Exhibit 770

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF NORTH CAROLINA

IN RE:	)	
	)	
CAMP LEJEUNE WATER LITIGATION	)	7:23-CV-00897
	)	

Andrew Brod, PhD
Tuesday, February 10, 2026

Videotaped deposition taken in the above matter, held at 101 S. Edgeworth Street, Greensboro, North Carolina 27401, commencing at 9:33 a.m. Eastern Time.

Stenographically recorded and transcribed by Lisa Taylor, Registered Professional Reporter, Pennsylvania Notary Public, Pennsylvania eNotary, and North Carolina Notary Public (participating via videoconference).

_ _ _

GOLKOW, A VERITEXT DIVISION
877.370.3377 ph | 917.591.5672 fax
deps@golkow.com

A P P E A R A N C E S

On behalf of Plaintiffs:

ROMANO LAW GROUP
BY: JOHN F. ROMANO, ESQ.
2701 Okeechobee Boulevard
West Palm Beach, FL 33409
(561)533-6700
john@romanolawgroup.com

BELL LEGAL GROUP
BY: LESLIE LAMACCHIA, ESQ.
219 Ridge Street
Georgetown, SC 29440
(843)429-6197
llamacchia@belllegalgroup.com
(participating via videoconference)

WARD & SMITH
BY: JENNA F. BUTLER, ESQ.
127 Racine Drive
Wilmington, NC 28403
(910)794-4829
jfb@wardandsmith.com
(participating via videoconference)

WEITZ & LUXENBERG, PC
BY: BENJAMIN VANSLYKE, ESQ.
Fisher Building
3011 West Grand Boulevard
24th Floor
Detroit, MI 48202
(313) 800-4170
bvanslyk@umich.edu
(participating via videoconference)

_ _ _

A P P E A R A N C E S (Cont'd)

On behalf of Defendant:

UNITED STATES DEPARTMENT OF JUSTICE
BY: MELANIE KONSTANTOPOULOS, ESQ.
1100 L Street NW
Washington, DC 20005
(202)353-2152
melanie.konstantopoulos@usdoj.gov

UNITED STATES DEPARTMENT OF JUSTICE
BY: JOSEPH B. TURNER, ESQ.
1100 L Street NW
Washington, DC 20005
(202)880-6104
joseph.b.turner@usdoj.gov

_ _ _

Also Present (participating via videoconference):
Rachael Corcione, Videographer

_ _ _

E X A M I N A T I O N I N D E X

WITNESS:	PAGE:
Andrew Brod, PhD	
Examination by Mr. Romano	8
Examination by Ms. Konstantopoulos	236

_ _ _

E X H I B I T I N D E X

EXHIBIT:	DESCRIPTION:	PAGE:
1	Plaintiff's Notice of Deposition and Request for Production of Documents Andrew Brod	21
2	Andrew C. Brod Curriculum Vitae	21
3	Dr. Andrew Brod Website Content	23
4	2/6/26 Letter	24
5	Supplemental Materials Considered of Dr. Andrew Brod 2/3/26	25
6A	2/9/26 Letter	193
6B	12/29/22 Amendment of Solicitation/Modification of Contract Signed 5/8/24	194
6C	12/29/22 Amendment of Solicitation/Modification of Contract Unsigned	196
6D	Attachment #2 Statement of Work (SOW) Contract/Purchase Order Number: 3W-CIV-03-0143/15JCIV23P00000148	197
6E	Attachment #3 Schedule, Rate, And Cost (SRC) Contract/Purchase Order Number: 3W-CIV-03-0143/15JCIV23P00000148	198
6F	12/29/22 Amendment of Solicitation/Modification of Contract Unsigned	198
6G	Solicitation/Contract/Order for Commercial Items Offeror to Complete Blocks 12, 17, 23, 24 & 30	199
7	Brod Invoices	27

_ _ _

E X H I B I T I N D E X (Cont'd)

EXHIBIT:	DESCRIPTION:	PAGE:
8	Materials Considered List - Andrew Brod (Sparks)	28
9	Materials Considered List - Andrew Brod (Peterson)	28
10	Materials Considered List - Andrew Brod (Rothchild)	28
11	Materials Considered List - Andrew Brod (Welch)	28
12	Materials Considered List - Andrew Brod (McElhiney)	28
13	5/8/25 Expert Report of Andrew Brod, PhD (Peterson)	120
14	12/15/25 Expert Report of Andrew Brod, PhD (Peterson)	58
15	12/15/25 Expert Report of Andrew Brod, PhD (McElhiney)	122
16	12/15/25 Expert Report of Andrew Brod, PhD (Rothchild)	172
17	12/15/25 Expert Report of Andrew Brod, PhD (Welch)	186
18	12/15/25 Expert Report of Andrew Brod, PhD (Sparks)	161

(Videotaped deposition commences, 9:27 a.m. Eastern Time.)

– – –

(The witness will read and sign the deposition transcript.)

– – –

VIDEOGRAPHER: On record. Today is February 10, 2026, and the time is 9:27 a.m. I'm the videographer, Rachael Corcione, and the court reporter is Lisa Taylor.

This is the video deposition of Andrew Brod, in re: Camp Lejeune Water Litigation.

Will counsel now introduce themselves for the video record, after which the court reporter will swear in the witness.

MR. ROMANO: John Romano with Romano Law Group on behalf of the plaintiffs.

MS. KONSTANTOPOULOS: Melanie Konstantopoulos on behalf of the United States.

MR. TURNER: Joseph Turner on behalf of the United States.

– – –

(ANDREW BROD, PhD, having affirmed to tell the truth, the whole truth, and

nothing but the truth, testified as follows:)

_ _ _

EXAMINATION

BY MR. ROMANO:

Q. Please tell us your full name.

A. Andrew Chappell Brod. Chappell has two P's and two L's.

Q. Who is the individual who you first communicated with regarding your hiring in this case?

A. As I recall, it was Daniel Eagles of US DOJ.

Q. When was it you were first contacted by Daniel Eagles?

A. As I recall, it was late 2022.

Q. Had you ever worked with Daniel -- Eagles or Engles?

A. Eagles.

Q. Had you ever worked with Daniel Eagles before that?

A. No.

Q. Before you got this call from Daniel Eagles, had you had any involvement with respect to the Camp Lejeune litigation matters?

A. No.

Q. When you were first hired on, did you understand you were being hired on as an economist to review and evaluate certain cases and case material?

MS. KONSTANTOPOULOS: And objection -- object to the record for attorney-client privilege.

To the extent that you are not providing substantive communications with attorneys, you can answer that question.

BY MR. ROMANO:

Q. Well, I'll rephrase the question.

What did you understand you were supposed to do after you -- the government got in touch with you?

MR. ROMANO: Same objection.

You can answer.

THE WITNESS: At first, the contact was really exploratory, discussing what kind of damages analyses and what kind of damages project would be pursued.

It wasn't until, I suppose, the next year, the following year, rather, when my role was better defined.

BY MR. ROMANO:

Q. Okay. Once your role was better defined, in your mind, what was it you were supposed to evaluate in terms of categories of damage?

MR. ROMANO: Objection to the extent this question calls for attorney-client correct privilege.

Without revealing the substance of any communications with the attorneys, you may answer the question if you're able to.

THE WITNESS: I was to be a defense damages expert to provide expert testimony and expert reports in the field of economic damages potentially to assess and rebut any plaintiff's experts reports along these lines.

BY MR. ROMANO:

Q. When you were hired, what did you believe in your mind was going to be your goal in this case?

MR. ROMANO: Objection to form.

THE WITNESS: Well, my goal, as always, is to do as objective and as reasonable an economic analysis as I can.

BY MR. ROMANO:

Q. Why is it important to do an objective analysis as an expert?

A. Well, I can't speak for all experts. What I can address is why that's important for an economics expert, for a damages expert.

In principle, I'm on no one's side. My job is to do as reasonable and sensible an analysis as I can.

It's not my job to help the US government here. It's not my job to hurt the plaintiffs here.

It's my job to do the analysis that I think is appropriate and reasonable.

Q. So being an objective and reasonable analyst as an economist is important in your work; correct?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Yes.

BY MR. ROMANO:

Q. Likewise, it is essential that you not be an advocate for one side or another when you are working as an expert; true?

A. True.
Q. How long have you been an economist? And by that I mean an economist who is working of -- in the field of analyzing economical and financial data and trends.
MR. ROMANO: Objection to form.
THE WITNESS: I've been an economist, I suppose, since -- well, even before I finished my PhD, I was an economist. I guess that means I've been an economist, using the definition you just laid out, for about 40 years.
BY MR. ROMANO:
Q. All right. How long has it been since you did your first case where you testified in either a deposition or a trial?
MS. KONSTANTOPOULOS: Objection to form.
THE WITNESS: As I recall, my first deposition was in 2001 or 2002, something in that ballpark.
BY MR. ROMANO:
Q. So your work as an economist before that first deposition was doing what? What was your line of work as an economist?

A. Well, I started doing forensic economics work in the mid- to late '90s, and prior to that first deposition, I produced reports. I was never called upon to testify in deposition or trial, but I had done some work in forensic economics.

Prior to that, I was on the faculty at the University of North Carolina at Greensboro. And also after my first deposition. I didn't leave UNC Greensboro until 2010. I didn't retire until 2010.

Q. If you go back to the time of that first deposition in roughly 2001, had you been doing forensic consulting as an economist before that?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes, for just a few years.

BY MR. ROMANO:

Q. What was it that drew you into the business of forensic consulting?

A. The initial thing was someone calling the -- the business school at UNC Greensboro and asking if there was somebody who was available to work on a case.

And I was a consultant in many other respects. It sounded interesting. I took the case,

and it was interesting.

Q. All right. After you got that first case, did you then move into the business of consulting and ultimately form your own firm?

A. Yes. It was a slow progress, but yes.

Q. All right. Tell us how that progressed.

A. Well, at first, I worked on a few cases. I mean, once you work on one case, you are on, in a sense, the radar of attorneys. Sometimes you get referrals. Sometimes you get suggested.

And at first that didn't happen very often. I had a smattering of cases, but once we got into the 2000s, that sped up a little bit.

It wasn't until 2010 or so that I decided to make it my primary source of income.

Q. And for how long a period of time has forensic consulting been your primary source of income?

A. Since twenty --

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Since 2010, give or take.

BY MR. ROMANO:

Q. In your work as an economist, you agree that you have professional boundaries similar to staying in your lane in your field of expertise; true?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: There are certainly boundaries or lanes that I believe that I should stay within.

BY MR. ROMANO:

Q. All right. What are those boundaries or lanes you believe you should stay within?

A. Well, that's a pretty general question. So I can give you an example.

Often cases that I work on involve medical issues. I have no medical opinions in the cases that I work on. So one lane is that I don't opine about medical stuff.

Q. All right. As a forensic economist, you're not a medical diagnostician; true?

A. That's true.

Q. As a forensic economist, you do not create and develop life care plans; true?

A. True.

Q. As a forensic economist, you are not the fact-finder when a case goes to court; true?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: My understanding of that term is that the finder of fact is a judge or a jury, so that's correct. I'm neither judge nor jury.

BY MR. ROMANO:

Q. As a forensic economist in these five cases involving Parkinson's disease, you did not create or develop the sources upon which you rely; true?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes.

BY MR. ROMANO:

Q. And is it true that the primary role of a forensic economist in an injury or wrongful death case is the analysis of economic data and trends?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I would say that the primary role of a forensic economist in a

case like these is to analyze damages, use the data that is -- that are available to me, and come up with what I believe are reasonable conclusions.

BY MR. ROMANO:

Q. And for purposes of today, when you use that term or phrase "reasonable conclusions," what does Andrew Brod, PhD, mean by that?

A. I suppose "reasonable" has a meaning that depends on the setting.

What I take "reasonable" to mean in my work is -- is -- is persuasive, understandable, and not easily rejected.

Q. True that your work as a forensic economist is having expertise which involves the application of economic theories and principles to assess financial implications? True?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: Yes, to assess economic implications, I would say. They're not always specifically financial, but yes.

BY MR. ROMANO:

Q. True you do not evaluate the effectiveness of medical care or treatment in this

case; correct?

A. Yes.

Q. And by "this case," I mean the five cases of Parkinson's disease we're here to talk about today; correct?

A. Yes.

Q. And as a forensic economist in these five Parkinson's disease cases, you did not provide opinions regarding the appropriateness of the medical care or treatment or medical procedures; correct?

A. Yes.

Q. As to medical care and treatment, is it true you defer to the work and decisions of the medical doctors and healthcare providers?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes, and other medical experts.

BY MR. ROMANO:

Q. And as to life care planning, you defer to life care planners who have created and developed various life care plans; correct?

A. Yes.

Q. I realize you've had your deposition

taken a lot of times, and I'm guessing that lawyers remind you of all sorts of instructions.

The only thing I would say first, if you want to take a break at any time -- I'm sure you know this -- if you just let DOJ lawyers know or the court reporter, we're going to take a break at any time. Okay?

A. Okay.

Q. And so that you'll know, it does not matter to me what the reason is. If you want to take a break, including if you want to talk to the DOJ lawyers, you tell me. We're going to take a break. Okay?

A. Yes.

Q. As you can already see, I talk very slow, so I don't think there will be a problem with speediness of -- of questions, but if I ask a question and it is something that you don't understand, you know, you can just tell me you don't understand it, and I'll try to rephrase it or ask a different question. Okay?

A. Yes.

Q. Is there anything about your health that would prevent us from moving forward with the deposition today?

A. Not that I know of.
Q. All right. I hope there's nothing. I know sometimes --
A. I hope not as well.
Q. -- people have colds and flu and they're taking medications.
You're -- you're good to go today in terms of your mental alertness; right?
A. I think so.
MR. ROMANO: Okay. All right. We premarked a number of exhibits. Some of them I'm going to need to ask you questions about and some I won't, but I just want to get these on the record for right now.
And I've got these in packets. Perhaps the best thing is just to state on the record what we've got. Then I'll come back and go through them one by one. Okay?
So Exhibit Number 1 is the Brod deposition notice, and then Number 2 is the Brod CV, or curriculum vitae.
By the way, while I'm doing this, I'll give you Exhibit 1 so you can start to take a look at that. Okay?
MS. KONSTANTOPOULOS: Counsel, can you

provide -- pass a copy to --
MR. ROMANO: Yep.
COURT REPORTER: Can we go off the record one second. Off the record.
VIDEOGRAPHER: Off record at 9:44.
(Off the record.)
(Whereupon, Exhibits 1 and 2 marked for identification.)
VIDEOGRAPHER: On record at 9:44.

BY MR. ROMANO:

Q. All set. All right. You have Exhibit Number 1 there in front of you?

A. Yes.

Q. Does that appear to be the deposition notice along with the subpoena for the deposition and the duces tecum?

A. It does.

Q. All right. Have you seen that before today?

A. Yes.

Q. And have you complied with that in the sense of providing all of the necessary documents to the government which in turn they provided to us?

MS. KONSTANTOPOULOS: Objection to -- oh, sorry, Counsel.

MR. ROMANO: That's all right. It's all right.

MS. KONSTANTOPOULOS: Objection to form and objection to the extent it calls for attorney-client privileged communications -- I'm sorry -- privileged communications.

You can answer the question.

THE WITNESS: Yes.

MR. ROMANO: Okay. And I'm going to slow it down based on our discussion a moment ago. It will probably be easier if we do that as we go through these.

I'll hand you what we marked as Exhibit Number 2.

And hang on. Let me give copies of these to counsel.

BY MR. ROMANO:

Q. Exhibit Number 2 appears to be your curriculum vitae; correct?

A. Yes.

Q. Who prepared your curriculum vitae?

A. I did.

Q. Is it accurate and up to date as of today, the date of this deposition?

A. Yes.

Q. Do you have any other CVs that you use on a regular basis for your forensic economics work?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: No.

MR. ROMANO: I'll go to Exhibit Number 3. I'll hand you a copy of that, and I'll hand copies to each counsel.

(Whereupon, Exhibit 3 marked for identification.)

BY MR. ROMANO:

Q. And can you identify Exhibit number 3 for us, please.

A. This appears to be a few pages printed out from my website.

Q. And what is the address of your website?

A. Andrewbrod.com.

Q. As we look at these materials from your website, that first page, just tell us what that is. What do you -- the gist of this page.

A. I think the first page is just the landing page. That is -- it's a fairly low-tech website, and this is just the first page you would see.

Q. All right. Then you go to the second page, and does that contain your biographical data?
A. It does.
Q. And then there is a contact page which comes next; correct?
A. Yes.
Q. And then this page, Case Experience, what is that?
A. It's just a description of some cases that I've worked on.
Q. All right. And then the final page, which says Commentary, what is that?
A. At the time when this website was created, I was a fairly frequent writer in popular and business media, so I wrote articles, monthly articles in newspapers and magazines.
MR. ROMANO: Let me hand you Exhibit Number 4, and I'll hand copies to counsel.
(Whereupon, Exhibit 4 marked for identification.)
BY MR. ROMANO:
Q. Have you seen this before?
A. No.
Q. Do you know what this transmittal letter is dated February 5, 2026, regarding

documents pertaining to you?
A. I believe it's February 6th.
Q. February 6th.
A. I -- I can read it, but I'm not aware of what it's about --
Q. Okay.
A. -- beyond that, no.
Q. You were not a part of creating that letter?
A. I was not.
MR. ROMANO: Okay. I'll move to the -- to the next exhibit, Exhibit Number 5. While you're looking at that, I'll hand copies to each -- each counsel.
(Whereupon, Exhibit 5 marked for identification.)
BY MR. ROMANO:
Q. And you see this is entitled Supplemental Materials Considered by Dr. Andrew Brod, February 3, 2026?
A. Yes.
Q. All right. Do you recognize these as additional materials you reviewed in this case?
A. Yes.
Q. In going through these materials, can

you tell us when you first received these materials?

And I'm not looking for a precise date if you don't have one, but approximately when did you receive these additional materials?

A. First I need to amend my previous answer. I don't recognize necessarily, you know, the Bates numbers. The one -- the documents that have titles, I recognize those, but I don't -- I have not memorized Bates numbers.

Now, as far when I received them, my recollection is that many of these were provided earlier this year. I don't think it was late 2025. I think it was in January of this year.

Q. All right. And is -- does this appear to be an accurate list of the additional supplemental materials that you have considered as a part of formulating your opinions in this case?

A. Yes, barring the Bates-stamped -- the ones that are identified only by Bates numbers. Again, I don't memorize Bates numbers.

Q. Understood.

A. But the others, yes, I -- I recognize them. I have seen them.

MR. ROMANO: Let's go to Exhibit Number 6.

I'm going to skip Number 6 for a minute because I think they're out of order in the folder I've got there.

So we'll go to Exhibit Number 7, and I'll hand copies to counsel.

(Whereupon, Exhibit 7 marked for identification.)

BY MR. ROMANO:

Q. Would you identify Exhibit Number 7, please, and tell us what that is.

A. It appears to be the collection of invoices that I have submitted on this project.

Q. I'll come back to that later, but in looking at what is in Exhibit Number 7, does that appear to be all of the invoices for this case?

And I'd ask -- just look carefully. There may have been supplements to that. I just want to make sure that we've got them all.

A. Yes, they are. They're numbered, but they are out of order.

Q. Okay. Thank you.

A. I haven't -- I mean, I think it's everything, but it's not immediately apparent given that the numbering is out of order.

Q. All right. Let me just say this as to

this exhibit and the invoices: Please feel free during a break and take your time if you want to look through that some more.

I just want to make sure that we have all of the invoices before we leave today. So I'm not holding you to that particular packet. If -- if there are others, it's okay. I just want to make sure we get them included. Okay?

A. I believe this covers it.

MR. ROMANO: Okay. All right. Then I'll come back to these later, but for right now, we don't need to go through all of them.

But Exhibit number 8 would be the Brod materials considered regarding Mr. Sparks.

Number 9, Brod materials considered regarding Mr. Peterson.

Number 10, Brod materials considered regarding Diane Rothchild.

11, Brod materials considered regarding Robert Welch.

And Exhibit 12, Brod materials considered regarding Mr. McElhiney.

(Whereupon, Exhibits 8, 9, 10, 11, and 12 marked for identification.)

BY MR. ROMANO:

Q. Let me -- let me just go to one of these for a moment. We'll take the first one, which is Exhibit Number 8, if you can take a look at that, please. Just tell us what that is.

A. Sure. The title is pretty descriptive. These are materials that I considered in producing my expert report regarding Mr. Sparks.

Q. Okay. And for each of the five cases, is there indeed a materials considered list of documents that you have provided us?

A. Yes.

Q. All right. I recognize that the documents on each might vary, but is the way you have formatted the list -- is it similar in each of the five cases?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes.

BY MR. ROMANO:

Q. All right. What is the purpose, then, of the materials considered list --

MS. KONSTANTOPOULOS: Objection --

THE WITNESS: -- from your perspective?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Well, it's hard for me to answer that. It was a request made of me.

MS. KONSTANTOPOULOS: Objection to the extent that the question calls for privileged communications.

BY MR. ROMANO:

Q. Did you prepare --

A. It was something I was asked to do.

Q. Did you prepare this document?

MS. KONSTANTOPOULOS: Objection.

THE WITNESS: I believe so.

BY MR. ROMANO:

Q. All right. The materials that were on here, did you consider and review and analyze these documents and materials?

A. Yes.

Q. And did you in a similar way do that for each of these five Parkinson's disease cases?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes.

BY MR. ROMANO:

Q. Since we're here, I'll quickly hit on

each one of these.

Would you look at Exhibit Number 9. Is this the materials considered list for the Peterson matter?

MR. ROMANO: And I'll hand copies to counsel.

THE WITNESS: Yes.

BY MR. ROMANO:

Q. Exhibit Number 10, is this the materials list for Diane Rothchild?

A. Yes.

Q. Exhibit Number 11, is this your materials considered list on the Robert Welch matter?

A. Yes.

MR. ROMANO: And I'll provide a copy of that to counsel.

BY MR. ROMANO:

Q. And Exhibit Number 12, is this the materials considered list regarding the McElhiney matter?

A. Yes, it appears so.

MR. ROMANO: And just for the record, on these exhibits, I am providing the witness with the exhibit and two copies to government

counsel.

MS. KONSTANTOPOULOS: That is correct.

BY MR. ROMANO:

Q. In addition to any documents and/or materials you've assessed in this case, are there any other documents you feel you need in order to arrive at your opinions before you testify in court?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: No.

BY MR. ROMANO:

Q. Have you requested from any source any documents which you feel you need and which you have not yet received?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: No.

BY MR. ROMANO:

Q. Do you know the date and month you were actually retained as an expert in this case?

MS. KONSTANTOPOULOS: Objection to the extent it calls for privileged communications.

But you can answer that question.

THE WITNESS: I believe that it was

December 29th of '22.

BY MR. ROMANO:

Q. And in this instance, did you in any way before having contact with the government solicit the government to be hired as a forensic economist in this case?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: No.

BY MR. ROMANO:

Q. What do you perceive is your purpose and function in this case?

A. As I said previously, my job is to do the work of a forensic economist, in particular, one doing damages analysis.

My role and job is to assess and rebut plaintiff's experts reports on the subject of economic damages.

Q. Do you agree, Dr. Brod, that the hallmark of an expert is not to be an advocate, but rather to be objective and search for that which is accurate and truthful?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Again, I can't speak for

other kinds of experts, but for an economics expert, that is absolutely the objective, the goal.

BY MR. ROMANO:

Q. In your CV -- by the way, any time you need to go to one of the documents, please feel free to do so and pull it up.

In your CV, under Professional Experience, it notes '97 to the present you've had Brod Forensic Economics as a firm or company; right?

A. Yes.

Q. Are you the owner of the Brod Forensic Economics?

A. So to speak. It's not an entity. It's essentially a letterhead. I'm a sole proprietor, but on my correspondence, invoices, etc., I put "Brod Forensic Economics" at the top.

Q. Okay. How many employees does Brod Forensic Economists now have?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Zero. I work with an assistant, but we work on a contractor basis.

BY MR. ROMANO:

Q. Do you have an office address or do

you work out of your home?
A. I work out of my home.
Q. Are there any other economists who are in any way in a formal sense affiliated with Brod Forensic Economics?
MS. KONSTANTOPOULOS: Objection to form.
THE WITNESS: No.
BY MR. ROMANO:
Q. And as to the company Brod Forensic Economics, what is its primary function? Understanding, as you said, it's a sole proprietorship.
A. Well, the -- given that it's not an actual entity -- it's not an LLC. It's not an S corporation. It's just a letterhead. Its function is the same as mine is when I do forensic economics consulting.
Q. Is it fair to say that Brod Forensic Economics is you?
MS. KONSTANTOPOULOS: Objection to form.
THE WITNESS: Yes.
BY MR. ROMANO:
Q. As an economist, have you authored any

peer-reviewed articles in the field of economics at any time in the last 10 years?

A. No.

Q. As an economist, have you authored any peer-reviewed articles at any time in the last 20 years?

A. I don't think so. My work as a standard academic economist was primarily in the '90s. I can't remember if one of the publication dates of my works was in the early 2000s. I don't recall.

My guess is that the answer is no, not in the last two decades.

BY MR. ROMANO:

Q. All right. In the last 10 years, have you given any lectures at annual national meetings for any group of economists?

A. No.

Q. There is a publication Attorney at Law Magazine. You're familiar with that?

A. I am.

Q. And you've written a number of blogs or articles for that magazine; right?

A. Articles, yes.

Q. All right. What is Attorney at Law

Magazine?

A. It is a magazine whose readership is attorneys. The business model is I pay them to run my articles. So they're essentially advertisements.

My articles touch upon various issues in forensic economics, but it's not -- it's not refereed. It's essentially popular media.

Q. All right. Do you still continue to this day to author these paid articles for Attorney at Law Magazine?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes.

BY MR. ROMANO:

Q. And for how many years have you been doing this?

A. Seven or eight, I would guess.

Q. The reports that you rendered on each of the five cases, who actually transcribed the reports?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Who -- who wrote them?

BY MR. ROMANO:

Q. Who typed them up?

A. I typed them up.
Q. Okay. You mentioned earlier that you have an assistant who you work with at your business; right?
A. Yes.
Q. What is the name of that assistant?
A. Melissa Hershberger, H-E-R-S-H-B-E-R-G-E-R.
Q. And what is Melissa Hershberger's job title or role?
A. Yeah, there's no title. It's just us. Her role is to provide research assistance. She manages documents, occasionally finds articles and data that I need.
She does not write reports. She does not conduct the analysis, and she doesn't communicate with clients. You know, these are all things that I do.
And I should also add that she doesn't testify. I do that as well.
Q. Is Melissa Hershberger an economist?
A. She has an MBA from Duke and is a former instructor in finance and accounting at UNC Greensboro.
Q. Is she an actual "employee" of your

business or fully contracted?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Right. As I said, I have no employees. She's -- we have a 1099 relationship, she and I.

BY MR. ROMANO:

Q. Right. Dr. Brod, in your completing your work and analysis on these Parkinson's disease cases, have you utilized artificial intelligence in any manner whatsoever as a part of your work?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: No.

BY MR. ROMANO:

Q. Zero?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I can think of no instances when I -- in which I've used AI. I write my own work.

BY MR. ROMANO:

Q. The reports which you have rendered in the five Parkinson's disease cases, are these reports rendered by using any form of a template

report format?

MS. KONSTANTOPOULOS: Objection to form. Objection to the extent it calls for privileged communications.

You can answer.

THE WITNESS: If so, they're templates that I developed, so -- so in a sense, no. I certainly use no one else's template.

BY MR. ROMANO:

Q. All right. I ask that because in each of the reports, there is certain language when you render opinions where the language is identical in those reports. That is why I'm wondering if there is some form of a template which you are using?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: Well, again, there is no template provided to me by someone else.

Did I try to harmonize the language in my reports? I did.

But it was not language provided to me by someone. It wasn't a report format that was provided to me by someone. It's my report.

BY MR. ROMANO:

Q. All right. In work that you did, was there any level of cutting and pasting from one report to another as to these five Parkinson's disease cases?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: Well, sure, that's possible. That's just a typing technique, a word processing technique.

If I want to harmonize my language in certain respects, I might well copy and paste from a different report, but, again, it's a different report that I wrote.

BY MR. ROMANO:

Q. And when you use that term "harmonize" as to harmonizing these reports, what do you mean by that?

A. I thought it would be useful to readers of these reports for my language to be consistent for me to express my opinions in similar ways.

And for what it's worth, this is very similar to what Mr. Staller did for the plaintiffs.

I thought it would help if the reports

were -- if they were constructed and structured similarly.

Q. Have you at any time served on either active or reserve duty in any branch of the US armed forces?

A. No.

Q. Before you were hired as a forensic economist in this case by the government, had you ever been previously hired by the federal government to do any work as a forensic economist?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes.

BY MR. ROMANO:

Q. Several occasions or just one or two?

A. Several.

Q. All right. Just briefly give us an overview of that work you did for the federal government before being hired in this case.

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I have been engaged -- over the years, I have been engaged a number of times by the three US Attorney's offices in North Carolina as a forensic economist in

cases in which someone sued the federal government.

BY MR. ROMANO:

Q. Were these federal Tort Claims Act cases?

A. I believe.

Q. Okay.

A. I'm not an attorney, but I think so.

Q. Were they, the cases in which you were hired by the federal government, personal injury or wrongful death matters?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I'm pausing.

Yes, but -- certainly the vast majority were. I'm trying to think if there were any -- there might have been one or two that required the analysis -- sort of a business analysis.

Sometimes people -- their personal injury involves -- you know, they're owners of a company, for example, and so you are effectively doing a commercial analysis, even though it is, I suppose, strictly speaking, a personal injury or wrongful death case.

So, yes, I think they were all personal injury or wrongful death cases.

BY MR. ROMANO:

Q. In any of those cases where you were hired as a forensic economist by the federal government, was your deposition taken?

A. Yes.

Q. The case list that you have provided of prior work as a forensic economist, does it have those cases listed, in other words, the cases where you were involved or hired by the federal government?

A. I think so. My recollection is that the list of testimony that I've provided was for the last four years.

And so over the last four years, there have been a couple of instances in which I'm aware in which I was deposed or testified at trial.

Q. As you go back over the years before this last four-year period, approximately how many times were you hired by the federal government in your capacity as a forensic economist?

A. Over the years, about 20 times.

Q. In each of those cases, did you render a report?

A. No, not in all cases.
Q. In approximately how many of the cases did you render a report?
A. Out of 20? Probably 13 or 14 of them.
Q. And of all the cases in which you've been involved where you were hired by the federal government as a forensic economist, did you testify at trial, either a -- a nonjury trial, a judge alone, or jury trial?
MS. KONSTANTOPOULOS: Objection to form.
THE WITNESS: Yes. As I recall, just once.
BY MR. ROMANO:
Q. Was that a jury trial or judge-alone trial?
A. As I recall, it was a bench trial.
Q. Where did that bench trial take place?
A. In the Western District in Charlotte.
Q. Do you remember the name of that case?
A. I have it on the tip of my tongue. Yes, I do remember it. The plaintiff's name was -- name was Carmellie [phonetically].
Q. And was that an injury or a death case or something else?

A. It was an injury case.
Q. In this particular case, did you require a retainer fee of the government upon being hired?
A. I'm sorry. Which particular case?
Q. In this case, the Camp Lejeune litigation, when you were hired, did you require a retainer fee as a part of your being hired?
A. To my knowledge, the federal government doesn't pay retainers.
Q. So no retainer fee?
MS. KONSTANTOPOULOS: Objection to form.
THE WITNESS: Yes, there was none.
BY MR. ROMANO:
Q. What is your arrangement with the federal government in this case in terms of your rates and how you are paid?
MS. KONSTANTOPOULOS: Objection to form.
THE WITNESS: My rate currently is $480 per hour for everything other than travel and testimony. So research, reviewing reports, prepping for depositions, reviewing other experts reports, conducting my own

research.

And half that, $240 per hour, for out-of-town travel, of which there has been none in these cases.

And $750 an hour for time in deposition.

In addition, my assistant bills at a rate of $106 per hour, which I just pass through to the government.

BY MR. ROMANO:

Q. When your assistant, Melissa -- right?

A. Right.

Q. All right. When your assistant, Melissa, does work, does she keep track of her time noting how many minutes or hours she is working on a given project?

A. Yes.

Q. Do you require that she detail out what the work is she is doing so that you know what she did and what she is billing for?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: No, I don't require her to provide me with time sheets, but we talk virtually daily, so I know everything she's

doing.

BY MR. ROMANO:

Q. When Melissa works on a given case and spends a certain amount of time on it and you are billing for her time, how do you know what to bill for her time?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: She tells me.

BY MR. ROMANO:

Q. Verbally?

A. Sometimes.

Q. And is there --

A. Sometimes in an e-mail, sometimes in a text, sometimes orally.

Q. All right. Do you require that she provide you with the details of what she did or...?

MS. KONSTANTOPOULOS: Objection. Communications between experts and their assistants are considered privileged pursuant to CMO 17.

So to the extent it goes into substantive conversations with your assistant, I would instruct you not to answer. Otherwise, you can answer the

question.

THE WITNESS: I forgot the question.

BY MR. ROMANO:

Q. When Melissa reports her work to you and her time, what specifics do you require in terms of the information you need so that you can put that in an invoice to the government?

MS. KONSTANTOPOULOS: Same objection.

THE WITNESS: I don't require a time sheet, as I said. I just need to know the number of hours.

BY MR. ROMANO:

Q. What is your charge for a deposition per hour?

A. 750 per hour for depositions and trials with a -- oh, no. I'm sorry. I was going to say with an $1,800 daily minimum, but that's what -- that's with private clients.

There is no daily minimum when you work for the federal government.

Q. When your deposition is being taken like today as a video deposition, do you charge the same amount whether there is a video capturing everything or whether it's a non-video depo?

MS. KONSTANTOPOULOS: Objection to

form.

THE WITNESS: The thought never occurred to me. It's the same fee.

BY MR. ROMANO:

Q. In the last 10 years, have you worked as a forensic economist on the plaintiff's side and also on the defense side in personal injury and wrongful death cases?

A. Yes.

Q. Specifically in personal injury and wrongful death cases, what has been the breakdown, approximate breakdown, of percentage between your work for plaintiff and your work for defendants in the last 10 years?

A. For me, it's been roughly two-thirds plaintiffs, one-third defense. That's a -- a high proportion compared to most forensic economists. I do a little more defense work than most of them, but even for me, it's mostly plaintiffs work.

Q. And I asked you that question based on 10 years. Is it the same for the last five years?

A. As far as I know. I don't keep statistics. This is my best guess, but it's an educated guess.

Q. Do you have any type of a podcast

where you regularly broadcast it?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: It sounds fun, but no.

BY MR. ROMANO:

Q. Have you ever been called upon by the federal government to do any teaching in the area of forensic economists?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: No.

BY MR. ROMANO:

Q. You're familiar with the Daubert case; right?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: I am.

MR. ROMANO: In fact --

THE WITNESS: Well, I should say I'm familiar with what it means to be challenged under Daubert.

I'm not am attorney who's familiar with the case, but I think I'm familiar with what it implies for expert witnesses.

BY MR. ROMANO:

Q. All right. True you've actually written an article about Daubert and challenges to experts; right?

THE WITNESS: I did in Attorney at Law Magazine.

BY MR. ROMANO:

Q. All right. Has any judge or court or tribunal ever restricted or limited your testimony in any way once your testimony was challenged?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes.

BY MR. ROMANO:

Q. How many times has your testimony or expertise been limited or restricted?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: To my knowledge, just twice.

BY MR. ROMANO:

Q. Where -- where was each case located?

A. One --

Q. Meaning the court.

A. Right, right. One was located in

Cumberland County, and the other one was in, I believe, federal court in the Middle District.

Q. As to the Cumberland County matter, was that a personal injury or wrongful death case?

A. Yes.

Q. Were you testifying for the plaintiff or defense?

A. Plaintiff.

Q. Was it a challenge under Daubert or some other law which may have preceded Daubert, if you know?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: It wasn't under Daubert because it wasn't about my qualifications, per se. It was a challenge.

BY MR. ROMANO:

Q. What was the challenge?

A. Well, as I understood it -- you know, so many of these things happen outside of my knowledge, you know.

Q. Just your understanding is what I'm looking for.

A. My understanding is that a fact witness, I believe the treating physician, changed

his testimony or it was misunderstood or there was miscommunication or something, but the upshot was that I was allowed to testify to past economic damages up until the trial but not future economic damages.

Q. Was a written order rendered by the judge regarding your testimony?

A. I have no idea.

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I'm sorry. I have no idea.

BY MR. ROMANO:

Q. And when approximately did that case take place?

A. I think it was 16 or 17 years ago.

Q. Do you remember the name of that case?

A. No, I do not.

Q. Did that case go to trial?

A. Yes.

Q. Did you testify at trial?

A. Yes.

Q. And was your testimony limited, as you have explained?

A. Yes. It was in -- in the courtroom

where that ruling was made. I may have even been on the stand when -- when it happened.

Q. You mentioned another case that you thought occurred in the Middle District of North Carolina.

A. Right. About 10 years ago.

Q. Was that a personal injury or wrongful death case?

A. No. That was a commercial case.

Q. And was your testimony being challenged by one side or the other?

A. Yes.

Q. All right. What was the nature of the challenge, as you understood it?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I can't speak to the challenge. My understanding is that the judge ruled that my expert opinion didn't add anything to the case.

BY MR. ROMANO:

Q. So your testimony was excluded?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: My -- my testimony was,

right.
BY MR. ROMANO:
Q. Do you remember the name of that case?
A. Yes.
Q. What was the name of that case?
A. It was MSI v. Cree. Cree, C-R-E-E, is the company that's now known as Wolfspeed. And it was a commercial dispute over LED lighting technology.
Q. Other than Melissa, did anyone else work with you as a part of your forensic economics analysis in these five Parkinson's disease cases?
MR. ROMANO: Objection to form.
THE WITNESS: No.
BY MR. ROMANO:
Q. Was it necessary for you to sub out any of your work to get help from another source other than yourself and Melissa?
A. No.
MR. ROMANO: All right. I'm going to next -- I'll try you to give you a heads-up as to where I'm going so you know what area I'm going to cover.
The next area I'm going to get into will be the report on the Eddie Peterson

case.

How is our court reporter doing?

COURT REPORTER: Okay.

MR. ROMANO: Okay. Videographer okay? Everybody okay?

You all set?

THE WITNESS: Sure.

MR. ROMANO: Okay.

MS. KONSTANTOPOULOS: Actually, Counsel, can we take a quick five-minute break?

MR. ROMANO: Sure, sure.

MS. KONSTANTOPOULOS: Okay. Thank you very much.

VIDEOGRAPHER: Off record at 10:33.

(Recess taken.)

VIDEOGRAPHER: On record at 10:43.

BY MR. ROMANO:

Q. All set?

A. Yes, I am.

Q. Okay. One more question relating to Melissa. Do you 1099 her?

A. Yes.

Q. Okay. And do you consider her to be an independent contractor regarding your business?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Right. Whether I consider her that or not, she is.

The way we work, however, is once we -- once she agrees to work on a case with me, then we have a hierarchical relationship where I'm the boss, the leader, the principal, and she is my assistant.

(Whereupon, Exhibit 14 marked for identification.)

BY MR. ROMANO:

Q. Let's go to Exhibit Number 14. Would you identify this, please.

A. This appears to be the report, including tables, regarding Mr. Peterson. This is my December 15th report.

Q. And if we break down the report, is this report structured in a manner that is similar to the report for the Rothchild case, Welch case, McElhiney case, and Sparks case?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes.

BY MR. ROMANO:

Q. And you can refer to this report as much as you feel the need to, but if we go to the initial section, which is your introductory section, you state, "In this report, I provide a preliminary assessment and rebuttal of the plaintiff expert report regarding economic damages"; true?

A. I do say that.

Q. All right. And when you use that term "preliminary assessment," what do you mean by that? In other words, what is preliminary about this?

A. I guess two things. First, my understanding is that everything is preliminary until you testify to it under oath.

And second, it's preliminary in the sense that, as the last paragraph in that section says, for all I know, perhaps further information will become available, and if so, I may update my analysis.

Q. And it further states that the report -- that in this report you're providing this preliminary assessment and rebuttal of the plaintiff's expert reporting economic damages.

The report written by Staller and Dripps claims damages for lost earnings, lost

household services, and the value of a life care plan; correct?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Actually, no, that's not what the -- the December report doesn't mention a second author.

BY MR. ROMANO:

Q. Okay. So in this particular report, as you go through it in this introductory section -- and when you refer to Staller, you're stating the report by Chad L. Staller claims damages for lost earnings, lost household services, and the value of a life care plan; correct?

A. Yes.

Q. You then state Mr. Peterson was diagnosed with Parkinson's disease in July 2001; correct?

A. Yes.

Q. And Mr. Peterson claims the damages resulted from his exposure to contaminated water at Camp Lejeune; correct?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Actually, the sentence

says that he claims that the diagnosis resulted from his exposure to contaminated water.

BY MR. ROMANO:

Q. All right. I'll read it again and make sure we've got it accurately.

"Mr. Peterson was diagnosed with Parkinson's disease (PD) in July 2001, and he claims that the diagnosis resulted from his exposure to contaminated water at Camp Lejeune"; correct?

A. Yes, that's the sentence.

Q. "He further claims to have incurred economic damages as a result of that exposure"; correct?

A. Yes, that's what it says.

Q. And then you state, "For the sole purpose of this report, I will assume that liability has been established"; correct?

A. Yes, I said that.

Q. Have you received any additional materials to review and evaluate after the date of your rendering this December 15, 2025, report?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes, and they appear on

Exhibit 5.
BY MR. ROMANO:
Q. And the documents that were provided to you and which you reviewed, referring to Exhibit 5, we previously discussed as to when you obtained it; correct?
MS. KONSTANTOPOULOS: Objection to form.
THE WITNESS: Yes.
BY MR. ROMANO:
Q. Right. Did they change -- did your review of the materials on Exhibit 5 change your opinions in any way, meaning change your opinions from your December 15, 2025, report?
A. No.
Q. Are all of your opinions that you are rendering in this case contained within your December 15, 2025, report regarding Edgar Allen Peterson?
MS. KONSTANTOPOULOS: Objection to form.
THE WITNESS: Yes, as currently expressed.
As I said before, if new information becomes available, that could change things,

but at this point, this is my opinion.
BY MR. ROMANO:
Q. Well, as we sit here today on the day of your deposition, is it true that all of your opinions that you intend to express in this case are contained in your December 15, 2025, report?
MS. KONSTANTOPOULOS: Objection to form.
THE WITNESS: Yes.
BY MR. ROMANO:
Q. Let's go to your section on page 1 that you number as number 3, Lost Earnings.
Do you have that there?
A. I do.
Q. All right. Define what is meant from your perspective as a forensic economist by the phrase "lost earnings."
A. Well, earnings refers to income earned through work rather than received as dividends, interest, whatever. So "earning" refers to earned income.
Lost earnings is generally the objective in an analysis like this, strictly speaking. Theoretically speaking, it is lost earning capacity. However, in the vast majority of

cases, lost earnings meanings lost earning capacity.

In other words -- put differently, in other words, in the vast majority of cases, lost earning capacity is taken to be lost earnings.

Q. In your work as a forensic economist, do you differentiate between lost earnings and lost earning capacity?

A. Sure, there is a theoretical distinction.

Q. What is the --

A. One -- I'm sorry. Please.

Q. My question is just: What is that theoretical distinction?

A. Right. The theoretical distinction is that lost earnings is often a combination of past earnings lost and expected future earnings lost.

Earning capacity could apply to both past and future, but it's usually applied to the future.

And so the difference between expected future earnings and lost future earning capacity is that the expected earnings are what you expect. It's a reasonable expectation, a reasonable projection of what that person would earn.

Earning capacity refers to the -- in a

sense, the maximum amount of earnings that that person could earn if someone is maximizing the present value of future earnings.

So -- so lost earning capacity is the theoretical objective.

Lost earnings, expected future lost earnings, is almost always our best predictor of it.

Can they be different in practice? Sure, but it just doesn't happen very often, as a rule.

So for our purposes, lost earnings is our best predictor of lost earning capacity.

Q. In the case of Eddie Peterson, in your analysis, is it lost earnings which you are trying to assess as a part of your work?

A. It's lost -- it's both. It's lost earning capacity. In this case, there is no -- there's no distinction. There's no -- there is a -- as I said, a theoretical distinction, but there's no reason, no evidence in this case, that would drive a wedge, so to speak, between lost earnings and lost earning capacity.

Q. You reviewed the reports, Staller and Dripps, and you see that they opine that the lost earnings are at $1,127,639; true?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: No.

BY MR. ROMANO:

Q. All right. What do you have in your report of December 15, 2025, on this as to their conclusion?

A. Right. It's not there because as of December 15th, I was responding to a report by Staller alone. Mr. Staller did not partner with Mr. Dripps -- Dripps? Dripps? -- to produce the report, so there's no Staller and Dripps. It's just Staller. So that's one thing.

I was responding to Mr. Staller's expert opinion in the December 15th report, and the value that Mr. Staller arrives at is $1,126,348.

Q. And you say there is an error in this calculation?

MS. KONSTANTOPOULOS: Objection to form and foundation.

BY MR. ROMANO:

Q. Is that your position?

A. Not so much in the calculation. My -- the error that I identified was based on an expert opinion by the defense vocational expert

Dr. Shahnasarian regarding Mr. Peterson's work life expectancy.

Q. All right. And what is that opinion you rely upon from Dr. Shahnasarian?

A. Mr. Staller assumed that -- that Mr. Peterson's pre-PD -- and when I say "PD," I'm talking about Parkinson's disease -- his pre-PD work expectancy was 68.4 years.

Dr. Shahnasarian says that a more reasonable number was between 65 and 67 years.

I took the midpoint of that range and did a rebuttal analysis, a rebuttal projection based on 66 years of work life expectancy.

Q. And when you conduct your analysis, you come out to a result of this corrected analysis coming to a present value of lost earnings in the amount of $885,284; is that right?

A. Yes.

Q. The conclusion as to life expectancy on which you are basing your numbers, then, is that based solely on the information from Dr. Shahnasarian?

A. Yes, but it's not life expectancy. It's work life --

Q. Work life expectancy.

A. -- work life expectancy.

Q. Right. And explain briefly -- because we do not know who will end up reading this deposition, but it may be not just the judge but many, many people who are involved in this matter. So tell us what is the difference between life expectancy and work life expectancy.

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Life expectancy is a statistical calculation that determines when -- how long a person is likely to live based on attributes of the group that person is in. Males, for example, Latino females, etc., whatever the group is. That's life expectancy, how long is someone expected to live.

Work life expectancy is simply how long someone is expected to work or in this case to what age is someone expected to work.

BY MR. ROMANO:

Q. When you as an economist make a calculation based upon work life expectancy, is that strictly basing it upon statistical data from a government source?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Well, in this case, I -- I don't recall what Dr. Shahnasarian bases his expert opinion on. As I recall, it is based on statistics. It's based on demographic data of some sort. I just don't recall what it was.

And the same way that I don't step on the toes of medical experts to talk about their medical opinions, the same goes for vocational experts and their opinions.

So whereas I recall that he had a firm foundation, a statistical and data foundation for this, I don't really recall directly.

What I recall is his expert opinion was that Mr. Peterson would work until the age of 65 or 67 but for his Parkinson's.

BY MR. ROMANO:

Q. Right. Other than that disagreement, then, with Staller, was his methodology in this analysis acceptable to you?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I don't dispute it.

BY MR. ROMANO:

Q. Did you use the same methodology as Staller except for that one matter?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes, that's what it says here in the last paragraph of that section on my report.

BY MR. ROMANO:

Q. And if you would read that, please, into the record?

A. Sure. The report says that I adopted --

MS. KONSTANTOPOULOS: Objection. Is there a question pending?

MR. ROMANO: Yes, yes.

MS. KONSTANTOPOULOS: The question is --

MR. ROMANO: The question is "Would you please read that into the record?"

MS. KONSTANTOPOULOS: The expert report is already entered as an exhibit. If there's a specific question, I would --

MR. ROMANO: That's the question.

MS. KONSTANTOPOULOS: It's --

MR. ROMANO: I'm asking him a question. I'm asking him to read something into the record. He should do that.

MS. KONSTANTOPOULOS: That's not a question.

However, you can answer to the extent that he asked you to read your report.

THE WITNESS: The last paragraph of my Section 3 of my Peterson report dated December 15th reads: "I adopted all of Mr. Staller's other assumptions and replicated their analysis, except for the slightly shorter work life expectancy. The result of this corrected analysis was a present value of lost earnings of $885,284."

There actually is a typo in that paragraph because I refer to Mr. Staller but then use "their." So it should read "his." I "replicated his analysis."

BY MR. ROMANO:

Q. When assessing work life expectancy, did you consider anything upon Eddie Peterson's desire as to how long he wanted and intended to work?

MS. KONSTANTOPOULOS: Objection to

form and foundation.

THE WITNESS: I did not assess his work life expectancy.

BY MR. ROMANO:

Q. Do you know whether or not Dr. Shahnasarian considered Eddie Peterson's intent as to how long he wanted to work?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: I don't know.

BY MR. ROMANO:

Q. In your work as a forensic economist and working with life care planners, do you ever factor into work life expectancy an individual's intended desire as to how long he or she intends to work?

MS. KONSTANTOPOULOS: Objection. Form and foundation.

THE WITNESS: My assumption is that the vocational expert making that assessment does precisely that.

And I should note that in this case, in this particular example, Dr. Shahnasarian is acting not as a life care planner but as a vocational expert.

And so when I use expert opinions of vocational experts, again, my assumption is that they have taken into account precisely what you described.

BY MR. ROMANO:

Q. When you as an economist determine an amount -- an amount to be assessed as damages for lost earnings, do you factor in such things as the worker's attitude, skills and talents, initiative, motivation, vision for the future in his calling as a Marine and a courtroom advocate?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Those certainly can be relevant factors.

In this case, I was assessing and rebutting Mr. Staller's report, and my assumption is that he took those things into account. Or maybe he didn't, but my role here was to assess and potentially rebut his analysis.

BY MR. ROMANO:

Q. All right. Let's move to lost household services. From your perspective as a forensic economist, define what is meant by the term

or phrase "household services."

A. "Household services" generally refers to chores, tasks, duties around the house such as cooking, cleaning, laundry, repairs, maintenance, mowing the lawn, yard work that people do around their house.

And the reason this concept is relevant in forensic economics is that when there's a personal injury or a wrongful death, part of the claim can be the value of those household services because help might have to be hired to replace the services previously performed by the injured person, the decedent, you know, whoever we're talking about.

Q. True that Staller presents a value of lost household services through December 31st of 2025, at which point such services are assumed to be covered by the life care plan?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I would say no. I think you are reading the first sentence of my Section 4 --

MR. ROMANO: Yes.

THE WITNESS: -- and, frankly, I -- I believe I misstated it because I don't think

he did present a value of lost household services.

He claimed to have done an analysis of lost household services that covered a period until December 31, 2025. In my opinion, he did not completely --

No, I'm sorry. I'd like to amend that answer. I take it back.

He does present -- please -- sorry about this. I'm not trying to be confusing.

He does present a value of lost household services. In my opinion, he doesn't do a full analysis of it, but he doesn't present a value of lost house -- lost household services.

BY MR. ROMANO:

Q. Is it true he set forth that value in his report?

A. He presented a value in his report, yes.

Q. All right. And you dispute his value; correct?

A. It's an intermediate value. It's not really a value of lost household services.

Q. All right. What is -- what is your --

as -- as we look through your report, you state, "Staller does not express an expert opinion regarding the number of service hours Mr. Peterson could have provided but for his PD," Parkinson's disease.

You state that; correct?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I did.

BY MR. ROMANO:

Q. Okay. What do you mean by that?

A. What I mean is that -- well, I mean, I'm not sure how to say what I mean other than to say what I just said: He does not claim to know the number of lost service hours.

The way these analyses are typically done in forensic economics is that you determine how many hours -- how many service hours were lost because of the injury, the disease, whatever. You multiply that times a reasonable service wage, the wage that is assumed would have to be paid to someone replacing those services. Then you add them up over time.

He obtained a service wage, but he only did a calculation corresponding to an

assumption of one hour per week, one lost service hour per week.

He did a partial analysis. He just didn't do the complete job.

Q. Do you know what services or chores of a household nature Eddie Peterson performed prior to his Parkinson's disease?

A. I do not, and neither does Mr. Staller. I assume that if he knew, he would have told us, but he didn't.

Q. Have you made any calculation as to what the lost house -- lost household services should be based on any research you've done into what services Eddie Peterson performed in the house pre-Parkinson's disease?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: No. How could I? No one has said on the record or in any document how many hours he did provide before his PD, or actually, more relevantly, we should say but for his PD, because, you know, these are all people who are aging through time.

So it's not just what did he do before he contracted PD. The real issue is what

would he be doing now but for his PD.

These are potentially complicated questions, and for whatever reason, Mr. Staller didn't even investigate them.

BY MR. ROMANO:

Q. And in your report, you state that he presented an average number of hours based on data published by the US Bureau of Labor Statistics; correct? That's what you state?

A. I did state that.

Q. You say that number applies to all men of Mr. Peterson's age; correct?

A. It does.

Q. Okay. Tell us what difference does that make.

A. Well, for example, the footnote to my next sentence reminds us that Mr. Peterson used to do chores around the house. So there is probably some amount of lost earnings. There may be. It just can't be qualified given Mr. Staller's analysis.

So his wife said he used to do chores around the house, but he rarely cooked and rarely worked in the yard.

So already we know that he didn't do

the average number of hours as presented by Mr. Staller in his table because that average includes men of Mr. Peterson's age who do some cleaning or cooking, rather, and do work in the yard.

So we already know based on Ms. -- Ms. Peterson's testimony that the value in the table presented by Mr. Staller is wrong, and Mr. Staller didn't do any kind of investigation to determine what the right number would be.

Q. And your criticism of Staller is that he chose this one-hour-per-week model; correct?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I wouldn't call it a model. I would say my criticism is that he did half a job.

BY MR. ROMANO:

Q. Okay. All right. This -- have you ever in your work as a forensic economist done projections for loss of household services where you chose a specific number of hours similar to what Staller has done?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I have never -- I have never done what Mr. Staller has done. Moreover, I have never seen any economist do what Mr. Staller has done.

BY MR. ROMANO:

Q. All right. You are aware, as you've just said, that Mrs. Peterson said that Eddie Peterson did perform household services and chores pre-Parkinson's disease; correct?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes. He used to -- I'm sorry. I'm waiting for the objection. Sorry.

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes, he said he did some chores.

BY MR. ROMANO:

Q. Right. So assume for a moment you set aside what Staller says. Have you independently calculated or determined what the value is that should be placed on the loss of household services?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: No. That is the job of the plaintiff's economist.

BY MR. ROMANO:

Q. So that I have this correctly, you have no opinion, then, on household services other than to say there is no basis for an award on lost household services since there's uncertainty as to the number of hours, as you're saying, according to Staller's report?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: In a sense, I do have an opinion. My opinion is that the analysis, the quantification of lost -- of the value of lost service hours was not completed.

I have no opinion about the number because I have no access to Mr. Peterson. You know who did? Well, Mr. Staller did.

He could have asked Mr. Peterson what kind of tasks he would be doing but for his PD, but apparently he didn't.

He could have asked Lori Peterson, his wife, what kind of chores Mr. Peterson used to do. She testified to them. It's not even clear that he read her deposition.

There are things that he could have done to find this information, but he didn't.

And so it's not for me to say what the number is because the person in the best position to find the number didn't do so.

BY MR. ROMANO:

Q. Did you do any investigation into this issue of loss of household services to determine what the loss should be?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: No. Again, as I said, I did not do that.

My role here, as we've been saying -- as I've been saying, is to assess and rebut the plaintiff's analysis and the plaintiff's report.

For whatever reason, the plaintiff's economics expert in this case, Mr. Staller, didn't complete his work.

BY MR. ROMANO:

Q. Okay. Do I understand, though, that you do agree that Eddie Peterson did, in fact, perform household services and chores for the household before Parkinson's disease?

MS. KONSTANTOPOULOS: Objection to form.

BY MR. ROMANO:

Q. True?

A. Well, it's not for --

Q. You agree with that?

A. It's not for me --

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: It's not for me to agree or disagree.

What I know is that there is evidence, for example, cited on this page of my report that he used to do chores around the house.

Now, if those chores are chores that he would be doing but for his PD, then, yes, there could very easily be lost household services.

On the other hand, "used to do chores" means that he did them in the past. I don't know if he would still be doing them in this world in which he did not have PD. These are some of the questions that have to be discussed.

So do I agree that he had some lost

household services? I absolutely do not agree with that.

Do I agree that it's possible that there is a value of lost household services that's bigger than zero? Sure, that's possible, but we do not have at this point any expert testimony or any expert report that says what that number is.

BY MR. ROMANO:

Q. All right. Let's go to future medical expenses life care plan where you have that on page 2 of your December 15, 2025, report.

Do you have that there?

A. I do.

Q. And you base your projections on the life care plan which was prepared by Dr. Shahnasarian; true?

A. Yes.

Q. And his life care plan describes various medications and treatments and equipment which Dr. Shahnasarian believes Eddie Peterson will need in the future as a result of the PD; correct?

A. Yes.

Q. And from your report, we see that Dr. Shahnasarian took the cost estimates -- or I'm

sorry.

You took the cost estimates provided by Dr. Shahnasarian and obtained growth rates and costs in each category based on components of the Consumer Price Index, CPI; correct?

A. Yes.

Q. Define you what mean as a forensic economist by "growth rate."

A. Just inflation rate. It's the growth rate of future medical expenses and the assumption that that future growth rate will be a function of past inflation rates.

Q. Give us an example of how you would in a practical sense use growth rate on a particular item.

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Sure. If we're talking about -- for example, suppose we're looking at the category for physician services. That's -- that is a component of the CPI, the Consumer Price Index.

And I followed Mr. Staller in using a -- the period from 2014 through 2024. That was the period at that -- at the time he and

I did this report -- he did his report and I did my report, we didn't yet have data for 2025. We were still in 2025.

So 10 years, from 2014 through '24, and essentially you look at the -- the value of the CPI for a component in 2014 and you look at the value in 2024, and you can calculate the average annual growth rate or inflation rate for that component of the CPI over those 10 years.

BY MR. ROMANO:

Q. When you use the term "growth rate," is that the same to you as inflation rate?

A. In this case, yes, but let me -- let me be clear.

Q. Oh, sure, sure.

A. It is -- that is how I mean it when I'm talking about life care plans. One could talk about a growth rate of wages or earnings, but here we're talking medical expenses in a life care plan.

And, yes, the growth rate that I'm discussing here in the context of a life care plan is essentially the inflation rate. It is an average inflation rate.

Q. Over the past -- let's take 10-year

period, has the general inflation rate in the United States been the same as the inflation rate for medical care and medical services?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I'm not going to try to remember the data, but the answer is almost certainly not.

There's almost no reason to think that inflation rates for two -- two different components of the CPI, all items, which is the overall inflation rate, versus some component, some medical services or medical commodities component, would be the same. I'm sure they're different. They might be similar, but, again, I don't remember the exact numbers.

BY MR. ROMANO:

Q. Are you aware of data showing that the inflation rate for the last 10 years regarding medical services has by far exceeded the regular overall inflation rate in the United States?

MS. KONSTANTOPOULOS: Objection to form and foundation.

BY MR. ROMANO:

Q. True?

A. I'm aware of that data, and I'm not surprised to hear that.

Q. Is the growth rate a measure which describes how certain amounts, such as for the cost of a given medication -- how it will increase over a certain period of time?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: It is calculated as the average inflation rate over the period 2014 through 2024.

And it is my assumption, which is standard in the way economists analyze life care plans -- it is my assumption that average inflation rate will be the rate at which elements of that category increase in cost in the future.

BY MR. ROMANO:

Q. Okay. And is it true that the growth rate is usually explained by using a percentage? As an example, a medication costs $100 this year, and it rises by 5 percent each year. In 12 months from now, it will cost $105; true?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes, except that it's not exactly that precise. These are annual data, and you're basically saying that within one year, if the cost is $100, then in the next year -- it could be nine months later. It could be 11 months later, but in that next -- or 13 months later, depending on where you are in these years.

These are annual averages. And so the average cost in that following year would be, in fact, $150, as -- you know, as laid out in your example.

BY MR. ROMANO:

Q. True that the growth rate allows us to form a more accurate picture of what the injured party will need to spend in the future for ongoing care?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes, it's -- it's -- it's standard for economists to use growth rates, inflation rates in that way to get a better representation of what future medical

costs would be.

In my opinion, it's an indispensable part of the economic analysis of a life care plan.

BY MR. ROMANO:

Q. And did you account for inflation or this growth rate in your calculations?

A. Yes.

Q. What inflation rate did you use? Or what growth rate?

A. No one growth rate. I used a number of growth rates.

Q. And are they shown in your tables?

A. Yes.

Q. I'll come to that shortly. By the way, if it seems at any time that I ask you a question where it's taken out of context and you say, "Well, you must include the table to explain what I'm talking about," I don't mind you at all referring to that, and we'll go to that table. Okay?

A. Okay.

Q. All right. Is it important in your work as a forensic economist in this -- or these five Parkinson's disease cases that the economic

forecast you are making provide a realistic look at the individual's future financial burden?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: When I value a life care plan, it is important to factor in the future cost of those treatments, therapies, medications, etc.

BY MR. ROMANO:

Q. All right. What happens if your forecast is inaccurate and too low? What happens to the patient regarding future medical care needs?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: If the value of any life care plan is too low, as in your example, well, then not enough will be -- not enough compensation will be provided to the plaintiff, assuming a finding of liability, to cover the expense -- those future expenses.

BY MR. ROMANO:

Q. Meaning that the patient with a forecast which is too low could run out of money for the payment of these future care and treatment

needs; correct?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes, hypothetically.

BY MR. ROMANO:

Q. You referred in your report to the Consumer Price Index. What is that?

A. The Consumer Price Index, or CPI, is a measure of consumer prices. It is an index designed to capture prices of various commodities and groups of commodities and services and as much as possible to also take into account changes in quality and so on.

The Consumer Price Index is a data series -- or, rather, a series of data series produced by the Federal Bureau of Labor Statistics.

Q. Is it important as a part of your forensic work in these cases to have relied upon the Consumer Price Index?

A. Yes. That is the standard methodology in forensic economics.

Q. Quantify for us the level of accuracy or reliability of the Consumer Price Index from your perspective as a forensic economist.

MS. KONSTANTOPOULOS: Objection to

form.

THE WITNESS: How to classify it?

BY MR. ROMANO:

Q. No. My question is please quantify the -- the CPI's level of accuracy or reliability from your perspective as a forensic economist.

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I don't think I can quantify it, but fortunately I am assessing and rebutting the plaintiff's report, and he uses the same data.

BY MR. ROMANO:

Q. When economists rely upon the Consumer Price Index, is this index something that provides you with 100 percent accuracy or is it an estimate?

A. Nothing we do when we project into the future provides 100 percent certainty. Nothing that anyone does in any field when the future is projected or estimated is 100 percent certain.

The future is unknown, but that doesn't mean that we can make -- that doesn't mean that we can't make reasonable projections about the future.

Q. You rely upon the Consumer Price Index

as part of your forensic economics work in this case; right?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I did, and so did Mr. Staller.

BY MR. ROMANO:

Q. Fine. And that is something that is the norm among economists throughout the country when making projections like this in personal injury and wrongful death cases; correct?

A. Yes. I should note there is one of these categories that doesn't rely on the CPI.

Architectural renovations is a price index that doesn't exist in the CPI, but it is also based on federal government data, in this case construction data produced by the Federal Census Bureau.

So that is, strictly speaking, not an element of the CPI, but it is also standard, normal government data.

Q. If you go to page 3 of your report, you have Table A, Life Care Plan Categories and Growth Rates. Do you have that in front of you?

A. Yes, I do.

Q. All right. Just in picking a couple of examples here, where you have the categories drugs and it shows a growth rate of 1.97 percent and under the CPI component it says "prescription drugs," how did you arrive at the growth rate of 1.97 percent for prescription drugs?

A. The point of Table A is to connect the categories in the life care plan to the relevant components of the CPI.

That category is sometimes called "medications," etc. This time it's called "drugs" in the life care planning.

The corresponding component in the CPI is called "prescription drugs."

What I did is what I described earlier. I looked at the CPI for the component called "prescription drugs." I took the value of that index in 2014, I took the value of that index in 2024, and based on those two numbers and the number of years in between them, I calculated the average annual inflation rate in that component, and it is, as shown in the table, 1.97 percent on average per year.

Q. Let's take one other area, architectural renovations, and it shows a growth

rate that you chose of 5.52, and the CPI component is listed as "New single-family houses under construction." Walk us through how you arrived at that.

A. Sure. First of all, I didn't choose that growth rate. I calculated it based on data.

And this is the one I was mentioning a moment ago. The category new single-family homes -- or houses under construction is not actually a component of the CPI. I got that from data provided by the Federal Bureau of the Census.

The Census Bureau provides a lot of construction data, including construction price data, and so that's the category that I used.

In life care plans, that's typically what I use. That's always what I use. If a life care plan I'm analyzing involves some construction, you know, to make the house more usable for someone who's disabled, for example -- that's typically what it is -- this is the category I use.

So I did the same thing. I took the price index for new single-family houses under construction in 2014, I took the value for 2024, and from those, I calculated this average annual inflation rate of 5.52 percent, and my assumption is

that future expenses in this category will grow at that rate.

Q. You then say -- and I'm on page 3 of the report -- "The Shahnasarian life care plan expresses costs in ranges for some items, so I followed suit and calculated lower and upper bounds on the value of the life care plan."

Is that what it says?

A. It does.

Q. All right. When you use those terms, "lower bounds," "upper bounds," what does mean?

A. As I note here, the life care plan expresses costs and ranges. It's not just cost. Sometimes it's frequencies.

So a range could be a statement that a given doctor's visit will cost between 150 and $200. I would take 150 to be the lower bound and $200 to be the upper bound.

But sometimes that arises because of frequency issues. So if -- if the life care plan says that the doctor visit is $200 per year but it's going to be needed -- the patient will need to visit that doctor between six and 12 times over the course of the year, the lower bound is six times 200 and the upper bound for that year, at least, is 12 times

200.

So the range can arise because of timing and frequency as well as just the actual cost of the item.

Q. As to Eddie Peterson, your projections start on what date?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Let's see. I believe I started -- oh, it says right here. January 1st of this year.

BY MR. ROMANO:

Q. And what is the reason you begin the projections January 1st of 2026?

A. I think the simplest answer is that's when the -- when Mr. Staller -- yes, that's when Mr. Staller started the analysis of the life care plans he analyzed, and I figured that simplicity is a valuable thing for something like this.

Q. Then your projections will extend until the expected end of Mr. Peterson's life; correct?

A. Yes.

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes, that's what it says.

BY MR. ROMANO:

Q. And you are assuming a life expectancy for Eddie Peterson for how long?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: The data we used -- we used the same data source, Mr. Staller and I. That data source implies a remaining life expectancy as of January 1st of this year of 9.7, implying a total life expectancy of 86.7 years.

BY MR. ROMANO:

Q. When you as a forensic economist calculate the amount of money needed in a life care plan to pay for all the items in that plan, is it then necessary for you to reduce the total calculated amount to present value?

A. Yes.

Q. All right. Define "present value."

A. Present value is a -- is a -- is an expression of a future dollar value or a series, a stream of future dollar values in today's dollars.

The idea is based on the simple and

very standard concept of a dollar being worth more today than it is next year.

That difference in valuation is summarized by various kinds of rates of return. Interest rates, T-bill, you know, beyond yields. We call them discount rates in -- in the forensic economics because they are discounting the future.

The standard approach in forensic economics in personal injury cases is to use a rate of return that is as close to risk-free as reasonable, as possible.

You generally do not use as a discount rate, for example, a rate of return on the S&P 500.

So Mr. Staller used a fairly low-risk rate. My choice was just to use the one that he did.

Q. The determination of that rate that both you and Staller used, do you find Staller's methodology as to that rate determination acceptable?

A. I did not dispute it.

Q. Would you give us an example of an item in the life care plan? Just -- just pick an item. And you can use a round number to make it easier, if that will help.

But when you take -- where you would take the cost of a given item in the life care plan at today's rate and project it over the course of the life care plan to what it will cost in the last month of life expectancy, knowing that number, and explain how you reduce it to present value.

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Well, let's suppose that something costs $100 now, to use an example that you mentioned earlier, and let's suppose that the discount rate is 5 percent. If the growth rate and the discount rate are the same, what would happen is that it would grow to $105.

Let's suppose it's 5 percent, both the growth rate and the discount rate are 5 percent. It would grow to $105. The cost would grow to $105 next year.

But then when you calculate at the present value this year, you would reduce it by that same 5 percent. So even though in nominal dollars it would be -- it could cost more next year, $105 instead of $100, the present value would still be $100.

Now, alternatively, suppose that the growth rate is 5 percent but that the discount rate is 7 percent. That's unreasonable given -- you know, it's not true. Right? The value he uses is 4.88 percent. I don't dispute that.

But let's just say -- let's suppose that we're in a high interest rate environment, which we are not currently, and that the discount rate is bigger than 5 percent. That $100 expense today turns into a nominal expense of $105 next year, but then when it's discounted to present value, you're taking 7 percent off.

You're multiplying it by -- actually, you're dividing it by 1.07, which takes it below $100. I don't know what the number would be. It would be $98 or something like that, but -- $97. I don't know.

But if the growth rate is smaller than the discount rate, then the present value of the future value is less than that future value. I should say it's less than the current value. I'm sorry.

BY MR. ROMANO:

Q. And then have you a Table B which sets forth your discounted future values using the same 4.88 discount rate which was used by Mr. Staller; correct?

A. These are present values, but, yes, other than that, that's what this table shows.

Q. Right. And as Table B shows and you have in your report, you put the present value of the cost of the Shahnasarian life care plan at between $1,783.882 and 3,451,807; correct?

A. Yes.

Q. Because you have the value of the life care plan at a low -- lower number and then a higher number, what is the reason for that? Why the two numbers?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: As noted earlier, Dr. Shahnasarian's life care plan expresses these values and ranges, so this is nothing more than my calculation reflecting the ranges that are part of his life care plan.

BY MR. ROMANO:

Q. And then Table B. Briefly explain

that to us. What are we looking at and what does it mean?

A. These are the life care plan categories that appear in the Shahnasarian report. I will say that some of them are split up by me. For example, there is a Drugs and a Drugs, OTC, meaning essentially prescription drugs and over-the-counter drugs, but there is a drugs category in the Shahnasarian life care plan.

And so I -- these are the -- the present values assuming that, say, an expense is grown into the future at that -- whatever rate, 3 percent, 2 percent it grows into the future, but then each of those is discounted back to the present.

So these are the sums of all of those expenses except for the fact there are growth rates and discount rates involved.

MR. ROMANO: You doing okay at the time? Keep going?

THE WITNESS: I'm fine. Thank you.

MR. ROMANO: Everybody okay? Good? Okay.

THE WITNESS: At some point, we'll need lunch, but other than that.

BY MR. ROMANO:

Q. Let's move to the next section, then, Offset to Damages. What is it your working definition of offsets?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Well, I don't think there is a formal definition in forensic economics. I think the definition we use is simply the definition in common parlance.

An offset is something that cancels something else out in whole or in part. It's a value that is used to net out some amount of that larger number.

We're talking about economic damages. Very often in forensic economics, you are netting out some element of the damages.

There is a job that the injured person can do, and so there are mitigation wages. That's essentially an offset.

So while there is no formal definition of offset, I think it's something that forensic economic -- economists understand. It's the thing that you in principle subtract off of of a gross economic damage to get a

net economic damage.
BY MR. ROMANO:
Q. In this instance, did you take this section of offsets to damages and divide it into two categories?
MS. KONSTANTOPOULOS: Objection to form.
THE WITNESS: Yes. I believe you're talking about the two subsections. There are disability benefits and medical offsets.
BY MR. ROMANO:
Q. Yes. All right. Have you reviewed Dr. Miller's report?
A. Yes.
Q. In terms of offsets as it relates to these five Parkinson's disease cases, are you relying upon Dr. Miller's work relating to offsets or are you doing your own calculations regarding offsets as to each of the five cases?
A. I'm relying on Dr. Miller's expert opinion regarding these medical offsets.
Q. Does that apply for both offsets -- I'm sorry -- disability benefits and medical offsets?
MS. KONSTANTOPOULOS: Objection to

form.
BY MR. ROMANO:
Q. Applies to both?
A. No. Just if we're talking about Dr. Miller's expert opinion --
Q. Yes.
A. -- it applies to medical offsets only.
Q. And as to disability benefits and the issue of offsets, does Dr. Miller's opinion factor into that at all?
MS. KONSTANTOPOULOS: Objection to form.
THE WITNESS: No.
BY MR. ROMANO:
Q. All right. So any calculations made with respect to offsets and disability benefits are calculations and opinions you have arrived at; right?
MS. KONSTANTOPOULOS: Objection to form.
THE WITNESS: There was a separate expert addressing these, the disability offsets.
BY MR. ROMANO:
Q. Who was that?

A. Dr. Syed Hasan.
Q. And are you relying upon Dr. Syed Hasan's opinions as to offsets pertaining to disability benefits?
MS. KONSTANTOPOULOS: Objection to form.
THE WITNESS: Yes.
BY MR. ROMANO:
Q. If you follow me, I'm going to the section under Disability Benefits.
MS. KONSTANTOPOULOS: At what page?
MR. ROMANO: Page 4.
MS. KONSTANTOPOULOS: Thank you.
MR. ROMANO: Page 4.
BY MR. ROMANO:
Q. And you state, "Mr. Peterson has received disability benefits from the Veterans Benefits Administration, VBA, since 2013. His 2026 monthly benefit will be $4,767.99, which corresponds to a 100 percent disability rating. As a -- as --" I'm sorry -- "a May 1, 2025, letter from VBA along with an accompanying spreadsheet listed Mr. Peterson's disabilities, and all of them are PD-related, therefore all of his VBA benefits are due to his PD, and hence the full amount of

$4,767.99 per month is an offset in the context of this lawsuit."

Did I read that correctly?

A. Yes.

Q. I'll read a little more before I come to my next question, but you state in that next paragraph, "By law, the benefit grows each year according to the Social Security Administration's cost of living adjustment, COLA.

"The average COLA for the years 2025 was 2.57 percent, so I assume that his future VBA benefits will grow at a rate of 2.57 percent per year.

"I used the same discount rate as I did to calculate the present value of the life care plan"; correct?

A. Yes, that's what it says.

Q. And then this final paragraph, you say, "Based on this -- on the above information, the present value of this offset to Mr. Peterson's economic damages in this case calculated from 2013 until his life expectancy is $1,073,280."

Is that your opinion as it relates to these offsets regarding disability benefits?

A. Yes.

Q. As to Dr. Hasan, you said you relied upon his opinion. To what extent are you utilizing his opinions to help you form your own opinions --

MS. KONSTANTOPOULOS: Objection.

MR. ROMANO: -- in this matter?

MS. KONSTANTOPOULOS: Sorry. Objection to form.

THE WITNESS: Dr. Hasan identified -- his role, at least as it pertains to my analysis, was to determine which of the diagnoses used by VBA to determine disability ratings were related to PD and which were not.

If -- if there were extensive diagnoses that were unrelated to PD in his opinion, then perhaps not all or maybe not any of the $4,700, roughly, per month would be relevant to this lawsuit.

What Dr. Hasan found in this case was that all of Mr. Peterson's disability benefits were derived from disability ratings and hence from diagnoses that were PD-related, so therefore his entire amount, this 4,700, approximately, per month was due to -- he received it because of his diagnosis

of PD. Again, according to Dr. Hasan.

BY MR. ROMANO:

Q. What methodology did you employ to evaluate and quantify the offsets in these five Parkinson's disease cases?

A. Well, in the cases where it was relevant -- it wasn't relevant to do so in all of them, but in the ones where it was relevant, I had information based on -- you know, from materials in that materials considered list that told me how much each plaintiff, each relevant plaintiff, each plaintiff relevant to this issue, was receiving in VBA benefits, disability benefits. I had Dr. Hasan's opinion about which of these was related to PD.

In the case of Mr. Peterson, my approach, my methodology was to take the information I had about what he was receiving, I projected it into the future, assuming as an inflation rate the average SSA COLA, the cost of living adjustment, which, as noted and as you just read, I think is 2.57 percent over the last couple of decades, and so I assumed that his future benefits would grow at that rate.

And -- and by the way, I confirmed

that -- that his recent benefits had grown at the rate of the SSA COLA for each of those years.

So it does say "by law," but I'm not claiming any expertise in the law. This is something that I was able to confirm.

So it was simply the current rate grown into the future using an inflation rate, not unlike the approach I used for the life care plan, really.

That number was grown into the future according to this SSA COLA and then discounted back to the present using the interest rate that Mr. Staller introduced.

Q. When you make that reference and you say "by law," what law are you referring to?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I don't know. I read on the VA website that it says by law it must. I was able to confirm that it had. So I don't -- I don't think I need to be an attorney to confirm that. There is some law out there, apparently, that says this.

BY MR. ROMANO:

Q. Under medical offsets, you note,

"Mr. Peterson has received services that were provided or paid for by Medicare and the Veterans Health Administration, VHA. According to defense clinical expert Dr. Syed Hasan, the total value of --"

A. Oh, it does say "Mr. McElhiney," doesn't it? That appears to be a typo, and it's an example of something you noted earlier, that I would cut or copy and paste things from other reports. Yeah, that's -- that's something that we all should have caught.

That should read --

Q. All right.

A. -- "Mr. Peterson's past medical offsets."

Q. Okay. All right. I'll -- I'll just start back at the beginning of that sentence --

A. I apologize for interrupting.

Q. -- and I'll make it Mr. Peterson instead of Mr. McElhiney.

"According to defense medical expert Dr. Syed Hasan, the total of Mr. Peterson's past medical offset is $149,361.21 when accounting for VHA's total cost and $146,773.49 when accounting for VHA's total direct cost."

Did I read that correctly?

A. Yes, with -- and with the correction --

Q. With the --

A. -- yeah, and with the correction --

Q. Okay.

A. -- of Mr. -- inserting Mr. Peterson's name.

Q. Okay. And then you state, "Mr. Peterson's future medical offsets are summarized in a report by Henry Miller of the Berkeley Research Group which lists the projected payments for the I items in the Shahnasarian life care plan by both Medicare and VHA.

"The Miller report retains the categories and treatments of the Shahnasarian life care plan, and its implied results can be construed as a pair of modifications of the LCP.

"The results of the modified Shahnasarian life care plans appear in Tables C and D"; correct?

A. Yes.

Q. All right. And we have Table C there. Briefly tell us what this table is and what it means.

A. First I -- I should clarify that even though I refer to this as a modified LCP, in a way, it isn't. It is a set of calculations of offsets, Medicare or VHA, that are applied to the same treatments and medications, etc., of the life care plan.

So it looks like a life care plan, but it's really an expression of the offsets of the -- of the costs that would -- that would be covered by these other entities. But, as I say, it looks like a life care plan.

And I presented in Table C and Table D for the different sources of the offsets to show how those offsets apply to the categories of the Shahnasarian life care plan.

So, for example, you can see in Table B that the first category, the first row in Table B is evaluations, and so it is in Tables C and D as well.

Table C -- Tables C and D show the value of the offsets that would be applied to the gross expenses that are outlined in Table B.

Q. And as you come down further on page 5, you note that "Medicare is projected to cover between $127,172 and 158,209 of the cost of the

Shahnasarian LCP, and VHA is projected to cover between $398,577 and $462,381."

Did I read that correctly?

A. Yes, I believe so.

Q. Then you state, "The court may decide to subtract these amounts from corresponding lower and upper bounds of the present value of the original Shahnasarian LCP to arrive at a net value of the cost of Mr. Peterson's future medical care"; correct?

A. Yes.

Q. All right. And then we come to Table D. Briefly explain that to us.

A. Well, that's also the opinion of Dr. Miller operationalized by overlaying it on top of the Shahnasarian life care plan in exactly the same way that I did with the Medicare offsets.

These are VHA offsets, so it's the same thing as Table C but for a different -- a different coverage, different set of offsets.

Q. We then come to plaintiff's life care plan, and you're referring here now to Kay Hairston, RN, and her life care plan; correct?

A. Yes.

Q. She was the expert life care planner

hired by the plaintiff in the Eddie Peterson matter; right?

A. Yes.

Q. And in this section, you have a Table E. Explain that to us, please.

A. Table E is similar to Table C in that it summarizes the medical offsets, the coverage by Medicare.

The -- the difference between Tables -- between Table C and Table E is that E applies the offsets identified by Dr. Miller to the plaintiff's life care plan by Hairston, whereas Table C does the same thing but applies it to the defense life care plan by Dr. Shahnasarian.

Q. And when Mr. Staller calculated the present value of the Hairston life care plan, that came to $3,752,303; correct?

A. Yes.

Q. You have Table F. Explain that to us, please.

A. Just as Table E is similar to Table C, Table F is related to Table D.

Table F summarizes the offsets identified by Dr. Miller and applies them to the Hairston life care plan.

Q. And then you show through Tables E and F Medicare projections as to what would be paid regarding the cost of the Hairston life care plan and then the VHA projections as to what they would pay; is that right?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes, I -- that's what those tables show, yes.

BY MR. ROMANO:

Q. All right. And then your next section provides your conclusions; right?

A. Yes.

Q. And is that meant to be a summary of opinions you've already provided in the report?

A. Yes.

Q. And you have a Section 9, References. What is that?

A. These are documents and -- and, yes, documents in which I either relied or reviewed and considered to be closely related to my work in this report.

Q. And two of those items include transcript of deposition of Edgar Peterson from February 2024; right?

A. One of them is.
Q. Yep. And the other transcript of deposition of Lori Peterson, April 2024; right?
MS. KONSTANTOPOULOS: Objection to form.
THE WITNESS: Yes.
BY MR. ROMANO:
Q. And then you have a series of appendices and charts attached which further explain what you have discussed throughout the report. Is that a fair way of stating that or not?
A. It's fair.
MR. ROMANO: Okay. All right.
MS. KONSTANTOPOULOS: Counsel.
MR. ROMANO: We will next move to the Gary Layne McElhiney report.
It is 12:03. So why don't we -- first we can go off the record.
VIDEOGRAPHER: Off record at 12:03.
(Recess taken.)
VIDEOGRAPHER: On record at 1:12.
MR. ROMANO: All set.
VIDEOGRAPHER: Um-hum.
MR. ROMANO: Okay.

(Whereupon, Exhibit 13 marked for identification.)

BY MR. ROMANO:

Q. Ready to go?

A. I am.

Q. Okay. I have placed in front of you Exhibit Number 13, which appears to be your report in the matter of Edgar Allen Peterson dated May 8, 2025. Would you identify that for us. Just tell us what it is, please.

A. Yes. It appears to be that report that you just mentioned.

Q. That was the first report that you did on the Peterson matter?

A. Yes.

Q. And then there was the December 15, 2025, report; correct?

A. Yes.

Q. Okay. Going back to two questions regarding Peterson and then I'll move to the McElhiney report.

But you are not an expert on VBA benefits; correct?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I'm not an expert in the determination of how VBA benefits are granted. That's certainly true.

BY MR. ROMANO:

Q. Are you an expert in any aspect of VBA benefits in determining what benefits are due to a given person?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: No.

BY MR. ROMANO:

Q. Regarding your -- the offsets in the Peterson matter, walk us through your methodology for making your findings and calculations.

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Sure. I -- I believe I did so. Happy to do so again.

What I did was look at the benefits, the disability benefits that had been paid to Mr. Peterson, saw what the current rate was, based on the opinion of Dr. Hasan that these were all related to VD, they were all relevant as offsets in this matter, these were amounts that Mr. Peterson would not have

received but for his PD.

I then looked at the average SSA COLA over a number of decades and took that average and treated it as my growth rate moving forward.

And so each future amount was the -- you know, the amount that he's received currently times 12, because these were monthly rates, increased each year by that growth rate of 2.57 percent, I think it was, and then brought back to present value with the application of a discount rate.

MR. ROMANO: Let's move to the McElhiney report dated December 15, 2025, and this will be Exhibit Number 15. And I have copies for defense counsel.

There we go.

(Whereupon, Exhibit 15 marked for identification.)

BY MR. ROMANO:

Q. All right. You have the report there in front of you on --

A. I do.

Q. -- Mr. McElhiney?

You note that -- in the introduction

portion of your report, you state that Mr. McElhiney was diagnosed with his PD July of 2018; correct?

A. Yes.

Q. And you assume liability for purposes of this report on Mr. McElhiney; correct?

A. Right, only -- only during my analysis of -- of -- of his damages and any testimony that follows from it.

Q. All right. As you assessed and evaluated each of these five Parkinson's disease cases from your perspective as a forensic economist, did you use the same methodology and steps of analysis in going through each of the cases?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes.

BY MR. ROMANO:

Q. If we go first to the -- at the bottom of page 1, on lost earnings, you note that Staller calculates the lost earnings to be at $288,361; correct?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes.

BY MR. ROMANO:

Q. And then you conclude that Staller omitted an important aspect of the McElhiney work history in that you say he was disabled before his PD diagnosis; correct?

A. Yes, I said he omitted it.

Q. Do you agree that the date of diagnosis does not mean the date of commencement of the signs and symptoms of Parkinson's disease?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: That sounds like a medical assessment. I haven't made that.

BY MR. ROMANO:

Q. When you make your assessments as it relates to Parkinson's disease and Mr. McElhiney, are you making calculations based on the date of diagnosis of the Parkinson's disease?

A. No, not exclusively.

Q. Okay. By "not exclusively," what do you mean? What else are you factoring in?

A. A few things. One is that he also applied for social security disability benefits. That was in 2016. He reported his symptoms. He had no incentive to understate his symptoms. None of

them were related to PD, in the opinion of Dr. Hasan. That's one.

He was -- frankly, I guess that's the main one, you know, that social security determined that he was disabled, 100 percent disabled, and unemployable prior to his diagnosis.

I -- I'm not really saying about when symptoms arose. It's not for me to say whether they arose years before or months before. I don't know.

But the fact is based on the documents in this case that he was declared unemployable on the basis of considerations that had nothing to do with PD.

Q. Are you relying completely on the opinions of medical doctors as to, first, the date of diagnosis of PD?

A. I suppose that's where I got that piece of information. I don't recall precisely. It may have been -- it may have been in a document that I read. I'm certainly not making my own determination about that date.

It's something that I read perhaps in a VBA document, perhaps a VHA document, perhaps written by a medical expert. I don't recall specifically.

Q. Let me give you an example so that I can clarify where you're coming from in your opinion as a forensic economist.

If you have a man who has, let's say, very significant major chest pain for 30 days but does not for whatever reason see a physician until that 30th day and the physician diagnoses cardiac disease, you have a diagnosis of cardiac disease on day 30 but clearly signs and symptoms of that disease for the 30 days leading up to that.

My question is as a forensic economist, first, do you make any determinations as to when he had his cardiac disease in an instance like that?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: No.

BY MR. ROMANO:

Q. You would go by the physician's diagnosis of the cardiac disease?

A. In your example, there's --

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: In your example, there's no information other than this physician.

So, yes, in your example, I would rely on what the physician said.

BY MR. ROMANO:

Q. Assuming you had those medical records in front of you and you could see the history of the severe significant chest pain for that 30-day period, do you factor that into your work as a forensic economist or do you go solely with the diagnosis?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yeah, I don't think it's that simple. What I go by is the expert opinion of medical professionals.

It's not for me to read medical records and decide for myself whether there was cardiac disease. I can certainly read them and see, oh, there are symptoms, but of what, it's not for me to say. I'm not a medical professional.

So if -- in your example still -- we're talking about your example. What I would do is see what medical professionals involved said about this case.

If that medical professional said that

there was an onset of this condition 30 days before this official diagnosis, then that's the information I would take and use.

But maybe that medical professional wouldn't go out on that kind of limb. Maybe he or she would say 10 days before the diagnosis. I don't know.

So fortunately, my opinion here and my calculation doesn't depend exclusively on when that diagnosis happened. We know when the diagnosis happened, you know, and so that is one of the facts.

Beyond that, the other very important fact, it seems to me, is the fact that another branch of the federal government, the Social Security Administration, determined him to be 100 percent disabled, unemployable, and it made that determination on the basis of nothing related to PD.

BY MR. ROMANO:

Q. You agree that the date of diagnosis does not mean the date signs and symptoms of PD commenced?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Again, that sounds like a medical opinion. If you told me that -- if you were a medical person and you told me that was true, I would say, sure, that makes sense, but it doesn't make sense for me to be answering that question. It seems possible, but I'm not a medical professional.

BY MR. ROMANO:

Q. If you are making an assessment as a forensic economist and you are trying to determine what signs and symptoms being displayed make someone unemployable, do you make that determination or is that to the life care planner --

MS. KONSTANTOPOULOS: Object.

BY MR. ROMANO:

Q. -- or to someone else?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Neither. I base my determination along those lines on the documents.

Or, rather, I shouldn't say determination because I did not make that determination.

The documents told me that

determination. The Social Security Administration had made that determination. I took and used the information in those documents.

BY MR. ROMANO:

Q. Did the Social Security Administration, to your knowledge, assess what Mr. McElhiney's signs and symptoms had been prior to the date of diagnosis of PD, if you know?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: Would you mind repeating that?

BY MR. ROMANO:

Q. Yes. Are you aware of whether or not the Social Security Administration assessed whether Mr. McElhiney had signs and symptoms of Parkinson's disease prior to the date he was diagnosed with Parkinson's disease?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: If I had seen something about that in the social security documents, I would have taken that into account in whatever way was deemed valid by medical

professionals working on the case. I saw nothing about that.

Again, Mr. McElhiney gave a detailed assessment of what he thought his disability was, and he couldn't, of course, necessarily say what caused it, but he could say what had happened.

Similarly, in his deposition, as I note here in this report, he said that he quit his job in 2016 and he talks about pain in his -- in his limbs, etc., etc.

At that point, I suppose he's not -- he's not a medical professional himself. I guess he couldn't say whether it was Parkinson's, but at no point did anyone mention Parkinson's disease.

And as I noted previously, it was the -- it's the opinion of Dr. Hasan that those health conditions were not caused by PD.

BY MR. ROMANO:

Q. Have you seen any medical report confirming his pre-Parkinson's disease diagnosis showing symptoms, limitations, or disability that were related to the yet to be diagnosed Parkinson's

disease?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: I don't recall.

BY MR. ROMANO:

Q. True Mr. McElhiney retired, according to your report, in 2016 because of pain from his medical conditions which became too great, every joint in his body was hurting, he had neuropathy in his hands and feet, and could not stand the jarring of the truck; correct?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes, that is the comment of his that I quoted.

BY MR. ROMANO:

Q. Have you reviewed any record in this case showing when Mr. McElhiney's signs and symptoms of Parkinson's disease first manifested themselves?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I don't recall.

BY MR. ROMANO:

Q. Have you considered as a part of your formulating opinions as a forensic economist in this

case that Mr. McElhiney did have signs and symptoms of PD well before the diagnosis was ever made?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: No, I don't believe so.

BY MR. ROMANO:

Q. And your conclusion is that the implication is that Mr. McElhiney's PD did not lead to a loss of earning capacity because the loss had already taken place and for reasons unrelated to his PD? That's your conclusion; correct?

A. Yes.

Q. And your opinion is there is no claim for lost earnings; correct?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: No. There appears to be a claim. That's certainly the claim made by the plaintiff and quantified by the plaintiff's expert, Mr. Staller.

My opinion is not that there's no claim. My opinion is that the value of that loss is zero.

BY MR. ROMANO:

Q. Move to lost household services. When

we were discussing the Peterson report, we spent a good bit of time going over the one hour per week theory of Mr. Staller; correct?

A. Yeah, we talked about his methodology.

Q. Okay. In the case of Mr. McElhiney, you state, "Staller does not address the likelihood that McElhiney would have actually done that many hours of household chores, but rather presents a model of one hour per week"; correct?

A. Yes, that's what he did.

Q. And as a result of that, under Loss of Household Services, your determination is that there are none for which money should be awarded?

MS. KONSTANTOPOULOS: Objection.

BY MR. ROMANO:

Q. Is that accurate?

MS. KONSTANTOPOULOS: I'm sorry. Objection to form.

THE WITNESS: The finder of fact will determine whether money should be awarded.

My role here is simply to say what is valid or invalid about the plaintiff's expert's analysis.

My claim is not that nothing should be awarded. My opinion is not that there are

zero lost services.

My opinion is that no one has calculated this number and it's impossible for anyone to address it because, as I said before, Mr. Staller did an incomplete analysis.

He came up with an intermediate number, a number that could in principle be used by someone else -- however, inaccurately -- to come up with a total number for the value of lost household services, but Staller -- Mr. Staller himself did not do it.

So my opinion is that I see no basis for any kind of quantitative claim for lost services here.

BY MR. ROMANO:

Q. You agree in the instance of Mr. McElhiney that there is evidence, though, in the record from materials you have reviewed, including depositions, that he was performing household chores before he contracted or exhibited signs of Parkinson's disease?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: I don't know that there's any such evidence, but, again, I'm not saying that there's zero evidence. I'm saying that a reasonable analysis was not done here.

BY MR. ROMANO:

Q. When a forensic economist is making an assessment of damages for loss of household services, does that forensic economist give due consideration to such things as attitude, work ethic, and work history as it pertains to household chores?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: The standard approach of a forensic economist when trying to quantify lost household services is to count up the hours. That is the main thing a forensic economist does.

Issues of attitude or whatever work ethic or the other issues that you mentioned could conceivably be relevant, but they would ultimately lead to a number. What's missing here is a number.

Mr. Staller chose not to give us a

number, and in that regard, he didn't do a complete analysis.

BY MR. ROMANO:

Q. And therefore your opinion is that zero should be awarded for loss of household chores because Staller didn't give a number?

A. No, as I said a moment ago that my opinion is not that the answer is zero. My opinion is that no one has done the analysis yet, and the person in the best situation to do that analysis has not done it.

I'm not sure what I can do in my role as someone assessing and potentially rebutting the plaintiff's economics report in this regard. The work hasn't been done. There's nothing really for me to assess. There's nothing for me to rebut.

Had he done a complete analysis, I could tell you right now I could testify under oath what I thought of his approach, what I thought of his number, but there's no number here. There's no answer here.

So my opinion is not that it should be zero. For all I know, the finder of fact will say, okay, I think it's X number of hours per week. I don't know on what basis that would be decided, but

it's not for me to say. That's what the finder of fact will do.

I don't think the finder of fact has been given the prop- -- has been given the appropriate assistance and help that an expert witness is supposed to provide.

It's an incomplete analysis, and that's really all I'm saying.

Now, I suppose it's true that if no analysis is done that nothing can be awarded, and so ultimately, effectively the answer is zero.

That would be a shame because there may well be some lost household services that Mr. McElhiney has suffered, but at this point we don't know because the person best situated to give us that answer chose not to.

Q. All right. Is it true from your perspective as a forensic economist that a determination as to the number of hours of household services lost is up to the finder of fact during trial?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: Everything is up to the finder of fact in a trial. That's my

understanding. I'm not a lawyer, but I've done enough work in forensic economics to know I'm not the one who makes the decisions ultimately.

All I can do and all Mr. Staller is supposed to do is help the finder of fact. Everything is ultimately decided upon by the finder of fact.

And if the finder of fact makes a determination on the basis of this insufficient help by Mr. Staller, well, then there's nothing for me to say about that.

But it should not be the case that the finder of fact is effectively required to make these decisions without appropriate assistance by the expert witness, and in this case, he has not been provided with that help.

BY MR. ROMANO:

Q. Move to future medical expenses life care plan, and in this instance you are making calculations based on the life care plan of Michael Shahnasarian; correct?

A. Yes.

Q. And true your economic analysis of the

life care plan involves, A, identifying inflation and growth rates that allow medical costs to be projected into the future, and, B, using a discount rate to express the streams of future costs as lump sum present values; correct?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes.

BY MR. ROMANO:

Q. One area regarding Consumer Price Index. Are there different types or categories under the Consumer Price Index?

A. Yes.

Q. For example, all --

A. Yeah.

Q. -- urban consumers being one, urban wage earners and clerical workers, another -- you know what I'm referring to, those categories?

A. Yes. Those are actually different price series, and, yes, the Bureau of Labor Statistics produces different -- different price series and hence different price indexes.

Q. All right. And you say that following Staller, you calculated the average inflation rates over the period of 2014 to 2024; correct?

A. Yes.
Q. And you assigned CPI components in order to capture the bulk of the spending in each category; correct?
A. Yes.
Q. Was your methodology the same as Staller's in this respect?
MS. KONSTANTOPOULOS: Objection to form.
THE WITNESS: Yes.
BY MR. ROMANO:
Q. There is a Table A on page 3. Would you explain that to us, please, briefly.
A. Table A is a summary of how different life care plan categories are connected to the CPI components that I used to calculate the growth rates or items in those categories.
Q. And this is similar, at least in structure, to a table that we covered earlier in the deposition regarding the Peterson report; right?
A. Yes.
Q. I'm moving over to page 4. And regarding Mr. McElhiney, your projections start on January 1, 2026, and extend until the expected end of Mr. McElhiney's life; correct?

A. Yes.
Q. And you have Mr. McElhiney as having a remaining life expectancy as of the date of this report being 13.3 years, implying a total life expectancy of 84.4 years; correct?
A. Yes.
Q. And the discount rate you were using with respect to Mr. McElhiney is 4.88 percent; right?
A. Yes.
Q. And that is the same discount rate being used by Mr. Staller?
A. Yes.
Q. And briefly explain Table B on page 4.
A. Table B on page 4 summarizes the present value of each of the costs and each of the categories in the life care plan.
As in the Peterson case, the life care plan values are expressed in ranges. So there is a lower bound and an upper bound that's reflected in Table B, and I simply add them up to get that total at the bottom, a total value of the cost of the Shahnasarian life care plan, a lower bound and an upper bound.
Q. And for the lower bound, you calculate

the value of the Shahnasarian life care plan of being $1,732,298 and the upper bound as being $2,664,264; correct?

A. Yes.

Q. Let's go to the McElhiney Offset to Damages section. Do you explain under the section of Disability Benefits your calculations as to offsets regarding Gary McElhiney? Is that done through Table C?

A. Yes, it is.

Q. All right. Walk us through, then, Table C and explain that to us.

A. Table C is the list of his various diagnoses that appear in the documents that I mention here in this report and accompanied by the disability percentage.

I at least initially determined that these were unrelated to PD, but because I am not a medical professional, I relied, importantly, on the report of Dr. Hasan, who confirmed that the diagnoses in this table are, in fact, not related to PD. So ultimately I relied on Dr. Hasan.

I may have looked at this. I looked at the VA calculator to determine a combined disability rating, but that would have been less

authoritative if I hadn't had the expert report of Dr. Hasan to rely upon.

Q. If you look at Table C for Gary McElhiney's non-PD-related disabilities and you see that first category, adjustment disorder with anxiety and depressed mood, do you see where it shows a disability percentage of 70 percent?

A. Yes.

Q. All right. True you as a forensic economist are not qualified to determine whether PD was or was not causing any of that adjustment disorder? True?

A. That's true --

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: -- which is why I relied on Dr. Hasan's expert opinion to make that determination.

BY MR. ROMANO:

Q. Do you know what Dr. Hasan relied upon in order to arrive at his conclusions?

A. Well, it's not really for me to say, is it? Dr. Hasan is a medical expert, a medical professional. I assume that he used appropriate methodologies and data and resources to come up with

his opinion, but I certainly didn't -- I didn't evaluate it. It's not in my area of expertise to do so.

Q. So for purposes of your expert testimony in this case, when you see adjustment disorder with anxiety and depressed mood and a 70 percent disability rating, your assumption for purposes of your opinion is that that has nothing to do with Parkinson's disease; correct?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: No, not correct.

MR. ROMANO: All right.

THE WITNESS: It's not an assumption. It is an opinion based on a medical expert.

BY MR. ROMANO:

Q. All right. So upon whom you rely for his opinion on this item of adjustment disorder; correct?

A. Yes, I relied on his opinion.

Q. At the top of page 5, you say, "I fed the percentages in Table C into the VA's combined disability rating calculator to determine the joint rating of Mr. McElhiney's non-PD-related health conditions. The result of this calculation was a

combined non-PD disability rating of 100 percent."

Is that what it says, first of all?

A. Yes, that's what it says.

Q. All right. How do you go about feeding percentages into the VA combined disability rating calculator? How do you do that?

A. Well, first of all, it should be noted that when I did that -- and I'll explain it further in a moment, but when I did that, I was really just confirming, in effect, Dr. Hasan's opinion.

What I did to confirm it to make it make sense to me, I suppose -- there is a -- a VA disability rating calculator and it has rows that you -- you know, you enter these percentages. I think it's primarily the percentages.

I can't recall exactly how it works, but it is a tool on a website at VA.gov, and when you enter these percentages, there is a relatively complex calculation done by that tool on the VA website that comes up with the determination, the combined rating.

Again, when I did so, that's just confirming what Dr. Hasan had opined.

Q. When we look at adjustment order -- disorder and it says 70 percent and under that,

lumbar disc disease 20 percent and so on and so forth, who came up with these percentages?

A. That was from a VBA document.

Q. Did you have any role in arriving at these percentages which are shown in Table C?

A. No.

Q. Is this VA calculator -- is it like a table or a form or a machine or something on the Internet or is it in a book or what? Where do you get it?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: It is a form on the website VA.gov. It is a disability rating calculator.

BY MR. ROMANO:

Q. And your opinion is that Mr. McElhiney was 100 percent disabled before he contracted PD; correct?

A. Dr. Hasan's opinion is that. I used Dr. Hasan's opinion.

Q. All right. At the middle of page 5, when you state, "Therefore, from the perspective of the VBA, Mr. McElhiney was 100 percent disabled even before he contracted PD"; is that correct?

Is that what it says?

A. It is.

Q. And then it says "The PD-related increment to his regular VBA disability benefit is zero."

Is that what it says?

A. Yes.

Q. Have -- have you reviewed any document in the case of McElhiney which sets forth when his Parkinson's disease signs and symptoms first started?

A. I might have. I don't recall.

Q. Still on page 5, you then state, "Since June 2020, Mr. McElhiney has received a special monthly compensation payment level K, and this benefit is for a condition that is related to his PD. The value of this benefit for 2026 will be $139.87 per month.

"Therefore, the PD-related increment to his overall VBA disability benefit is the SMC-K benefit, which I assume he will continue to receive. 12 months at $139.87 per month works out to $1,678.44."

Did I read that correctly?

A. Yes.

Q. The past SMC-K benefit from various sources, what is that?

A. I'm sorry. What is what?

Q. SMC-K benefit.

A. They're -- VBA grants, depending on eligibility, a series of special monthly compensation payments, SMC, and they're designated by various letters. SMC-L, SMC-K, SMC-S.

Mr. McElhiney received and is receiving an SMC-K benefit from VBA, and more to the point, he's receiving it because of his PD.

Q. And you conclude the present value of the offset is $26,858?

A. Yes.

Q. Regarding medical offsets and Mr. McElhiney, you your report concludes that the past medical offset is $89,891.24 when accounting for VHA's total cost and $78,835.58 when accounting for VHA's total direct cost; correct?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: No.

BY MR. ROMANO:

Q. No. Okay. Clarify that, please.

A. I didn't conclude. You asked if I

concluded this. I haven't concluded this. I'm really just reporting the finding of Dr. Hasan. These were his calculations.

Q. Right. Are you relying on his calculations for anything in your report?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: The only respects in which I relied on Dr. Hasan's expert opinion, as I recall, are his opinions regarding VBA disability ratings and then these calculations of past medical offsets.

BY MR. ROMANO:

Q. Then you state, "Mr. McElhiney's future medical offsets are summarized in a report by Henry Miller of Berkeley Research Group which lists projected payments by Medicare with TRICARE as secondary coverage and CCN/VHA for the items in the Shahnasarian life care plan.

"The Miller report contains the categories and treatments of the Shahnasarian life care plan and can be construed as modifying the life care plan. The results of a modified Shahnasarian life care plan for Medicare (with TRICARE as secondary) and CCN/BHA appear in Tables D and E."

Did I read that correctly?

A. Sure, I think so.

Q. Walk us through the methodology you used in calculating the McElhiney offsets.

A. The one summarized in Tables D and E?

Q. Yes.

A. Sure. As I did in the Peterson example we discussed earlier, I took the offsets laid out by Dr. Miller and applied them to the various treatments and medications and therapies they corresponded to in the Shahnasarian life care plan. These are the amounts that in Table D Medicare and TRICARE would cover.

In Table E, they're the amounts that VHA and its Community Care Network, CCN, would cover.

So I applied each of those amounts to the corresponding treatment or therapy in the Shahnasarian life care plan and added them up over time, applying growth rates and discount rates, and then, as you can see in Tables D and E, added them up over the various categories to get values -- the total present value of the offsets under each coverage scenario.

Q. So your final opinions regarding any

offsets for Mr. McElhiney are what?

A. That if coverage is obtained under Medicare and TRICARE that the total present value of the medical -- of the future medical offsets is between $206,210 -- I'm sorry. I'll say that again -- $206,210 on the upper bound, $273,874 for coverage under CCN and VHA. The offset -- the present value of the offsets is between $532,501 and $600,401.

Q. In calculating the offsets, do you assume he's 100 percent disabled?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: No. These offsets have nothing to do with disability ratings. These offsets are determined not by me but by Dr. Miller on the basis of the terms and provisions of medical coverage under these different plans.

BY MR. ROMANO:

Q. If you will look at your section Plaintiff Life Care Plan, you note that Staller calculates the present value of the Hairston life care plan at $3,513,463; correct?

A. Yes.

Q. And the Miller report addresses the Hairston life care plan for both Medicare, TRICARE, and CC and VHS coverage; correct?

A. Yes. It does the same basic analysis that it did with the Shahnasarian life care plan.

Q. Are you holding yourself out as an expert in TRICARE benefits?

A. No.

Q. Are you aware of the types of TRICARE plans, such as TRICARE Prime, TRICARE Select, TFL, or TRICARE for Life, TRICARE Reserve Select and others?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: No.

BY MR. ROMANO:

Q. As a part of you work -- your work, do you make any determinations as to whether or not Mr. McElhiney is eligible for any coverage under these TRICARE plans?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: No.

BY MR. ROMANO:

Q. And you agree TRICARE is the official

healthcare program for the US Department of Defense?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: I -- I think that's right. I don't really have deep knowledge of of Department of Defense or military healthcare.

BY MR. ROMANO:

Q. Do you know who manages TRICARE?

A. No.

Q. If projections were being made by the government that pertain to future payments that would be made by TRICARE, do you as the forensic economist assess the strength and viability of TRICARE as an organization which would be able to make the payments in the future? Do you do that?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: No. I base my projections in this case and in others on current -- the current situation, current policy, etc., etc.

TRICARE exists now, and it's on that basis that I made projections.

In any case, I would think that any

discussion about the future viability of TRICARE might have to be had with Dr. Miller, who is the expert on this kind of coverage.

In any case, it would have been speculative of me to assume that it might not exist in the future. The evidence that I have is that it currently exists.

BY MR. ROMANO:

Q. Are you aware of the fact that TRICARE as of May 2025 had not paid over 16,000 health providers, resulting in many dropping TRICARE patients and some even having to close their clinics or facilities? Are you aware of that?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: No.

BY MR. ROMANO:

Q. When you make your calculations as a forensic economist, do you consider or not whether Medicare will have gone broke five or six years from now?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: Does the thought ever enter my mind? Sure, but it's not a relevant

part of my analysis.

My analysis is based on the data that I can observe and the reality that I know is in place right now.

Medicare exists now, and, frankly, it would be speculative of me to start talking about it not existing in the future.

BY MR. ROMANO:

Q. As a part of your work as a forensic economist, is it important for you to be continuously in touch with information about whether or not these government programs will even be in existence in a few years?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Should I be aware of such things in principle? Sure, but, again, I can't -- it's not reasonable to expect me to speculate about possible different future scenarios.

What I can do is base my projections on data and information that exists now.

BY MR. ROMANO:

Q. When you make your determinations in these five cases about any future payments by

TRICARE or Medicare, do you then assume they're in existence today and make the assumption they will be in existence to make these future payments?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: In effect, yes. What I've effectively -- what I've actually assumed is that there will be some program to cover these medical expenses. I can't say what it might be called. I can't say if it will be Medicare or TRICARE. What I can say is that this coverage exists now.

And as I said a couple of times a moment ago, it would be really speculative and, frankly, improper of me to start supposing all manner of different possibilities for the future.

Again, what we know is that Medicare and TRICARE exists now. Am I assuming that they will -- that they or some program like them will continue to cover these -- these medical expenses in the future? Yes, I am.

BY MR. ROMANO:

Q. What is -- you referred in the report to CCN/VHA coverage. What is that?

A. CCN is Community Care Network, which is in effect part of VHA. It's not literally part of VHA, but it's a program that veterans can get coverage from -- coverage from when they are working through the Veterans Health Administration.

Q. How does CCN/VMA coverage differ from Medicare?

A. I don't know.

Q. Do you know how Medicare differs from TRICARE?

A. No.

Q. On page 7 of the McElhiney report, at the bottom of page 7, you make reference showing that Tables F and G show that in present value terms, Medicare/TRICARE is projected to cover between $178,440 and 243,674 of the cost of the Hairston life care plan and CCN/VHA is projected to cover between $1,290,196, and $1,372,014.

Did I state that correctly?

A. I believe so.

Q. If you go to page 8 and the Tables F and G, let's start with F. Would you briefly explain that to us.

A. Table F is the Present Value Costs by category of the offsets identified by Dr. Miller

corresponding to each medication, treatment, therapy in the Hairston life care plan added up across each category, and then -- but then I should say added up in a way that accounts for -- that takes into account growth rates and discount rates, and then those totals for each category are added up to get the total at the bottom of Table F.

Q. And then Table G, explain that.

A. It's the same thing --

Q. The same.

A. -- but it is -- I'm happy to say it again.

It is the summary of the medical offsets identified by Dr. Miller to correspond to the various treatments, therapies, and medications in the Hairston life care plan, but this time the offsets are based on the coverage of CCN/VHA. Then those amounts are added up across the category.

They're added up through time in a way that factors in growth rates and discount rates, and then it's added up across the columns, which gives you the numbers at the bottom of Table G.

Q. Then if you come over to page 9, you state that "The opinions set forth in this report which are my present opinions to a reasonable degree

of certainty."

Do you see that?

A. I do.

Q. All right. When you use that phrase, "opinions to a reasonable degree of certainty," what does that mean to you from your perspective as a forensic economist?

A. Well, it means that it is as certain as I can achieve as a human being and someone making projections into the future.

It is not 100 percent certain because no projection into the future is 100 percent certain. They are all of necessity and by construction uncertain to some degree.

And so the key thing here is not the word "certainty" but the phrase "reasonable degree of certainty."

It's as close to certain as I can make it, and the degree and my effort in this regard has been reasonable. It's not an unreasonable degree of certainty. It's a reasonable degree of certainty.

MR. ROMANO: I'm going to switch gears and move on to your report regarding Richard Sparks. Good to go or you want a break?

Anybody need a break?

MS. KONSTANTOPOULOS: Counsel, I would need a break.

MR. ROMANO: A break? Okay.

MS. KONSTANTOPOULOS: Yes. Thank you.

MR. ROMANO: We'll take about 10 minutes. 10 minutes.

VIDEOGRAPHER: Off record at 2:13.

(Recess taken.)

VIDEOGRAPHER: On record at 2:24.

(Whereupon, Exhibit 18 marked for identification.)

BY MR. ROMANO:

Q. I have handed you -- what is the sticker number on there?

A. 18.

Q. Exhibit Number 18, which appears to be a copy of your report in the Sparks matter dated December 15, 2025. Is that your report on Richard Sparks in this matter?

A. Yes, it certainly appears to be.

Q. In the introductory section, you note that he was diagnosed with Parkinson's disease in January 2014; correct?

A. Yes.

Q. And then in the section under lost

earnings, you note that Stellar opines that the lost earnings are at $414,970; correct?

A. Yes.

Q. But Dr. Shahnasarian opines that Sparks retained his earning capacity even after retirement; right?

A. Right.

Q. And according to your report, Dr. Shahnasarian had concluded that Richard Sparks left his employment voluntarily as a customs and border officer; correct?

A. Yes.

Q. All right. And thus the conclusion -- that he left voluntarily leads to your conclusion that there will be zero awarded as to lost earnings in the past, as far as your opinion goes; correct?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes, zero lost earnings, period. Yes, that's my opinion.

BY MR. ROMANO:

Q. Did you attempt to make any independent assessment yourself as to why Richard Sparks stopped working?

MS. KONSTANTOPOULOS: Objection to

form.

THE WITNESS: I relied on the report of Dr. Shahnasarian.

BY MR. ROMANO:

Q. Let's go to Richard Sparks' lost -- lost household services, and would you just walk us through your analysis.

A. Sure. This is the same as for the other two PD plaintiffs we've discussed.

This is where Mr. Staller does a partial analysis. He did a calculation based on an assumption of one hour of -- one lost service hour per week.

He does not determine how many hours Mr. Parks -- Mr. Sparks would have done but for his PD. He doesn't say anything about how many hours Mr. Sparks can do now.

In fact, that's something that I haven't mentioned in the other -- for the other plaintiffs. Not only does Mr. Staller not investigate how much -- how many service hours could have been performed and provided but for the PD, he also doesn't inquire how about many can be provided now. Maybe it's zero. Maybe it's something more than zero.

So it's the same story here. Mr. Staller does not determine, question, investigate whether Mr. Sparks could have actually done the number of hours that he presents in his table.

He just puts that number out there, and I guess he's hoping that we will -- or someone is hoping that we will think that the number of hours for Mr. Sparks not -- the number of lost service hours for Mr. Sparks is close to that number, 20 or 22 hours, but there's no investigation along those lines by Mr. Staller.

He apparently did not ask Mr. Sparks or his -- his wife or anyone how many service hours he was providing, could have provided, or is now providing, so he doesn't give us an answer.

And, again, my conclusion is not that the number of service hours -- lost service hours is zero or that the value of lost service hours is zero simply that I can't rebut something that isn't there.

And there is no -- effectively no complete analysis of lost household services in this report.

Q. Separate and apart from the Staller

work, did you arrive at a determination of hours Richard Sparks could have performed household chores but for limitations because of the PD?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: No, I didn't. I was not in the best position to do that. I don't have the same sort of access to Mr. Sparks or his family that Mr. Staller had.

That seems like something Mr. Staller should have done, but, no, I didn't do that.

BY MR. ROMANO:

Q. If you would go to Future Medical Expenses Life Care Plan regarding Richard Sparks, please, on page 2.

If you go to the third paragraph under that heading, Future Medical Expenses Life Care Plan, and it states "I took the cost estimates provided in the Shahnasarian life care plan and obtained reasonable growth rates for the costs in each category based on components of the Consumer Price Index, CPI.

"I calculated average inflation rates over the period of 2014-2024. I assigned CPI components in order to capture the bulk of the

spending in each category."

Did I read that correctly?

A. Yes.

Q. Okay. And then we go from there to Table A, which is on page 3 under the -- with the heading Life Care Plan Categories and Growth Rates. Would you briefly explain Table A for us.

A. Yes. As in the other reports, Table A is -- it provides a crosswalk between the life care plan categories and the CPI components whose inflation rates I use as growth rates for those life care plan categories.

So the first one in that table, Evaluations, that's one of the categories in the Shahnasarian life care plan, and I associate that with the CPI component for physician services.

And so the inflation rate that I calculated for physician services is the one that I'm using as the growth rate for evaluations, the life care plan category Evaluations.

Q. And your projections start on January 2026 and extend until the expected end of Mr. Sparks' life; correct?

A. Yes.

Q. And similar to Mr. Staller, you used

CDC demographic data to determine that Mr. Sparks' remaining life expectancy on the date of this report was 12.7 years, implying a total life expectancy of 84.8 years; correct?

A. Yes.

Q. And like Staller, you used the same discount of 4.88 percent as the discount rate; correct?

A. Yes.

Q. And then the results of your analysis appear on Table B, which is your present value of life care plan by category; right?

A. Yes.

Q. Explain Table B briefly, please.

A. Table B takes the various -- the costs of the various therapies, treatments, and medications in the -- and procedures in the life care plan by Dr. Shahnasarian -- takes the costs associated with them, adds them up across the category, adds them over time in a way that factors in both growth rates and discount rates, and then in the table those different categories are added up to obtain the number at the bottom of the table.

At the bottom of Table B are the lower and upper bound of the cost of the Shahnasarian life

care plan.

Q. And Table B shows that the present value of the cost of the Shahnasarian life care plan is between $992,606 and $1,414,899; correct?

A. Yes.

Q. Moving to the section Offsets to Damages, is this section, at least structurally in the report, similar to the structure you have in the reports of the other Parkinson's disease cases?

A. Quite similar.

Q. Okay. And the methodology that you utilized in any of your calculations regarding offsets, first as to disability benefits, would you walk us through that, please.

A. Sure. As in the other cases we've reviewed so far, I heeded Dr. Hasan's report, who opined that all of Mr. Sparks' disabilities listed in the VBA document were due to PD. They're all PD-related.

Therefore, all of his VBA benefits are amounts that he's receiving because of PD, and therefore, the full amount of his offsets, his VBA benefits, are offsets to his economic damages in this case.

Q. Walk us through the methodology you

are utilizing regarding the medical offsets pertaining to Richard Sparks.

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Sure. As before, I am taking the -- well, actually, let's stop first.

If we're talking about past medical -- medical offsets, I had no approach other than to report the numbers calculated by Dr. Hasan in that first paragraph in the subsection entitled Medical Offsets. So for that, there was nothing I did other than report the number.

For future medical offsets, I did something. For future medical offsets, I took the information on offsets provided by Dr. Henry Miller and applied it to the corresponding medications, treatments, procedures, etc. in the Shahnasarian life care plan, added them up in the same way that I did for the life care plan and arrived at a present value for the cost of these offsets.

In this case, we're only -- in the case of Mr. Sparks, we're only looking at VHA

coverage, and so we're only looking at VHA offsets, and those offsets are summarized in Table C.

BY MR. ROMANO:

Q. Right. I'll come back to that in a moment. Moving back briefly to disability benefits, what is the present value of the offset to Richard Sparks' economic damages which you calculate from 2016 until his life expectancy?

A. The value that I arrive at is $972,889.

Q. All right. Let's move to Table C for Richard Sparks on page 5 entitled Present Value of Modified LCP by Category - HVA. Would you explain that briefly for us?

A. This is the result of my taking the offsets identified by Dr. Miller, applying them to each medication, treatment, therapy, procedure in the Shahnasarian life care plan, adding them up over each life care plan category, adding them through time in a way that factors in growth rates and discount rates to arrive at a present value, then adding them up across life care plan categories, which is actually -- as you move down the table, adding them up across the categories is what leads

to the bottom row of Table C, the total present value of the medical offsets, future medical offsets identified by Henry Miller as applied to the Shahnasarian life care plan.

Q. And those amounts are?

A. The lower bound is $333,205. The upper bound is $339,498.

Q. Then we move on page 5 under number 7, Plaintiff's Life Care Plan. In this instance, plaintiff's life care plan for Richard Sparks was produced by Michael Fryar, and Mr. Staller calculated the present value of the Fryar life care plan to be $1,540,411; correct?

A. Yes.

Q. In Table D on page 5, Present Value of Modified Fryar Life Care Plan, by Category - VHA, would you briefly explain this Table D for us?

A. Of course. Table D is where I took the offsets identified by Dr. Henry Miller, I applied them to the corresponding medications, treatments, therapies, and procedures in the Fryar life care plan and added them up over each category.

Added them up over time in a way that took account of growth rates and discount rates to arrive at a present value, upper and lower bound of

the present value in each category, which I then added up across categories to obtain the numbers at the bottom of Table D, which are the upper and lower bound of the present value of the VHA offsets to the Fryar life care plan.

Q. And what is the lower bound?

A. $1,548,503.

Q. And what is the upper bound?

A. $1,549,332.

Q. And then you state your conclusions on page 6; right?

A. Yes, the overall conclusions in the report are on page 6, yes.

MR. ROMANO: We will move now to the -- your report on Diane Rothchild, which is Exhibit Number 16. If you would look at that, please, and I'll hand copies to counsel.

(Whereupon, Exhibit 16 marked for identification.)

BY MR. ROMANO:

Q. Is Exhibit Number 16 a copy of your report in the Diane Rothchild matter and dated December 15, 2025?

A. Yes, it certainly appears to be.

Q. In the introduction -- introductory section, you note that Ms. Rothchild began experiencing tremors in 1993 and was diagnosed with Parkinson's disease after she began treatment with Dr. Joel Perlmutter in 1999; correct?

A. Yes, that's what it says.

Q. And if you will go to the Lost Earnings section, you see that Mr. Staller opined that Ms. Rothchild's lost earning capacity is $406,660; correct?

A. Yes.

Q. All right. In terms of your decision-making as to lost earnings for Diane Rothchild, would you walk us through your methodology, please.

A. Sure. It's very brief. Dr. Shahnasarian, the defense vocational expert, opined that Ms. Rothchild retired voluntarily and that, as with Mr. Sparks, she had residual earning capacity even after she retired.

He said, in addition to that, "Her transferable skills would have qualified her for employment in numerous positions."

So his expert opinion is that she stopped working voluntarily, and therefore there's

no justification to award lost earnings or lost earning capacity on the basis of her PD.

Q. As to the reasons for her stopping to work at a given time, do you rely upon the report of Dr. Shahnasarian?

A. Yes.

Q. Do you defer to his conclusions as to why she stopped working?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: If someone has an expert opinion outside of the area of economics as Mr. -- I'm sorry -- Dr. Shahnasarian's opinion in this regard is, yes, I defer to it.

BY MR. ROMANO:

Q. If you would go to the section -- well, staying -- staying with lost earnings for a moment, is it true her work life -- Diane Rothchild's work life expectancy was 65 to 67, regardless of the Parkinson's disease?

A. You're asking me if that's true?

Q. Is it true that you stated that in your report?

A. It's true that Dr. Shahnasarian stated

it, and I quoted Dr. Shahnasarian.

Q. All right. And you defer to him for that opinion?

A. Naturally.

Q. Moving on to Diane Rothchild on loss of household services, walk us through your methodology, please.

A. Sure. The methodology such as it is is simply an assessment of the partial analysis done by Mr. Staller.

As in the other reports, he takes us part of the way there but doesn't complete the ride. He does this calculation under the assumption of one hour -- one lost service hour per week and views that as a step toward the full answer.

But he could have given us the first answer. He could have investigated how many hours Ms. Rothchild believes she would have worked around the house but for her PD.

He could have discovered by talking to her or her daughter how many hours she can do now, if any. He could have made those determinations.

He could have -- he could have investigated those issues, but he chose not to, and as a result, we don't know what the number of lost

service hours is for Ms. Rothchild.

My methodology is simply to note that we don't have an analysis here for me to assess or rebut. It's only a partial analysis.

Q. As to Diane Rothchild, you conclude there's no basis to include lost household services in her economic damages; right?

A. Yes.

Q. Right. That opinion is an opinion of yours that is similar in all five of the Parkinson's disease cases; correct?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes.

BY MR. ROMANO:

Q. If you would go to future medical expenses on the life care plan, please. You calculated average inflation rates over the period of 2014 to 2024; correct?

A. Yes.

Q. Why is it that you utilized that 10-year period?

A. It was the period that Mr. Staller used at least in most of his analyses.

Q. Do you agree with that? That's a

reasonable time period to use?

A. I chose not to dispute it.

Q. And then you find Ms. Rothchild's remaining life expectancy as of the date of this report to be 10.2 years, implying a total life expectancy of 88.9 years; correct?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes.

BY MR. ROMANO:

Q. Then we come to Table A. Would you explain this to us, please. I'm referring to Table A on page 3 of the Diane Rothchild report.

A. Table A represents my decisions regarding which CPI components to calculate inflation rates in and to use at growth rates for various categories of the life care plan.

So, for example, there's a category called Drugs. These appeared all to be prescription drugs, so I used the CPI category or component, rather, for prescription drugs.

I used that average inflation rate calculated over the past 10 years in -- you know, to grow those numbers into the future to reflect, as I believe you put it earlier, a clearer, more reliable

picture of what those costs will be in the future.

Q. And we come down to Table B, Present Value of Life Care Plan by Category. Briefly explain this to us.

A. These are the sums of all of those -- of the costs of all of those medications, treatments, etc. in the Shahnasarian life care plan.

I grow them over time using the discount rates in Table A. I discount them back to present value using the discount rate of 4.88 percent, the same one that Mr. Staller used, and with that, I arrive at the number in each row for each life care plan category.

There's a lower and upper bound because that's -- that reflects the way that Dr. Shahnasarian expressed his results in his life care plan.

I add those up across categories, which takes us down the table to the row at the bottom where it says Total.

The bottom row represents the total present value of all the categories in this life care plan.

Q. And the value lower bound is what?

A. The lower bound for the present value

of the Shahnasarian life care plan is $454,940.

Q. And the higher bound is what?

A. Is $555,661.

Q. We then come to offsets to damages regarding Diane Rothchild. Would you walk us through your methodology in arriving at these offset calculations or conclusions.

A. Well, there are, I suppose, three categories. There are disability benefits, but that's not relevant to Ms. Rothchild since she is not a veteran, so there's nothing to say about that. There are no benefits to add up, no offsets to subtract.

Then there are past medical offsets. As in previous reports that we've discussed, I -- in that paragraph, I'm really just reporting the calculation done by Dr. Hasan.

And then the third category, I suppose, is future medical offsets, and that's where I took the -- the values from Dr. Miller's report, which are amounts of costs covered in this case by Medicare.

VHA doesn't apply to Ms. Rothchild because, again, she's not a veteran.

And so these calculate Medicare

offsets to the Shahnasarian life care plan. Or at least that's what's going on in Table C.

Q. In Table C, you indicate that Medicare is projected to cover between $26,657 and $38,292 of the cost of the Shahnasarian life care plan; correct?

A. Yes.

Q. If a Parkinson's disease patient were to require a medical procedure in the future, is it your conclusion in these five cases that the amount of money that should be paid for that procedure is the amount of money that would be paid by either Medicare or TRICARE?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: That is not my opinion.

BY MR. ROMANO:

Q. Okay. What is your opinion, then, as to -- let's take Eddie Peterson. If he needs to have a deep brain stimulation procedure done in the future, what is your opinion as to what amount of money should be paid by a government agency?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I don't have an opinion

about that. That's well outside of my area of expertise. I'm not an expert in government health insurance, military or otherwise.

BY MR. ROMANO:

Q. Do you agree that these individuals are entitled within reason to the best medical care available?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Are you asking me as a private person? Because I have no professional opinion about that.

BY MR. ROMANO:

Q. Okay. I'm asking you this question as a private person.

A. Sure, I think --

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I think people should have access to good care. That also is not at all relevant to my expert opinion here, however.

BY MR. ROMANO:

Q. If Eddie Peterson needs a deep brain

simulation -- stimulation procedure done by a neurosurgeon, do your opinions factor in whether or not that should be a top-flight expensive neurosurgeon or not a top-flight neurosurgeon who accepts less money from Medicare or TRICARE?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: Well, these are questions best directed to the life care planners because my opinion in these cases, in all cases involving life care plans, is that the life care planners address the medical issues and I address the calculation of the corresponding present value.

I have my lane. You asked about lanes and boundaries earlier in this deposition. This is one of those boundaries.

It's not my job to determine either medical expenses or the quality of care or which neurosurgeon does the work.

My job is to take the life care plan as is, assume that it has been done properly, reasonably, I should say, and then I calculate the value thereof.

BY MR. ROMANO:

Q. Does the life care plan of Shahnasarian discuss who is supposed to pay for the future medical treatments?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: My understanding is that it does not. He is laying out the cost, not who is to pay.

BY MR. ROMANO:

Q. Well, if you -- when you get a life care plan, you rely on the life care planner's opinions to do your work as an economist; correct?

A. I do.

Q. Okay. Do you assume that the life care planner is creating and developing a life care plan to provide the best possible care in the future for that particular client or patient?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: These are issues between the life care planner and the attorney who hires him or her.

My job is not -- among my jobs is not to stick my nose into medical issues. I'm

not that kind of doctor.

So my job is to take the life care plan as given, and if there are problems with it hypothetically, well, then those are issues for other people to talk about and argue about. It's not for me to say.

BY MR. ROMANO:

Q. When you reviewed the Shahnasarian life care plan, does that plan let you know the future source of payment for a given procedure or medical service?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Well, as I answered just recently, I don't believe that life care plan says anything about how it's to be paid.

My understanding is that the life care plan, in this case the Shahnasarian life care plans, lay out the cost.

The offset studies by Dr. Miller address some issues regarding who is to pay and what the cost is net of those payors, but that's just me interpreting the results of the -- of the Miller report.

I also have nothing to say about his

detailed findings, his specific findings. He's an expert in those coverage issues. I'm not.

Dr. Shahnasarian is an expert in these cost issues. I'm not.

What I am an expert in is the analysis of life care plans.

And by the way, a moment ago you -- ago you said -- you asked me about what happens when I reviewed his report.

In a way, I did not review his report. I quantified his report. I took his numbers and arranged them in a spreadsheet so that they made sense, you know, chronologically and so on and divided them up by categories and I grew them over time, reduced them to present value, and that's it.

BY MR. ROMANO:

Q. If you go to the bottom of page 5 of your report, it states that "The other factor at work here is that Medicare doesn't cover the cost of a CNA when there is no skilled nursing, and, as it happens, there are no RNs or LPNs in the Fryar LCP. As a result, home care is ignored by Miller and absent from Table D. It's still in the underlying

life care plan but not from a Medicare payment perspective. It's absent and cannot offset the cost of facility care in the lower bound.

"Therefore, to calculate the cost of Fryar's life care plan net of offsets, one should subtract the larger number in Table D, $87,465, from the lower bound of the Fryar LCP."

Did I read that correctly?

A. Yes.

Q. And then on page 6 you have your conclusions and references; correct?

A. Yes.

MR. ROMANO: Then we come to the Welch report, and this would be your expert report on Robert Welch dated December 15, 2025.

Okay. Let me hand you -- I've got Exhibit Number 17. I'll hand copies to counsel.

(Whereupon, Exhibit 17 marked for identification.)

BY MR. ROMANO:

Q. Okay. Do you have the -- Exhibit Number 17 --

A. 17.

Q. -- in front of you?

Under the introductory section, you note that Mr. Welch was diagnosed with Parkinson's disease in November 2021; correct?

A. Yes.

Q. And if we go to the section Household Services, is your methodology for loss of household services for Robert Welch similar to the methodology you used for each of the other cases or does it differ?

A. It differs only in one small way. It is basically the same as the others. The only difference is that we know, according to Dr. Hasan and VBA, that Mr. Welch was -- had a number of conditions unrelated to PD, including, as I noted in the report, degenerative joint disease. That's not my determination. That was the VBA's determination.

I don't know -- in fact, I say right here, "I do not have expertise, in particular the medical expertise, to determine which, if any, household chores Mr. Welch's non-PD conditions allowed him to do, and Mr. Staller appears not to have investigated this issue at all."

So it's the same basic idea. Mr. Staller did the start -- he started the analysis, but he didn't finish.

And the only difference here is that, you know, we know that from the documents that Mr. Welch had other things going on. You know, the question is -- other health problems. So the question is but for his PD but acknowledging his other health issues, what -- what number of service hours could he have performed anyway and what number of services hours can he perform now.

As with the other ones, with the other cases, Mr. Staller didn't investigate that, and so as a result, we don't have a completed analysis of lost household services.

Q. We move to future medical expenses life care plan. You did not assign a growth rate to the transportation needs category; correct?

Look at page 2.

A. I am looking -- yeah, yeah.

Q. Yeah.

A. I'm sorry. I interrupted.

Q. That's all right.

A. Yeah, the second-to-last paragraph on page 2, right, I did not assign a growth rate to the transportation needs category, which is a category in the life care plan but did not require a growth rate.

Q. All right. Tell us why.

A. Because it was a one-time cost. There are -- as I note here, there are many one-time costs in life care plans.

And my methodology which I use, regardless of whether I'm working for the plaintiff or defense, but one that is conservative when I am on the defense is to just put that dollar value in the first year.

If there's no -- if I'm not going to be provided with information about timing or frequency by the life care planner, the only thing I can do is put that cost in the first year, and so that's what I did here.

And if there's only a cost that takes place in year zero, which is 2026 in this report, then there's no reason to even look up an inflation rate. There's no reason to determine what the growth rate is. If I had done so, I wouldn't have used it.

Q. And following Mr. Staller, you used CDC demographic data to determine that Mr. Welch's remaining life expectancy as of the date of this report is 7.4 years, implying a total life expectancy of 88.6 years; correct?

A. Yes.
Q. Briefly explain Table A on page 3 of the Welch report.
A. Sure. Table A is where I display the CPI components that I use to -- that I use to calculate inflation rates that I then use as growth rates for the columns of the life care plan that are listed on the left-hand side of the table.
Q. And you discounted all future values using the same 4.88 percent discount rate that Mr. Staller used; correct?
A. Yes.
Q. And then briefly explain Table B on page 3 of your report.
A. Those are the results of my report. I'm sorry. I should say those are the results of my evaluation of the life care plan by category. Then if you add them up across categories, you get the value at the bottom of the table, the total present value of the life care plan.
Q. And the present value of the cost of the Shahnasarian life care plan is between $160,567 and 342,889; correct?
A. Yes.
Q. We then move to offsets to damages,

and you have that broken into the two categories of disability benefits and medical offsets; correct?

A. Yes.

Q. Right. As to the disability benefits, please explain your methodology for your opinions regarding offsets to damages in the category relating to disability benefits.

A. Sure. I mean, the summary of this section is that there are no offsets either for disability benefits or medical expenses.

The methodology I used with the former -- I'm sorry -- whatever the former -- the one I used for disability benefits was the same as in other reports.

The -- the expert opinion of Dr. Hasan confirmed that in effect Mr. Welch was 100 percent disabled, even aside from PD. That means that his VBA disability benefits are amounts he would have received anyway, so they don't amount to offsets to his economic damages in this case. Again, that was based on the opinion of Dr. Hasan.

But I also did what I did in other reports and used that VBA web page to arrive at a combined disability rating that confirmed Dr. Hasan's opinion, but the result here is no

disability -- no offset due to disability benefits.

Q. And your Table C, explain that, please.

A. That's -- those are the values that I fed into the VA's disability rating calculator, and when you do that -- but the ones I added in, the ones I fed into that calculator, were only the ones identified by Dr. Hasan as being non-PD-related, and so you see the result is a combined non-PD disability rating of 100 percent. So even aside from PD, Mr. Welch was 100 percent disabled.

Q. And under Medical Offset, you state, "Based on the information available to me and determinations made by defense clinical expert Dr. Syed Hasan, there are no offsets for past or future medical treatment"; correct?

A. Correct.

Q. Then you have your conclusion section; right?

A. Yes.

Q. Followed by reference materials; correct?

A. Yes.

Q. Let me go back to Exhibit 6. I'll hand it to you in just a moment, but --

A. Okay.
Q. -- there's a February 9, 2026, transmittal letter from the government from Joseph Turner.
A. Okay.
Q. And it appears to be a number of documents that were produced to us yesterday or today. I simply want to go through these briefly and just have you identify what these are, assuming you can identify them.
And we'll make this -- I think the best way to do is we'll just make it Exhibit Number 6, and then each of the individual parts within I'll make 6A, 6B, something like that. Is that all right?
MS. KONSTANTOPOULOS: That's fine.
MR. ROMANO: Okay.
COURT REPORTER: Can we go off the record?
VIDEOGRAPHER: Off record at 3:19.
(Off the record.)
(Whereupon, Exhibit 6A marked for identification.)
VIDEOGRAPHER: On record at 3:22.

BY MR. ROMANO:

Q. All right. I will quickly go through some of these records, but 6A, which we have in front of you, does that appear to be just a February 9, 2026, transmittal letter noting that certain documents were being produced by the government to the plaintiffs? Is that what it appears to be?

A. Yes.

Q. All right.

A. That's what it appears to be.

MR. ROMANO: Let's go to 6B. Will you look at that, please. I'll give copies to counsel.

(Whereupon, Exhibit 6B marked for identification.)

BY MR. ROMANO:

Q. Can you identify this for us, please.

A. Sure. This appears to be my contract, the contract between me and US DOJ for the Camp Lejeune Act Litigation.

Q. Do you know, did you sign different contracts at different times or was there one contract that you signed?

A. Well, interestingly, I don't sign the

contracts. The expert -- the expert doesn't sign the contracts. These are the contracts that I presume that if I accept them, they are binding, etc., etc., but I don't think I ever signed a contract. They're just --

Q. Take a look down at the left bottom of 6B.

A. Oh, yeah, that's my signature.

Q. Is that your signature?

A. Okay.

Q. It looks like your signature?

A. It is my signature.

Q. Yeah, okay.

A. Funny. My -- you know, I think what it was was that this was a modification. Maybe -- I really don't think I signed the contract, but this was a modification of a contract, and clearly -- you're right -- I -- I was asked to sign this and I did sign this.

Q. Okay. But this is a modification of a contract that you had with the government for services performed in this case -- these five cases as a forensic economist; correct?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes. Sorry.

MR. ROMANO: Okay. We'll go to 6C, and I'll give that to you and I'll hand copies to counsel.

(Whereupon, Exhibit 6C marked for identification.)

BY MR. ROMANO:

Q. Can you identify this for us, please, and tell us what this is.

A. Well, given that this is the -- I don't know. It also says that it's a modification. I don't know if this is the original one. This appears to be a modification. The funding and the budgeted amounts have changed.

Q. And is entitled Amendment of Solicitation/Modification of Contract; correct?

A. Right, just as Exhibit 6B is.

Q. Okay. And this is between US DOJ/CIV/OMP/OPBE and Andrew Brod; correct?

A. Yes.

Q. And if you go to the bottom right, it has a date signed by someone on behalf of the government of May 7, 2024. Do you see that?

A. I do.

MR. ROMANO: Okay. By the way, the

order that I'm giving these to you, I do not know if they came in this order or not, so don't let the order of these influence you in any way. They -- they -- they may not be in the order they're supposed to be in, but take a look at 6D.

And I'll hand copies to counsel.

(Whereupon, Exhibit 6D marked for identification.)

BY MR. ROMANO:

Q. What is Exhibit 6D?

A. It is an attachment, possibly to the previous contract modification we looked at, possibly to the original contract. It is an SOW, a statement of work.

Q. And under Section 2.2, does that show scope?

A. It does.

Q. What you would understand to be your scope of work as a forensic economist in this case?

A. It's --

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: It's a description of what I have been contracted to do.

MR. ROMANO: Let's go to 6E, which is one page.

(Whereupon, Exhibit 6E marked for identification.)

BY MR. ROMANO:

Q. Would you identify 6E, please.

A. It says this is also an attachment, I presume, to a contract. It is a schedule rate and cost document. It appears to be fairly early in the process. I don't see a date on it, but I think it's early in the process.

Q. And this is the document -- it says Attachment Number 3, and then it says Schedule Rate and Cost (SRC); correct?

A. Yes.

Q. And at the top, the title shows US Department of Justice requests authorization and contract for services of expert witness litigation, consultant, or ADR neutral; correct?

A. Oh, right, I see it now, yes.

MR. ROMANO: All right. Let's go to 6F.

(Whereupon, Exhibit 6F marked for identification.)

BY MR. ROMANO:

Q. And is this a document at least with the cover page showing Amendment of Solicitation/Modification of contract between the government and you with a date of 8/8/2025?

A. Yes.

MR. ROMANO: And then we come to the last in this, Exhibit 6G, and I'll hand that to you and give copies to counsel.

(Whereupon, Exhibit 6G marked for identification.)

BY MR. ROMANO:

Q. And is this, at least the first page, titled at the top Solicitation/Contract/Order for Commercial Items, and then there is a date signed box at the bottom right showing 12/29/2022; correct?

A. Yes.

Q. Did you conduct a sensitivity analysis as any part of your valuations of the issues in this case?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: No.

BY MR. ROMANO:

Q. At this point, do you intend to

prepare any type of an addendum or supplement to your December 15, 2025, report?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Not at this point.

BY MR. ROMANO:

Q. Have there been any supplements to your opinions, meaning any supplement to the December 15, 2025, report?

A. No. I have produced nothing since that report.

Q. Is it true that as a forensic economist, you value health services at the amount that willing buyers pay and willing sellers accept?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: That is not true.

BY MR. ROMANO:

Q. And your reasons as to why that is not true?

A. I don't put any value on health services. The life care planner does that.

Q. Have you produced all of the materials that you have originated as part of your work as a forensic economist in this case?

A. Yes.
Q. As you were conducting your analysis of the issues in this case, did you make any type of handwritten notes or computer notes?
A. No, not beyond whatever was produced to defense counsel.
Q. Right. Whatever that was, you produced it to them; correct?
A. Yes.
Q. As a part of your work, did you confer with any other experts who have been hired by the government in this case?
A. Yes.
Q. Who did you confer with?
A. Let's see. I -- I had -- I was part of a --
MS. KONSTANTOPOULOS: And objection to the extent it calls for communications between those experts because they're protected under CMO 17.
However, to the extent that you communicated with someone, you can answer that.
BY MR. ROMANO:
Q. Yeah my -- my question right now is

who did you communicate with? I don't want to know when.

MS. KONSTANTOPOULOS: You can answer.

THE WITNESS: I had one -- I participated in one Zoom meeting -- it might have been a Microsoft Teams meeting -- that involved Dr. Shahnasarian. Just one, as I recall.

And then there was one Teams meeting with Dr. Hasan, and, again, I believe just one.

BY MR. ROMANO:

Q. Those are the two times you conferred with other experts in the case?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: As I recall, those are the only two times.

BY MR. ROMANO:

Q. As a part of your work in this case, have you reviewed or read any of the other experts' reports other than the life care planners you've already told us about and the Dr. Miller and the Dr. Hasan report?

A. Well, Mr. Staller's reports, I've --

I've read those.

Q. Any others?

A. Well, let's see. We -- I did read the life care plans by Fryar and Hairston in order to implement the offsets in Dr. Miller's report, so I saw those reports. I can't think of any other at this time.

Q. When you have been doing your work in this case, who do you report that to?

MS. KONSTANTOPOULOS: Object --

BY MR. ROMANO:

Q. Who do you report to?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I work for US DOJ. I report my results, have discussions with them.

BY MR. ROMANO:

Q. All right. I understand that, but is there a particular person who is working with you that you generally make your initial reports to?

MS. KONSTANTOPOULOS: Objection to the extent it calls for privileged information.

Instructing the witness not to reveal substance -- substance of any communications.

However, you can answer this specific question.

THE WITNESS: It appears to be a team. It does not -- there does not appear to be one person to whom I am reporting. My meetings all appear to be group meetings with a collection of DOJ attorneys. Sometimes it's a small collection; sometimes it's a larger collection.

BY MR. ROMANO:

Q. Do you have any further work that you feel you need to do in this case in order to prepare to testify at a trial?

MS. KONSTANTOPOULOS: Objection to form. Objection to privileged communications between attorneys.

To the extent that you are aware, you may answer the question.

THE WITNESS: There's nothing of which I'm aware right now.

BY MR. ROMANO:

Q. When you testify as a forensic economist, do you typically utilize demonstrative aids in court?

A. There have been times when I have,

like PowerPoint presentations, yes.

Q. PowerPoints, charts, graphs, diagrams, blowups, slides, things like that.

A. Yes, there have been times when I've done so.

Q. All right. In this particular case, and setting aside any communications with government lawyers, in your mind, have you formulated any demonstrative aids you would like to use in order to help explain your testimony in court?

MS. KONSTANTOPOULOS: Objection to form. Objection to foundation. Objection to any privileged communications between attorneys.

THE WITNESS: Nothing at this time.

MS. KONSTANTOPOULOS: That's with attorneys, not between attorneys.

BY MR. ROMANO:

Q. Have you created or developed a PowerPoint presentation for this case?

MS. KONSTANTOPOULOS: Objection. Same objections.

THE WITNESS: No.

BY MR. ROMANO:

Q. To what extent do tariffs affect any

of your opinions in this case?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: It's an interesting question. I don't know. If tariffs are relevant, then I guess it's possible that they might be relevant to certain -- I don't know -- medical devices.

They're not really relevant to issues of earnings and offsets and so on, but -- at least disability offsets, but it's possible they could be relevant to medical devices, but that's something we would have to discuss with the life care planners.

And I presume it's something that is not going to be incorporated into any analysis until there is some evidence that it's happening.

BY MR. ROMANO:

Q. Well, you are aware that our country has placed tariffs on many other countries who provide services and medical products to us?

MS. KONSTANTOPOULOS: Objection to form and --

MR. ROMANO: Correct.

MS. KONSTANTOPOULOS: -- foundation.

THE WITNESS: I'm aware in broad outlines, of course, that there is something of a tariff war going on, but that's not as relevant to me as -- or that's not as relevant to this litigation as the specific commodities those tariffs apply to.

Again, that's not something that I do. I don't assign costs to medical devices or anything else in the medical field. The life care planners do, and I would hope that they would not make any adjustments for tariffs until there's evidence that such adjustments are needed.

MR. ROMANO: Right.

THE WITNESS: But that's their call, not mine.

BY MR. ROMANO:

Q. Up to this point in time, have you incorporated any information about the effect tariffs may have on the cost of future medical care and services?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: No. Again, I would wait

until there's evidence that it's happening.
BY MR. ROMANO:
Q. If you would go to Exhibit Number 7, please, invoices.
A. I have it.
Q. You have that. Well, let's just go to the first page where it shows this is an invoice and you sent it to Daniel Eagles. It's from you dated July 14, 2023; correct?
A. Yes.
Q. All right. Now, it says research at $480 per hour. Then it provides 13.25 hours and it shows the dollar amount of $6,360; correct?
A. Yes.
Q. Then it shows one hour on general work, 12.2 -- 12.25 on Jones versus USA; correct?
A. Yes.
Q. Do you track anywhere what the work was that you did to conduct that 12.25 hours of research?
MS. KONSTANTOPOULOS: Objection to form.
THE WITNESS: I'm sorry. Do I track it? I keep -- I keep --

BY MR. ROMANO:

Q. In other words, if we look back now and we say, "What did you do during those 13.25 hours," is there a way to go back and find out what you did?

A. Yes.

Q. Okay. Tell us what steps you would take to go and find that out.

A. I keep a time sheet.

Q. You keep a time sheet on all of your work?

A. Yes.

Q. And does the time sheet reflect hour by hour what specific work you are doing on any case, any project?

A. Yeah. It's not necessarily hour by hour. If I spend 13 minutes on a phone call with a client, I would register that as a quarter of an hour. If I spend 33 minutes working on some analysis for some case, I might -- I would record that that as half an hour.

I just do this in 15-minute increments, quarter-hour increments, and so sometimes it's hour by hour, sometimes it's quarter hour by quarter hour.

Q. Is that time kept on a computer?
A. Yes. It's a spreadsheet.
Q. What -- what's the software that you use to track your time with the time entries?
MS. KONSTANTOPOULOS: And for the record, objection to the extent that this calls for privileged communications or information that is considered privileged under the CMO 17 regarding the contents of any such materials.
I would instruct you not to answer to the extent that it seeks information regarding the contents of your work.
BY MR. ROMANO:
Q. I'm not asking about the context of your work. My question right now is what is the software you use to make your time entries?
THE WITNESS: I'm -- I'm not clear what's happening here. It appears that I've been instructed not to answer.
MR. ROMANO: Are you telling him not to answer to tell us what the software is?
MS. KONSTANTOPOULOS: I would object to form.
You can answer to that question

specifically.

THE WITNESS: Microsoft Excel.

BY MR. ROMANO:

Q. And is that Microsoft Excel on your own work computer at your home office?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes.

BY MR. ROMANO:

Q. When you send an invoice such as this invoice dated July 14, 2023, when you send that to the government, do you send anything else other than this invoice to the government?

MS. KONSTANTOPOULOS: Objection to the extent it calls for privileged communications between attorneys and our expert.

I'm going to instruct you not to answer.

THE WITNESS: Right. I can answer that --

MR. ROMANO: Yes.

THE WITNESS: -- I'm inferring.

You asked -- I'm sorry. You've instructed me not to answer?

MS. KONSTANTOPOULOS: Correct.

MR. ROMANO: Not to answer what he sends along with --

MS. KONSTANTOPOULOS: What other potential documents that he might have sent along with an invoice to an attorney in this case.

BY MR. ROMANO:

Q. You sent -- when you send a document like the July 14, 2023, invoice to the government, does it include your specifically timed time sheets that you keep on the spreadsheet through the software?

MS. KONSTANTOPOULOS: Objection to form, foundation.

THE WITNESS: Oh, but I can answer?

MS. KONSTANTOPOULOS: To the extent that it doesn't include any substance regarding any of the information contained and communicated between you and the attorneys.

THE WITNESS: Got it.

You asked initially in the present tense. Currently there is another document that I provide to DOJ, but it's just other information about billing.

There is -- well, I can say you referred specifically to this invoice. I don't believe I sent anything else along with this invoice.

BY MR. ROMANO:

Q. All right. But let's take this invoice of July 14, 2023. If we now wanted to determine specifically what you did during that 13.25 hours, is there a document somewhere in that computer system that has that information?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: As I answered previously, yes.

BY MR. ROMANO:

Q. All right. When these invoices are prepared, are you the one who prepares them?

A. Yes.

Q. Are you the one who actually physically takes the steps to send them to the government --

MS. KONSTANTOPOULOS: Objection to form.

BY MR. ROMANO:

Q. -- in these five cases?

A. I physically write the e-mail and physically hit send. Yeah, I do that.

Q. And do you typically send them via e-mail?

A. Yes.

Q. The invoices -- the invoice that we see on the first page here with these categories, research, then testimony, then travel, then research expenses, and then total, is this still -- still the same format of invoice that you are sending to the government when you send them an invoice?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: It is basically the same structure, yes.

BY MR. ROMANO:

Q. Do you know in this case what your charges have been thus far for the five Parkinson's diseases cases?

A. Well, I know roughly what my total billings have been since the beginning of my engagement on the Camp Lejeune litigation.

Q. Are you doing any cases other than the Parkinson's disease cases?

MS. KONSTANTOPOULOS: Objection to the

extent that it calls for substantive communications or information between the attorneys and the expert.

I would ask him not to answer. I would instruct him not to answer.

THE WITNESS: To the extent that it addresses that? So you're asking me to assess whether it involves that?

MS. KONSTANTOPOULOS: I'm instructing you not to answer the question, sir.

BY MR. ROMANO:

Q. I'll rephrase the question. I'll rephrase the question.

Are you providing expert consulting services for the government on any Camp Lejeune cases other than the five Parkinson's disease cases we are here on today?

A. No.

Q. You said that you have a rough idea of how much you've charged them since the beginning in the five Parkinson's cases. How much is that?

A. I believe it is in the ballpark of $260,000, but that's total billing. That's not my income.

Q. Are the Camp Lejeune cases for which

your testifying as a forensic economist peculiarly different from an analysis or work perspective from other personal injury and wrongful death cases on which you have worked as a forensic economist?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: A little bit more complex, but the basic ideas, concepts, and methodologies are just the same.

BY MR. ROMANO:

Q. Have you actually sat down to add up your invoices for these five cases?

A. Well, as I told you, I think the -- I know the total amount that I've billed, and I didn't just make that number up. I think that is a pretty good number based on adding up invoices.

Q. If someone were to have calculated that your charges have exceeded $550,000, then -- then that person would be incorrect; is that what you're saying?

A. Sure.

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: My total charges haven't come anywhere near 500 -- 550,000.

BY MR. ROMANO:

Q. All right. Do you keep a running track of the total amount?

A. Yes. That's how I know the number.

Q. And that would be the number on these five Parkinson's disease cases and not any other cases; right?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: It would be my total billing on the Camp Lejeune litigation.

MR. ROMANO: All right. We need to go off the record, and I'll need about 15 minutes.

When we come back, I'll -- I'll either be done or almost done.

MS. KONSTANTOPOULOS: Okay.

MR. ROMANO: Okay.

VIDEOGRAPHER: Off record at 3:55.

(Recess taken.)

VIDEOGRAPHER: On record at 4:14.

BY MR. ROMANO:

Q. All set?

A. I am.

Q. We received production of documents on

the 5th, 6th, and 9th from the government regarding your last production.

When did you first receive notice of our request for that last production?

A. I'm not sure what you're talking about on the 5th, 6th, and 9th. Is that -- are those dates?

Q. Of February. That's when the documents were being sent to us by the government. My question is when did you get notice of the need to send those documents?

MS. KONSTANTOPOULOS: Objection to form and objection to the extent that the question calls for privileged communications.

I would instruct you not to answer.

THE WITNESS: All right, then.

BY MR. ROMANO:

Q. A date, I'm looking for a date.

A. Right. To the extent that... I don't recall. It was recently.

Q. Well, was it within the last 10 days?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I don't recall.

BY MR. ROMANO:

Q. You have no memory as to this recent production as to the approximate date of when you learned you were supposed to get those materials together and send them in? You have no memory of that?

A. I'm not even sure which production you're talking about.

Q. The production that was just made to us on the 5th and the 6th and the 9th.

A. Okay.

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: I still don't know which documents you're talking about. What documents were they?

BY MR. ROMANO:

Q. Did you recently produce documents to the government pursuant to a request from us so that you would have those documents available before your deposition?

A. Yes.

Q. All right. My question is when did you receive notice that you were supposed to produce those documents, approximately when?

A. Right. And my answer is the same. I don't remember exactly.

Q. All right. Can you tell us was it a week ago? Was it a month ago?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I don't recall.

BY MR. ROMANO:

Q. Did you produce the documents that you were asked to produce?

MS. KONSTANTOPOULOS: Objection.

THE WITNESS: Yes.

BY MR. ROMANO:

Q. You sent them to the government?

A. Yes.

Q. Is there anything you were asked to produce that you didn't produce?

MS. KONSTANTOPOULOS: Objection. To the extent that calls for privileged -- privileged communications, I'm instructing the witness not to answer.

THE WITNESS: No.

BY MR. ROMANO:

Q. If you go to the request for production or duces tecum component of the subpoena

in number 2, it requests that you provide us with billing records and it says "This includes all time sheets, time records, billing records, and documents reflecting the time you and/or anyone employed by you and/or on your behalf spent in connection with your work and any aspect of the Camp Lejeune Water Contamination Litigation."

You knew that was in the request; correct?

A. Yes.

Q. All right. We have not seen the time sheets. Did you produce the time sheets?

MS. KONSTANTOPOULOS: Objection and instructing the witness not to answer. This calls for privileged communications.

Invoices and other documents were produced, and objections were provided pursuant to the responses that counsel has been provided.

MR. ROMANO: All right. We will request on the record that this deposition remains open.

We were just provided with documents on the 5th, 6th, and 9th, so the late production alone puts us in a prejudiced

position in not having had time to really review, assess, analyze, and evaluate these documents.

Also, I've asked him a number of questions about these billing records, and specifically this request says time sheets.

He's testified that he has time sheets that he keeps. They should have been turned over to us, and there's no privilege on a time sheet.

MS. KONSTANTOPOULOS: We don't agree with that. We obviously made that clear. The objections are noted in the responses, but your request is noted on the record.

BY MR. ROMANO:

Q. Regarding offsets, you stated that as a part of your report of December 15, 2025, various reports, that you relied upon Dr. Hasan for his calculations pertaining to offsets; correct?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I relied on -- excuse me. I relied on his opinion regarding the determination of a non-PD combined disability rating. He didn't make any calculations

about VBA benefits. I did the calculations.
BY MR. ROMANO:
Q. Did he provide opinions as to his numbers as to what the offset should be so that you could rely upon that and use his numbers for your December 15, 2025, report?
A. No.
MS. KONSTANTOPOULOS: Objection to form.
BY MR. ROMANO:
Q. Did he provide any numbers at all upon which you relied, any offset numbers at all for any aspect of the offsets?
MS. KONSTANTOPOULOS: Objection to form.
THE WITNESS: No. His role was to determine the combined non-PD-related disability rating.
I had documents that told me what the offset amounts were. I didn't need anyone's expert opinion to tell me what had been received by the PD plaintiffs, again, because I had documents that outlined those benefits.
BY MR. ROMANO:
Q. When you did your May 8, 2025, reports

on these Parkinson's disease cases, did you have the benefit of any of the work of Dr. Hasan at that time?

A. No.

Q. Did you make calculations relating to offsets back in May of 2025?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I did the same calculations about offsets that I did in the December 15th report.

BY MR. ROMANO:

Q. Did any of the numbers regarding offset calculations change between the May 8, 2015, reports and the December 15, 2015, reports? 2025 reports?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Yes, as I recall, there was a small change.

BY MR. ROMANO:

Q. What was the change that you recall regarding the offsets?

A. Well, there was new information. I think for the May report, I had to -- excuse me. I

had to project a value for 2026 based on the growth rate, but by the time I did the December 15th report, the monthly benefit -- VBA benefits were published for 2026, so I didn't have to make a projection of it. I just at that point did projections for 2027 on.

Q. So how did those numbers change? What was the difference in the numbers?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: It was not much. I don't recall whether it was a little bit up or a little bit down, but it was a small change.

BY MR. ROMANO:

Q. In terms of the information you obtained from the Dr. Hasan report, just so that we're crystal clear on this, he did not provide any numbers upon which you relied for any reason in your December 15, 2025, report; is that what you were saying?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: I don't recall if there were numbers in his report or not.

What I can tell you, and just so we're crystal clear, is he provided me with determinations regarding the relation to PD of the various diagnoses listed in the VBA documents that I had seen. There may have been numbers involved. I don't know. I don't recall.

What I do recall is that he didn't provide me with the -- the numbers for the VBA benefits because those were numbers that the case documents had already provided to me.

I already knew what, for example, Mr. Peterson was receiving as a VBA disability benefit because there were documents that said so. I didn't need Dr. Hasan's opinion to tell me what that number was.

What I needed his opinion for was to confirm that the determinations of non-PD disability ratings that I had done for the May reports were correct, and it was Dr. Hasan's opinion that each of those determinations that I had made was correct.

So, in effect, I'm relying on

Dr. Hasan, but I'm relying on him for those disability ratings, not the dollar amounts of the disability payments.

So it depends which numbers you're talking about.

BY MR. ROMANO:

Q. Did he give a dollar amount at any time with respect to offsets?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: As -- I'm not sure how I can be -- please let me answer.

I'm not sure how I can be clearer. He did not, to my knowledge, to my recollection, give me numbers for the VBA benefits. Maybe he did. It didn't matter because I wasn't relying on him for that. I had that information. That information was available to me.

And I don't know that -- it would have been a waste of Dr. Hasan's expertise anyway to have him looking up numbers that I had already looked up.

So I knew what the dollar amount was for, for example, Mr. Peterson's disability

benefit from the VBA. I didn't need Dr. Hasan to tell me what that number was. Did he tell me? I can't remember.

So, you know, if we're going to go look at his report and find out that there's a number in it, well, maybe so, but I didn't rely on that number because I had it already.

BY MR. ROMANO:

Q. You mention that you did rely on certain determinations from Dr. Hasan. What specifically are the determinations you're referring to?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: The disability ratings and the identification of different diagnoses as being related to or not related to PD.

BY MR. ROMANO:

Q. Between the time of your May 8, 2025, reports and the December 15, 2025, reports, did the numbers change regarding the offsets?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Well, as I said just a moment ago, yes, there was a small change.

BY MR. ROMANO:

Q. And was it?

A. I now had --

Q. Was it -- go ahead.

A. I now had the announcement, VBA announcement of what the disability benefits were going to be for 2026. When I did the May report, I didn't have them.

So when I was projecting into -- when I was talking about the value in 2026, I had to project that value based on the 2025 number multiplied by a growth factor.

For the December report, I didn't have to do that because I had the actual number for 2026, so I didn't have to project it. I could just look at the document that said here's the number.

Q. When you completed the December 15, 2025, reports, was your offset number higher than it had been from the time back on May 8th of 2025?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: For which plaintiff are we talking?

BY MR. ROMANO:

Q. Let's take McElhiney.

A. Okay. I don't know. It wasn't much different. I think it might have been a little bit lower.

Q. Peterson, higher or lower?

MS. KONSTANTOPOULOS: Objection to form. The records speak for themselves.

THE WITNESS: Well, I think we can probably summarize all of these. The ones for which this is relevant are McElhiney, Peterson, and Sparks and -- right. Those three.

And I think they were a little bit lower for the -- that's my recollection. We can look at the reports if you'd like, but my recollection is that they were a little bit lower in December. Very similar, not much of a change, and it was because -- I think the disability payment for 2026 was a little bit lower than I had projected it to be.

So when I had the actual data, obviously I made the correction and the offset was, I believe, a little lower.

We don't have to speculate. We can find out if you'd like.

BY MR. ROMANO:

Q. Why don't we look. We have the Peterson May 8th report and the Peterson December 15th report. You've got them in front of you.

A. Yeah, I have them.

Q. If you look at them, please.

MS. KONSTANTOPOULOS: Counsel, can you identify them for the record.

MR. ROMANO: Can you pull up the -- each report, the May 8th and December 15th, and just tell us the exhibit number.

THE WITNESS: Sure will.

All right. Here's Peterson May 8th, and this is Exhibit 13, and this is Peterson December 15th, and it's Exhibit 14. Shall I look at it?

MS. KONSTANTOPOULOS: Yeah, yes, please.

THE WITNESS: So in Exhibit 13, which is the May 8th report, we're looking at the disability offset. Okay? And there's the number. It is $1,053,531 for Mr. Peterson.

In the December report, with the new data, it is -- all right. My recollection

was wrong. It's a teeny bit bigger. It is -- in the May report is -- based on the new data, it's $1,073,280.

So I think what that implies is that the -- the datum for 2026, when it was announced by -- by -- by VBA, was a little bit higher than what I had projected it to be back in May.

BY MR. ROMANO:

Q. Is there anything you learned from Dr. Hasan through his report that caused you to change your numbers as it pertains to anything having to do with offset -- offsets as to Peterson?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: No.

BY MR. ROMANO:

Q. There is an invoice that shows you recently ordered two books and sent the bill for the books to the government. One of the books is entitled Forensic Economics: Addressing Personal Damages in Civil Litigation.

Is that a book that you ordered for these cases?

A. Yeah.

Q. What was the reason you ordered -- let me go to the other book for a second.

And you also ordered a book called Determining Economic Damages; correct?

A. Right, I think that was the name of the other one.

Q. All right. First, what was the reason you ordered two books and charged the government for them?

MS. KONSTANTOPOULOS: Objection. Calls for privileged communication.

I'm instructing you not to answer that question.

BY MR. ROMANO:

Q. Did you read these books?

MS. KONSTANTOPOULOS: Objection.

THE WITNESS: Not in their entirety.

BY MR. ROMANO:

Q. Have you read the book Forensic Economics: Addressing Personal Damages in Civil Litigation?

MS. KONSTANTOPOULOS: Objection to form and foundation.

THE WITNESS: I don't recall. What book? Who wrote that book?

BY MR. ROMANO:

Q. It's a book that you just ordered --

A. Oh.

Q. -- and charged the government for.

The name of the book is Forensic Economics: Addressing Personal Damages in Civil Litigation.

Did you read the book?

A. No, not in its entirety.

Q. The book Determining Economic Damages, did you read that book?

A. I'm sorry. I thought you just asked that. The answer is no, not in its entirety.

Q. All right. What is your understanding as to the reason you ordered these two books?

MS. KONSTANTOPOULOS: Objection. Calls for privileged communications between the witness and counsel.

I'm instructing him not to answer.

BY MR. ROMANO:

Q. Do you intend to use any information that you have learned from either of these two books as a part of your testimony in this case?

MS. KONSTANTOPOULOS: Same objection. I'm instructing him not to answer.

BY MR. ROMANO:

Q. Has your reading either of these two books adjusted your opinions at all in this case?

A. No.

Q. Is there any information you learned in either one of these books that will have any effect on any opinions you have rendered in the five cases that we've already gone through?

MS. KONSTANTOPOULOS: Objection. Calls for privileged communications between counsel and the witness.

Instructing him not to answer.

MR. ROMANO: Well, let me just state for the record on this one if he orders books and the purpose of the book is to educate himself on forensic economics or economics or whatever is contained in the books, that is now a part of his overall knowledge and base of knowledge in terms of his work as a forensic economist, and that is something that it is appropriate for us to ask him about.

There's nothing privileged about somebody reading a book.

MS. KONSTANTOPOULOS: But why he's

read these books --

MR. ROMANO: I think -- I think he should --

MS. KONSTANTOPOULOS: Why he's read those books is --

MR. ROMANO: Yeah --

MS. KONSTANTOPOULOS: -- considered privileged.

MR. ROMANO: -- and I think we should be able to ask him why he's read those books.

MS. KONSTANTOPOULOS: I'm still going to object and instruct him not to answer.

MR. ROMANO: All right. We're going to also need the deposition open on that because that is something we do need to take up.

BY MR. ROMANO:

Q. Do you know the author of either of these two books?

A. Do I know them personally?

Q. Yes.

A. No.

MR. ROMANO: I have no further questions.

EXAMINATION

BY MS. KONSTANTOPOULOS:

Q. Thank you, Dr. Brod. I have a few questions for you.

Do forensic economists routinely calculate and evaluate offsets?

A. Sure, it is certainly quite routine. It can pop up in a number of ways. Sometimes they're called offsets and sometimes they're not.

It could be mitigation income, as I mentioned earlier. It could be a subtraction for personal consumption, which I refer to in my work as personal consumption offsets.

So any time you are netting out a certain dollar value from a gross damage, you're implying offsets.

Q. Do these include both past and future offsets?

A. They certainly can.

Q. And how do forensic economists typically calculate future offsets?

A. Well, the only way you can do it is in a way similar to calculating the gross economic damage.

You use the information you have. You determine a reasonable growth rate. You project it

into the future, and that path of offsets, whatever form it takes, is then subtracted from the -- the gross damage.

Or sometimes you calculate the present value of those reductions, the mitigation income, the personal consumption offsets, whatever it is, and subtract that from the present value of the gross loss.

Q. And have you calculated future offsets in your work as a forensic economist before this case that we're here about today?

A. Yes, many times.

Q. And did you generally employ the same methodology in arriving at your offset opinions in the five cases we're here about today as you have in the past?

A. Yes.

MS. KONSTANTOPOULOS: No further questions at this time.

MR. ROMANO: Give me one second.

No further questions.

VIDEOGRAPHER: This concludes the deposition. The time is 4:38.

COURT REPORTER: Then, Counsel, before you go, will you just indicate standing

orders or do you have a -- if you wish to order the transcript, I guess. I think the DOJ -

MR. TURNER: We have a standing order.

COURT REPORTER: Okay. Do you...?

MR. ROMANO: We're going to need to order it, yes.

– – –

(Videotaped deposition concludes, 4:38 p.m. Eastern Time.)

C E R T I F I C A T E

I, Lisa Taylor, Registered Professional Reporter and notary public certify:

That the foregoing deposition of Andrew Brod, PhD, was taken before me at the time and place therein set forth at which time the witness was put under oath by me;

That the testimony of the witness and all objections made at the time of the deposition were recorded stenographically by me and thereafter transcribed;

That the foregoing deposition is a true record of the testimony and of all objections made at the time of the deposition.

I further certify that I am neither counsel for nor related to any party to said action, nor in any way interested in the outcome thereof.

My certification as to the accuracy of this transcript, if it has been reformatted or altered from its original form in any manner, is null and void.

In witness whereof, I have subscribed my name this 24th day of February 2026.

_____

Lisa Taylor
Registered Professional Reporter
Notary Public

ERRATA SHEET

Deponent: Andrew Brod, PhD
Date of Deposition: Tuesday, February, 10, 2026
In Re: Camp Lejeune Water Litigation
INSTRUCTIONS TO THE DEPONENT:
In compliance with the Rules of Civil Procedure, a copy of your deposition is provided for your review and signature. Any corrections/changes to the deposition that you care to make are to be made on this sheet.

PAGE	LINE	CORRECTION/CHANGE & REASON FOR CORRECTION/CHANGE

DEPONENT CERTIFICATE

I have read the foregoing transcript of my oral deposition taken on the date and at the location indicated on the title page of the deposition transcript and I certify that the said transcript is true and correct, with the provision that any corrections and changes appearing therein have been corrected/changed personally by myself by listing them on a separate sheet indicating the page number, line number, and content of correction or change.

I further understand that upon completion of the reading and correcting/changing of the deposition transcript that I am to sign this deponent's certificate in the presence of a notary public and then return this original deponent's certificate with my list of corrections/changes and the deposition transcript to the person so indicated to me by my counsel or the court reporter.

I further understand that if I do not carry out all of the above-mentioned instructions within thirty (30) days from receipt, I automatically waive my right to read and sign the deposition transcript and, thereupon, the original transcript can be filed accordingly.

PRINTED NAME:_____

SIGNATURE:_____

DATE:_____

Notary seal

Sworn to and subscribed before me this _____day of_____ 2026

Notary Signature:_____

&

& 2:11,15 5:23 241:8

0

00897 1:3
03-0143/15jc... 5:16,19

1

1 5:4 20:19,23 21:7,12 63:11 108:21 123:19 141:24
1,053,531 231:23
1,073,280 109:22 232:3
1,126,348 66:16
1,127,639 65:25
1,290,196 158:18
1,372,014 158:18
1,414,899 168:4
1,540,411 171:13
1,548,503 172:7
1,549,332 172:9
1,678.44. 148:23
1,732,298 143:2
1,783.882 103:11
1,800 49:17
1.07 102:16
1.97 95:3,6,22
10 1:7 6:7 7:8 28:17,23 31:9 36:2,15 50:5,14 50:21 55:6 86:4 86:10,25 87:20 128:6 161:5,6 176:22 177:23 218:21 241:2
10.2 177:5
100 88:23 89:6 93:16,18,20 101:10,24,25 102:11,17 108:20 125:5 128:17 146:1 147:18,24 152:11 160:11 160:12 191:16 192:10,11
101 1:10
105 88:25 101:15,18,19 101:24 102:12
106 47:8
1099 39:5 57:22
10:33 57:15
10:43 57:17
11 6:8 28:19,23 31:12 89:8
1100 3:5,8
12 5:23 6:10 28:21,24 31:19 88:24 97:23,25 122:8 148:22
12.2 208:16
12.25 208:16,19
12.7 167:3
12/15/25 6:13 6:14,16,17,19
12/29/2022 199:16
12/29/22 5:11 5:13,20
120 6:11
122 6:14
127 2:12
127,172 115:25
12:03 119:17,19
13 6:11 45:4 89:9 120:1,7 209:17 231:15 231:20
13.25 208:12 209:3 213:9
13.3 142:4
139.87 148:18 148:22
14 6:13 45:4 58:10,13 208:9 211:11 212:9 213:7 231:16
146,773.49 113:24
149,361.21 113:23
15 6:14 61:22 62:14,18 63:6 66:6 84:12 120:16 122:14 122:15,18 161:18 172:24 186:15 200:2,9 209:22 217:13 222:17 223:6 224:15 225:20 228:20 229:17
150 89:13 97:16 97:17
158,209 115:25
15th 58:17 66:9 66:15 71:10 224:11 225:2 231:4,11,16
16 6:16 54:16 172:16,19,22
16,000 155:10
160,567 190:22
161 6:19
17 5:23 6:17 48:21 54:16 186:17,19,23 186:24 201:20 210:9
172 6:16
178,440 158:16
18 6:19 161:10 161:15,16

186 6:17
193 5:10
194 5:11
196 5:13
197 5:15
198 5:17,20
199 5:22
1993 173:3
1999 173:5
1:12 119:21
1st 98:11,14 99:11

2

2 5:6,15 20:20 21:7 22:14,18 84:12 104:13 165:15 188:16 188:22 221:1
2,664,264 143:3
2.2 197:16
2.57 109:11,12 111:22 122:10
2/3/26 5:9
2/6/26 5:8
2/9/26 5:10
20 36:5 44:23 45:4 147:1 164:11
200 97:16,17,21 97:24 98:1
20005 3:5,9
2000s 14:14 36:10
2001 12:20 13:11 60:17 61:8
2002 12:20
2010 13:9,9 14:15,23
2013 108:18 109:21
2014 85:24 86:4 86:6 88:12 95:18 96:23 140:25 161:23 176:19
2014-2024 165:24
2015 224:14,15
2016 124:24 131:10 132:7 170:9
2018 123:2
202 3:6,9
2020 148:14
2021 187:3
2022 8:16
2023 208:9 211:11 212:9 213:7
2024 85:24 86:7 88:13 95:19 96:23 118:25 119:3 140:25 176:19 196:23
2025 26:12 61:22 62:14,18 63:6 66:6 74:16 75:5 84:12 86:3 86:3 108:21 109:10 120:9 120:17 122:14 155:10 161:18 172:24 186:15 200:2,9 222:17 223:6,25 224:6 224:15 225:20 228:19,20 229:11,18,19
2026 1:7 7:8 24:25 25:20 98:14 108:18 141:24 148:17 166:22 189:16 193:2 194:5 225:1,4 229:7 229:10,14 230:18 232:5 240:15 241:2 242:21
2027 225:6
206,210 152:5,6
21 5:4,6
219 2:8
22 33:1 164:11
23 5:7,23
236 4:7
24 5:8,23 86:4
240 47:2
243,674 158:16
24th 2:17 240:15
25 5:9
26,657 180:4
26,858 149:13
260,000 215:23
27 5:24
2701 2:5
273,874 152:6
27401 1:11
28 6:4,5,7,8,10
28403 2:13
288,361 123:20
29440 2:9
29th 33:1
2:13 161:7
2:24 161:9

3

3 5:7,17 23:7,9 23:12 25:20 63:12 71:9 94:22 97:3 104:13 141:12 166:5 177:13 190:2,14 198:13
3,451,807 103:11
3,513,463 152:24
3,752,303 117:17
30 5:23 126:5,9 126:10 127:6

128:1 242:12
3011 2:17
30th 126:7
31 75:5
313 2:18
31st 74:15
33 209:19
33143 240:18
333,205 171:6
33409 2:5
339,498 171:7
342,889 190:23
353-2152 3:6
38,292 180:4
398,577 116:2
3:19 193:20
3:22 193:24
3:55 217:19
3w 5:16,19

4

4 5:8 24:18,19 74:22 108:12 108:14 141:22 142:14,15
4,700 110:17,24
4,767.99 108:19 109:1
4.88 102:6 103:4 142:8 167:7 178:11 190:10
40 12:12
406,660 173:10
414,970 162:2
429-6197 2:9
454,940 179:1
462,381 116:2
480 46:22 208:12
48202 2:18
4:14 217:21
4:38 238:23 239:10

5

5 5:9 24:25 25:12,15 62:1,5 62:12 88:24 101:12,16,18 101:22 102:2 102:11 115:24 145:21 147:22 148:13 170:13 171:8,15 185:19
5.52 96:1,25
5/8/24 5:12
5/8/25 6:11
500 100:13 216:25
532,501 152:8
533-6700 2:6
550,000 216:18 216:25
555,661 179:3
561 2:6
58 6:13
5th 218:1,6 219:10 221:24

6

6 26:25 27:1 172:11,13 186:10 192:24 193:13
6,360 208:13
600,401 152:9
65 67:10 69:18 174:20
66 67:13
67 67:10 69:18 174:20
68.4 67:8
6a 5:10 193:14 193:22 194:3
6b 5:11 193:14 194:12,15 195:7 196:17
6c 5:13 196:2,5
6d 5:15 197:6,8 197:11
6e 5:17 198:1,3 198:6
6f 5:20 198:22 198:23
6g 5:22 199:8 199:10
6th 25:2,3 218:1,6 219:10 221:24

7

7 5:24 27:4,6,9 27:14 102:3,14 158:12,13 171:8 196:23 208:3
7.4 189:24
70 144:7 145:7 146:25
750 47:5 49:15
78,835.58 149:18
794-4829 2:13
7:23 1:3

8

8 4:6 6:4 28:13 28:23 29:4 120:8 158:21 223:25 224:14 228:19
8/8/2025 199:5
800-4170 2:18
84.4 142:5
84.8 167:4
843 2:9
86.7 99:12
87,465 186:6
877.370.3377 1:24
88.6 189:25
88.9 177:6
880-6104 3:9

885,284 67:17 71:15
89,891.24 149:17
8th 229:19 231:3,11,14,21

9

9 6:5 28:15,23 31:2 118:17 159:23 193:2 194:5
9.7 99:12
90s 13:2 36:9
910 2:13
917.591.5672 1:24
97 34:9 102:19
972,889 170:11
98 102:18
992,606 168:4
9:27 7:2,8
9:44 21:5,9
9th 218:1,6 219:10 221:24

a

a.m. 1:11 7:2,8
able 10:10 112:5,20 154:15 236:10
above 1:10 109:19 242:12
absent 185:25 186:2
absolutely 34:2 84:1
academic 36:8
accept 195:3 200:14
acceptable 69:22 100:20
accepts 182:5
access 81:17 165:8 181:21
accompanied 143:15
accompanying 108:22
account 73:3 73:19 90:6 92:12 130:24 159:5 171:24
accounting 38:23 113:23 113:24 149:17 149:18
accounts 159:4
accuracy 92:22 93:5,16 240:12
accurate 22:23 26:15 33:22 89:17 134:16
accurately 61:6
achieve 160:9
acknowledging 188:5
act 43:4 194:21
acting 72:24
action 240:11
active 42:4
actual 35:15 38:25 98:3 229:14 230:20
actually 32:20 37:19 52:2 57:9 60:5,25 71:16 77:21 96:9 102:15 134:7 140:19 157:7 164:3 169:6 170:24 213:19 216:11
add 38:19 55:19 76:22 142:21 178:18 179:12 190:18 216:11
added 151:19 151:21 159:2,3 159:6,18,19,21 167:22 169:21 171:22,23 172:2 192:6
addendum 200:1
adding 170:19 170:20,23,25 216:16
addition 32:4 47:7 173:21
additional 25:23 26:4,15 61:20
address 11:5 23:16 34:25 134:6 135:4 182:12,13 184:21
addresses 153:1 215:7
addressing 107:22 232:21 233:20 234:6
adds 167:19,20
adjusted 235:3
adjustment 109:9 111:20 144:5,11 145:5 145:18 146:24
adjustments 207:12,13
administration 108:18 113:3 128:16 130:2,7 130:16 158:5
administratio... 109:8
adopted 70:13 71:10
adr 198:19
advertisements 37:4
advocate 11:24 33:20 73:11

affect 205:25
affiliated 35:4
affirmed 7:24
age 68:20 69:18 78:12 79:3
agency 180:22
aging 77:23
ago 22:11 54:16 55:6 96:8 137:7 157:14 185:8,9 220:4,4 228:25
agree 15:3 33:19 82:23 83:6,10,25 84:2 84:3 124:7 128:21 135:18 153:25 176:25 181:6 222:11
agrees 58:6
ahead 229:4
ai 39:20
aids 204:24 205:9
alertness 20:8
allen 62:18 120:8
allow 140:2
allowed 54:3 187:21
allows 89:16
altered 240:13
alternatively 102:1
amend 26:5 75:7
amendment 5:11,13,20 196:15 199:3
amount 48:4 49:23 65:1 67:17 73:7,7 78:19 99:16,19 105:13 108:25 110:23 122:6,7 168:22 180:10 180:12,21 191:19 200:13 208:13 216:14 217:3 227:7,24
amounts 88:6 116:6 121:25 151:12,14,17 159:18 168:21 171:5 179:21 191:18 196:14 223:20 227:2
analyses 9:21 76:16 176:24
analysis 10:24 11:3,9,13 16:20 33:15 38:16 39:9 43:18,19 43:23 56:12 59:19 63:23 65:14 67:12,14 67:15 69:22 71:12,14,19 73:21 75:3,13 77:3 78:21 81:13 82:16 90:3 98:17 110:10 123:6 123:13 134:23 135:6 136:4 137:2,9,10,17 138:7,10 139:25 153:4 156:1,2 163:7 163:11 164:23 167:10 175:9 176:3,4 185:6 187:25 188:11 199:18 201:2 206:17 209:20 216:2
analyst 11:16
analyze 17:1 30:16 88:15 222:2
analyzed 98:18
analyzing 12:4 96:17
andrew 1:6 4:5 5:5,6,7,9 6:4,6 6:7,9,10,12,13 6:15,16,18,19 7:11,24 8:7 17:8 25:19 196:19 240:4 241:2
andrewbrod.c... 23:18
announced 232:6
announcement 229:5,6
annual 36:16 86:8 89:4,11 95:21 96:24
answer 9:11,18 10:10 11:20 22:7 26:6 30:4 32:24 36:12 40:5 48:25,25 71:6 75:8 87:7 98:15 137:8,21 138:11,16 164:16 175:15 175:17 201:22 202:3 204:1,18 210:11,20,22 210:25 211:18 211:19,24 212:1,15 215:4 215:5,10 218:15 220:1 220:21 221:14 227:12 233:12 234:13,19,25 235:12 236:12
answered 184:14 213:13
answering 129:6

anxiety 144:6 145:6
anybody 160:25
anyone's 223:20
anyway 188:7 191:19 227:21
apart 164:25
apologize 113:18
apparent 27:23
apparently 81:21 112:23 164:13
appear 21:14 26:14 27:15 61:25 104:4 114:20 143:14 150:25 167:11 194:4 204:4,6
appeared 177:19
appearing 242:4
appears 22:18 23:14 27:11 31:22 58:15 113:7 120:7,11 133:17 161:16 161:20 172:25 187:21 193:6 194:8,11,19 196:13 198:9 204:3 210:19
appendices 119:9
application 17:16 122:12
applied 64:18 115:4,21 124:23 151:9 151:17 169:18 171:3,20
applies 78:11 107:3,7 117:11 117:13,24
apply 64:17 106:22 115:14 179:23 207:7
applying 151:20 170:17
approach 100:8 111:17 112:8 136:15 137:19 169:9
appropriate 11:14 138:5 139:15 144:24 235:21
appropriateness 18:9
approximate 50:12 219:3
approximately 26:3 44:20 45:2 54:14 110:24 219:25
april 119:3
architectural 94:14 95:25
area 51:7 56:22 56:24 95:24 140:10 145:2 174:12 181:1
argue 184:6
arises 97:19
armed 42:4
arose 125:8,9
arranged 185:13
arrangement 46:16
arrive 32:7 95:5 116:8 144:21 165:1 170:10,22 171:25 178:12 191:23
arrived 96:3 107:17 169:22
arrives 66:16
arriving 147:4 179:6 238:14
article 52:3
articles 24:15 24:16 36:1,5,23 36:24 37:4,5,9 38:13
artificial 39:10
aside 80:21 191:17 192:10 205:7
asked 30:10 50:20 71:7 81:19,22 149:25 182:15 185:9 195:18 211:23 212:22 220:10,16 222:4 234:12
asking 13:22 71:1,2 174:22 181:11,15 210:15 215:7
aspect 121:5 124:3 221:6 223:13
assess 10:14 17:17,20 33:16 65:15 72:2 73:20 82:15 130:7 137:16 154:14 176:3 215:8 222:2
assessed 32:5 73:7 123:9 130:16
assessing 71:21 73:16 93:10 137:13
assessment 59:6,10,22 72:20 124:13 129:9 131:4 136:8 162:23

175:9
assessments 124:15
assign 188:14 188:22 207:9
assigned 141:2 165:24
assistance 38:12 138:5 139:16
assistant 34:23 38:3,6 47:7,11 47:13 48:24 58:9
assistants 48:20
associate 166:15
associated 167:19
assume 61:17 77:9 80:20 109:11 123:4 144:24 148:21 152:11 155:5 157:1 182:22 183:15
assumed 67:5 74:16 76:21 111:23 157:8
assuming 91:19 99:4 104:11 111:19 127:4 157:19 193:9
assumption 72:19 73:2,18 77:1 85:10 88:14,16 96:25 145:7,14 157:2 163:12 175:13
assumptions 71:11
attached 119:9
attachment 5:15,17 197:12 198:7,13
attempt 162:22
attitude 73:9 136:10,20
attorney 9:7 10:6 22:5 36:19 36:25 37:9 43:8 51:22 52:5 112:22 183:22 212:5
attorney's 42:24
attorneys 9:11 10:9 14:10 37:3 204:7,16 205:14,17,17 211:16 212:20 215:3
attributes 68:13
author 37:9 60:7 236:18
authored 35:25 36:4
authoritative 144:1
authorization 198:17
automatically 242:12
available 13:22 17:2 59:18 62:25 181:8 192:13 219:20 227:18
average 78:7 79:1,2 86:8,23 88:12,17 89:12 95:21,23 96:24 109:10 111:20 122:2,4 140:24 165:23 176:18 177:22
averages 89:11
award 81:6 174:1
awarded 134:13,20,25 137:5 138:10 162:15
aware 25:4 44:17 80:6 87:19 88:3 130:15 153:9 155:9,13 156:16 204:17 204:20 206:20 207:2

b

b 3:8 5:2 6:2 38:8 103:2,8,25 115:17,17,22 140:3 142:14 142:15,21 167:11,14,15 167:24 168:2 178:2 190:13
back 13:10 20:18 27:13 28:11 44:19 75:8 104:14 112:11 113:17 120:19 122:11 170:5,6 178:9 192:24 209:2,4 217:15 224:6 229:19 232:8
ballpark 12:21 215:22
barring 26:18
base 84:15 129:19 154:19 156:21 235:18
based 22:10 50:20 66:24 67:12,21 68:13 68:23 69:6,6 77:13 78:7 79:6 85:4 94:16 95:19 96:6

99:25 109:19 111:9 121:22 124:17 125:10 139:22 145:15 156:2 159:17 163:11 165:21 191:21 192:13 216:16 225:1 229:11 232:2
bases 69:4
basic 153:4 187:23 216:8
basically 89:5 187:11 214:14
basing 67:20 68:24
basis 23:2 34:23 81:6 125:12 128:18 135:14 137:25 139:10 152:17 154:24 174:2 176:6
bates 26:7,9,18 26:19,20
beach 2:5
began 173:2,4
beginning 113:17 214:21 215:20
behalf 2:3 3:3 7:17,19,21 196:22 221:5
believe 10:19 15:9,13 17:3 25:2 28:9 30:13 32:25 43:6 53:2 53:25 74:25 98:9 106:8 116:4 121:17 133:5 158:20 177:25 184:15 202:10 213:3 215:22 230:22
believes 84:21 175:18
bell 2:7
belllegalgrou... 2:10
bench 45:17,18
benefit 108:19 109:7 148:4,16 148:17,20,21 149:1,4,10 224:2 225:3 226:15 228:1
benefits 106:10 106:23 107:8 107:16 108:4 108:10,17,18 108:24 109:12 109:24 110:21 111:13,13,23 112:1 120:23 121:2,6,6,19,20 124:23 143:7 153:7 168:13 168:20,23 170:6 179:9,12 191:2,4,7,10,13 191:18 192:1 223:1,23 225:3 226:10 227:15 229:6
benjamin 2:16
berkeley 114:12 150:16
best 20:16 50:23 65:7,12 82:4 137:10 138:15 165:7 181:7 182:9 183:17 193:12
better 9:25 10:2 89:25
beyond 25:7 100:5 128:13 201:5
bha 150:25
bigger 84:5 102:10 232:1
bill 48:5 100:5 232:19
billed 216:14
billing 47:20 48:5 212:25 215:23 217:11 221:2,3 222:5
billings 214:21
bills 47:7
binding 195:3
biographical 24:2
bit 14:14 134:2 216:7 225:12 225:13 230:2 230:12,15,18 232:1,7
blocks 5:23
blogs 36:22
blowups 205:3
body 132:9
book 147:9 232:23 233:2,3 233:19,25,25 234:2,5,8,10,11 235:15,24
books 232:19 232:20,20 233:8,15 234:15,22 235:3,6,14,17 236:1,5,10,19
border 162:11
boss 58:8
bottom 123:18 142:22 158:13 159:7,22 167:23,24 171:1 172:3 178:20,21 185:19 190:19 195:6 196:21 199:16

boulevard 2:5 2:17
bound 97:17,18 97:24,25 142:20,20,23 142:24,25 143:2 152:6 167:25 171:6,7 171:25 172:4,6 172:8 178:14 178:24,25 179:2 186:3,7
boundaries 15:3,9,12 182:16,17
bounds 97:6,11 97:11 116:7
box 199:16
brain 180:20 181:25
branch 42:4 128:15
break 19:4,6,11 19:13 28:2 57:11 58:18 160:24,25 161:2,3
breakdown 50:11,12
brief 173:16
briefly 42:17 68:2 103:25 114:24 116:13 141:13 142:14 158:22 166:7 167:14 170:6 170:15 171:17 178:3 190:2,13 193:8
broad 207:2
broadcast 51:1
brod 1:6 4:5 5:5 5:6,7,9,24 6:4,6 6:7,9,10,12,13 6:15,16,18,19 7:12,24 8:7 17:8 20:19,21 25:20 28:13,15 28:17,19,21 33:19 34:10,12 34:17,18 35:4 35:10,19 39:8 196:19 237:2 240:4 241:2
broke 155:20
broken 191:1
brought 122:11
budgeted 196:14
building 2:16
bulk 141:3 165:25
burden 91:2
bureau 78:8 92:16 94:18 96:11,12 140:20
business 13:19 13:21 14:3 24:15 37:3 38:4 39:1 43:19 57:25
butler 2:12
buyers 200:14
bvanslyk 2:19

c

c 2:2 3:2 5:6 56:6 114:20,23 115:12,18,20 115:20 116:19 117:6,10,13,21 143:9,12,13 144:3 145:22 147:5 170:3,12 171:1 180:2,3 192:2 240:1,1
calculate 86:8 99:16 101:20 109:15 141:16 142:25 170:8 177:15 179:25 182:24 186:4 190:6 237:5,20 238:4
calculated 80:22 88:11 95:20 96:6,24 97:6 99:19 109:21 117:15 135:3 140:24 165:23 166:18 169:10 171:12 176:18 177:23 216:17 238:9
calculates 123:20 152:23
calculating 151:4 152:10 237:22
calculation 66:18,23 68:11 68:23 76:25 77:11 103:22 128:9 145:25 146:19 163:11 175:13 179:17 182:13
calculations 90:7 106:18 107:15,17 115:3 121:14 124:17 139:22 143:7 150:3,5 150:12 155:18 168:12 179:7 222:19,25 223:1 224:5,10 224:14
calculator 143:24 145:23 146:6,13 147:7 147:15 192:5,7
call 8:23 79:15 100:6 207:16 209:17

called 13:4 51:6 95:10,11,14,17 157:10 177:19 233:3 237:8
calling 13:20 73:10
calls 10:6 22:4 30:6 32:22 40:3 201:18 203:23 210:7 211:15 215:1 218:14 220:19 221:15 233:11 234:17 235:10
camp 1:3 7:12 8:25 46:6 60:22 61:10 194:20 214:22 215:15 215:25 217:11 221:6 241:3
cancels 105:11
capacity 44:22 63:25 64:1,4,7 64:17,21,25 65:4,12,17,22 133:9 162:5 173:9,20 174:2
capture 92:10 141:3 165:25
capturing 49:23
cardiac 126:7,8 126:13,20 127:17
care 15:24 17:25 18:10,13 18:21,22,23 60:1,14 72:13 72:24 74:17 84:11,16,19 86:18,20,22 87:3 88:16 89:19 90:3 91:5 91:12,16,25 94:23 95:8,12 96:15,17 97:4,7 97:12,20 98:17 99:16 100:23 101:2,4 103:10 103:14,20,23 104:3,9 109:15 112:8 114:14 114:17,20 115:5,7,11,15 116:9,16,21,23 116:25 117:12 117:14,16,25 118:3 129:13 139:21,22 140:1 141:15 142:17,18,23 143:1 150:19 150:22,23,24 151:11,15,19 152:22,24 153:2,5 158:1 158:17 159:2 159:16 165:14 165:17,19 166:6,9,12,15 166:20 167:12 167:18 168:1,3 169:21,22 170:19,20,23 171:4,9,10,12 171:16,22 172:5 176:17 177:17 178:3,7 178:13,17,23 179:1 180:1,5 181:7,21 182:9 182:11,12,19 182:21 183:2 183:12,12,16 183:16,17,22 184:2,9,15,17 184:18 185:7 185:24 186:1,3 186:5 188:14 188:24 189:4 189:12 190:7 190:17,20,22 200:22 202:22 203:4 206:14 207:11,21 241:6
carefully 27:16
carmellie 45:23
carolina 1:1,11 1:14 13:7 42:25 55:5
carry 242:11
case 8:11 9:4 10:20 12:15 13:23,25 14:3,9 16:2,20 17:1 18:1,3 24:7 25:23 26:17 27:15 32:5,20 33:6,12 42:8,19 43:25 44:8 45:20,24 46:1,2 46:5,6,17 48:3 51:13,23 52:22 53:4 54:14,17 54:19 55:3,8,9 55:20 56:3,5 57:1 58:6,20,20 58:21,21 62:17 63:5 65:13,17 65:20 68:20 69:3 72:22 73:16 82:19 86:14 94:2,16 109:21 110:19 111:16 125:11 127:24 131:1 132:18 133:1 134:5 139:13 139:17 142:18 145:5 148:9 154:20,25 155:4 168:24 169:24,25 179:21 184:18

191:20 195:22
197:20 199:20
200:25 201:3
201:12 202:14
202:20 203:9
204:12 205:6
205:20 206:1
209:15,20
212:6 214:17
226:11 234:23
235:3 238:11
cases 9:4 14:9
14:13 15:16,18
16:11 18:4,8
24:9 29:9,16
30:20 37:19
39:10,24 41:5
43:1,5,9 44:2,4
44:10,10,24
45:1,2,5 47:4
50:8,11 56:12
64:1,3 90:25
92:18 94:11
100:9 106:16
106:19 111:5,6
123:11,13
156:25 168:9
168:15 176:11
180:10 182:10
182:11 187:8
188:10 195:22
213:25 214:19
214:23,24
215:16,16,21
215:25 216:3
216:12 217:6,7
224:1 232:24
235:8 238:15
categories 10:4
94:13,23 95:2,8
104:4 106:5
114:16 115:14
140:11,18
141:15,17
142:17 150:21
151:22 166:6
166:10,12,14
167:22 170:23
170:25 172:2
177:17 178:18
178:22 179:9
185:15 190:18
191:1 214:7
category 85:4
85:20 88:18
95:10 96:8,14
96:20 97:1
104:9 115:17
141:4 144:5
158:25 159:3,6
159:18 165:21
166:1,20
167:12,20
170:14,20
171:16,22
172:1 177:18
177:20 178:3
178:13 179:18
188:15,23,23
190:17 191:6
caught 113:11
caused 131:6
131:19 232:11
causing 144:11
cc 153:3
ccn 150:18,25
151:15 152:7
157:25 158:1,6
158:17 159:17
cdc 167:1
189:22
census 94:17
96:11,12
certain 9:4
40:11 41:12
48:4 88:6,8
93:20 160:8,11
160:13,18
194:6 206:7
228:10 237:14
certainly 15:8
40:8 43:15
73:14 87:8
121:3 125:20
127:17 133:18
145:1 161:20
172:25 237:6
237:18
certainty 93:18
160:1,5,16,17
160:21,21
certificate
242:1,8,9
certification
240:12
certify 240:2,10
242:3
chad 60:12
challenge 53:9
53:16,18 55:14
55:18
challenged
51:20 52:10
55:11
challenges 52:3
change 62:11
62:12,13,25
224:14,20,22
225:7,14
228:21,25
230:17 232:12
241:8,8 242:6
changed 53:25
196:14 242:5
changes 92:12
241:6 242:4,9
changing 242:7
chappell 8:7,7
charge 49:13
49:22
charged 215:20
233:8 234:4
charges 214:18
216:18,24

charlotte 45:19
charts 119:9 205:2
chest 126:5 127:6
choice 100:15
choose 96:5
chores 74:3 77:5 78:18,22 80:8,18 81:23 82:24 83:14,15 83:15,19 134:8 135:21 136:12 137:5 165:2 187:20
chose 79:12,22 96:1 136:25 138:16 175:24 177:2
chronologically 185:14
cited 83:13
civ 5:16,19 196:19
civil 232:22 233:20 234:6 241:5
claim 74:10 76:14 133:13 133:18,18,22 134:24 135:15
claimed 75:3
claiming 112:4
claims 43:4 59:25 60:12,20 61:1,8,12
clarify 115:1 126:2 149:24
classify 93:2
cleaning 74:4 79:4
clear 81:25 86:15 210:18 222:12 225:18 226:2
clearer 177:25 227:13
clearly 126:9 195:17
clerical 140:17
client 9:7 10:6 22:5 183:18 209:18
clients 38:17 49:18
clinical 113:4 192:14
clinics 155:12
close 100:10 155:12 160:18 164:10
closely 118:21
cmo 48:21 201:20 210:9
cna 185:22
cola 109:9,10 111:20 112:2 112:11 122:2
colds 20:5
collection 27:11 204:7,8,9
columns 159:21 190:7
combination 64:15
combined 143:24 145:22 146:1,5,21 191:24 192:9 222:24 223:17
come 17:3 20:17 27:13 28:11 67:15 90:15 109:5 115:23 116:12 116:21 135:10 144:25 159:23 170:5 177:11 178:2 179:4 186:13 199:7 216:25 217:15
comes 24:5 146:20
coming 67:16 126:2
commenced 128:23
commencem... 124:8
commences 7:1
commencing 1:11
comment 132:14
commentary 24:12
commercial 5:22 43:23 55:9 56:8 199:15
commodities 87:14 92:10,11 207:7
common 105:10
communicate 38:17 202:1
communicated 8:10 201:22 212:19
communication 233:11
communicati... 9:10 10:9 22:5 22:6 30:7 32:23 40:4 48:19 201:18 203:25 204:15 205:7 205:13 210:7 211:15 215:2 218:14 220:20 221:15 234:17 235:10
community 151:15 158:1

company 34:10 35:10 43:22 56:7
compared 50:17
compensation 91:18 148:15 149:7
complete 5:23 77:4 82:20 137:2,17 164:23 175:12
completed 81:15 188:11 229:17
completely 75:6 125:14
completing 39:8
completion 242:7
complex 146:19 216:8
compliance 241:5
complicated 78:2
complied 21:21
component 85:21 86:6,9 87:13,14 95:4 95:13,16,21 96:1,10 166:16 177:20 220:25
components 85:4 87:11 95:9 141:2,16 165:21,25 166:10 177:15 190:5
computer 201:4 210:1 211:5 213:10
conceivably 136:22
concept 74:7 100:1
concepts 216:8
conclude 124:2 149:12,25 176:5
concluded 150:1,1 162:9
concludes 149:16 238:22 239:9
conclusion 66:7 67:19 133:7,11 162:13,14 164:17 180:10 192:18
conclusions 17:4,7 118:12 144:21 172:10 172:12 174:7 179:7 186:11
condition 128:1 148:16
conditions 131:19 132:8 145:25 187:14 187:20
conduct 38:16 67:14 199:18 208:19
conducting 46:25 201:2
confer 201:10 201:14
conferred 202:13
confirm 112:5 112:20,22 146:11 226:20
confirmed 111:25 143:20 191:16,24
confirming 131:23 146:10 146:23
confusing 75:10
connect 95:7
connected 141:15
connection 221:5
conservative 189:7
consider 30:16 57:24 58:4 71:22 155:19
consideration 136:10
considerations 125:12
considered 5:9 6:4,5,7,8,10 25:19 26:16 28:14,15,17,19 28:22 29:7,10 29:22 31:3,13 31:20 48:20 72:6 111:10 118:21 132:24 210:8 236:7
consistent 41:21
constructed 42:1
construction 94:17 96:3,9,13 96:13,17,23 160:14
construed 114:17 150:22
consultant 13:24 198:19
consulting 13:12,19 14:4 14:18 35:18 215:14
consumer 85:5 85:22 92:7,8,9 92:14,19,23 93:14,25

140:10,12 165:21
consumers 140:16
consumption 237:11,12 238:6
cont'd 3:2 6:2
contact 9:19 24:4 33:4
contacted 8:14
contain 24:2
contained 62:17 63:6 212:18 235:17
contains 150:20
contaminated 60:21 61:2,10
contamination 221:7
content 5:7 242:6
contents 210:9 210:13
context 86:22 90:17 109:1 210:15
continue 37:8 148:21 157:21
continuously 156:11
contract 5:12 5:14,16,18,21 5:22 194:19,20 194:24 195:5 195:16,17,21 196:16 197:13 197:14 198:8 198:18 199:4 199:14
contracted 39:1 77:25 135:22 147:18,25 197:25
contractor 34:23 57:25
contracts 194:23 195:1,2 195:2
conversations 48:23
cooked 78:23
cooking 74:4 79:4
copies 22:15 23:8 24:18 25:14 27:5 31:5 31:25 122:16 172:17 186:17 194:13 196:4 197:7 199:9
copy 21:1 23:7 31:16 41:12 113:9 161:17 172:22 241:5
corcione 3:13 7:9
corporation 35:16
correct 10:7 11:17 16:7 18:1 18:5,11,23 22:19 24:5 32:2 60:2,14,18,22 61:10,14,18 62:6 75:22 76:6 78:9,12 79:12 80:9 84:22 85:5 92:1 94:11 98:22 103:5,11 109:16 114:21 116:10,23 117:17 120:17 120:23 123:2,5 123:21 124:5 132:11 133:11 133:14 134:3,9 139:23 140:5 140:25 141:4 141:25 142:5 143:3 145:9,12 145:19 147:19 147:25 149:19 152:24 153:3 161:23 162:2 162:11,16 166:23 167:4,8 168:4 171:13 173:5,10 176:11,19 177:6 180:6 183:13 186:11 187:3 188:15 189:25 190:11 190:23 191:2 192:16,17,22 195:23 196:16 196:19 198:14 198:19 199:16 201:8 206:25 208:9,13,16 211:25 221:9 222:19 226:22 226:24 233:4 242:4
corrected 67:15 71:14 242:5
correcting 242:7
correction 114:2,5 230:21 241:8,8 242:6
corrections 241:6 242:4,9
correctly 81:4 109:3 114:1 116:3 148:24 151:1 158:19 166:2 186:8
correspond 159:14
corresponded 151:11
correspondence 34:16

corresponding 76:25 95:13 116:6 151:18 159:1 169:19 171:20 182:14
corresponds 108:19
cost 5:18 84:25 85:2 88:6,19,25 89:6,12 91:7 97:13,16 98:3 101:2,4,18,23 103:10 109:9 111:20 113:24 113:25 115:25 116:9 118:3 142:22 149:18 149:19 158:16 165:18 167:25 168:3 169:23 180:5 183:8 184:19,22 185:5,21 186:2 186:4 189:2,13 189:15 190:21 198:9,14 207:21
costs 85:4 88:23 90:1 97:5,13 101:10 115:9 140:2,4 142:16 158:24 165:20 167:15,18 178:1,6 179:21 189:3 207:9
counsel 7:13 20:25 21:25 22:16 23:8 24:18 25:14 27:5 31:6,17 32:1 57:10 119:14 122:16 161:1 172:18 186:18 194:14 196:4 197:7 199:9 201:6 221:18 231:8 234:18 235:11 238:24 240:11 242:10
count 136:17
counter 104:8
countries 206:21
country 94:9 206:20
county 53:1,3
couple 44:17 95:1 111:22 157:13
course 97:23 101:3 131:5 171:18 207:3
court 1:1 7:10 7:14 16:2 19:6 21:3 32:7 52:8 52:24 53:2 57:2 57:3 116:5 193:18 204:24 205:10 238:24 239:5 242:10
courtroom 54:25 73:11
cover 56:23 91:20 115:24 116:1 151:13 151:16 157:9 157:21 158:15 158:18 180:4 185:21 199:3
coverage 116:20 117:7 150:18 151:24 152:2,7,18 153:3,19 155:3 157:12,25 158:4,4,6 159:17 170:1 185:2
covered 74:17 75:4 115:9 141:19 179:21
covers 28:9
cpi 85:5,21 86:6 86:9 87:11 92:8 94:13,15,20 95:4,9,13,16 96:1,10 141:2 141:15 165:22 165:24 166:10 166:16 177:15 177:20 190:5
cpi's 93:5
create 15:24 16:12
created 18:22 24:14 205:19
creating 25:8 183:16
cree 56:6,6
criticism 79:11 79:16
crosswalk 166:9
crystal 225:18 226:2
cumberland 53:1,3
current 102:24 112:6 121:21 154:21,21,21
currently 46:21 62:22 102:9 122:8 155:7 212:23
curriculum 5:6 20:21 22:19,21
customs 162:10
cut 113:9
cutting 41:3
cv 1:3 20:21 34:5,8
cvs 23:1

d

d 4:3 5:2 6:2 114:21 115:12 115:18,20 116:13 117:22 150:25 151:5 151:12,21 171:15,17,18 172:3 185:25 186:6
daily 47:25 49:17,19
damage 10:4 105:25 106:1 237:14,23 238:3
damages 9:21 9:21 10:12,14 11:6 17:1 33:15 33:18 54:4,5 59:7,23,25 60:12,20 61:13 73:7 105:3,15 105:17 106:4 109:21 123:7 136:8 143:6 168:7,23 170:8 176:7 179:4 190:25 191:6 191:20 232:22 233:4,20 234:6 234:10
daniel 8:12,15 8:17,20,23 208:8
data 12:5 16:20 17:2 24:2 38:14 68:24 69:7,14 78:7 86:2 87:7 87:19 88:3 89:5 92:14,15 93:12 94:16,17,21 96:6,10,13,14 99:8,9,10 144:25 156:2 156:22 167:1 189:22 230:20 231:25 232:3
date 22:23,24 26:2 32:19 61:21 98:6 124:7,8,17 125:15,21 128:21,22 130:9,18 142:3 167:2 177:4 189:23 196:22 198:10 199:5 199:15 218:18 218:18 219:3 241:2 242:2,17
dated 24:25 71:9 120:8 122:14 161:17 172:23 186:15 208:8 211:11
dates 36:10 218:7
datum 232:5
daubert 51:13 51:21 52:3 53:9 53:10,14
daughter 175:21
day 37:9 63:3 126:7,9 127:6 240:15 242:20
days 126:5,10 128:1,6 218:21 242:12
dc 3:5,9
death 16:20 43:11,25 44:2 45:24 50:8,11 53:4 55:8 74:9 94:11 216:3
decades 36:13 111:22 122:3
decedent 74:13
december 33:1 58:17 60:6 61:22 62:14,18 63:6 66:6,9,15 71:10 74:15 75:5 84:12 120:16 122:14 161:18 172:24 186:15 200:2,9 222:17 223:6 224:11,15 225:2,20 228:20 229:13 229:17 230:16 231:4,11,16,24
decide 116:5 127:16
decided 14:16 137:25 139:7
decision 173:13
decisions 18:14 139:3,15 177:14
declared 125:11
deemed 130:25
deep 154:5 180:20 181:25
defendant 3:3
defendants 50:13
defense 10:11 50:7,16,18 53:7 66:25 113:3,21 117:14 122:16 154:1,6 173:17 189:7,8 192:14 201:6
defer 18:14,22 174:7,14 175:2
define 63:15 73:25 85:7 99:21
defined 9:25 10:3
definition 12:11 105:4,8,9

105:10,21
degenerative 187:15
degree 159:25 160:5,14,16,19 160:20,21
demographic 69:7 167:1 189:22
demonstrative 204:23 205:9
department 3:4 3:7 154:1,6 198:17
depend 128:9
depending 89:9 149:5
depends 17:10 227:4
depo 49:24
deponent 241:2 241:4 242:1
deponent's 242:8,9
deposed 44:18
deposition 1:10 5:4 7:1,5,11 12:16,20,24 13:3,4,8,11 18:25 19:25 20:20 21:14,15 22:24 44:6 47:6 49:13,21,22 63:4 68:4 81:25 118:24 119:3 131:8 141:20 182:16 219:21 221:21 236:14 238:23 239:9 240:3,6,8,9 241:2,5,6 242:2 242:3,8,10,13
depositions 46:24 49:15 135:21
depressed 144:6 145:6
deps 1:25
derived 110:21
described 73:4 95:15
describes 84:19 88:6
description 5:3 6:3 24:9 197:24
descriptive 29:7
designated 149:7
designed 92:9
desire 71:23 72:15
detail 47:18
detailed 131:3 185:1
details 48:17
determination 100:17,19 121:2 125:21 128:18 129:12 129:20,23,24 130:1,2 134:12 138:19 139:10 144:18 146:20 165:1 187:16 187:16 222:24
determinations 126:12 153:18 156:24 175:22 192:14 226:3 226:20,24 228:10,11
determine 73:6 76:17 79:9 82:8 110:10,11 129:10 134:20 143:24 144:10 145:23 163:14 164:2 167:1 182:18 187:19 189:18,22 213:8 223:17 237:25
determined 80:22 125:4 128:16 143:17 152:16
determines 68:11
determining 121:6 233:4 234:10
detroit 2:18
develop 15:24 16:12
developed 18:23 40:7 205:19
developing 183:16
devices 206:8 206:12 207:9
diagnosed 60:17 61:7 123:2 130:18 131:25 161:22 173:3 187:2
diagnoses 110:11,15,22 126:7 143:14 143:21 226:4 228:16
diagnosis 61:1 61:9 110:25 124:5,8,18 125:6,16 126:8 126:20 127:9 128:2,7,10,11 128:21 130:9 131:23 133:2
diagnostician 15:21
diagrams 205:2
diane 28:18 31:10 172:15 172:23 173:13

174:19 175:5 176:5 177:13 179:5
differ 158:6 187:9
difference 64:20 68:6 78:14 100:3 117:9 187:12 188:1 225:8
different 19:21 41:13,14 65:8 87:10,15 115:13 116:19 116:20,20 140:11,19,21 140:21,22 141:14 152:19 156:19 157:16 167:22 194:22 194:23 216:2 228:16 230:2
differentiate 64:6
differently 64:2
differs 158:9 187:10
direct 113:25 149:19
directed 182:9
directly 69:15
disabilities 108:23 144:4 168:17
disability 106:10,23 107:8,16,22 108:4,10,17,20 109:24 110:11 110:20,21 111:13 121:20 124:23 131:4 131:24 143:7 143:16,25 144:7 145:7,23 146:1,5,13 147:14 148:4 148:20 150:11 152:15 168:13 170:6 179:9 191:2,4,7,10,13 191:18,24 192:1,1,5,10 206:11 222:24 223:18 226:15 226:21 227:2,3 227:25 228:15 229:6 230:18 231:22
disabled 96:19 124:4 125:5,5 128:17 147:18 147:24 152:11 191:17 192:11
disagree 83:11
disagreement 69:20
disc 147:1
discount 100:6 100:12 101:12 101:13,17 102:3,10,21 103:4 104:18 109:14 122:12 140:3 142:7,11 151:20 159:5 159:20 167:7,7 167:21 170:22 171:24 178:9,9 178:10 190:10
discounted 102:13 103:3 104:14 112:11 190:9
discounting 100:7
discovered 175:20
discuss 183:3 206:13
discussed 62:5 83:24 119:10 151:8 163:9 179:15
discussing 9:20 86:22 134:1
discussion 22:10 155:1
discussions 203:16
disease 16:11 18:4,8 30:20 39:9,24 41:5 56:12 60:17 61:8 67:7 76:5 76:19 77:7,15 80:9 82:25 90:25 106:16 111:5 123:10 124:9,16,18 126:8,8,10,13 126:20 127:17 130:18,19 131:16,23 132:1,19 135:23 145:9 147:1 148:10 161:22 168:9 173:4 174:21 176:11 180:8 187:3,15 214:24 215:16 217:6 224:1
diseases 214:19
disorder 144:5 144:12 145:6 145:18 146:25
display 190:4
displayed 129:11
dispute 56:8 69:25 75:21 100:21 102:6 177:2

distinction 64:9 64:13,14 65:18 65:19
district 1:1,1 45:19 53:2 55:4
divide 106:4
divided 185:15
dividends 63:19
dividing 102:16
division 1:24
doctor 97:21,23 184:1
doctor's 97:16
doctors 18:15 125:15
document 30:11 77:19 125:19,23,23 147:3 148:8 168:18 198:9 198:12 199:2 212:8,23 213:9 229:16
documents 5:4 21:22 25:1 26:7 29:11,14 30:17 32:4,6,13 34:6 38:13 62:3 118:19,20 125:10 129:21 129:25 130:4 130:23 143:14 188:2 193:7 194:6 212:4 217:25 218:9 218:11 219:15 219:16,18,20 219:25 220:9 221:3,16,23 222:3 223:19 223:23 226:5 226:11,16
doing 12:24 13:1,11 20:22 33:15 37:16 43:23 47:19 48:1 57:2 78:1 81:20 83:16,21 104:19 106:18 203:8 209:14 214:23
doj 8:13 19:5 19:12 194:20 196:19 203:15 204:7 212:24 239:3
dollar 99:23,24 100:1 189:8 208:13 227:2,7 227:24 237:14
dollars 99:24 101:23
dr 5:7,9 25:19 33:19 39:8 67:1 67:4,9,22 69:4 72:6,23 84:17 84:21,25 85:3 103:20 106:13 106:17,20 107:5,9 108:1,2 110:1,8,19 111:1,13 113:4 113:22 116:15 117:11,14,24 121:22 125:2 131:18 143:20 143:22 144:2 144:17,20,23 146:10,23 147:20,21 150:2,9 151:9 152:17 155:2 158:25 159:14 162:4,9 163:3 167:18 168:16 169:10,18 170:17 171:19 173:5,17 174:5 174:13,25 175:1 178:16 179:17,20 184:20 185:4 187:12 191:15 191:21,25 192:8,15 202:7 202:10,23,24 203:5 222:18 224:2 225:17 226:17,23 227:1,21 228:2 228:10 232:11 237:2
drew 13:18
dripps 59:25 65:24 66:11,11 66:11,12
drive 2:12 65:20
dropping 155:11
drugs 95:3,5,6 95:11,14,17 104:6,6,7,8,8 177:19,20,21
duces 21:16 220:25
due 108:25 110:24 121:6 136:9 168:18 192:1
duke 38:22
duties 74:3
duty 42:4

e

e 2:2,2 3:2,2 4:3 4:3 5:2,2 6:2,2 38:8,8,8 48:14 56:6,6 117:5,6 117:10,10,21 118:1 150:25 151:5,14,21 214:1,4 240:1,1
eagles 8:12,15 8:18,19,20,24 208:8

earlier 26:12 38:2 95:16 101:11 103:19 113:8 141:19 151:8 177:25 182:16 237:10
early 36:10 198:9,11
earn 64:24 65:2
earned 63:18 63:20
earners 140:17
earning 63:20 63:25 64:1,4,7 64:17,21,25 65:4,12,17,22 133:9 162:5 173:9,19 174:2
earnings 59:25 60:13 63:12,17 63:18,22 64:1,4 64:6,15,16,16 64:21,22 65:1,3 65:6,7,11,14,21 65:25 67:16 71:15 73:8 78:19 86:19 123:19,20 133:14 162:1,2 162:15,19 173:8,13 174:1 174:18 206:10
easier 22:11 100:25
easily 17:13 83:17
eastern 1:1,11 7:2 239:10
economic 10:13 10:24 16:20 17:16,20 33:18 54:3,4 59:7,23 61:13 90:3,25 105:15,23,25 106:1 109:21 139:25 168:23 170:8 176:7 191:20 233:4 234:10 237:22
economical 12:4
economics 11:6 13:2,5 23:2 34:1,10,13,17 35:5,11,17,20 36:1 37:6 56:11 74:8 76:17 82:19 92:21 94:1 100:7,9 105:9,16 137:14 139:2 174:12 232:21 233:20 234:6 235:16,16
economist 9:3 11:16 12:2,3,7 12:9,10,23,25 13:12 15:2,20 15:23 16:1,10 16:19,25 17:15 18:7 33:6,14 35:25 36:4,8 38:21 42:8,10 42:25 44:5,9,22 45:7 50:6 63:16 64:5 68:22 72:12 73:6,25 79:20 80:3 81:2 85:8 90:24 92:24 93:6 99:15 123:11 126:3,12 127:8 129:10 132:25 136:7,9,16,19 138:18 144:10 154:14 155:19 156:10 160:7 183:13 195:23 197:20 200:13 200:25 204:23 216:1,4 235:20 238:10
economists 34:19 35:3 36:17 50:17 51:8 88:15 89:23 93:14 94:9 105:23 237:4,19
eddie 56:25 65:13 71:22 72:6 77:6,14 80:7 82:23 84:21 98:5 99:5 117:1 180:19 181:25
edgar 62:18 118:24 120:8
edgeworth 1:10
educate 235:15
educated 50:24
effect 146:10 157:6 158:2 191:16 207:20 226:25 235:7
effectively 43:23 138:11 139:14 157:7 164:22
effectiveness 17:25
effort 160:19
eight 37:17
either 12:16 42:3 45:8 118:20 180:12 182:18 191:9 217:15 234:22 235:2,6 236:18
element 94:20 105:17
elements 88:18
eligibility 149:6
eligible 153:19
else's 40:8

employ 111:3 238:13
employed 221:4
employee 38:25
employees 34:18 39:5
employment 162:10 173:23
engaged 42:22 42:23
engagement 214:22
engles 8:18
enotary 1:14
enter 146:14,18 155:25
entered 70:22
entire 110:23
entirety 233:17 234:9,13
entities 115:10
entitled 25:18 169:12 170:13 181:7 196:15 232:21
entity 34:14 35:15
entries 210:4 210:17
environment 102:9
equipment 84:20
errata 241:1
error 66:17,24
esq 2:4,8,12,16 3:4,8
essential 11:23
essentially 34:15 37:4,7 86:5,23 104:7 105:20
established 61:18
estimate 93:16
estimated 93:20
estimates 84:25 85:2 165:18
ethic 136:11,21
evaluate 9:4 10:4 17:24 61:21 111:4 145:2 222:2 237:5
evaluated 123:10
evaluation 190:17
evaluations 115:18 166:14 166:19,20
everybody 57:5 104:22
evidence 65:20 83:12 135:19 136:2,3 155:6 206:17 207:13 208:1
exact 87:17
exactly 89:4 116:16 146:16 220:2
examination 4:6,7 8:4 236:25
example 15:15 43:22 68:14 72:23 78:16 83:13 85:13,19 88:23 89:14 91:16 96:19 100:13,22 101:10 104:6 113:8 115:16 126:1,21,24 127:1,21,22 140:14 151:8 177:18 226:13 227:25
examples 95:2
exceeded 87:21 216:18
excel 211:2,4
except 70:3 71:12 89:3 104:17
excluded 55:22
exclusively 124:19,20 128:9
excuse 222:22 224:25
exhibit 5:3 6:3 20:19,23 21:11 22:14,18 23:6,9 23:12 24:17,19 25:12,12,15 26:24 27:4,6,9 27:14 28:1,13 28:21 29:4 31:2 31:9,12,19,25 58:10,13 62:1,5 62:12 70:22 120:1,7 122:15 122:18 161:10 161:16 172:16 172:19,22 186:17,19,22 192:24 193:12 193:22 194:15 196:5,17 197:8 197:11 198:3 198:23 199:8 199:10 208:3 231:12,15,16 231:20
exhibited 135:22
exhibits 20:11 21:7 28:23 31:24
exist 94:15 155:6

existence 156:13 157:2,3
existing 156:7
exists 154:23 155:7 156:5,22 157:12,19
expect 64:22 156:18
expectancy 67:2,8,13,19,23 67:25 68:1,7,7 68:10,16,18,23 71:13,21 72:3 72:14 99:4,11 99:12 101:5 109:22 142:3,5 167:2,3 170:9 174:20 177:4,6 189:23,25
expectation 64:23
expected 64:16 64:20,22 65:6 68:16,19,20 98:21 141:24 166:22
expense 91:20 102:11,12 104:11
expenses 84:11 85:10 86:20 91:21 97:1 104:17 115:22 139:20 157:9 157:22 165:14 165:17 176:17 182:19 188:13 191:10 214:9
expensive 182:3
experience 24:7 34:9
experiencing 173:3
expert 6:11,13 6:14,16,17,19 10:12,12,13 11:3,6,6,25 29:8 32:20 33:20 34:2 51:24 55:19 59:6,23 66:15 66:24,25 69:5 69:16 70:21 72:20,25 73:1 76:2 82:19 84:7 84:7 106:20 107:5,22 113:4 113:21 116:25 120:22 121:1,5 125:24 127:13 133:20 138:5 139:16 144:1 144:17,23 145:4,15 150:9 153:7 155:3 173:17,24 174:11 181:2 181:22 185:2,4 185:6 186:14 191:15 192:14 195:1,1 198:18 211:16 215:3 215:14 223:21
expert's 134:23
expertise 15:4 17:15 52:16 112:4 145:2 181:2 187:18 187:19 227:21
experts 10:15 11:4 18:19 33:17 34:1 46:25 48:19 52:4 69:10,12 73:2 201:11,19 202:14,21
explain 68:2 90:18 101:6 103:25 116:13 117:5,19 119:9 141:13 142:14 143:6,12 146:8 158:23 159:8 166:7 167:14 170:14 171:17 177:12 178:4 190:2,13 191:5 192:2 205:10
explained 54:24 88:22
exploratory 9:20
exposure 60:21 61:2,9,13
express 41:21 63:5 76:2 140:4
expressed 62:23 142:19 178:16
expresses 97:5 97:13 103:20
expression 99:23 115:8
extend 98:20 141:24 166:22
extensive 110:14
extent 9:9 10:5 22:4 30:6 32:22 40:3 48:22 71:6 110:2 201:18 201:21 203:23 204:17 205:25 210:6,12 211:15 212:16 215:1,6 218:13 218:19 220:19

f

f 2:4,12 117:19 117:22,23 118:2 158:14 158:21,22,24 159:7 240:1
facilities 155:13
facility 186:3

fact 16:2,6 51:18 53:24 82:23 89:13 104:17 125:10 128:14,14 134:19 137:23 138:2,3,20,25 139:6,8,9,14 143:21 155:9 163:18 187:17
factor 72:14 73:8 91:6 107:9 127:7 182:2 185:20 229:12
factoring 124:21
factors 73:15 159:20 167:20 170:21
facts 128:12
faculty 13:6
fair 35:19 119:11,12
fairly 23:23 24:14 100:14 198:9
familiar 36:20 51:13,20,22,23
family 96:2,8 96:22 165:9
far 26:10 50:22 87:21 162:16 168:16 214:18
fax 1:24
february 1:7 7:8 24:25 25:2 25:3,20 118:25 193:2 194:5 218:8 240:15 241:2
fed 145:21 192:5,7
federal 42:9,18 43:1,4,10 44:5 44:11,21 45:6 46:9,17 49:20 51:7 53:2 92:16 94:16,17 96:11 128:15
fee 46:3,8,11 50:3
feeding 146:5
feel 28:1 32:6 32:13 34:6 59:3 204:12
feet 132:10
females 68:14
field 10:13 12:4 15:4 36:1 93:19 207:10
figured 98:18
filed 242:13
final 24:11 109:18 151:25
finance 38:23
financial 12:4 17:17,22 91:2
find 82:2,5 100:18 177:3 209:4,8 228:5 230:24
finder 16:2,6 134:19 137:23 138:1,3,20,25 139:6,8,9,14
finding 91:19 150:2
findings 121:14 185:1,1
finds 38:13
fine 94:8 104:21 193:16
finish 187:25
finished 12:9
firm 14:4 34:10 69:13
first 8:9,14 9:2 9:19 12:15,19 12:24 13:3,8,11 14:2,8,12 19:3 23:20,22,24 26:1,5 29:3 59:12 74:21 96:5 115:1,17 115:17 119:17 120:13 123:18 125:15 126:12 132:19 144:5 146:2,7 148:10 166:13 168:13 169:7,11 175:16 189:9 189:13 199:13 208:7 214:7 218:3 233:7
fisher 2:16
five 16:10 18:3 18:8 29:9,16 30:20 37:19 39:24 41:4 50:21 56:12 57:10 90:25 106:16,19 111:4 123:10 155:20 156:25 176:10 180:10 195:22 213:25 214:18 215:16 215:21 216:12 217:6 235:7 238:15
fl 2:5
flight 182:3,4
floor 2:17
flu 20:5
folder 27:3
follow 108:9
followed 85:23 97:6 192:21
following 9:24 89:12 140:23 189:21
follows 8:2 123:8

footnote 78:16
forces 42:5
forecast 91:1 91:11,24
foregoing 240:3 240:8 242:2
forensic 13:1,5 13:12,19 14:18 15:20,23 16:1 16:10,19,25 17:14 18:7 23:2 33:5,14 34:10 34:12,17,19 35:5,10,17,19 37:6 42:7,10,25 44:5,9,22 45:7 50:6,17 51:8 56:11 63:16 64:5 72:12 73:25 74:8 76:17 79:20 85:7 90:24 92:18,21,24 93:6 94:1 99:15 100:6,8 105:8 105:16,23 123:11 126:3 126:11 127:8 129:10 132:25 136:7,9,16,18 138:18 139:2 144:9 154:13 155:19 156:9 160:7 195:23 197:20 200:12 200:25 204:22 216:1,4 232:21 233:19 234:5 235:16,20 237:4,19 238:10
forgot 49:2
form 10:21 11:19 12:6,18 13:14 14:4,22 15:7 16:4,15,23 17:19 18:17 22:4 23:4 29:18 30:2,22 32:9,16 33:8,24 34:21 35:7,22 37:12 37:22 39:3,13 39:18,25 40:3 40:14,16 41:7 42:12,21 43:13 45:11 46:13,20 47:22 48:8 50:1 51:3,10,16 52:12,18 53:13 54:10 55:16,24 56:13 58:2,23 60:4,24 61:24 62:8,21 63:8 66:2,20 68:9 69:2,24 70:5 72:1,9,17 73:13 74:19 76:8 77:17 79:14,25 80:11,16,25 81:11 82:11 83:2,9 85:17 87:5,24 88:10 89:2,17,21 91:4 91:14 92:3 93:1 93:8 94:4 98:8 98:25 99:7 101:8 103:18 105:6 106:7 107:1,12,20 108:6 110:3,7 112:17 118:7 119:5 120:25 121:9,16 123:15,23 124:11 126:16 126:23 127:11 128:25 129:18 130:11,21 132:3,13,21 133:4,16 134:18 135:25 136:14 138:23 140:7 141:9 144:15 145:11 147:8,12,13 149:21 150:7 152:13 153:14 153:22 154:3 154:18 155:15 155:23 156:15 157:5 162:18 163:1 165:5 169:4 174:10 176:13 177:8 180:15,24 181:10,19 182:7 183:6,20 184:13 195:25 197:23 199:22 200:4,16 202:16 203:14 204:15 205:12 206:3,24 207:24 208:22 210:24 211:7 212:14 213:12 213:23 214:13 216:6,23 217:9 218:13,23 219:13 220:6 222:21 223:9 223:15 224:8 224:18 225:10 225:23 227:10 228:14,23 229:21 230:6 232:15 233:23 238:2 240:13
formal 35:4 105:8,21
format 40:1,22 214:10
formatted 29:15
former 38:23 191:12,12

formulated 205:8
formulating 26:17 132:25
forth 75:17 103:3 147:2 148:9 159:24 240:4
fortunately 93:10 128:8
forward 19:24 122:5
found 110:19
foundation 17:19 33:8 40:16 41:7 48:8 51:16 66:20 69:14,14 72:1,9 72:18 81:11 87:24 126:16 130:11,21 132:3 133:4,16 135:25 138:23 154:3 155:15 155:23 182:7 199:22 200:16 205:12 206:3 207:1,24 212:14 214:13 216:23 219:13 225:23 233:23
four 44:15,16 44:20
frankly 74:24 125:3 156:5 157:15
free 28:1 34:6 100:10
frequencies 97:14
frequency 97:20 98:3 189:12
frequent 24:14
front 21:12 94:24 120:6 122:22 127:5 186:25 194:4 231:4
fryar 171:11,12 171:16,21 172:5 185:23 186:7 203:4
fryar's 186:5
full 8:6 75:13 108:25 168:22 175:15
fully 39:1
fun 51:4
function 33:12 35:11,16 85:11
funding 196:13
funny 195:14
further 59:17 59:20 61:12 115:23 119:9 146:8 204:11 236:23 238:18 238:21 240:10 242:7,11
future 54:4 64:16,18,19,21 64:21 65:3,6 73:10 84:10,22 85:10,11 88:19 89:18,25 91:2,6 91:12,20,25 93:18,19,21,24 97:1 99:23,24 100:7 102:22 102:22 103:3 104:12,13 109:11 111:19 111:23 112:7 112:10 114:10 116:9 122:6 139:20 140:3,4 150:15 152:4 154:12,16 155:1,6 156:7 156:19,25 157:3,17,22 160:10,12 165:13,17 169:15,16 171:2 176:16 177:24 178:1 179:19 180:9 180:21 183:4 183:17 184:10 188:13 190:9 192:16 207:21 237:16,20 238:1,9

g

g 38:8 158:14 158:22 159:8 159:22
gary 119:16 143:8 144:3
gears 160:22
general 15:14 87:1 208:15
generally 63:22 74:2 100:12 203:21 238:13
georgetown 2:9
gist 23:21
give 14:23 15:15 20:23 22:15 42:17 56:21 85:13 100:22 126:1 136:9,25 137:6 138:15 164:16 194:13 196:3 199:9 227:7,15 238:20
given 27:23 35:14 36:16 47:16 48:3 78:20 88:7 97:16 101:2 102:4 121:7 138:4,4 174:4

175:16 184:3 184:10 196:10
gives 159:21
giving 197:1
go 13:10 20:7 20:18 21:3 22:12 23:6 24:1 26:24 27:4 28:12 29:2 34:6 44:19 54:19 58:13 59:3 60:10 63:11 84:10 90:20 94:22 119:18 120:4 122:17 123:18 126:19 127:8,13 128:5 143:5 146:4 158:21 160:24 163:5 165:13 165:16 166:4 173:7 174:17 176:16 185:19 187:5 192:24 193:8,18 194:2 194:12 196:2 196:21 198:1 198:21 208:3,6 209:4,8 217:12 220:24 228:4 229:4 233:2 238:25
goal 10:19,22 34:3
goes 16:2 48:22 69:11 162:16
going 10:19 19:6,12 20:12 22:9 25:25 27:1 49:16 56:20,22 56:23,24 87:6 97:22 104:20 108:9 120:19 123:13 134:2 160:22 180:2 188:3 189:10 206:16 207:4 211:17 228:4 229:7 236:11 236:13 239:6
golkow 1:24
golkow.com 1:25
good 20:7 104:22 134:2 160:24 181:21 216:16
government 9:15 11:11 21:23 31:25 33:4,5 42:8,9 42:19 43:2,10 44:6,12,21 45:7 46:3,10,17 47:9 49:7,20 51:7 68:25 94:16,21 128:15 154:12 156:12 180:22
181:3 193:3 194:7 195:21 196:23 199:5 201:12 205:7 211:12,13 212:9 213:21 214:11 215:15 218:1,9 219:19 220:14 232:20 233:8 234:4
grand 2:17
granted 121:3
grants 149:5
graphs 205:2
great 132:8
greensboro 1:11 13:7,9,21 38:24
grew 185:16
gross 105:25 115:22 237:14 237:22 238:3,8
group 2:4,7 7:17 36:17 68:13,15 114:12 150:16 204:6
groups 92:10
grow 97:1 101:14,18,19 109:12 111:23 177:24 178:8
grown 104:12 112:1,7,10
grows 104:13 109:7
growth 85:3,8,9 85:11,14 86:8 86:12,19,21 88:5,21 89:16 89:23 90:7,10 90:11,12 94:24 95:3,5,25 96:6 101:13,17 102:2,20 104:17 122:4 122:10 140:2 141:16 151:20 159:5,20 165:20 166:6 166:11,19 167:21 170:21 171:24 177:16 188:14,22,24 189:19 190:6 225:1 229:12 237:25
guess 12:10 36:12 37:17 50:23,24 59:12 125:3 131:14 164:7 206:6 239:2
guessing 19:1

h

h 5:2 6:2 38:8,8
hairston 116:22 117:12,16,25

118:3 152:23 153:2 158:17 159:2,16 203:4
half 47:2 79:17 209:21
hallmark 33:20
hand 22:13 23:7,8 24:17,18 25:14 27:5 31:5 83:19 172:17 186:16,17 190:8 192:25 196:3 197:7 199:8
handed 161:13
hands 132:10
handwritten 201:4
hang 22:15
happen 14:12 53:20 65:9 101:14
happened 55:2 128:10,11 131:7
happening 206:18 208:1 210:19
happens 91:10 91:11 185:10 185:23
happy 121:18 159:11
hard 30:3
harmonize 40:19 41:11,16
harmonizing 41:17
hasan 108:1 110:1,8,19 111:1 113:4,22 121:22 125:2 131:18 143:20 143:22 144:2 144:20,23 146:23 150:2 169:10 179:17 187:12 191:15 191:21 192:8 192:15 202:10 202:24 222:18 224:2 225:17 227:1 228:2,10 232:11
hasan's 108:3 111:14 144:17 146:10 147:20 147:21 150:9 168:16 191:25 226:17,23 227:21
heading 165:17 166:6
heads 56:21
health 19:23 113:3 131:19 145:24 155:10 158:5 181:3 188:4,6 200:13 200:21
healthcare 18:15 154:1,7
hear 88:4
heeded 168:16
held 1:10
help 11:10 41:25 56:17 74:11 100:25 110:3 138:5 139:6,11,18 205:10
henry 114:11 150:16 169:18 171:3,19
hershberger 38:7,21
hershberger's 38:9
hierarchical 58:7
high 50:16 102:8
higher 103:14 179:2 229:18 230:4 232:7
hired 9:2,3 10:18 33:5 42:7 42:9,19 43:10 44:5,11,21 45:6 46:4,7,8 74:11 117:1 201:11
hires 183:23
hiring 8:10
history 124:4 127:5 136:11
hit 30:25 214:2
holding 28:6 153:6
home 35:1,2 185:24 211:5
homes 96:8
hope 20:2,4 207:11
hoping 164:7,8
hour 46:22 47:2 47:5,8 49:14,15 77:1,2 79:12 134:2,9 163:12 163:12 175:14 175:14 208:12 208:15 209:13 209:14,16,17 209:19,21,23 209:24,24,25 209:25
hours 47:15 49:11 76:3,15 76:18,18 77:20 78:7 79:1,22 81:8,15 134:8 136:18 137:24 138:19 163:14 163:16,21 164:4,9,10,11 164:14,18,18

164:19 165:1 175:17,21 176:1 188:7,8 208:12,19 209:4 213:9
house 74:3,6 75:14 77:12,14 78:18,23 83:14 96:18 175:19
household 60:1 60:13 73:24 74:1,2,10,15 75:1,4,12,15,24 77:6,12 79:21 80:8,23 81:5,7 82:8,24,25 83:17 84:1,4 133:25 134:8 134:12 135:11 135:21 136:8 136:11,17 137:5 138:13 138:19 163:6 164:23 165:2 175:6 176:6 187:5,6,20 188:12
houses 96:2,9 96:22
hum 119:23
human 160:9
hurt 11:11
hurting 132:9
hva 170:14
hypothetically 92:4 184:4

i

idea 54:8,12 99:25 187:23 215:19
ideas 216:8
identical 40:12
identification 21:8 23:10 24:20 25:16 27:7 28:24 58:11 120:2 122:19 161:11 172:20 186:20 193:23 194:16 196:6 197:9 198:4,24 199:11 228:16
identified 26:19 66:24 110:8 117:11,24 158:25 159:14 170:17 171:3 171:19 192:8
identify 23:12 27:9 58:14 120:9 193:9,10 194:18 196:8 198:6 231:9
identifying 140:1
ignored 185:24
immediately 27:23
implement 203:5
implication 133:8
implications 17:17,21
implied 114:17
implies 51:24 99:10 232:4
implying 99:12 142:4 167:3 177:5 189:24 237:15
important 11:2 11:5,16 90:23 91:6 92:17 124:3 128:13 156:10
importantly 143:19
impossible 135:3
improper 157:15
inaccurate 91:11
inaccurately 135:10
incentive 124:25
include 90:18 118:23 176:6 212:10,17 237:16
included 28:8
includes 79:3 221:2
including 19:11 58:16 96:13 135:20 187:14
income 14:16 14:19 63:18,21 215:24 237:9 238:5
incomplete 135:5 138:7
incorporated 206:16 207:20
incorrect 216:19
increase 88:7 88:18
increased 122:9
increment 148:4,19
increments 209:23,23
incurred 61:12
independent 57:25 162:23
independently 80:21
index 85:5,22 92:7,8,9,14,19

92:23 93:15,15 93:25 94:15 95:18,18 96:22 140:11,12 165:22
indexes 140:22
indicate 180:3 238:25
indicated 242:3 242:10
indicating 242:5
indispensable 90:2
individual 8:9 193:13
individual's 72:14 91:2
individuals 181:6
inferring 211:22
inflation 85:9 85:12 86:9,13 86:23,24 87:1,2 87:10,12,20,22 88:12,17 89:24 90:6,9 95:21 96:25 111:19 112:7 140:1,24 165:23 166:11 166:17 176:18 177:16,22 189:17 190:6
influence 197:3
information 49:6 59:17 62:24 67:21 82:2 109:19 111:9,17 125:18 126:25 128:3 130:3 156:11,22 169:17 189:11 192:13 203:23 207:20 210:8 210:12 212:18 212:25 213:10 215:2 224:24 225:16 227:18 227:18 234:21 235:5 237:24
initial 13:20 59:4 203:21
initially 143:17 212:22
initiative 73:9
injured 74:12 89:17 105:18
injury 16:19 43:10,21,25 44:2 45:24 46:1 50:7,10 53:4 55:7 74:9 76:19 94:10 100:9 216:3
inquire 163:23
inserting 114:7
instance 33:3 106:3 126:13 135:18 139:21 171:9
instances 39:20 44:17
instruct 48:24 210:11 211:17 215:5 218:15 236:12
instructed 210:20 211:24
instructing 203:24 215:9 220:20 221:14 233:12 234:19 234:25 235:12
instructions 19:2 241:4 242:12
instructor 38:23
insufficient 139:11
insurance 181:3
intelligence 39:10
intend 63:5 199:25 234:21
intended 71:23 72:15
intends 72:15
intent 72:6
interest 63:20 100:5 102:8 112:12
interested 240:11
interesting 13:25 14:1 206:4
interestingly 194:25
intermediate 75:23 135:7
internet 147:9
interpreting 184:23
interrupted 188:19
interrupting 113:18
introduce 7:13
introduced 112:13
introduction 122:25 173:1
introductory 59:4 60:10 161:21 173:1 187:1
invalid 134:22
investigate 78:4 163:21 164:3 188:10

investigated 175:17,24 187:22
investigation 79:9 82:7 164:11
invoice 49:7 208:7 211:10 211:11,13 212:5,9 213:2,4 213:7 214:6,10 214:11 232:18
invoices 5:24 27:12,15 28:1,5 34:16 208:4 213:16 214:6 216:12,16 221:16
involve 15:16
involved 44:11 45:6 68:5 104:18 127:24 202:7 226:6
involvement 8:24
involves 17:15 43:21 96:17 140:1 215:8
involving 16:11 182:11
issue 77:25 82:8 107:9 111:12 187:22
issues 15:17 37:5 97:20 136:20,21 175:24 182:13 183:21,25 184:5,21 185:2 185:5 188:6 199:19 201:3 206:9
item 85:15 98:4 100:23,24 101:2 145:18
items 5:22 87:11 97:5 99:17 114:13 118:23 141:17 150:18 199:15

j

january 26:13 98:11,14 99:11 141:24 161:23 166:22
jarring 132:10
jenna 2:12
jfb 2:14
job 11:8,10,11 11:13 33:13,16 38:9 77:4 79:17 81:1 105:18 131:10 182:18 182:21 183:24 184:2
jobs 183:24
joel 173:5
john 2:4,6 7:16
joint 132:9 145:23 187:15
jones 208:16
joseph 3:8 7:21 193:3
joseph.b.turner 3:10
judge 16:6,7 45:8,15 52:8 54:7 55:19 68:4
july 60:17 61:8 123:2 208:9 211:11 212:9 213:7
june 148:14
jury 16:7,8 45:9,15
justice 3:4,7 198:17
justification 174:1

k

k 148:15,20 149:1,4,8,10
kay 116:22
keep 47:14 50:22 104:20 208:24,24 209:9,10 212:11 217:2
keeps 222:8
kept 210:1
key 160:15
kind 9:20,21 79:9 81:20,23 128:5 135:15 155:3 184:1
kinds 34:1 100:4
knew 77:9 221:8 226:13 227:24
know 19:5,5,9 19:19 20:1,3 24:24 26:6 32:19 38:17 43:21 47:19,25 48:5 49:10 50:22 53:11,19 53:21 56:22 59:17 68:3 72:5 72:10 74:13 76:14 77:5,22 78:25 79:6 81:18 83:12,21 89:13 96:18 100:5 102:4,17 102:19 111:9 112:18 122:7 125:4,9 128:7 128:10,11 130:9 136:1 137:23,25 138:15 139:3 140:18 144:20

146:14 154:9
156:3 157:18
158:8,9 175:25
177:23 184:9
185:14 187:12
187:17 188:2,2
188:3 194:22
195:14 196:11
196:12 197:2
202:1 206:5,8
214:17,20
216:14 217:4
219:14 226:6
227:20 228:4
230:1 236:18
236:20
knowing 101:5
knowledge 46:9
52:19 53:21
130:7 154:5
227:14 235:18
235:19
known 56:7
konstantopou...
3:4 4:7 7:18,19
9:6 11:18 12:17
13:13 14:21
15:6 16:3,14,22
17:18 18:16
20:25 21:24
22:3 23:3 29:17
29:23 30:1,5,12
30:21 32:2,8,15
32:21 33:7,23
34:20 35:6,21
37:11,21 39:2
39:12,17 40:2
40:15 41:6
42:11,20 43:12
45:10 46:12,19
47:21 48:7,18
49:8,25 51:2,9
51:15 52:11,17
53:12 54:9
55:15,23 57:9
57:13 58:1,22
60:3,23 61:23
62:7,20 63:7
66:1,19 68:8
69:1,23 70:4,14
70:17,21,25
71:4,25 72:8,17
73:12 74:18
76:7 77:16
79:13,24 80:10
80:15,24 81:10
82:10 83:1,8
85:16 87:4,23
88:9 89:1,20
91:3,13 92:2,25
93:7 94:3 98:7
98:24 99:6
101:7 103:17
105:5 106:6,25
107:11,19
108:5,11,13
110:4,6 112:16
118:6 119:4,14
120:24 121:8
121:15 123:14
123:22 124:10
126:15,22
127:10 128:24
129:14,17
130:10,20
132:2,12,20
133:3,15
134:14,17
135:24 136:13
138:22 140:6
141:8 144:14
145:10 147:11
149:20 150:6
152:12 153:13
153:21 154:2
154:17 155:14
155:22 156:14
157:4 161:1,4
162:17,25
165:4 169:3
174:9 176:12
177:7 180:14
180:23 181:9
181:18 182:6
183:5,19
184:12 193:16
195:24 197:22
199:21 200:3
200:15 201:17
202:3,15
203:10,13,22
204:14 205:11
205:16,21
206:2,23 207:1
207:23 208:21
210:5,23 211:6
211:14,25
212:3,13,16
213:11,22
214:12,25
215:9 216:5,22
217:8,17
218:12,22
219:12 220:5
220:11,18
221:13 222:11
222:20 223:8
223:14 224:7
224:17 225:9
225:22 227:9
228:13,22
229:20 230:5
231:8,18
232:14 233:10
233:16,22
234:16,24
235:9,25 236:4
236:7,11 237:1
238:18

l

l 3:5,8 60:12
149:8
l's 8:8
labor 78:8
92:16 140:20

laid 12:11 89:13 151:9
lamacchia 2:8
landing 23:23
lane 15:4,18 182:15
lanes 15:9,13 182:15
language 40:11 40:12,19,21 41:11,20
larger 105:14 186:6 204:9
late 8:16 13:2 26:12 221:24
latino 68:14
laundry 74:4
law 2:4 7:17 36:19,25 37:10 52:5 53:10 109:7 112:3,4 112:15,15,19 112:22
lawn 74:5
lawsuit 109:2 110:18
lawyer 139:1
lawyers 19:1,5 19:12 205:8
lay 184:19
laying 183:8
layne 119:16
lcp 114:18 115:2 116:1,8 170:14 185:23 186:7
lead 133:8 136:23
leader 58:8
leading 126:10
leads 162:14 170:25
learned 219:4 232:10 234:22 235:5
leave 13:8 28:5
lectures 36:16
led 56:8
left 162:10,14 190:8 195:6
legal 2:7
lejeune 1:3 7:12 8:25 46:6 60:22 61:10 194:21 214:22 215:15,25 217:11 221:6 241:3
leslie 2:8
letter 5:8,10 24:25 25:9 108:21 193:3 194:5
letterhead 34:15 35:16
letters 149:8
level 41:3 92:22 93:5 148:15
liability 61:17 91:19 123:4
life 15:24 18:21 18:22,23 60:1 60:14 67:1,13 67:19,23,24,25 68:1,6,7,10,15 68:18,23 71:13 71:21 72:3,13 72:14,24 74:17 84:11,16,19 86:18,20,22 88:15 90:3 91:5 91:15 94:23 95:8,12 96:15 96:16 97:4,7,12 97:20 98:17,21 99:4,10,12,16 100:23 101:2,4 101:5 103:10 103:13,20,23 104:3,9 109:15 109:22 112:8 114:13,16,20 115:5,7,11,15 116:16,21,23 116:25 117:12 117:14,16,25 118:3 129:13 139:20,22 140:1 141:15 141:25 142:3,4 142:17,18,23 143:1 150:19 150:21,22,24 151:11,19 152:22,23 153:2,5,11 158:17 159:2 159:16 165:14 165:17,19 166:6,9,11,15 166:20,23 167:2,3,12,17 167:25 168:3 169:20,22 170:9,19,20,23 171:4,9,10,12 171:16,22 172:5 174:19 174:20 176:17 177:4,5,17 178:3,7,13,16 178:22 179:1 180:1,5 182:9 182:11,12,21 183:2,11,12,15 183:16,22 184:2,9,15,17 184:18 185:7 186:1,5 188:14 188:24 189:4 189:12,23,24 190:7,17,20,22 200:22 202:22 203:4 206:14 207:10

lighting 56:8
likelihood 134:6
likely 68:12
likewise 11:23
limb 128:5
limbs 131:11
limitations 131:24 165:3
limited 52:9,16 54:23
line 12:25 241:8 242:6
lines 10:16 129:20 164:12
lisa 1:13 7:10 240:2,19
list 6:4,5,7,8,10 26:15 29:10,15 29:22 31:3,10 31:13,20 44:8 44:14 111:10 143:13 242:9
listed 44:10 96:2 108:22 168:17 190:8 226:4
listing 242:5
lists 114:12 150:16
literally 158:2
litigation 1:3 7:12 8:25 46:7 194:21 198:18 207:6 214:22 217:11 221:7 232:22 233:21 234:7 241:3
little 14:14 50:18 109:5 216:7 225:12 225:13 230:2 230:12,15,18 230:22 232:6
live 68:12,17
living 109:9 111:20
llamacchia 2:10
llc 35:15
located 52:22 52:25
location 242:2
long 12:2,14 14:17 68:12,16 68:19 71:23 72:7,15 99:5
look 20:24 23:19 27:16 28:3 29:4 31:2 76:1 86:5,7 91:1 121:19 144:3 146:24 152:21 172:16 188:16 189:17 194:13 195:6 197:6 209:2 228:5 229:15 230:14 231:2,7 231:17
looked 95:16 122:2 143:23 143:23 197:13 227:23
looking 25:13 26:2 27:14 53:23 85:19 104:1 169:25 170:1 188:17 218:18 227:22 231:21
looks 115:7,10 195:11
lori 81:22 119:3
loss 79:21 80:23 82:8,9 133:9,9 133:23 134:11 136:8 137:5 175:5 187:6 238:8
lost 59:25,25 60:12,13 63:12 63:17,22,24 64:1,1,3,4,6,6 64:15,16,16,21 65:4,6,6,11,12 65:14,16,16,21 65:21,24 67:16 71:15 73:8,23 74:15 75:1,4,11 75:14,14,24 76:15,18 77:1 77:12,12 78:19 81:6,14,15 83:17,25 84:4 123:19,20 133:14,25 135:1,11,15 136:17 138:13 138:20 161:25 162:1,15,19 163:5,6,12 164:9,18,19,23 173:7,9,13 174:1,1,18 175:14,25 176:6 188:12
lot 19:1 96:12
low 23:23 91:11 91:16,24 100:14 103:14
lower 97:6,11 97:17,24 103:14 116:6 142:20,23,25 167:24 171:6 171:25 172:3,6 178:14,24,25 186:3,7 230:3,4 230:13,16,19 230:22
lpns 185:23
lumbar 147:1
lump 140:4
lunch 104:25

luxenberg 2:15

m

m 4:3
machine 147:8
made 30:4 55:1 77:11 107:15 124:13 128:18 130:2 133:2,18 154:11,13,24 175:22 185:14 192:14 219:9 222:12 226:24 230:21 240:6,9 241:6
magazine 36:20 36:23 37:1,2,10 52:6
magazines 24:16
mail 48:14 214:1,4
main 125:4 136:18
maintenance 74:4
major 126:5
majority 43:16 63:25 64:3
make 14:16 27:18 28:4,7 61:6 68:22 78:15 93:22,23 96:18 100:24 112:14 113:19 124:15 126:12 129:5,11,12,23 139:15 144:17 146:11,12 153:18 154:16 155:18 156:24 157:2,3 158:13 160:18 162:22 193:11,12,14 201:3 203:21 207:12 210:17 216:15 222:25 224:5 225:4 241:6
makes 129:4 139:3,9
making 72:20 91:1 94:10 121:14 124:17 125:20 129:9 136:7 139:21 160:9 173:13
males 68:14
man 126:4
manages 38:13 154:9
manifested 132:19
manner 39:11 58:19 157:16 240:13
marine 73:11
marked 21:8 22:13 23:9 24:19 25:15 27:6 28:24 58:10 120:1 122:18 161:10 172:19 186:19 193:23 194:15 196:5 197:8 198:3,23 199:10
material 9:5
materials 5:9 6:4,5,7,8,10 23:19 25:19,23 25:25 26:1,4,16 28:14,15,17,19 28:21 29:7,10 29:22 30:15,17 31:3,10,13,20 32:5 61:21 62:12 111:9,10 135:20 192:21 200:23 210:10 219:4
matter 1:10 19:10 31:4,14 31:21 53:3 68:5 70:3 110:5 117:1 120:8,14 121:13,24 161:17,19 172:23 227:16
matters 8:25 43:11
maximizing 65:2
maximum 65:1
mba 38:22
mcelhiney 6:10 6:15 28:22 31:20 58:21 113:6,20 119:16 120:21 122:14,24 123:1,5 124:3 124:16 130:17 131:3 132:6 133:1 134:5,7 135:19 138:14 141:23 142:2,8 143:5,8 147:17 147:24 148:9 148:14 149:9 149:16 151:4 152:1 153:19 158:12 229:25 230:9
mcelhiney's 130:8 132:18 133:8 141:25 144:4 145:24 150:14
mean 12:3 14:9 17:8,11 18:3 27:22 41:17 59:10 76:11,12 76:12,13 85:7 86:17 93:22,22

97:11 104:2 124:8,21 128:22 160:6 191:8
meaning 17:9 52:24 62:13 91:23 104:7 200:8
meanings 64:1
means 12:10 51:20 83:20 114:25 160:8 191:17
meant 63:15 73:25 118:14
measure 88:5 92:9
media 24:15 37:7
medical 15:17 15:17,19,21 17:25 18:10,10 18:13,15,18 69:10,11 84:10 85:10 86:20 87:3,3,13,13,21 89:25 91:12 106:10,21,23 107:7 112:25 113:14,21,23 114:10 116:9 117:7 124:13 125:15,24 127:4,14,15,20 127:23,25 128:4 129:2,3,7 130:25 131:13 131:22 132:8 139:20 140:2 143:19 144:23 144:23 145:15 149:15,17 150:12,15 152:4,4,18 157:9,22 159:13 165:13 165:17 169:1,8 169:9,12,15,16 171:2,2 176:16 179:14,19 180:9 181:7 182:13,19 183:4,25 184:11 187:19 188:13 191:2 191:10 192:12 192:16 206:8 206:12,22 207:9,10,21
medicare 113:2 114:14 115:4 115:24 116:17 117:8 118:2 150:17,24 151:13 152:3 153:2 155:20 156:5 157:1,11 157:18 158:7,9 158:15 179:22 179:25 180:3 180:13 182:5 185:21 186:1
medication 88:7,23 159:1 170:18
medications 20:6 84:20 91:8 95:11 115:5 151:10 159:15 167:17 169:19 171:20 178:6
meeting 202:5 202:6,9
meetings 36:16 204:6,6
melanie 3:4 7:18
melanie.kons... 3:6
melissa 38:7,9 38:21 47:11,14 48:3 49:4 56:10 56:18 57:22
memorize 26:20
memorized 26:9
memory 219:2 219:5
men 78:11 79:3
mental 20:8
mention 60:7 131:16 143:15 228:9
mentioned 38:2 55:3 101:11 120:12 136:21 163:19 237:10 242:12
mentioning 96:7
methodologies 144:25 216:9
methodology 69:21 70:2 92:20 100:19 111:3,17 121:13 123:12 134:4 141:6 151:3 168:11 168:25 173:15 175:7,8 176:2 179:6 187:6,7 189:5 191:5,11 238:14
mi 2:18
michael 139:22 171:11
microsoft 202:6 211:2,4
mid 13:2
middle 53:2 55:4 147:22
midpoint 67:11

military 154:6 181:3
miller 114:11 114:15 116:15 117:11,24 150:16,20 151:9 152:17 153:1 155:2 158:25 159:14 169:18 170:17 171:3,19 184:20,24 185:24 202:23
miller's 106:13 106:17,20 107:5,9 179:20 203:5
mind 10:3,19 90:19 130:12 155:25 205:8
mine 35:17 207:17
minimum 49:17,19
minute 27:2 57:10 209:22
minutes 47:15 161:6,6 209:17 209:19 217:14
miscommuni... 54:2
missing 136:23
misstated 74:25
misunderstood 54:1
mitigation 105:19 237:9 238:5
model 37:3 79:12,16 134:9
modification 5:12,14,20 195:15,17,20 196:11,13,16 197:13 199:4
modifications 114:18
modified 114:19 115:2 150:23 170:14 171:16
modifying 150:22
moment 22:10 29:3 80:20 96:8 137:7 146:9 157:14 170:6 174:19 185:8 192:25 228:25
money 91:24 99:16 134:13 134:20 180:11 180:12,22 182:5
month 32:19 101:5 109:1 110:17,24 148:18,22 220:4
monthly 24:15 108:19 122:9 148:15 149:6 225:3
months 88:24 89:7,8,9 125:9 148:22
mood 144:6 145:6
motivation 73:10
move 14:3 25:11 73:23 105:2 119:15 120:20 122:13 133:25 139:20 160:23 170:12 170:24 171:8 172:14 188:13 190:25
moving 19:24 122:5 141:22 168:6 170:6 175:5
mowing 74:5
msi 56:6
multiplied 229:12
multiply 76:20
multiplying 102:15

n

n 2:2 3:2 4:3,3 4:3 5:2 6:2
name 8:6 38:6 45:20,22,23 54:17 56:3,5 114:8 233:5 234:5 240:15 242:15
national 36:16
naturally 175:4
nature 55:13 77:6
nc 2:13
near 216:25
necessarily 26:6 131:5 209:16
necessary 21:22 56:16 99:18
necessity 160:13
need 20:12 26:5 28:12 32:6,13 34:6 38:14 49:6 49:10 59:3 84:22 89:18 97:22 104:25 112:21 160:25 161:2 204:12 217:12,13 218:10 223:20 226:16 228:1

236:14,15 239:6
needed 97:22 99:16 207:14 226:19
needs 91:12 92:1 180:19 181:25 188:15 188:23
neither 16:7 77:8 129:19 240:10
net 105:13 106:1 116:8 184:22 186:5
netting 105:17 237:13
network 151:15 158:1
neuropathy 132:9
neurosurgeon 182:2,4,4,20
neutral 198:19
never 13:4 50:2 80:1,2,3
new 62:24 96:2 96:8,22 224:24 231:24 232:3
newspapers 24:16
nine 89:7
nominal 101:23 102:12
non 49:24 144:4 145:24 146:1 187:20 192:8,9 222:24 223:17 226:20
nonjury 45:8
norm 94:9
normal 94:20
north 1:1,11,14 13:7 42:25 55:5
nose 183:25
notary 1:13,14 240:2,20 242:8 242:19,22
note 72:22 94:12 97:12 112:25 115:24 122:25 123:19 131:9 152:22 161:21 162:1 173:2 176:2 187:2 189:3
noted 103:19 111:21 113:8 131:17 146:7 187:14 222:13 222:14
notes 34:9 201:4,4
notice 5:4 20:20 21:15 218:3,10 219:24
noting 47:15 194:5
november 187:3
null 240:14
number 5:16 5:18 20:11,19 20:20 21:12 22:14,18 23:6 23:12 24:18 25:12 26:25 27:1,4,9,14 28:13,15,17 29:4 31:2,9,12 31:19 36:22 42:23 49:11 58:13 63:12,12 67:10 76:3,15 78:7,11 79:1,10 79:22 81:8,16 82:4,5 84:8 90:11 95:20 100:24 101:5 102:17 103:14 103:15 105:14 112:10 120:7 122:3,15 135:3 135:8,8,11 136:23,24 137:1,6,20,20 137:24 138:19 161:14,16 164:4,6,8,9,11 164:18 167:23 169:14 171:8 172:16,22 175:25 178:12 186:6,17,23 187:13 188:6,7 193:6,12 198:13 208:3 216:15,16 217:4,5 221:1 222:4 226:18 228:2,6,7 229:11,14,16 229:18 231:12 231:23 237:7 242:5,6
numbered 27:19
numbering 27:24
numbers 26:7,9 26:19,20 67:20 87:17 95:19 103:16 159:22 169:10 172:2 177:24 185:12 223:4,5,11,12 224:13 225:7,8 225:19,25 226:6,9,10 227:4,15,22 228:21 232:12
numerous 173:23
nursing 185:22
nw 3:5,8

o

o 4:3
oath 59:14 137:18 240:5
object 9:7 129:14 203:10 210:23 236:12
objection 9:6 9:17 10:5,21 11:18 12:6,17 13:13 14:21 15:6 16:3,14,22 17:18 18:16 21:24 22:3,4 23:3 29:17,23 30:1,5,12,21 32:8,15,21 33:7 33:23 34:20 35:6,21 37:11 37:21 39:2,12 39:17 40:2,3,15 41:6 42:11,20 43:12 45:10 46:12,19 47:21 48:7,18 49:8,25 51:2,9,15 52:11 52:17 53:12 54:9 55:15,23 56:13 58:1,22 60:3,23 61:23 62:7,20 63:7 66:1,19 68:8 69:1,23 70:4,14 71:25 72:8,17 73:12 74:18 76:7 77:16 79:13,24 80:10 80:13,15,24 81:10 82:10 83:1,8 85:16 87:4,23 88:9 89:1,20 91:3,13 92:2,25 93:7 94:3 98:7,24 99:6 101:7 103:17 105:5 106:6,25 107:11,19 108:5 110:4,7 112:16 118:6 119:4 120:24 121:8,15 123:14,22 124:10 126:15 126:22 127:10 128:24 129:17 130:10,20 132:2,12,20 133:3,15 134:14,18 135:24 136:13 138:22 140:6 141:8 144:14 145:10 147:11 149:20 150:6 152:12 153:13 153:21 154:2 154:17 155:14 155:22 156:14 157:4 162:17 162:25 165:4 169:3 174:9 176:12 177:7 180:14,23 181:9,18 182:6 183:5,19 184:12 195:24 197:22 199:21 200:3,15 201:17 202:15 203:13,22 204:14,15 205:11,12,12 205:21 206:2 206:23 207:23 208:21 210:6 211:6,14 212:13 213:11 213:22 214:12 214:25 216:5 216:22 217:8 218:12,13,22 219:12 220:5 220:11,18 221:13 222:20 223:8,14 224:7 224:17 225:9 225:22 227:9 228:13,22 229:20 230:5 232:14 233:10 233:16,22 234:16,24 235:9
objections 205:22 221:17 222:13 240:6,9
objective 10:23 11:2,15 33:21 34:2 63:23 65:5
observe 156:3
obtain 167:23 172:2
obtained 62:6 76:24 85:3 152:2 165:20 225:17
obviously 222:12 230:21
occasionally 38:13
occasions 42:15
occurred 50:3 55:4
offeror 5:23
office 34:25 211:5
officer 162:11
offices 42:24
official 128:2 153:25
offset 105:3,11 105:20,22 109:1,20 113:23 143:5 149:13,17

152:7 170:7
179:6 184:20
186:2 192:1,12
223:4,12,20
224:14 229:18
230:22 231:22
232:13 238:14
offsets 105:4
106:4,10,15,17
106:19,21,22
106:24 107:7,9
107:16,23
108:3 109:24
111:4 112:25
113:15 114:10
115:3,8,13,14
115:21 116:17
116:18,20
117:7,11,23
121:12,24
143:8 149:15
150:12,15
151:4,8,23
152:1,4,8,10,14
152:16 158:25
159:14,17
168:6,13,22,23
169:1,9,12,15
169:16,17,23
170:2,2,17
171:2,2,19
172:4 179:4,12
179:14,19
180:1 186:5
190:25 191:2,6
191:9,19
192:15 203:5
206:10,11
222:16,19
223:13 224:6
224:10,23
227:8 228:21
232:13 237:5,8
237:12,15,17
237:20 238:1,6
238:9
oh 21:25 49:16
86:16 98:10
113:6 127:18
195:8 198:20
212:15 234:3
okay 10:2 19:7
19:8,13,21
20:10,18,24
22:9 25:6,11
27:21 28:7,8,10
29:9 34:18 38:2
43:7 57:3,4,4,5
57:8,13,21,24
60:9 76:11
78:14 79:19
82:22 88:21
90:21,22
104:19,22,23
113:16 114:6,9
119:13,24
120:6,19
124:20 134:5
137:24 149:24
161:3 166:4
168:11 180:18
181:15 183:15
186:16,22
193:1,5,17
195:10,13,20
196:2,18,25
209:7 217:17
217:18 219:11
230:1 231:22
239:5
okeechobee 2:5
omitted 124:3,6
omp 196:19
once 10:2 14:9
14:13 45:13
52:10 58:5,6
one's 11:7
ones 26:19
111:8 188:9
192:6,7,7 230:8
ongoing 89:18
onset 128:1
opbe 196:19
open 221:22
236:14
operationalized
116:15
opine 15:19
65:24
opined 146:23
168:17 173:8
173:18
opines 162:1,4
opinion 55:19
63:1 66:15,25
67:3 69:5,16
75:5,12 76:2
81:5,13,13,16
90:2 106:21
107:5,9 109:23
110:2,16
111:14 116:14
121:22 125:1
126:2 127:14
128:8 129:2
131:18 133:13
133:21,22
134:25 135:2
135:14 137:4,8
137:8,22
144:17 145:1,8
145:15,18,20
146:10 147:17
147:20,21
150:9 162:16
162:20 173:24
174:12,14
175:3 176:9,9
180:16,18,21
180:25 181:13
181:22 182:10
191:15,21,25
222:23 223:21
226:17,19,23
opinions 15:17
18:9 26:17 32:7

40:12 41:21 62:13,13,16 63:5 69:11,12 73:1 107:17 108:3 110:3,3 118:15 125:15 132:25 150:10 151:25 159:24 159:25 160:5 182:2 183:13 191:5 200:8 206:1 223:3 235:3,7 238:14
oral 242:2
orally 48:15
order 5:16,18 5:22 27:2,20,24 32:6 54:6 141:3 144:21 146:24 165:25 197:1,2 197:3,5 199:14 203:4 204:12 205:9 239:2,4,7
ordered 232:19 232:23 233:1,3 233:8 234:2,15
orders 235:14 239:1
organization 154:15
original 116:8 196:12 197:14 240:13 242:9 242:13
originated 200:24
otc 104:6
outcome 240:11
outlined 115:22 223:23
outlines 207:3
outside 53:20 174:12 181:1
overall 87:12 87:22 148:20 172:12 235:18
overlaying 116:15
overview 42:18
own 14:4 39:21 46:25 106:18 110:3 125:20 211:5
owner 34:12
owners 43:21

p

p 2:2,2 3:2,2
p's 8:8
p.m. 239:10
packet 28:6
packets 20:15
page 4:4 5:3 6:3 23:20,21,22,23 23:24 24:2,4,7 24:11 63:11 83:13 84:11 94:22 97:3 108:11,12,14 115:23 123:19 141:12,22 142:14,15 145:21 147:22 148:13 158:12 158:13,21 159:23 165:15 166:5 170:13 171:8,15 172:11,13 177:13 185:19 186:10 188:16 188:22 190:2 190:14 191:23 198:2 199:3,13 208:7 214:7 241:8 242:3,5
pages 23:14
paid 37:9 46:18 76:21 113:2 118:2 121:20 155:10 180:11 180:12,22 184:16
pain 126:5 127:6 131:10 132:7
pair 114:18
palm 2:5
paragraph 59:16 70:7 71:8 71:17 109:7,18 165:16 169:11 179:16 188:21
parkinson's 16:11 18:4,8 30:20 39:9,24 41:4 56:12 60:17 61:8 67:7 69:18 76:4 77:7 77:15 80:9 82:25 90:25 106:16 111:5 123:10 124:9 124:16,18 130:17,19 131:15,16,23 131:25 132:19 135:23 145:9 148:10 161:22 168:9 173:4 174:21 176:10 180:8 187:2 214:18,24 215:16,21 217:6 224:1
parks 163:15
parlance 105:10
part 25:8 26:17 39:11 46:8 56:11 65:15 74:9 90:3 92:17 94:1 103:23 105:12 132:24 153:17 156:1,9 158:2,2 175:12

199:19 200:24 201:10,15 202:20 222:17 234:23 235:18
partial 77:3 163:11 175:9 176:4
participated 202:5
participating 1:14 2:10,14,19 3:12
particular 28:6 33:14 46:2,5 60:9 72:23 85:14 183:18 187:18 203:20 205:6
partner 66:10
parts 193:13
party 89:18 240:11
pass 21:1 47:8
past 54:3 64:15 64:18 83:20 85:12 86:25 113:14,22 149:1,17 150:12 162:16 169:8 177:23 179:14 192:15 237:16 238:16
paste 41:12 113:9
pasting 41:3
path 238:1
patient 91:12 91:23 97:22 180:8 183:18
patients 155:12
pausing 43:14
pay 37:3 46:10 99:17 118:5 183:3,9 184:21 200:14
payment 91:25 148:15 184:10 186:1 230:18
payments 114:13 149:7 150:17 154:12 154:16 156:25 157:3 227:3
payors 184:22
pc 2:15
pd 61:8 67:6,6 67:7 76:4 77:20 77:22,25 78:1 81:21 83:16,22 84:22 108:24 108:25 110:12 110:15,23 111:1,15 122:1 123:2 124:5 125:1,13,16 128:19,22 130:9 131:20 133:2,8,11 143:18,22 144:4,10 145:24 146:1 147:18,25 148:3,17,19 149:11 163:9 163:16,22 165:3 168:18 168:19,21 174:2 175:19 187:14,20 188:5 191:17 192:8,9,11 222:24 223:17 223:22 226:3 226:20 228:17
peculiarly 216:1
peer 36:1,5
pending 70:15
pennsylvania 1:13,13
people 20:5 43:20 68:5 74:5 77:23 181:20 184:5
perceive 33:11
percent 88:24 93:16,18,20 95:3,6,22 96:25 101:12,16,18 101:22 102:2,3 102:6,11,14 104:13,13 108:20 109:11 109:12 111:22 122:10 125:5 128:17 142:8 144:7 145:7 146:1,25 147:1 147:18,24 152:11 160:11 160:12 167:7 178:11 190:10 191:16 192:10 192:11
percentage 50:12 88:22 143:16 144:7
percentages 145:22 146:5 146:14,15,18 147:2,5
perform 80:8 82:24 188:8
performed 74:12 77:6,14 163:22 165:2 188:7 195:22
performing 135:21
period 14:17 44:20 75:4 85:24,25 87:1 88:8,12 127:7 140:25 162:20 165:24 176:18 176:22,23

177:1
perlmutter 173:5
person 64:24 65:2 68:12,13 74:12 82:4 105:18 121:7 129:3 137:10 138:15 181:12 181:16 203:20 204:5 216:19 242:10
personal 43:10 43:20,25 44:2 50:7,10 53:4 55:7 74:9 94:10 100:9 216:3 232:21 233:20 234:6 237:11 237:12 238:6
personally 236:20 242:5
perspective 29:25 63:16 73:24 92:24 93:6 123:11 138:18 147:23 160:6 186:2 216:2
persuasive 17:12
pertain 154:12
pertaining 25:1 108:3 169:2 222:19
pertains 110:9 136:11 232:12
peterson 6:6,12 6:13 28:16 31:4 56:25 58:16 60:16,20 61:7 62:19 65:13 69:17 71:9 76:3 77:6,14 78:17 80:7,8 81:17,19 81:22,23 82:23 84:21 98:5 99:5 108:16 111:16 113:1,19 117:1 118:24 119:3 120:8,14,20 121:13,21,25 134:1 141:20 142:18 151:7 180:19 181:25 226:14 230:4 230:10 231:3,3 231:14,15,23 232:13
peterson's 67:1 67:6 71:22 72:6 78:12 79:3,7 98:21 108:23 109:20 110:20 113:14,22 114:7,10 116:9 227:25
ph 1:24
phd 1:6 4:5 6:12,13,15,16 6:18,19 7:24 12:9 17:8 240:4 241:2
phone 209:17
phonetically 45:23
phrase 17:7 63:17 74:1 160:4,16
physically 213:20 214:1,2
physician 53:25 85:20 126:6,7 126:25 127:2 166:16,18
physician's 126:19
pick 100:23
picking 95:1
picture 89:17 178:1
piece 125:18
place 45:18 54:15 133:10 156:4 189:16 240:4
placed 80:23 120:6 206:21
plaintiff 50:13 53:6,8 59:6 91:19 111:11 111:11,12 117:1 133:19 152:22 189:6 229:22
plaintiff's 5:4 10:15 33:17 45:22 50:6 59:23 81:2 82:16,16,18 93:11 116:21 117:12 133:20 134:22 137:14 171:9,10
plaintiffs 2:3 7:17 11:12 41:24 50:16,19 163:9,20 194:7 223:22
plan 60:2,14 74:17 84:11,16 84:19 86:20,22 90:4 91:6,16 94:23 95:8 96:17 97:4,7,12 97:20 99:17,17 100:23 101:2,4 103:10,14,20 103:23 104:3,9 109:16 112:8 114:14,17 115:6,7,11,15 116:16,22,23 117:12,14,16 117:25 118:3

139:21,22 140:1 141:15 142:17,19,23 143:1 150:19 150:22,23,24 151:12,19 152:22,24 153:2,5 158:17 159:2,16 165:14,18,19 166:6,10,12,15 166:20 167:12 167:18 168:1,3 169:21,22 170:19,20,23 171:4,9,10,13 171:16,22 172:5 176:17 177:17 178:3,7 178:13,17,23 179:1 180:1,5 182:21 183:2 183:12,17 184:3,9,9,15,18 186:1,5 188:14 188:24 190:7 190:17,20,22
planner 72:24 116:25 129:13 183:16,22 189:12 200:22
planner's 183:12
planners 18:22 72:13 182:10 182:12 202:22 206:14 207:11
planning 18:21 95:12
plans 15:24 18:23 86:18 88:16 96:15 98:18 114:20 152:19 153:10 153:20 182:11 184:19 185:7 189:4 203:4
please 8:6 23:13 27:10 28:1 29:5 34:6 58:14 64:11 70:10,20 75:9 93:4 117:5,20 120:10 141:13 149:24 165:15 167:14 168:14 172:17 173:15 175:7 176:17 177:12 191:5 192:3 194:13 194:18 196:8 198:6 208:4 227:12 231:7 231:19
podcast 50:25
point 63:1 74:16 84:6 95:7 104:24 131:12 131:15 138:14 149:11 199:25 200:5 207:19 225:5
policy 154:22
pop 237:7
popular 24:14 37:7
portion 123:1
position 66:22 82:5 165:7 222:1
positions 173:23
possibilities 157:17
possible 41:9 84:3,6 92:11 100:11 129:6 156:19 183:17 206:6,11
possibly 197:12 197:14
potential 212:4
potentially 10:14 73:20 78:2 137:13
powerpoint 205:1,20
powerpoints 205:2
practical 85:14
practice 65:8
pre 67:6,7 77:15 80:9 131:23
preceded 53:10
precise 26:2 89:4
precisely 72:21 73:3 125:18
predictor 65:7 65:12
prejudiced 221:25
preliminary 59:5,10,11,13 59:15,22
premarked 20:11
prepare 30:9 30:11 200:1 204:12
prepared 22:21 84:16 213:17
prepares 213:17
prepping 46:24
prescription 95:4,6,14,17 104:7 177:19 177:21
presence 242:8
present 3:12 34:9 65:3 67:16 71:15 75:1,9,11

75:14 99:19,21 99:22 101:6,21 101:25 102:13 102:21 103:6,9 104:11,15 109:15,20 112:12 116:7 117:16 122:11 140:5 142:16 149:12 151:23 152:3,8,23 158:14,24 159:25 167:11 168:2 169:23 170:7,13,22 171:1,12,15,25 172:1,4 178:2 178:10,22,25 182:14 185:17 190:19,21 212:22 238:4,7

presentation 205:20

presentations 205:1

presented 75:19 78:7 79:1 79:8 115:12

presents 74:14 134:8 164:4

presume 195:3 198:8 206:15

pretty 15:14 29:6 216:15

prevent 19:24

previous 26:5 179:15 197:13

previously 33:13 42:9 62:5 74:12 131:17 213:14

price 85:5,22 92:7,8,14,19,23 93:15,25 94:14 96:13,22 140:10,12,20 140:21,22 165:22

prices 92:9,10

primarily 36:8 146:15

primary 14:16 14:18 16:18,25 35:11

prime 153:10

principal 58:9

principle 11:7 105:24 135:8 156:17

principles 17:16

printed 23:14 242:15

prior 13:2,6 44:9 77:6 125:6 130:8,18

private 49:18 181:12,16

privilege 9:8 10:7 222:9

privileged 22:5 22:6 30:6 32:22 40:4 48:20 203:23 204:15 205:13 210:7,8 211:15 218:14 220:19,20 221:15 233:11 234:17 235:10 235:23 236:8

probably 22:11 45:4 78:18 230:8

problem 19:16

problems 184:3 188:4

procedure 170:18 180:9 180:11,20 182:1 184:10 241:5

procedures 18:10 167:17 169:20 171:21

process 198:10 198:11

processing 41:10

produce 66:11 219:18,24 220:9,10,17,17 221:12

produced 13:3 92:16 94:17 171:11 193:7 194:6 200:10 200:23 201:5,8 221:17

produces 140:21

producing 29:8

production 5:4 217:25 218:2,4 219:3,7,9 220:25 221:25

products 206:22

professional 1:13 15:3 34:8 127:20,25 128:4 129:7 131:13 143:19 144:24 181:13 240:2,20

professionals 127:14,23 131:1

program 154:1 157:8,20 158:3

programs 156:12

progress 14:5

progressed 14:7

project 9:22 27:12 47:16

93:17 101:3 209:15 225:1 229:11,15 237:25
projected 93:20 111:18 114:12 115:24 116:1 140:3 150:17 158:15,17 180:4 230:19 232:7
projecting 229:9
projection 64:24 67:12 160:12 225:5
projections 79:21 84:15 93:23 94:10 98:5,14,20 118:2,4 141:23 154:11,20,24 156:21 160:10 166:21 225:6
prop 138:4
properly 182:22
proportion 50:17
proprietor 34:16
proprietorship 35:13
protected 201:20
provide 10:12 18:8 21:1 31:16 38:12 47:24 48:17 59:5 77:20 91:1 138:6 183:17 206:22 212:24 221:1 223:3,11 225:18 226:9
provided 21:23 26:11 29:11 40:18,21,23 44:8,14 62:3 76:4 85:2 91:18 96:10 113:2 118:15 139:17 163:22,23 164:15 165:19 169:17 189:11 221:17,19,23 226:2,11 241:5
providers 18:15 155:11
provides 93:15 93:18 96:12 118:12 166:9 208:12
providing 9:10 21:22 31:24 59:21 164:15 164:16 215:14
provision 242:4
provisions 152:18
public 1:13,14 240:2,20 242:9
publication 36:9,19
published 78:8 225:4
pull 34:7 231:10
purchase 5:16 5:18
purpose 29:21 33:11 61:17 235:15
purposes 17:6 65:11 123:4 145:4,8
pursuant 48:20 219:19 221:18
pursued 9:22
put 34:17 49:6 64:2 103:9 177:25 189:8 189:13 200:21 240:5
puts 164:6 221:25

q

qualifications 53:15
qualified 78:20 144:10 173:22
quality 92:12 182:19
quantification 81:14
quantified 133:19 185:12
quantify 92:22 93:4,10 111:4 136:16
quantitative 135:15
quarter 209:18 209:23,24,25
question 9:11 9:13 10:6,10 15:15 19:18,21 22:7 30:6 32:24 49:1,2 50:20 57:21 64:12 70:15,17,19,23 70:24 71:2,5 90:17 93:4 109:6 126:11 129:6 164:2 181:15 188:4,5 201:25 204:2 204:18 206:5 210:16,25 215:10,12,13 218:10,14 219:23 233:13
questions 19:17 20:12 78:3 83:23 120:19

182:9 222:5 236:24 237:3 238:19,21
quick 57:10
quickly 30:25 194:2
quit 131:10
quite 168:10 237:6
quoted 132:15 175:1

r

r 2:2 3:2 38:8,8 38:8 56:6 240:1
rachael 3:13 7:9
racine 2:12
radar 14:10
range 67:11 97:15 98:2
ranges 97:5,13 103:21,23 142:19
rarely 78:23,23
rate 5:18 46:21 47:8 85:8,9,10 85:11,14 86:8,9 86:12,13,19,21 86:23,24 87:1,2 87:12,20,22 88:5,12,17,17 88:22 89:16 90:7,9,10,11 95:3,5,21 96:1 96:6,25 97:2 100:9,13,13,15 100:17,19 101:3,12,13,13 101:17,17 102:2,3,8,10,20 102:21 103:4 104:12 109:12 109:14 111:19 111:24 112:2,6 112:7,12 121:21 122:4 122:10,12 140:4 142:7,11 166:17,19 167:7 177:22 178:10 188:14 188:22,25 189:18,19 190:10 198:8 198:13 225:2 237:25
rates 46:18 85:3,12 87:10 89:24,24 90:12 94:24 100:4,5,6 104:17,18 122:9 140:2,24 141:16 151:20 151:20 159:5,5 159:20,20 165:20,23 166:6,11,11 167:21,21 170:21,22 171:24,24 176:18 177:16 177:16 178:9 190:6,7
rather 9:24 33:21 63:19 79:4 92:15 129:22 134:8 177:21
rating 108:20 143:25 145:7 145:23,24 146:1,6,13,21 147:14 191:24 192:5,10 222:25 223:18
ratings 110:12 110:21 150:11 152:15 226:21 227:2 228:15
read 7:4 25:4 61:5 70:10,20 71:2,7,18 81:25 109:3,5 111:21 112:18 113:12 114:1 116:3 125:20,22 127:15,17 148:24 151:1 166:2 186:8 202:21 203:1,3 233:15,19 234:8,11 236:1 236:4,10 242:2 242:13
readers 41:20
readership 37:2
reading 68:3 74:21 235:2,24 242:7
reads 71:10
ready 120:4
real 77:25
realistic 91:1
reality 156:3
realize 18:25
really 9:20 69:15 75:24 112:9 115:8 125:7 137:15 138:8 144:22 146:9 150:2 154:5 157:14 179:16 195:16 206:9 222:1
reason 19:10 65:20 74:7 78:3 82:18 87:9 98:13 103:15 126:6 181:7 189:17,18 225:19 233:1,7 234:15 241:8
reasonable 10:24 11:8,14 11:15 17:4,7,9

17:11 64:23,23 67:10 76:20 93:23 100:11 136:4 156:18 159:25 160:5 160:16,20,21 165:20 177:1 237:25
reasonably 182:23
reasons 133:10 174:3 200:19
rebut 10:14 33:16 73:20 82:15 137:16 164:20 176:4
rebuttal 59:6 59:22 67:12,12
rebutting 73:17 93:11 137:13
recall 8:12,16 12:19 36:11 45:12,17 69:4,5 69:8,13,15,16 125:18,24 132:4,22 146:16 148:12 150:10 202:8 202:17 218:20 218:24 220:7 224:19,22 225:12,24 226:7,8 233:24
receipt 242:12
receive 26:4 148:21 218:3 219:24
received 26:1 26:10 32:14 61:20 63:19 108:17 110:25 113:1 122:1,7 148:14 149:9 191:19 217:25 223:22
receiving 111:12,18 149:10,11 168:21 226:14
recent 112:1 219:2
recently 184:15 218:20 219:18 232:19
recess 57:16 119:20 161:8 217:20
recognize 25:22 26:6,8,22 29:13
recollection 26:11 44:13 227:14 230:13 230:15 231:25
record 7:7,14 9:7 20:14,17 21:4,4,5,6,9 31:23 57:15,17 70:11,20 71:3 77:19 119:18 119:19,21 132:17 135:20 161:7,9 193:19 193:20,21,24 209:20 210:6 217:13,19,21 221:21 222:14 231:9 235:14 240:9
recorded 1:12 240:7
records 127:4 127:16 194:3 221:2,3,3 222:5 230:6
reduce 99:18 101:6,21
reduced 185:16
reductions 238:5
refer 59:2 60:11 71:17 115:2 237:11
refereed 37:7
reference 112:14 158:13 192:21
references 118:17 186:11
referrals 14:11
referred 92:6 157:24 213:2
referring 62:4 90:20 112:15 116:22 140:18 177:12 228:11
refers 63:18,20 64:25 74:2
reflect 177:24 209:13
reflected 142:20
reflecting 103:22 221:4
reflects 178:15
reformatted 240:13
regard 137:1 137:14 160:19 174:14
regarding 8:10 18:9 24:25 28:14,16,18,20 28:22 29:8 31:20 54:7 57:25 58:16 59:7 62:18 67:1 76:3 87:20 91:12 106:18 106:21 109:24 118:3 120:20 121:12 140:10 141:20,23 143:8 149:15 150:10 151:25 160:23 165:14

168:12 169:1 177:15 179:5 184:21 191:6 210:9,13 212:18 218:1 222:16,23 224:13,23 226:3 228:21
regardless 174:21 189:6
register 209:18
registered 1:13 240:2,20
regular 23:2 87:21 148:4
regularly 51:1
rejected 17:13
related 108:24 110:12,23 111:14 117:22 118:21 121:23 125:1 128:19 131:25 143:21 144:4 145:24 148:3,16,19 168:19 192:8 223:17 228:17 228:17 240:11
relates 106:15 109:23 124:16
relating 57:21 106:17 191:7 224:5
relation 226:3
relationship 39:6 58:7
relatively 146:18
relevant 73:15 74:8 95:8 110:18 111:7,7 111:8,11,12 121:24 136:22 155:25 179:10 181:22 206:6,7 206:9,12 207:5 207:6 230:9
relevantly 77:21
reliability 92:23 93:5
reliable 177:25
relied 92:18 110:1 118:20 143:19,22 144:16,20 145:20 150:9 163:2 222:18 222:22,23 223:12 225:19
rely 16:12 67:4 93:14,25 94:13 127:1 144:2 145:17 174:4 183:12 223:5 228:7,9
relying 106:17 106:20 108:2 125:14 150:4 226:25 227:1 227:17
remaining 99:10 142:3 167:2 177:4 189:23
remains 221:22
remember 36:9 45:20,22 54:17 56:3 87:7,16 220:2 228:3
remind 19:2
reminds 78:17
render 40:12 44:24 45:3
rendered 37:18 39:23,25 54:6 235:7
rendering 61:22 62:17
renovations 94:14 95:25
repairs 74:4
repeating 130:12
rephrase 9:13 19:20 215:12 215:13
replace 74:11
replacing 76:22
replicated 71:12,19
report 6:11,13 6:14,16,17,19 29:8 40:1,22,24 41:4,13,14 44:25 45:3 56:25 58:15,17 58:18,19,20 59:2,5,7,21,21 59:24 60:6,9,12 61:17,22 62:14 62:18 63:6 66:6 66:9,12,15 70:8 70:12,22 71:7,9 73:17 75:18,19 76:1 78:6 81:9 82:17 83:13 84:7,12,24 86:1 86:1,2 92:6 93:11 94:22 97:4 103:9 104:4 106:13 114:11,15 118:15,22 119:10,16 120:7,11,13,17 120:21 122:14 122:21 123:1,5 131:9,22 132:7 134:1 137:14 141:20 142:4 143:15,20 144:1 149:16

150:5,15,20 153:1 157:24 158:12 159:24 160:23 161:17 161:18 162:8 163:2 164:24 167:2 168:8,16 169:10,13 172:13,15,23 174:4,24 177:5 177:13 179:20 184:24 185:10 185:11,12,20 186:14,14 187:15 189:16 189:24 190:3 190:14,15 200:2,9,11 202:24 203:5,9 203:12,16 222:17 223:6 224:11,25 225:3,17,20,25 228:5 229:7,13 231:3,4,11,21 231:24 232:2 232:11

reported 124:24

reporter 1:13 7:10,15 19:6 21:3 57:2,3 193:18 238:24 239:5 240:2,20 242:10

reporting 59:23 150:2 179:16 204:5

reports 10:13 10:15 13:3 33:17 37:18,20 38:15 39:23,25 40:11,13,20 41:17,20,25 46:24,25 49:4 65:23 113:9 166:8 168:9 175:11 179:15 191:14,23 202:22,25 203:6,21 222:18 223:25 224:15,15,16 226:22 228:20 228:20 229:18 230:14

representation 89:25

represents 177:14 178:21

request 5:4 30:4 218:4 219:19 220:24 221:8,21 222:6 222:14

requested 32:12

requests 198:17 221:1

require 46:3,7 47:18,23 48:16 49:5,9 180:9 188:24

required 43:18 139:14

research 38:12 46:23 47:1 77:13 114:12 150:16 208:11 208:20 214:8,8

reserve 42:4 153:11

residual 173:19

resources 144:25

respect 8:24 107:16 141:7 142:8 227:8

respects 13:25 41:12 150:8

responding 66:9,14

responses 221:18 222:13

restricted 52:9 52:16

result 61:13 67:15 71:14 84:22 134:11 145:25 170:16 175:25 185:24 188:11 191:25 192:9

resulted 60:21 61:2,9

resulting 155:11

results 114:17 114:19 150:23 167:10 178:16 184:23 190:15 190:16 203:16

retained 32:20 162:5

retainer 46:3,8 46:11

retainers 46:10

retains 114:15

retire 13:9

retired 132:6 173:18,20

retirement 162:6

return 100:4,10 100:13 242:9

reveal 203:24

revealing 10:8

review 9:4 30:16 61:21 62:12 185:11 222:2 241:5

reviewed 25:23 36:1,5 62:4 65:23 106:12 118:20 132:17

135:20 148:8
168:16 184:8
185:10 202:21
reviewing
46:23,24
richard 160:23
161:18 162:9
162:23 163:5
165:2,14 169:2
170:7,13
171:10
ride 175:12
ridge 2:8
right 12:14
14:2,6 15:12,20
20:2,8,10,14
21:11,18 22:1,2
24:1,11 25:22
26:14 27:25
28:10,11 29:13
29:21 30:15
34:10 36:15,23
36:25 37:8 38:4
39:4,8 40:10
41:2 42:17
47:11,12,13
48:16 51:14
52:2,4,8,25,25
55:6,13 56:1,20
58:3 59:9 61:5
62:11 63:15
64:14 66:5,8
67:3,17 68:2
69:20 73:23
75:21,25 79:10
79:19 80:6,20
84:10 90:23
91:10 94:2 95:1
97:10 98:10
99:21 102:5
103:8 106:12
107:15,18
113:13,16
114:23 116:12
117:2 118:5,11
118:12,25
119:3,13
122:21 123:6,9
137:18 138:17
140:23 141:20
142:9 143:11
144:9 145:13
145:17 146:4
147:22 150:4
154:5 156:4
160:4 162:6,7
162:13 167:12
170:5,12
172:11 173:12
175:2 176:7,9
187:17 188:20
188:22 189:1
191:4 192:19
193:15 194:2
194:10 195:18
196:17,21
198:20,21
199:16 201:7
201:25 203:19
204:20 205:6
207:15 208:11
210:16 211:19
213:6,16 217:2
217:7,12
218:16,19
219:23 220:1,3
221:11,20
230:10 231:14
231:25 233:5,7
234:14 236:13
242:13
rises 88:24
risk 100:10,14
rn 116:23
rns 185:23
robert 28:20
31:13 186:15
187:7
role 9:25 10:2
16:18,25 33:16
38:10,12 73:19
82:14 110:9
134:21 137:12
147:4 223:16
romano 2:4,4
4:6 7:16,16,16
8:5 9:12,17
10:1,5,17,21
11:1,22 12:6,13
12:22 13:17
15:1,11 16:9,17
17:5,23 18:20
20:10 21:2,10
22:1,9,17 23:6
23:11 24:17,21
25:11,17 26:24
27:8 28:10 29:1
29:20 30:8,14
30:24 31:5,8,16
31:18,23 32:3
32:11,18 33:2
33:10 34:4,24
35:9,24 36:14
37:14,24 39:7
39:15,22 40:9
41:1,15 42:14
43:3 44:3 45:14
46:15 47:10
48:2,10 49:3,12
50:4 51:5,12,18
52:1,7,14,21
53:17 54:13
55:21 56:2,13
56:15,20 57:4,8
57:12,18 58:12
59:1 60:8 61:4
62:2,10 63:2,10
66:4,21 68:21
69:19 70:1,9,16
70:19,24 71:1
71:20 72:4,11
73:5,22 74:23
75:16 76:10
78:5 79:18 80:5
80:19 81:3 82:6
82:21 83:3 84:9

86:11 87:18
88:1,20 89:15
90:5 91:9,22
92:5 93:3,13
94:7 98:12 99:3
99:14 103:1,24
104:19,22
105:1 106:2,11
107:2,14,24
108:8,12,14,15
110:5 111:2
112:24 118:10
119:7,13,15,22
119:24 120:3
121:4,11
122:13,20
123:17 124:1
124:14 126:18
127:3 128:20
129:8,15 130:5
130:14 131:21
132:5,16,23
133:6,24
134:15 135:17
136:6 137:3
139:19 140:9
141:11 144:19
145:13,16
147:16 149:23
150:13 152:20
153:16,24
154:8 155:8,17
156:8,23
157:23 160:22
161:3,5,12
162:21 163:4
165:12 170:4
172:14,21
174:16 176:15
177:10 180:17
181:5,14,24
183:1,10 184:7
185:18 186:13
186:21 193:17
194:1,12,17
196:2,7,25
197:10 198:1,5
198:21 199:1,7
199:12,24
200:6,18
201:24 202:12
202:19 203:11
203:18 204:10
204:21 205:18
205:24 206:19
206:25 207:15
207:18 208:2
209:1 210:14
210:21 211:3,9
211:21 212:1,7
213:5,15,24
214:16 215:11
216:10 217:1
217:12,18,22
218:17 219:1
219:17 220:8
220:13,23
221:20 222:15
223:2,10,24
224:12,21
225:15 227:6
228:8,18 229:1
229:24 231:1
231:10 232:9
232:17 233:14
233:18 234:1
234:20 235:1
235:13 236:2,6
236:9,13,17,23
238:20 239:6
romanolawgr... 2:6
rothchild 6:7 6:16 28:18 31:10 58:20 172:15,23 173:2,14,18 175:5,18 176:1 176:5 177:13 179:5,10,23
rothchild's 173:9 174:20 177:3
rough 215:19
roughly 13:11 50:15 110:17 214:20
round 100:24
routine 237:6
routinely 237:4
row 115:17 171:1 178:12 178:19,21
rows 146:13
rule 65:10
ruled 55:19
rules 241:5
ruling 55:1
run 37:3 91:24
running 217:2

s

s 1:10 2:2 3:2 35:15 38:8 149:8
s&p 100:13
sat 216:11
saw 121:21 131:1 203:6
saying 81:8 82:14,15 89:5 125:7 136:3,4 138:8 216:20 225:21
says 24:12 59:17 61:1,15 67:9 70:6,12 80:21 84:8 95:4 97:8,21 98:10 99:2 109:17 112:19,23 146:2,3,25 148:1,3,6 173:6 178:20 184:16 196:11 198:7 198:12,13 208:11 221:2

222:6
sc 2:9
scenario 151:24
scenarios 156:20
schedule 5:18 198:8,13
school 13:21
scope 197:17,20
se 53:16
seal 242:19
search 33:21
second 21:4 24:1 59:15 60:7 188:21 233:2 238:20
secondary 150:18,25
section 59:4,4 59:16 60:10 63:11 70:7 71:9 74:22 105:2 106:4 108:10 117:4 118:11 118:17 143:6,6 152:21 161:21 161:25 168:6,7 173:2,8 174:17 187:1,5 191:9 192:18 197:16
security 109:8 124:23 125:4 128:16 130:1,6 130:16,23
see 19:15 23:25 25:18 65:24 84:24 98:9 115:16 126:6 127:5,18,23 135:14 144:4,6 145:5 151:21 160:2 173:8 192:9 196:23 198:10,20 201:15 203:3 214:7
seeks 210:12
seems 90:16 128:14 129:6 165:10
seen 21:18 24:22 26:23 80:3 130:22 131:22 221:11 226:5
select 153:10,11
sellers 200:14
send 211:10,11 211:12 212:8 213:20 214:2,3 214:11 218:11 219:5
sending 214:10
sends 212:2
sense 14:10 21:22 35:4 40:7 59:16 65:1 81:12 85:14 129:5,5 146:12 185:14
sensible 11:8
sensitivity 199:18
sent 208:8 212:4,8 213:3 218:9 220:14 232:19
sentence 60:25 61:11 74:21 78:17 113:17
separate 107:21 164:25 242:5
series 92:15,15 92:15 99:23 119:8 140:20 140:22 149:6
served 42:3
service 76:3,15 76:18,20,24 77:1 81:15 163:12,21 164:10,14,18 164:18,19 175:14 176:1 184:11 188:6
services 60:1,13 73:24 74:1,2,10 74:12,15,16 75:2,4,12,15,24 76:22 77:5,12 77:14 79:21 80:8,23 81:5,7 82:8,24 83:18 84:1,4 85:20 87:3,13,21 92:11 113:1 133:25 134:12 135:1,12,16 136:9,17 138:13,20 163:6 164:23 166:16,18 175:6 176:6 187:6,7 188:8 188:12 195:22 198:18 200:13 200:22 206:22 207:22 215:15
set 21:11 57:6 57:19 75:17 80:20 115:3 116:20 119:22 159:24 217:23 240:4
sets 103:2 148:9
setting 17:10 205:7
seven 37:17
several 42:15 42:16
severe 127:6
shahnasarian 67:1,4,9,22 69:4 72:6,23 84:17,21,25

85:3 97:4 103:10 104:4,9 114:13,16,20 115:15 116:1,8 116:16 117:14 139:23 142:23 143:1 150:19 150:21,23 151:11,19 153:5 162:4,9 163:3 165:19 166:15 167:18 167:25 168:3 169:20 170:19 171:4 173:17 174:5,25 175:1 178:7,16 179:1 180:1,5 183:3 184:8,18 185:4 190:22 202:7
shahnasarian's 103:20 174:13
shame 138:12
sheet 49:10 209:9,10,13 222:10 241:1,7 242:5
sheets 47:24 212:10 221:3 221:12,12 222:6,7
shorter 71:13
shortly 90:15
show 115:13,20 118:1,9 158:14 197:16
showing 87:19 131:24 132:18 158:13 199:3 199:16
shown 90:13 95:22 147:5
shows 95:3,25 103:7,8 144:7 168:2 198:16 208:7,13,15 232:18
side 11:7,24 50:6,7 55:11 190:8
sign 7:4 194:22 194:25 195:1 195:18,19 242:8,13
signature 195:8 195:9,11,12 240:18 241:6 242:16,22
signed 5:12 194:24 195:4 195:16 196:22 199:15
significant 126:5 127:6
signs 124:9 126:9 128:22 129:11 130:8 130:17 132:18 133:1 135:22 148:10
similar 15:3 29:15 30:19 41:21,24 58:19 79:22 87:16 117:6,21 141:18 166:25 168:8,10 176:10 187:7 230:16 237:22
similarly 42:2 131:8
simple 99:25 127:13
simplest 98:15
simplicity 98:18
simply 68:18 105:10 112:6 134:21 142:21 164:20 175:9 176:2 193:8
simulation 182:1
single 96:2,8,22
sir 215:10
sit 63:3
situated 138:15
situation 137:10 154:21
six 97:23,24 155:20
skilled 185:22
skills 73:9 173:22
skip 27:1
slides 205:3
slightly 71:13
slow 14:5 19:16 22:10
small 187:10 204:8 224:20 225:13 228:25
smaller 102:20
smattering 14:13
smc 148:20 149:1,4,7,8,8,8 149:10
smith 2:11
social 109:8 124:23 125:4 128:16 130:1,6 130:16,23
software 210:3 210:17,22 212:12
sole 34:15 35:12 61:16
solely 67:21 127:8
solicit 33:5
solicitation 5:12,14,20,22 196:16 199:4 199:14

somebody 13:22 235:24
sorry 21:25 22:6 46:5 49:16 54:11 64:11 75:7,9 80:13,14 85:1 102:24 106:23 108:21 110:6 134:17 149:3 152:5 174:13 188:19 190:16 191:12 196:1 208:23 211:23 234:12
sort 43:18 69:7 165:8
sorts 19:2
sounded 13:25
sounds 51:4 124:12 129:1
source 14:16,18 32:12 56:17 68:25 99:9,10 184:10
sources 16:12 115:13 149:2
sow 5:16 197:14
sparks 6:4,19 28:14 29:8 58:21 160:24 161:17,19 162:5,9,24 163:5,15,17 164:3,9,10,13 165:2,8,14 166:23 167:1 168:17 169:2 169:25 170:8 170:13 171:10 173:19 230:10
speak 11:4 33:25 34:14 55:17 65:21 230:6
speaking 43:24 63:24,24 94:19
special 148:15 149:6
specific 70:23 79:22 185:1 204:1 207:6 209:14
specifically 17:22 50:10 125:25 211:1 212:10 213:2,8 222:6 228:11
specifics 49:5
speculate 156:19 230:23
speculative 155:5 156:6 157:14
sped 14:14
speediness 19:17
spend 89:18 209:17,19
spending 141:3 166:1
spends 48:4
spent 134:1 221:5
split 104:5
spreadsheet 108:22 185:13 210:2 212:11
src 5:18 198:14
ssa 111:20 112:2,11 122:2
staller 41:24 59:24 60:11,12 65:23 66:10,10 66:12,13,16 67:5 69:21 70:3 71:17 74:14 76:2 77:9 78:4 79:2,8,8,11,23 80:2,4,21 81:18 82:19 85:23 94:6 98:16,17 99:9 100:14,18 103:4 112:13 117:15 123:19 124:2 133:20 134:3,6 135:5 135:12,12 136:25 137:6 139:5,11 140:24 142:12 152:22 163:10 163:20 164:2 164:12,25 165:9,10 166:25 167:6 171:11 173:8 175:10 176:23 178:11 187:21 187:24 188:10 189:21 190:11
staller's 66:14 71:11 73:17 78:20 81:9 100:18 141:7 202:25
stamped 26:18
stand 55:2 132:10
standard 36:8 88:15 89:23 92:20 94:20 100:1,8 136:15
standing 238:25 239:4
start 20:23 98:6 113:17 141:23 156:6 157:15 158:22 166:21 187:24
started 13:1 98:10,17 148:11 187:24
state 20:16 59:5 60:16 61:16

76:1,6 78:6,9 78:10 108:16 109:6 114:9 116:5 123:1 134:6 147:23 148:13 150:14 158:19 159:24 172:10 192:12 235:13
stated 174:23 174:25 222:16
statement 5:15 97:15 197:15
states 1:1 3:4,7 7:20,22 59:20 87:2,22 165:18 185:20
stating 60:11 119:11
statistical 68:11 68:24 69:14
statistics 50:23 69:6 78:8 92:16 140:21
stay 15:10,13
staying 15:4 174:18,18
stellar 162:1
stenographic... 1:12 240:7
step 69:9 175:15
steps 123:12 209:7 213:20
stick 183:25
sticker 161:14
stimulation 180:20 182:1
stop 169:6
stopped 162:24 173:25 174:8
stopping 174:3
story 164:1
stream 99:24
streams 140:4
street 1:10 2:8 3:5,8
strength 154:14
strictly 43:24 63:23 68:24 94:19
structurally 168:7
structure 141:19 168:8 214:15
structured 42:1 58:19
studies 184:20
stuff 15:19
sub 56:16
subject 33:17
submitted 27:12
subpoena 21:15 220:25
subscribed 240:15 242:20
subsection 169:11
subsections 106:9
substance 10:8 203:25,25 212:17
substantive 9:10 48:23 215:1
subtract 105:24 116:6 179:13 186:6 238:7
subtracted 238:2
subtraction 237:10
sued 43:1
suffered 138:14
suggested 14:11
suit 97:6
sum 140:5
summarize 230:8
summarized 100:4 114:11 150:15 151:5 170:2
summarizes 117:7,23 142:15
summary 118:14 141:14 159:13 191:8
sums 104:16 178:5
supplement 200:1,8
supplemental 5:9 25:19 26:16
supplements 27:17 200:7
suppose 9:23 12:8 17:9 43:24 85:19 101:9,11 101:16 102:1,7 125:17 131:12 138:9 146:12 179:8,19
supposed 9:15 10:3 138:6 139:6 183:3 197:5 219:4,24
supposing 157:16
sure 19:4 27:18 28:4,8 29:6 41:8 57:7,12,12 61:6 64:8 65:9 70:12 76:13 84:5 85:18 86:16,16 87:15 96:5 121:17 129:4 137:12 151:2,7 155:25 156:17 163:8 168:15 169:5

173:16 175:8 181:17 190:4 191:8 194:19 216:21 218:5 219:7 227:11 227:13 231:13 237:6
surprised 88:4
swear 7:15
switch 160:22
sworn 242:20
syed 108:1,2 113:4,22 192:15
symptoms 124:9,24,25 125:8 126:9 127:18 128:22 129:11 130:8 130:17 131:24 132:18 133:1 148:10
system 213:10

t

t 4:3 5:2 6:2 100:5 240:1,1
table 79:2,7 90:18,20 94:23 95:7,22 103:2,7 103:8,25 114:23,24 115:12,12,16 115:17,20,22 116:12,19 117:4,6,6,10,10 117:13,19,21 117:21,22,22 117:23 141:12 141:14,19 142:14,15,21 143:9,12,13,21 144:3 145:22 147:5,8 151:12 151:14 158:24 159:7,8,22 164:5 166:5,7,8 166:13 167:11 167:14,15,22 167:23,24 168:2 170:3,12 170:24 171:1 171:15,17,18 172:3 177:11 177:12,14 178:2,9,19 180:2,3 185:25 186:6 190:2,4,8 190:13,19 192:2
tables 58:16 90:13 114:20 115:18,20 117:10 118:1,9 150:25 151:5 151:21 158:14 158:21
take 14:24 17:11 19:4,6,11 19:12 20:23 28:2 29:3,4 45:18 54:15 57:10 75:8 86:25 92:12 95:24 97:17 101:1,2 106:3 111:17 128:3 161:5 180:19 182:21 184:2 195:6 197:5 209:8 213:6 229:25 236:15
taken 1:10 19:1 44:6 49:21 57:16 64:4 73:3 90:17 119:20 130:24 133:10 161:8 217:20 240:4 242:2
takes 102:16 159:4 167:15 167:18 175:11 178:19 189:15 213:20 238:2
talents 73:9
talk 18:4 19:11 19:15 47:24 69:10 86:18 184:5
talked 134:4
talking 67:7 74:13 85:18 86:18,20 90:19 105:15 106:9 107:4 127:22 156:6 169:8 175:20 218:5 219:8,15 227:5 229:10,23
talks 131:10
tariff 207:4
tariffs 205:25 206:5,21 207:7 207:12,21
tasks 74:3 81:20
taylor 1:13 7:10 240:2,19
teaching 51:7
team 204:3
teams 202:6,9
tech 23:23
technique 41:9 41:10
technology 56:9
tecum 21:16 220:25
teeny 232:1
tell 7:25 8:6 14:6 19:12,19 23:20 26:1 27:10 29:5 68:6 78:14 114:24 120:9 137:18 189:1 196:9 209:7 210:22

220:3 223:21 226:1,17 228:2 228:3 231:12
telling 210:21
tells 48:9
template 39:25 40:8,14,18
templates 40:6
tense 212:23
term 16:6 17:7 41:16 59:9 73:25 86:12
terms 10:4 20:8 46:17 49:5 97:10 106:15 152:17 158:15 173:12 225:16 235:19
testified 8:1 12:15 44:18 81:24 222:7
testify 13:4 32:7 38:20 45:7 54:3,21 59:14 137:18 204:13 204:22
testifying 53:6 216:1
testimony 10:12 44:14 46:23 52:9,10 52:15 54:1,7,23 55:10,22,25 79:7 84:7 123:7 145:5 205:10 214:8 234:23 240:6,9
text 48:15
tfl 153:10
thank 27:21 57:13 104:21 108:13 161:4 237:2
theoretical 64:8 64:13,14 65:5 65:19
theoretically 63:24
theories 17:16
theory 134:3
therapies 91:7 151:10 159:15 167:16 171:21
therapy 151:18 159:1 170:18
thereof 182:24 240:11
thing 13:20 19:3 20:16 66:13 96:21 98:19 105:24 116:19 117:13 136:18 159:9 160:15 189:12
things 38:18 53:20 59:12 62:25 73:8,18 82:1 113:9 124:22 136:10 156:17 188:3 205:3
think 11:14 19:16 20:9 23:22 26:12,13 27:2,22 36:7 39:19 43:8,16 44:1,13 51:23 54:16 74:20,25 87:9 93:9 98:15 105:7,9,22 111:21 112:21 122:10 127:12 137:24 138:3 146:15 151:2 154:4,25 164:8 181:17,20 193:11 195:4 195:14,16 198:10 203:6 216:13,15 224:25 230:2,7 230:12,17 232:4 233:5 236:2,2,9 239:2
third 50:16 165:16 179:18
thirds 50:15
thirty 242:12
thought 41:19 41:25 50:2 55:4 131:4 137:19 137:19 155:24 234:12
three 42:24 179:8 230:11
time 1:11 7:2,8 13:10 14:17 19:4,7 24:13 28:2 34:5 36:2 36:5 42:3 47:5 47:14,24 48:4,5 48:6 49:5,9 76:23 77:23 85:25 88:8 90:16 95:11 104:20 134:2 151:20 159:16 159:19 167:20 170:21 171:23 174:4 177:1 178:8 185:16 189:2,3 203:7 205:15 207:19 209:9,10,13 210:1,4,4,17 212:10 221:2,3 221:4,11,12 222:1,6,7,10 224:3 225:2 227:8 228:19 229:19 237:13 238:19,23 239:10 240:4,4 240:6,9
timed 212:10

times 19:1 42:24 44:21,23 52:15 76:20 97:23,24,25 122:8 157:13 194:23 202:13 202:18 204:25 205:4 238:12
timing 98:3 189:11
tip 45:21
title 29:6 38:10 38:11 198:16 242:3
titled 199:14
titles 26:8
today 7:7 17:6 18:5 19:25 20:7 21:19 22:24 28:5 49:22 63:3 100:2 102:11 157:2 193:8 215:17 238:11 238:15
today's 99:24 101:3
toes 69:10
together 219:5
told 77:10 111:10 129:2,3 129:25 202:23 216:13 223:19
tongue 45:21
took 13:25 67:11 73:18 84:25 85:2 95:17,18 96:21 96:23 122:3 130:3 151:8 165:18 169:17 171:18,24 179:20 185:12
tool 146:17,19
top 34:17 116:15 145:21 182:3,4 198:16 199:14
tort 43:4
total 99:12,18 113:4,22,24,25 135:10 142:4 142:21,22 149:18,19 151:23 152:3 159:7 167:3 171:1 177:5 178:20,21 189:24 190:19 214:9,20 215:23 216:14 216:24 217:3 217:10
totals 159:6
touch 9:16 37:5 156:11
toward 175:15
town 47:3
track 47:14 208:18,23 210:4 217:3
transcribed 1:13 37:19 240:7
transcript 7:5 118:24 119:2 239:2 240:13 242:2,3,3,8,10 242:13,13
transferable 173:22
transmittal 24:24 193:3 194:5
transportation 188:15,23
travel 46:23 47:3 214:8
treated 122:4
treating 53:25
treatment 17:25 18:10,13 91:25 151:18 159:1 170:18 173:4 192:16
treatments 84:20 91:7 114:16 115:5 150:21 151:10 159:15 167:16 169:19 171:21 178:7 183:4
tremors 173:3
trends 12:5 16:21
trial 12:16 13:4 44:18 45:8,8,9 45:15,16,17,18 54:4,19,21 138:21,25 204:13
trials 49:16
tribunal 52:9
tricare 150:17 150:24 151:13 152:3 153:2,7,9 153:10,10,11 153:11,20,25 154:9,13,15,23 155:2,9,11 157:1,11,19 158:10,15 180:13 182:5
truck 132:11
true 11:25 12:1 15:5,21,22,24 15:25 16:2,13 16:18 17:14,17 17:24 18:14 52:2 59:7 63:4 65:25 74:14 75:17 83:4 84:17 88:2,21 88:25 89:16 102:5 121:3

129:4 132:6 138:9,17 139:25 144:9 144:12,13 174:19,22,23 174:25 200:12 200:17,20 240:8 242:4
truth 7:25,25 8:1
truthful 33:22
try 19:20 40:19 56:21 87:6
trying 43:16 65:14 75:10 129:10 136:16
tuesday 1:7 241:2
turn 21:23
turned 222:8
turner 3:8 7:21 7:21 193:4 239:4
turns 102:11
twenty 14:20
twice 52:20
two 8:8,8 31:25 36:13 42:15 43:17 50:15 59:12 87:10,10 95:19 103:15 106:4,9 118:23 120:19 163:9 191:1 202:13 202:18 232:19 233:8 234:15 234:22 235:2 236:19
type 50:25 200:1 201:3
typed 37:25 38:1
types 140:11 153:9
typically 76:16 96:15,19 204:23 214:3 237:20
typing 41:9
typo 71:16 113:7

u

ultimately 14:4 136:23 138:11 139:4,7 143:22
um 119:23
umich.edu 2:19
unc 13:8,21 38:23
uncertain 160:14
uncertainty 81:7
under 34:8 51:21 53:9,14 59:14 95:4 96:2 96:9,22 108:10 112:25 134:11 137:18 140:12 143:6 146:25 151:23 152:2,7 152:18 153:19 161:25 165:16 166:5 171:8 175:13 187:1 192:12 197:16 201:20 210:9 240:5
underlying 185:25
understand 9:3 9:14 19:19,20 82:22 105:23 197:19 203:19 242:7,11
understandable 17:12
understanding 16:5 35:12 53:22,24 55:18 59:13 139:1 183:7 184:17 234:14
understate 124:25
understood 26:21 53:19 55:14
unemployable 125:6,11 128:17 129:12
united 1:1 3:4,7 7:19,22 87:1,22
university 13:7
unknown 93:21
unreasonable 102:4 160:20
unrelated 110:15 133:10 143:18 187:14
unsigned 5:14 5:21
update 59:18
upper 97:6,11 97:18,25 116:7 142:20,24 143:2 152:6 167:25 171:7 171:25 172:3,8 178:14
upshot 54:2
urban 140:16 140:16
usa 208:16
usable 96:18
usdoj.gov 3:6 3:10
use 17:1,7 23:1 40:8 41:16 59:9 70:2 71:18 73:1 85:14 86:12 89:23 90:9 96:16,16,20 97:10 100:9,12 100:15,24

101:10 105:9 123:12 128:3 160:4 166:11 177:1,16 189:5 190:5,5,6 205:9 210:4,17 223:5 234:21 237:24
used 39:20 78:17,22 80:12 81:23 83:14,19 90:11 96:14 99:8,9 100:14 100:18 103:4 105:13 109:14 110:11 112:8 130:3 135:9 141:16 142:12 144:24 147:20 151:4 166:25 167:6 176:24 177:20,22 178:11 187:8 189:20,21 190:11 191:11 191:13,23
useful 41:19
uses 93:12 102:5
using 12:11 39:25 40:14 85:23 88:22 103:3 112:7,12 140:3 142:7 166:19 178:8 178:10 190:10
usually 64:18 88:22
utilize 204:23
utilized 39:10 168:12 176:21
utilizing 110:2 169:1

v

v 56:6
va 112:19 143:24 146:5 146:12,19 147:7
va's 145:22 192:5
va.gov 146:17
va.gov. 147:14
valid 130:25 134:22
valuable 98:19
valuation 100:3
valuations 199:19
value 60:1,13 65:3 66:16 67:16 71:15 74:10,14 75:1 75:11,14,17,19 75:21,23,24 79:7 80:22 81:14 84:4 86:5 86:7 91:5,15 95:17,18 96:23 97:7 99:19,21 99:22,23 101:6 101:21,25 102:5,13,21,22 102:23,24 103:9,13 105:13 109:15 109:20 113:4 115:21 116:7,8 117:16 122:11 133:22 135:11 142:16,22 143:1 148:17 149:12 151:23 152:3,8,23 158:14,24 164:19 167:11 168:3 169:23 170:7,10,13,22 171:2,12,15,25 172:1,4 178:3 178:10,22,24 178:25 182:14 182:24 185:17 189:8 190:19 190:20,21 200:13,21 225:1 229:10 229:11 237:14 238:5,7
values 99:24 103:3,6,21 104:11 140:5 142:19 151:22 179:20 190:9 192:4
vanslyke 2:16
various 18:23 37:5 84:20 92:10 100:4 143:13 149:1,8 151:10,22 159:15 167:15 167:16 177:17 222:17 226:4
vary 29:14
vast 43:15 63:25 64:3
vba 108:18,21 108:24 109:11 110:11 111:13 120:22 121:2,5 125:23 147:3 147:24 148:4 148:20 149:5 149:10 150:10 168:18,20,22 187:13 191:18 191:23 223:1 225:3 226:4,10 226:14 227:15 228:1 229:5 232:6
vba's 187:16
vd 121:23
verbally 48:11
veritext 1:24

versus 87:12 208:16
veteran 179:11 179:24
veterans 108:17 113:2 158:3,5
vha 113:3 114:14 115:4 116:1,18 118:4 125:23 150:18 151:15 152:7 157:25 158:2,3 158:17 159:17 169:25 170:1 171:16 172:4 179:23
vha's 113:24,25 149:18,19
vhs 153:3
viability 154:14 155:1
video 7:11,14 49:22,23,24
videoconfere... 1:14 2:10,14,19 3:12
videographer 3:13 7:7,9 21:5 21:9 57:4,15,17 119:19,21,23 161:7,9 193:20 193:24 217:19 217:21 238:22
videotaped 1:10 7:1 239:9
views 175:14
virtually 47:25
vision 73:10
visit 97:16,21 97:22
vitae 5:6 20:21 22:19,21
vma 158:6
vocational 66:25 69:12 72:20,25 73:2 173:17
void 240:14
voluntarily 162:10,14 173:18,25

w

wage 76:20,21 76:24 140:17
wages 86:19 105:19
wait 207:25
waiting 80:13
waive 242:12
walk 96:3 121:13 143:11 151:3 163:6 168:14,25 173:14 175:6 179:5
want 19:4,10 19:11 20:13 27:18 28:2,4,7 41:11 160:24 193:8 202:1
wanted 71:23 72:7 213:7
war 207:4
ward 2:11
wardandsmit... 2:14
washington 3:5 3:9
waste 227:21
water 1:3 7:12 60:21 61:3,10 221:6 241:3
way 20:22 29:14 30:19 33:4 34:5 35:4 52:10 58:5 62:13 69:9 76:16 88:15 89:24 90:16 111:25 115:2 116:17 119:11 130:25 159:4 159:19 167:20 169:21 170:21 171:23 175:12 178:15 185:8 185:11 187:10 193:12 196:25 197:4 209:4 237:21,22 240:11
ways 41:22 237:7
we've 20:17 27:18 61:6 82:14 163:9 168:15 179:15 235:8
web 191:23
website 5:7 23:15,17,20,24 24:13 112:19 146:17,20 147:14
wedge 65:21
week 77:1,2 79:12 134:2,9 137:24 163:13 175:14 220:4
weitz 2:15
welch 6:9,18 28:20 31:13 58:20 186:13 186:15 187:2,7 187:13 188:3 190:3 191:16 192:11
welch's 187:20 189:22
west 2:5,17
western 45:19
whatsoever 39:11
whereof 240:15

wife 78:22 81:23 164:14
willing 200:14 200:14
wilmington 2:13
wish 239:1
witness 4:4 7:4 7:15 9:19 10:11 10:22 11:21 12:7,19 13:15 14:23 15:8 16:5 16:16,24 17:20 18:18 22:8 23:5 29:19,24 30:3 30:13,23 31:7 31:24 32:10,17 32:25 33:9,25 34:22 35:8,23 37:13,23 39:4 39:14,19 40:6 40:17 41:8 42:13,22 43:14 45:12 46:14,21 47:23 48:9 49:2 49:9 50:2 51:4 51:11,17,19 52:5,13,19 53:14,25 54:11 55:17,25 56:14 57:7 58:3,24 60:5,25 61:25 62:9,22 63:9 66:3 68:10 69:3 69:25 70:6 71:8 72:2,10,19 73:14 74:20,24 76:9 77:18 79:15 80:1,12 80:17 81:1,12 82:12 83:10 85:18 87:6 88:11 89:3,22 91:5,15 92:4 93:2,9 94:5 98:9 99:1,8 101:9 103:19 104:21,24 105:7 106:8 107:13,21 108:7 110:8 112:18 118:8 119:6 121:1,10 121:17 123:16 123:24 124:12 126:17,24 127:12 129:1 129:19 130:12 130:22 132:4 132:14,22 133:5,17 134:19 136:1 136:15 138:6 138:24 139:16 140:8 141:10 144:16 145:12 145:14 147:13 149:22 150:8 152:14 153:15 153:23 154:4 154:19 155:16 155:24 156:16 157:6 162:19 163:2 165:6 169:5 174:11 176:14 177:9 180:16,25 181:11,20 182:8 183:7,21 184:14 196:1 197:24 198:18 199:23 200:5 200:17 202:4 202:17 203:15 203:24 204:3 204:19 205:15 205:23 206:4 207:2,16,25 208:23 210:18 211:2,8,19,22 212:15,21 213:13 214:14 215:6 216:7,24 217:10 218:16 218:24 219:14 220:7,12,21,22 221:14 222:22 223:16 224:9 224:19 225:11 225:24 227:11 228:15,24 229:22 230:7 231:13,20 232:16 233:17 233:24 234:18 235:11 240:5,6 240:15
witnesses 51:24
wolfspeed 56:7
wondering 40:13
word 41:10 160:16
words 44:10 59:11 64:2,3 209:2
work 5:15 11:16 12:23,25 13:2,5,23 14:9 15:2,16,18 17:12,14 18:14 23:2 33:14 34:22,23 35:1,2 36:7 38:3 39:9 39:11,21 41:2 42:10,18 44:9 47:14,19 49:4 49:20 50:13,13 50:18,19 56:11 56:17 58:5,6 63:19 64:5 65:15 67:1,7,13 67:24,25 68:1,7 68:18,19,20,23 69:17 71:13,21 71:24 72:3,7,12

72:14,16 74:5 79:4,20 82:20 90:24 92:18 94:1 106:17 118:21 124:3 127:7 136:10 136:11,20 137:15 139:2 153:17,17 156:9 165:1 174:4,19,20 182:20 183:13 185:21 197:15 197:20 200:24 201:10 202:20 203:8,15 204:11 208:16 208:18 209:11 209:14 210:13 210:16 211:5 216:2 221:6 224:2 235:19 237:11 238:10
worked 8:17,20 14:8 24:10 50:5 78:24 175:18 216:4
worker's 73:9
workers 140:17
working 11:25 12:3 47:15 72:13 105:3 131:1 158:4 162:24 173:25 174:8 189:6 203:20 209:19
works 36:10 48:3 146:16 148:22
world 83:22
worth 41:23 100:1
write 38:15 39:21 214:1
writer 24:14
written 36:22 52:3 54:6 59:24 125:24
wrong 79:8 232:1
wrongful 16:19 43:11,25 44:2 50:8,11 53:4 55:7 74:9 94:11 216:3
wrote 24:15 37:23 41:14 233:25

x

x 4:3,3 5:2,2 6:2 6:2 137:24

y

yard 74:5 78:24 79:5
yeah 38:11 113:10 114:5 127:12 134:4 140:15 188:17 188:17,18,21 195:8,13 201:25 209:16 214:2 231:6,18 232:25 236:6
year 9:24,24 26:12,13 44:20 86:25 88:23,24 89:6,7,12 95:23 97:21,24,25 98:11 99:11 100:2 101:19 101:21,24 102:12 109:7 109:13 122:9 176:22 189:9 189:13,16
years 12:12 13:16 36:2,6,15 37:15 42:23 44:15,16,19,23 50:5,14,21,21 54:16 55:6 67:8 67:10,13 86:4 86:10 87:20 89:10 95:20 99:13 109:10 112:2 125:9 142:4,5 155:20 156:13 167:3,4 177:5,6,23 189:24,25
yep 21:2 119:2
yesterday 193:7
yields 100:5

z

zero 34:22 39:16 84:5 133:23 135:1 136:3 137:5,8 137:23 138:11 148:5 162:15 162:19 163:24 163:25 164:19 164:19 189:16
zoom 202:5

Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate. The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

DISCLAIMER: THE FOREGOING FEDERAL PROCEDURE RULES ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY. THE ABOVE RULES ARE CURRENT AS OF APRIL 1, 2019. PLEASE REFER TO THE APPLICABLE FEDERAL RULES OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.

VERITEXT LEGAL SOLUTIONS

COMPANY CERTIFICATE AND DISCLOSURE STATEMENT

Veritext Legal Solutions represents that the foregoing transcript is a true, correct and complete transcript of the colloquies, questions and answers as submitted by the court reporter. Veritext Legal Solutions further represents that the attached exhibits, if any, are true, correct and complete documents as submitted by the court reporter and/or attorneys in relation to this deposition and that the documents were processed in accordance with our litigation support and production standards.

Veritext Legal Solutions is committed to maintaining the confidentiality of client and witness information, in accordance with the regulations promulgated under the Health Insurance Portability and Accountability Act (HIPAA), as amended with respect to protected health information and the Gramm-Leach-Bliley Act, as amended, with respect to Personally Identifiable Information (PII). Physical transcripts and exhibits are managed under strict facility and personnel access controls. Electronic files of documents are stored in encrypted form and are transmitted in an encrypted

fashion to authenticated parties who are permitted to access the material. Our data is hosted in a Tier 4 SSAE 16 certified facility.

Veritext Legal Solutions complies with all federal and State regulations with respect to the provision of court reporting services, and maintains its neutrality and independence regardless of relationship or the financial outcome of any litigation. Veritext requires adherence to the foregoing professional and ethical standards from all of its subcontractors in their independent contractor agreements.

Inquiries about Veritext Legal Solutions' confidentiality and security policies and practices should be directed to Veritext's Client Services Associates indicated on the cover of this document or at www.veritext.com.

Exhibit 771

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF NORTH CAROLINA

IN RE:	)	
	)	
CAMP LEJEUNE WATER LITIGATION	)	7:23-CV-00897
	)	

ERIC ANDERSON
Wednesday, January 28, 2026

Remote videoconference videotaped deposition taken in the above matter commencing at 10:06 a.m. Eastern Time.

Stenographically recorded and transcribed by Lisa Taylor, Registered Professional Reporter, Pennsylvania Notary Public, Pennsylvania eNotary, and North Carolina Notary Public (participating via videoconference).

– – –

GOLKOW, A VERITEXT DIVISION
877.370.3377 ph | 917.591.5672 fax
deps@golkow.com

_ _ _

A P P E A R A N C E S

On behalf of Plaintiffs:

BELL LEGAL GROUP
BY: LESLIE LAMACCHIA, ESQ.
219 Ridge Street
Georgetown, SC 29440
llamacchia@belllegalgroup.com
(participating via videoconference)

ROMANO LAW GROUP
BY: JOHN F. ROMANO, ESQ.
ALFRED LEHMAN, ESQ.
2701 Okeechobee Boulevard
West Palm Beach, FL 33409
(561)533-6700
john@romanolawgroup.com
alfred@romanolawgroup.com
(participating via videoconference)

On behalf of Defendant:

UNITED STATES DEPARTMENT OF JUSTICE
BY: JOSEPH B. TURNER, ESQ.
WILLIAM V. KLOTZBUCHER, ESQ.
1100 L Street NW
Washington, DC 20005
(202)880-6104
joseph.b.turner@usdoj.gov
william.v.klotzbucher@usdoj.gov
(participating via videoconference)

_ _ _

Also Present (participating via videoconference):

Enid Ondazara, Paralegal
William Chan, Videographer

_ _ _

E X A M I N A T I O N I N D E X

WITNESS:	PAGE:
Eric Anderson	
Examination by Mr. Turner	6
Examination by Mr. Romano	83

_ _ _

E X H I B I T I N D E X

EXHIBIT:	DESCRIPTION:	PAGE:
1	Subpoena to Testify	9
2	Accessible Housing Services Housing Report - Edgar Peterson	10
3	Curriculum Vitae - Eric Anderson	15
4	Plaintiff’s Objections and Responses to Defendant’s Notice of Videotaped Deposition of Eric Anderson	33
5	The 7 Principles - Centre for Excellence in Universal Design	45
6	Central Gardens Historic Zoning: Architectural Design Guidelines and Users Guide	80

(Remote videotaped videoconference deposition commences, 10:06 a.m. Eastern Time.)

– – –

(The witness will read and sign the deposition transcript.)

– – –

VIDEOGRAPHER: We are now on the record. My name is Wilmington Chan. I am a videographer for Golkow, a Veritext Division.

Today's date is Wednesday, January 28, 2026. The time is 10:06 a.m. Eastern.

This remote video deposition is being held In Re: Camp Lejuene Water Litigation, for the United States District Court, Eastern District of North Carolina.

The deponent is Eric Anderson.

All parties to this deposition are appearing remotely and have agreed to the witness being sworn in remotely.

Due to the nature of remote reporting, please pause briefly before speaking to ensure all parties are heard completely.

Counsel will be noted on the stenographic record.

The court reporter is Lisa Taylor, who will now swear in the witness.

– – –

(ERIC ANDERSON, having been duly sworn, testified as follows:)

– – –

EXAMINATION

BY MR. TURNER:

Q. Good morning, Mr. Anderson. My name is Joseph Turner, and I represent the United States.

Before we get started, I just want to stress that this is a court proceeding, even though we're not in a courtroom, and you are under oath.

Do you understand that you are obligated to tell the truth?

A. Yes.

Q. Mr. Anderson, I will be asking questions. Please answer them to the best of your ability. If you don't understand a question, please let me know, and I will do my best to rephrase or clarify it. However, if you do answer a question, I will assume that you understood it. Does that make sense?

A. Yes.

Q. And, you know, in a normal

conversation, it's typical that you may understand what I'm asking before I complete the question.

However, for the record and the court reporter, I just ask that you let me finish the question completely before answering.

A. Yeah, okay.

Q. And as the court reporter already mentioned, when answering questions, please say your answers so that they can accurately transcribe them.

If the answer is yes or no, please say yes or no. They can't transcribe an um-hum or they cannot see if you nod or shake your head.

A. Okay.

Q. I would also add that you talk at a reasonable pace, sort of like I'm speaking now, just so the court reporter can record everything.

A. Okay.

Q. And as the court reporter also mentioned, we should try not to interrupt one another. Otherwise they won't be able to record everything accurately.

You know, please wait until I've finished, again, before you start to answer, and I will not interrupt you while you are answering.

And I -- you know, we are doing this

over a videoconference, so there will be some lag. I just ask that we do our best to give each other time to speak.

A. Okay.

Q. Now, Mr. Anderson, during this deposition, you may hear other attorneys say "objection." Unless your attorney instructs you not to answer the question, please answer the question after the objection has been made.

A. Okay.

Q. Is there any reason why you are unable to give your most truthful and accurate testimony today?

A. No.

Q. Is there any reason your memory might be impaired today?

A. No.

Q. Are you currently taking any medication that might impair you?

A. No.

Q. And is there anyone in the room with you right now?

A. No.

Q. Now, Mr. Anderson, if at any time you need a break today, just let me know. I like to

break every hour at least. But I do ask that if you want a break and I have asked a question that you answer the question before we go on break. Does that make sense?

A. Yes.

Q. Now, Mr. Anderson, can you please state your full name for the record.

A. Eric Kyle Anderson.

Q. And what is your current address?

A. Current address is 21601 Keller Road in Freeland, Maryland 21053.

Q. And right. Now, are you looking at any documents on your screen?

A. No.

MR. TURNER: I am going to add Exhibit 1 to the chat and share it on my screen.

(Whereupon, Exhibit 1 marked for identification.)

BY MR. TURNER:

Q. Mr. Anderson, can you let me know when you can see the document that I'm sharing.

A. I can see the document.

Q. Perfect. Do you recognize this document?

A. Yes.
Q. Did you do anything to prepare for today's deposition?
A. I just reviewed the report and the Matterport tour.
Q. And did you meet with any counsel?
A. Prior to this, on Friday, I met with John.
Q. And was that the only time you met with John?
A. Yes.
Q. And how long did that meeting last?
A. Approximately an hour and a half.
Q. And you didn't meet with counsel any other times; correct?
A. Correct.
Q. Did you take any notes during the meeting with John?
A. No.
MR. TURNER: For the record, I'm adding what I'm marking as Exhibit Number 2 into the chat, and I will be sharing my screen.
(Whereupon, Exhibit 2 marked for identification.)

BY MR. TURNER:

Q. Mr. Anderson, are you able to see what I have been sharing on the screen right now?

A. Yes, I can see it.

Q. Perfect. And do you recognize this document?

A. Yes.

Q. And for the record, what is this document?

A. The document is the report that I submitted for this project.

Q. And were you provided any documents in connection with this matter?

A. No.

Q. Can you identify all of the documents that you relied upon in forming your opinions in your report.

A. I don't understand the question.

Q. Sorry. Let me rephrase.

In drafting your -- in writing your report, what did you reply upon for the opinions in it?

A. I relied on the information in the report.

Q. And did you have any communications

with other experts in this case?
A. No.
Q. You did not communicate with a Kay Hairston?
A. I'm sorry. I communicated via a voicemail, as I noted in the deposition document that I submitted. That was strictly an e-mail and a voicemail message that she left me.
Q. And was that the only time you communicated with Kay Hairston?
A. Yes.
Q. And, Mr. Anderson, in rendering your opinion, did you rely on any facts provided by Kay Hairston in this case?
A. The only fact that I relied on was the diagnosis of Parkinson's and reliance on self-care or for assistance for self-care?
Q. Mr. Anderson, is Deborah Gross an employee of Accessible Housing Services?
A. No, she's not.
Q. Who is Ms. Deborah Gross?
A. She was a catastrophic case manager. She's retired from Liberty Mutual Insurance. She handled catastrophic workers' comp claims.
Q. And what is the extent of her

relationship with Accessible Housing Services?
A. She would engage our services when she was employed at Liberty Mutual for the assessment of residential houses to be modified to accommodate catastrophic injuries obtained at work.
Q. And did Deborah Gross refer clients to you?
A. Yes.
Q. Does she receive compensation for her referrals?
A. No.
Q. Did she refer Mr. Peterson to you?
A. No.
Q. Did you work with her in the case of Mr. Peterson?
A. No.
Q. Did she provide any information to you for your report on Mr. Peterson?
A. No.
Q. Mr. Anderson, do you have any support staff that work for you in this matter?
A. I had somebody assist me with cost estimating.
Q. And are they an employee of Accessible Housing Services?

A. Yes.
Q. What is their name?
A. Shara Anderson.
Q. And what is their role?
A. She's an occupational therapist at Accessible Housing Services.
Q. And you just mentioned, you know, one task that she performed. Were there any other tasks that she performed?
A. No.
Q. Did any support staff perform any calculation on which you relied in rendering your opinion?
A. No.
Q. Did any support staff perform any calculation which you considered in rendering your opinion?
A. No.
Q. Did any support staff perform any calculation which you neither considered nor relied on in rendering your opinion?
A. No.
Q. And did any support staff draft or assist in the drafting of any portion of your expert report?

A. No.

MR. TURNER: I'm now adding for the record what I'm marking as Exhibit number 3 to the chat.

(Whereupon, Exhibit 3 marked for identification.)

BY MR. TURNER:

Q. Mr. Anderson, do you recognize this document?

A. Yes.

Q. And what is it?

A. It's my CV.

Q. And who drafted it?

A. I did.

Q. And is all of the information in your CV accurate?

A. It was -- it might not be up to date currently, but I -- at the time of submittal, it was.

Q. And is it fair to say that this document is a complete representation of your educational and professional background?

A. Yes.

Q. Other than the updates you just mentioned, is there any information that was not

included in your CV?

A. Not that I'm aware of.

Q. And is all of your education, employment, and publications listed on your CV?

A. Yes.

Q. Now, you graduated in 1991 from State University of New York at Buffalo; correct?

A. Yes.

Q. What degree or degrees did you graduate with?

A. Bachelor of science in exercise science and sports management.

Q. And is that the only degree you have, Mr. Anderson?

A. Yes.

Q. Now, you've also listed some professional licenses as well. For USA Rehab, you have a contractor's license; correct?

A. Correct.

Q. What's required to hold that license?

A. It requires a state -- a state examination, and that's governed by the Department of Labor and the board here in Maryland.

Q. And what's required to maintain that license?

A. Just -- just renews every two years.
Q. And you also hold a Maryland Home Improvement Commission license; correct?
A. Yes.
Q. What is this license?
A. It's the same as the license that we just referenced. It's a contractor's license.
Q. Are their requirements the same?
A. Yes.
Q. And are the requirements for maintaining it the same as well?
A. Yes.
Q. And you're maintaining both of these licenses as of today; correct?
A. It's only one license.
Q. One license?
A. Yeah. The Maryland Home Improvement Commission, so -- contractor's license for residential work.
Q. Thanks for clarifying.
Have you ever been subject to any disciplinary action or censured by a licensing body?
A. No.
Q. Have you ever been subject to any disciplinary action or censured by any court or

tribunal?

A. No.

Q. Now, Mr. Anderson, generally could you please describe your work experience for me.

A. Currently with USA Rehab. The business was formed in 1996 [sic]. As a Maryland contractor, we perform home improvement services in Maryland through the Department of Health & Hygiene, the waiver program, and also through the Department of Disabilities Services for accessible modification projects here in Maryland.

Q. Now, Mr. Anderson, you said USA Rehab was founded in 1998; correct?

A. 1998.

Q. And between 1991, when you graduated, and 1998, did you have any work experience relating to housing assessment and/or feasibility studies?

A. No.

Q. Sticking with your work with USA Rehab, your CV states that you serve exclusively in a financial role. Is that true as of to date?

A. No. I also do design and cost estimating for projects.

Q. And when did that work start?

A. It has -- I have always performed

those types of services as secondary to the financial operations.

Q. And are those the only roles you've had within USA Rehab?

A. No.

Q. Can you describe some of those other roles.

A. Some of the other roles, in the beginning, when I started the -- the business, I -- I did it all. I would purchase medical supplies. I would assemble them. I would deliver them. I would install them. I would provide family and patient education. And I would do the billing, medical billing, accounts receivable.

Q. And your CV also mentioned that USA Rehab is partially owned and operated by a licensed occupational therapist; correct?

A. Yes.

Q. Did this occupational therapist assist at all with your report or recommendations in the case of Mr. Peterson?

A. I referenced Shara Anderson, occupational therapist, previously.

Q. Okay. I'd like to switch over to your work with Accessible Housing Services. Now, you

founded that in 2006; correct?

A. Yes.

Q. And have you remained a founder and owner of this business since 2006?

A. Yes.

Q. And what are your responsibilities as owner and founder?

A. I -- my primary responsibility here is handling referrals that come in through special needs trusts and worker comp -- catastrophic worker comp injuries that I noted with Debbie Gross.

That entails collecting on-site information on residential properties, working with the parties that are involved.

There's usually a defendant and plaintiff side of a workers' comp project, as well as counsel and contractors and family members.

So I coordinate the activities of these parties through the process of assessing, designing, drafting documents, contractor solicitation, cost estimating, and project management of the projects.

Q. Now, Mr. Anderson, you alluded to some of this just now, but you mentioned in your CV that your client roster consists of medical and legal

professionals, insurance carriers, executors of trust funds, as well as private-pay individuals. Is that information correct?

A. Yes.

Q. What types of medical professionals do you work with?

A. Catastrophic case managers that are registered nurses.

Q. And what services do you offer for medical professionals?

A. The services that I previously mentioned.

Q. And are those the same services that you offer to legal professionals?

A. Yes.

Q. What percentage of your clients would you say are legal professionals?

A. 33 percent.

Q. Now, what percentage of your clients would you say are medical professionals?

A. 66.

Q. And do you have an idea of how many of your clients are actively involved in litigation?

A. Not off the top of my head.

Q. And overall, what percentage of your

work would you say is for legal professionals?

A. As I mentioned, 33 percent.

Q. Mr. Anderson, your CV also mentions that you provided accessible consulting services to the catastrophic case management unit at Liberty Mutual beginning in 2007; correct?

A. Yes.

Q. Can you describe your work with that catastrophic case management unit.

A. I previously mentioned those. Would you like me to do it again?

Q. Yes, that -- yeah, that would be helpful. Thank you.

A. When -- the primary responsibilities are intaking the referral and speaking to the catastrophic case manager, coordinating the on-site data collection on the residential property, formulating designs, creating cost estimate and plans for construction, contractor solicitation, and project management.

Q. And does this case management unit work with you on all of your cases?

A. Liberty Mutual and Travelers Insurance, they are the two primary clients, and they've been clients since 2007. From time to time,

I will get additional referrals from other secondary workers' comp insurance carriers.

Q. And, Mr. Anderson, did the catastrophic case management unit provide assistance with your report on --

A. No.

Q. -- Mr. Peterson?

A. No.

Q. Did they provide any recommendations in the case of Mr. Peterson?

A. No.

Q. Can you describe what types of individuals you work with through the catastrophic case management unit.

A. In general, catastrophic case management unit handles varying levels of spinal cord injured workers, traumatic brain injury, amputees. They usually have multiple amputees. And then you'll have some miscellaneous diagnoses, but those are the three primary diagnoses.

Q. And other than Mr. Peterson, have you ever worked with any clients who have Parkinson's disease?

A. The only -- no, but I would like to note that my mother was diagnosed with Parkinson's

in 2012 and she died in 2022, and so I have experience working with her and her disease prognosis through Parkinson's.

Q. Now, switching gears just a little bit from your CV, Mr. Anderson, have you ever held any teaching position in the area of housing assessment or feasibility?

A. No.

Q. Have you ever given any lectures or seminars in the area of housing assessment or feasibility studies?

A. Yes.

Q. Where were those lectures or seminars given?

A. They're usually through legal or healthcare association conferences. So throughout the years -- I can't tell you off the top of my head how many I've given, but I've presented to workers' comp and legal and healthcare association seminars or conferences.

Q. Generally do you recall the content of any of these lectures or seminars?

A. It is based on universal design and accessible housing.

Q. And is that the only topic for your

lectures and seminars?

A. Included in that would be assistive devices, so that's additional probably to that.

Q. And have you ever published any articles, papers, books on housing assessment or feasibility studies?

A. I have not published them myself, but I have been covered in magazines and different publications for this type of work.

Q. Do you recall the title of any of those magazines or publications?

A. Not off the top of my head. Ultimate Home Designs in 2008 was a magazine on universal design presentation on aging in place, and then different newspaper articles and publications over the years.

Q. And was the topic of those publications and newspaper articles related to universal design?

A. Yes.

Q. Were there any topics in those publications other than universal design?

A. No.

Q. Now, Mr. Anderson, you don't have a medical degree; correct?

A. Correct.
Q. And you have no education relating to Parkinson's disease; correct?
A. Correct.
Q. And you have no education relating to movement disorders generally; correct?
A. Correct.
Q. And you are not licensed to practice medicine; correct?
A. Correct.
Q. You are not a licensed physical or occupational therapist; correct?
A. Correct.
Q. Would you agree with me that you are not a medical professional?
A. Yes, I agree.
Q. Would you also agree that you are not qualified to offer an opinion on Mr. Peterson's medical care related to Parkinson's disease?
A. I agree.
Q. Would you also agree you are not qualified to offer an opinion on Mr. Peterson's medical care costs related to his Parkinson's disease?
A. I agree.

Q. Thank you, Mr. Anderson.

Switching topics again, have you ever served as an expert in a prior case before?

A. Yes.

Q. How many cases total?

A. I think my first was in 2010. I would say I have completed 15 to 20 expert reports similar to this.

Q. And do you recall the names of any of those cases?

A. Not off the top of my head.

Q. And do you recall the party for whom you were serving as an expert in any of those cases?

A. I -- I provide services both on the plaintiff and the defendant side. I don't remember names off the top of my head.

Q. Do you recall the last time you served as an expert?

A. Probably within the last 12 months.

Q. And in that case, did you draft an expert report?

A. Yes.

Q. And did you submit any affidavits or declarations to the court?

A. No.

Q. And in that case, did you testify at a deposition?

A. No. They didn't require a deposition.

Q. And did you testify at trial?

A. No.

Q. Were any of your opinions excluded by the court?

A. Not that I'm aware of.

Q. And if you can, Mr. Anderson, in this case that we're talking about right now, do you recall your opinion in that case? Was it a housing feasibility study?

A. Yes. It was an existing house that needed to be modified with universal design to accommodate accessibility.

Q. And how did you first learn about the matter with Mr. Peterson?

A. I receive a phone call, a voice message from Kay Peterson [sic] explaining that she had a referral for me, and that's how I learned this.

Q. And was Kay Peterson the first person who contacted you about working on this matter?

A. Yes.

Q. When you were contacted, were you

asked to do anything specifically for this case?
A. No. Just to assess the house.
Q. And at that time, what information were you provided with?
A. Kay Hairston just left a message saying that she had a referral and provided the attorney information.
Q. And when were you formally retained as an expert in this case?
A. I think -- I don't know off the top of my head. We provided the engagement agreement. I'm going to say sometime in September, early October.
Q. September or October of what year?
A. 2024.
Q. And did you write your report in this case before you were formally retained?
A. No.
Q. Did you speak with counsel at all prior to being formally retained?
A. No.
Q. And other than Kay Hairston, did you speak with any other -- any other individuals before being retained?
A. No.
Q. Do you recall who retained you in this

case?

A. I believe it was Leslie.

Q. And have you received any compensation in connection with your work in this case?

A. Yes.

Q. Do you know how much you've been paid to date?

A. I think roughly $3,200. The invoice was submitted.

Q. And how do you charge for your services as an expert?

A. Hourly.

Q. How much do you charge per hour?

A. It depends on the -- the client, but roughly 200 to 350 an hour, depending on the service.

Q. Can you go into detail about what impacts the difference between charging 200 an hour versus 350 an hour?

A. It's primarily fieldwork compared to desk work.

Q. I know this might be obvious, Mr. Anderson, but can you describe desk work versus fieldwork.

A. Fieldwork would be anything that

requires me to travel outside of the office. Desk work would be work in the office at my desk.

Q. And is $200 per hour the minimum you charge?

A. Yes.

Q. And how do you keep track of your time?

A. I have a passive -- a passive timekeeping system called Timely that sits in the background of my computer and then also a GPS for any type of travel.

Q. And are you reimbursed for any expenses or costs associated with your work?

A. Drive time and mileage.

Q. And is your compensation in this matter in any way dependent upon the outcome of the case?

A. No.

Q. And the rate you're charging in the case of Mr. Peterson, is this the same rate you would charge for other similar work?

A. To Liberty Mutual and Travelers, no.

Q. Would you say that this is lower or higher than what --

A. This is higher due to the volume and

the scope of work compared to the work with workers' comp cases.

Q. And do you know the percentage of your annual income that is earned from performing expert services?

A. Probably 2 percent.

Q. And do you recall what percentage of your annual income from 2024 was earned from work you did on this case?

A. You're speaking about this case in particular?

Q. Yes.

A. It's very nominal. I'm not even sure.

Q. So is it just the 3,200 that you mentioned?

A. Yes.

MR. TURNER: I'm now going to share what I'm marking as Exhibit 4 in the chat.

Counsel, can we go off record?

MR. LEHMAN: Of course.

MR. ROMANO: Yes.

VIDEOGRAPHER: Going off video record, 10:44 a.m.

(Recess taken.)

VIDEOGRAPHER: Back on video record,

10:49 a.m.

MR. TURNER: For the record, I'm now dropping what I'm labeling as Exhibit 4 into the chat, and I will be sharing my screen with that as well.

(Whereupon, Exhibit 4 marked for identification.)

BY MR. TURNER:

Q. Mr. Anderson, can you see the document that I'm currently sharing on the screen right now?

A. Yes.

Q. Do you recognize this document?

A. Yes.

Q. Mr. Anderson, I'm scrolling to question 2 -- or response number 2 in this document, for the record -- for the record.

You spoke with Edgar and Lori Peterson on September 20, 2024; correct?

A. September 21st, I believe.

Q. And was this the first time you had spoken with the Petersons?

A. Yes.

Q. And you met with them again on December 10th of 2024; correct?

A. Yes.

Q. And were these meetings conducted remotely?
A. Yes.
Q. And during these meetings, you used a software program called Chief Architect to take notes; correct?
A. Yes.
Q. Did you take any notes during that meeting?
A. Not at that time. This was an introductory phone call to let them know who I was and what I would be doing and to have them -- answer any questions that they had for me.
Q. And after that December 10, 2024, call, did you speak with the Petersons again?
A. I referenced the September 21st -- or 20th meeting in what I just answered. I spoke to them again -- I met with them again on December 10th. Those were the only two times that I had any interaction with them.
Q. And did you take any notes during either of those meetings?
A. Just I made notes in Chief Architect on the canvas.
Q. And were those notes completely

incorporated into your report?
A. They weren't incorporated. They were considered.
Q. Did you speak with any of Mr. Peterson's treating physicians in this case?
A. No.
Q. Mr. Anderson, Mr. Peterson's home address is 1509 Goodbar Avenue, Memphis, Tennessee 38104; correct?
A. Yes.
Q. And this is the property that is the subject of your report; correct?
A. Yes.
Q. In addition to meeting remotely with the Petersons, you also conducted a virtual tour of the property?
A. Yes.
Q. Do you recall when you virtually toured Mr. Peterson's property?
A. I -- I virtually toured the property all throughout the assignment.
Q. And who was part of that tour?
A. No one but myself. It was a LiDAR scan of the property. So a virtual tour or tour, I think, is used loosely here.

What this is is it is a LiDAR scan that allows you to go through the property, and so that is available 24/7 and in the cloud, so I have access to it at any time. So I made multiple tours of the property during the assignment.

Q. And did the LiDAR scanning or tour require any physical equipment in the Peterson home?

A. Yes.

Q. And what equipment was required?

A. It was a camera.

Q. And who controlled the camera during these LiDAR scans?

A. I would like to correct the record. I did hire a -- a local representative that had a camera and -- they have the camera and the technology, and they went on-site and they scanned the property.

Q. Do you recall the local representative's name?

A. Not off the top of my head.

Q. Do you recall the organization that the local representative worked for?

A. Not off the top of my head.

Q. And was that representative the sole controller of the device used to scan the Petersons'

home?

A. Yes.

Q. In part of this scanning, you used Matterport technology; correct?

A. Yes.

Q. What does Matterport technology collect during LiDAR scanning?

A. I don't understand the question.

Q. Apologies, Mr. Anderson. I'll try and rephrase.

The physical camera --

A. Um-hum.

Q. -- you -- employs Matterport technology; correct?

A. Yes.

Q. What data does it collect when you're doing a scan of a person's home?

A. So LiDAR will -- the LiDAR technology will send an infrared beam out to the surfaces, and it goes to the surface and comes back and creates a 3D model of the environment.

Q. And does the camera use, employ technologies other than LiDAR for the purpose of scanning someone's property?

A. No. The camera just has to be a 360

camera, and when you upload it to Matterport, they convert it to the LiDAR scan.

Q. Is that the only requirement for the camera?

A. Yes.

Q. And other than the LiDAR scanning that you just mentioned, did you also conduct a physical tour of Mr. Peterson's property?

A. No.

Q. Why not?

A. For the purpose of this report, there was no need to do that because the LiDAR scan provides all the information I need on the measurements of the house. This is a technology that I use day to day with all my projects.

Q. And is it the industry standard to only perform LiDAR tours of properties you provide feasibility and projected costs for?

A. Depending on the location, yes. If it is -- if it is local to Baltimore and I can drive within an hour or two, at times I will perform an on-site, but for the sake of time and cost, the LiDAR scan is sufficient.

Q. Is location the only factor you use when determining whether or not to conduct an

on-site tour?

A. No. Sometimes I -- my clients will require that I go on-site to understand maybe some of the more complicated case -- the family dynamics and, you know, specialized or -- you know, situations or issues that are going on with a project.

Q. And in the case of Mr. Peterson, did you request to physically tour his property?

A. No.

Q. Now, when you conduct your on-site tours, do you also -- do you make use of technologies other than LiDAR?

A. I will just use a tape measure to, you know, gather additional information maybe on their equipment -- maybe on -- on them, their reach and so forth, but on the house per se, LiDAR is sufficient.

Q. And just so it's clear, as of today, you have not been physically present inside Mr. Peterson's home; correct?

A. Correct.

Q. Mr. Anderson, I'm going to switch back over to Exhibit Number 2. This is your report, if you recall, and I will be sharing it on my screen. Can you confirm that you can see your report?

A. I can see my report.
Q. And does this report contain all of the opinions you have formed to date in this case?
A. Yes.
Q. Are you planning to form any additional opinions?
A. No.
Q. Looking at your accessibility section, did you perform an accessibility assessment regarding Mr. Peterson's disabilities?
A. An accessibility assessment? Can you ver- -- or can you elaborate on that, specifically what that means?
Q. Sure. Did you -- does your assessment account for Mr. Peterson's personal disabilities?
A. Yes, it's considered.
Q. And have you worked previously -- have you previously performed work for individuals with physically debilitating illnesses or injuries?
A. Yes.
Q. With Parkinson's disease?
A. No.
Q. How about with movement disorders?
A. Sure. The -- the catastrophic nurse assignments that I provided, some -- some of the

miscellaneous diagnoses are neurological in nature.

Q. And have you performed work for any individuals requiring wheelchair accessibility prior to Mr. Peterson?

A. Yes.

Q. What percentage of your work would you say falls within individuals with movement disorders?

A. 100 percent.

Q. And do you work with any doctors or medical professionals for these accessibility assessments?

A. No.

Q. Do you ever communicate with the client's doctor or medical care provider in any of your cases?

A. No.

Q. Do you engage with any medical professionals when determining accessibility modifications for a person's residence?

A. At times I will communicate with the catastrophic nurse case managers.

Q. In what instances will you communicate with those managers?

A. When there are questions or options in

regards to possible solutions.

An example would be maybe a tub transfer system that allows a spinal cord individual to transfer into a bathtub using a device that eliminates transfers, physical transfers. The chair transfers with an individual in it.

And the reason why I do this is because most of the time dwellings, apartments and houses, do not have a roll-in shower, and the cost to take out a tub and put in a barrier-free shower can be eliminated if certain pieces of equipment such as a tub transfer system is used.

So those are the types of discussions that I have.

Q. And in the case of Mr. Peterson, did you engage with any medical professionals when determining the accessibility modifications for his home?

A. No.

Q. Do you recall why you didn't engage with any medical professionals for that purpose?

A. When you -- when you practice universal design, universal design is a design that is usable by all people to the greatest extent possible without the need to further modify or

adapt.

So his -- his disease and the self-care falls under good universal design practice.

Q. Mr. Anderson, I'm switching to your residential accessibility portion of your report here.

Would you agree that there are not uniformly accepted codes for implementing accessible features in privately owned homes?

A. Yes.

Q. Would you agree that there are not uniformly accepted standards for implementing accessible features in privately owned homes?

A. Yes.

Q. Would you also agree with that without uniformly accepted codes and standards for privately owned homes and houses, you used universal design to implement certain accessible features in the Peterson home?

A. Can you repeat the last part? Certain features? Can you elaborate or ask differently on that.

Q. Not a problem. Mr. Anderson, I can rephrase.

So you -- as you mentioned, you agreed to a few things just there. Would you agree that without uniformly accepted codes and standards, you used universal design for Mr. Peterson's recommendations?

A. Yes.

Q. Who made the decision to use universal design?

A. That's my specialty and my area of expertise.

Q. And you may have elaborated on this a bit before, but how did you decide to use universal design in the case of Mr. Peterson?

A. Universal design by itself, the practice and the principles will allow Mr. Peterson to use the exterior and interior part of the house with good design without the need to specialize the design to accommodate specifically his disease of Parkinson's.

Q. Is there any authority that you're aware of that says universal design is appropriate when there are not uniformly accepted codes and standards?

A. It's -- I would say over the last 10 or five years, it has become an industry standard

for residential accessibility.

Q. Are you aware of any national or international standards that default to the use of universal design?

A. No.

MR. TURNER: For the record, I'm adding what I'm marking as Exhibit 5 to the chat, and I will be sharing my screen as well.

(Whereupon, Exhibit 5 marked for identification.)

BY MR. TURNER:

Q. Mr. Anderson, can you let me know when you can see the document I'm sharing.

A. Yes, I can see it.

Q. Do you recognize this at all?

A. I don't recognize this document per se. I do recognize the seven principles of universal design.

Q. I'm going to scroll through just to confirm each of these principles, so bear with me if it takes a little bit.

Is equitable use the first principle of universal design?

A. Yes.

Q. Is flexibility in use the second principle?
A. Yes.
Q. Is simple and intuitive use a third principle?
A. Yes.
Q. Is perceptible information the fourth principle?
A. Yes.
Q. Is tolerance for error a fifth principle?
A. Yes.
Q. Is low physical effort the sixth principle?
A. Yes.
Q. And is the final principle size and space for approach and use?
A. Yes.
Q. Thank you, Mr. Anderson.
Now, to you, what is universal design?
A. To me, universal design is -- as I mentioned, it is good design. The design itself is usable to all people to the greatest extent possible.
So in that example, universal

design -- I like to approach it from -- when I have a project -- I just mentioned usable by all people to the greatest extent possible.

The -- in my assignments, I will take an able-bodied individual that can walk without any disabilities. I will consider somebody that uses a wheelchair independently, manual. It could be somebody in a power wheelchair, and then a far extreme of this would be a home delivery service delivering an appliance to the house.

So that is a wide range of individuals with different abilities that are using a particular environment or product.

Q. Isn't that how others in your industry would define universal design?

A. I would assume so. I can't speak for others.

Q. And turning back to your report, in the Residential Accessibility section, you provide six items in a bulleted list. Would you say these are industry standard accessibility features?

A. As I noted, they're baseline.

Q. And when you say baseline, what are you referring to?

A. I -- I'm re- -- I'm referring to the

features that should be considered when trying to achieve or buy or modify a residential dwelling for individuals.

Q. And would your baseline and the principles of universal design -- how do you weigh one principle against another?

A. The seven principles that you mentioned, you -- when you come up with a solution in the design process, you want to be able to consider those -- those principles when designing a house or an exterior feature.

An example of that would be -- we'll say a sidewalk. Universal design is 42 inches. Some will say 36. I do 42. That can accommodate individuals that are walking by themselves, walking side by side, rolling an appliance along a sidewalk.

And the -- if you take the principles, which are, you know, equitable, it's useful to the users, flexible, it can -- you know, the design can accommodate the different target populations that I mentioned earlier.

It's intuitive, you know, to use the sidewalk rather than the grass, and perceptible. You -- it communicates the necessary information for somebody to use it.

Tolerance of error. That is if anything were to -- if a client or a user were to misuse the sidewalk, would it result in any type of -- of hazard or injury, and an example of that would be is if the sidewalk were poured and there is -- this happens a lot.

The sidewalk is poured. The forms are removed, and the sidewalk -- the finished level of the concrete is not at the same level as the ground, so there will be a dropoff. So universal design brings up the ground so it can tolerate error.

If you're not paying attention, the wheel of a wheelchair or the wheel of a dollied appliance doesn't fall off the sidewalk and down onto the -- the -- the ground. So that's an example of tolerate error -- error.

Low physical exertion is that there's little to no slope and there's size and space to use it.

So you take the seven principles of universal design and you implement them into all features of the exterior and interior of a house.

Q. And to the extent those principles conflict, how do you weigh one principle against the other?

A. You don't -- I don't know as if they conflict.

Q. Mr. Anderson, I am switching to the summary section of your report, which I believe is page 3. Is it your opinion that the estimated total cost for the recommended work is $289,000? Sorry. $289,979?

A. Yes.

Q. And when you say recommended work in this case, are you exclusively referring to the recommendations in your report?

A. Yes.

Q. And you also state that your estimate includes a 10 percent contingency for latent issues, change orders, and general exclusions from the cost estimate; correct?

A. Yes.

Q. And that 10 percent contingency equates to $28,998; correct?

A. Yes.

Q. Is this 10 percent contingency an industry standard?

A. Yes.

Q. Have you ever used a contingency other than 10 percent?

A. Yes.

Q. In what cases would you use a contingency other than 10 percent?

A. Job -- specifically job site location, if it -- if it is rural, lack of contractor pool, if there are possibly known defects of the house that would require additional professional opinions from say an architect or a civil engineer. Those are -- those are some of the reasons why there might be an additional 10 percent.

Q. And have you ever used a contingency lower than 10 percent?

A. No.

Q. Now, Mr. Anderson, I think you alluded to some of these, but what are some of the latent issues that may occur?

A. During demolition, you will expose the insides of walls, so you might have mechanical -- mechanical systems in there. You might have some structural components in there, water damage, things that you -- you can't see.

And so once you expose the inside of the walls, you can definitively understand what needs to be done and the scope of work that is required to cure those problems.

Q. And as we sit here today, do you know whether any those latent issues will occur in the case of Mr. Peterson?

A. No.

Q. And even if they did occur, do you know whether they will actually account for the 10 percent contingency?

A. Can you ask that differently?

Q. If any of those latent issues were to occur, would they match the 10 percent contingency recommendation in terms of cost?

A. There's, I would say, an equal chance that it is under or over that amount.

Q. And I don't know if these are overlapping, Mr. Anderson, but what are some of the change issues that may occur?

A. As noted, you might need to hire specialized trades to fix a problem in a house, such as I have a case where we had to hire a structural engineer to come on-site.

The span -- once the ceiling was removed and the span of the ceiling rafters were exposed, you could see the length and the thickness and the -- the span was greater than the thickness of the -- of the rafters, so additional work had to

be done in fortifying the structure, and so it's the additional expense and cost for the professionals.

In that case, you had to get a stamped document.

Q. And as we sit here today, do you know whether any change issues will occur in the case of Mr. Peterson?

A. To tell you the truth, I contemplated more than 10 percent, and the reasons why I thought about that or considered it was that the house was built in 1912, and if you look at the Matterport tour, you can see that there are 10-foot ceilings, and it's just unknown what is in the walls and if additional work would be required to bring it up to code.

Sometimes a jurisdiction requires the mechanical systems of a house to be brought up to code even if it's not in that particular part of the house that's under construction.

Q. But as you mentioned, at the moment, that is one unknown for Mr. Peterson's home; correct?

A. That is unknown.

Q. And even if some of these change issues did occur, do you know whether they will

actually -- will they -- whether they will equal or exceed the 10 percent contingency?

A. As I noted, I would say it's the same percentage, that it would be less or more.

Q. And to date, have you identified any latent issues in your recommendations for Mr. Peterson's home?

A. No.

Q. Have you identified any change orders to date in your recommendations for Mr. Peterson's home?

A. No.

Q. And have you identified any general exclusions to date in your recommendations for Mr. Peterson's home?

A. No.

Q. Now, Mr. Anderson, your report also recommends an additional 10 percent contingency; correct?

A. Yes.

Q. And the dollar value corresponding with that contingency is again $28,000 -- or sorry -- $28,998; correct?

A. Yes.

Q. And this is to account for historical

preservation compliance, to include additional professional services and material upgrades not known at this time; correct?

A. Correct.

Q. Is this additional 10 percent contingency an industry standard?

A. A contingency -- a 10 percent contingency in general is, I would say, an industry standard.

This is -- as I noted, this is for the historical review by the different associations that are associated with the modifications to the exterior part of the house which would more than likely require professional services and review of upgraded materials.

Q. Outside of historical review, were there any other factors that led you to include an additional 10 percent contingency?

A. No. Just I came up with that in my opinion after reviewing -- I believe it was a 75-page document on architectural guidelines by the historical association.

Q. And at this time, do you know whether you will encounter any historical preservation compliance issues with Mr. Peterson's property?

A. This -- no.
Q. And do you have any idea as to whether additional professional services will be required for the recommendations to Mr. Peterson's property?
A. It's reasonable to assume that there are going to be required drawings to be reviewed because you would have a load-bearing structure.
Q. Any additional professional services beyond drawings?
A. You might need a civil engineer based on setbacks and also water runoff based on concrete work.
Q. Now, Mr. Anderson, in your report, you also mention that there may be material upgrades not known at this time in your final paragraph; correct?
A. Yes.
Q. Are there any material upgrades you did not recommend in Mr. Peterson's case?
A. Can you rephrase that?
Q. Sure. Apologies for...
Are there any material upgrades that you would recommend in the case of Mr. Peterson?
A. No, but they're unknown at this time.
Q. So, Mr. Anderson, then is it fair to say that when we look at the 10 percent contingency

and the 10 percent additional contingency that at least 20 percent of the projected cost of this project is uncertain to occur as of today?

A. Correct.

MR. TURNER: Mr. Anderson, we've been going for over an hour. I know we took a short break. I'd like to take a 10-minute one if that's okay with you.

THE WITNESS: That's fine.

MR. TURNER: Counsel, can we go off the record?

MR. ROMANO: Yes.

VIDEOGRAPHER: Going off video record, 11:25 a.m.

(Recess taken.)

VIDEOGRAPHER: Back on video record, 11:35 a.m.

BY MR. TURNER:

Q. Mr. Anderson, earlier in the deposition, you mentioned that the technology and equipment used to conduct a scan of Mr. Peterson's home was LiDAR based; correct?

A. Yes.

Q. And just for my own edification on this, is Matterport the type of LiDAR or the

software used to support the LiDAR?

A. It's the software. They -- they render the scan into a usable product and files.

Q. And this LiDAR scan, again, was conducted via a camera; correct?

A. Yes.

Q. Do you know what the accuracy of the LiDAR used to scan Mr. Peterson's home is?

A. They say within 1 percent. This technology is worldwide used by architects and commercial construction companies for their projects.

Q. And does that 1 percent correspond to a distance or range?

A. The most useful part of Matterport technology is the ability to measure. So when you are touring Matterport, a Matterport tour, there is a tape measure, and you at any time can do custom measurements. The so the 1 percent is related to the actual measurements of the model.

Q. And does the LiDAR used to scan Mr. Peterson's home require any sort of calibration prior to use?

A. No.

Q. Are you aware of any sort of automated

calibration that Matterport employs for its LiDAR?
A. Not that I'm aware of.
Q. Do you know what resolution your LiDAR scanning equipment captures at?
A. No.
Q. In the case of Mr. Peterson's home, do you know how the LiDAR scanner is tracked?
A. I'm not sure I understand what that means.
Q. Let me clarify some. Do you know if the LiDAR used in Mr. Peterson's home was tracked using global navigation satellite systems?
A. No.
Q. Do you know if it was tracked using inertial measurement units?
A. No.
Q. And Matterport is a cloud-based system; correct?
A. Yes.
Q. And in the case of Mr. Peterson, did you use Matterport's mobile scanning application?
A. I don't know if there -- I don't know what you're talking about when you're saying mobile.
Q. Okay. Is there a specific application that's required to use Matterport on a camera?

A. No. There are cameras that are manufactured and sold by Matterport, and earlier -- I've been using this technology, I'm going to say, close to 15 years, and initially the technology required you to purchase a Matterport-manufactured camera, and over the years, I would say within the last five years, they allow third-party cameras to be used, and that's compatible with their technology.

Q. Thank you. That's helpful. Do you know what particular camera was used in the case of Mr. Peterson?

A. It was a Matterport Pro2 camera.

Q. And do you know if Matterport makes use of any artificial intelligence for any of its data processing?

A. I can't answer that. I'm not sure.

Q. Now, for the scanning of Mr. Peterson's home, how many LiDAR scans did you use in capturing the interior of his home?

A. I don't know off the top of my head. I'm going to say probably 50 to 60 scans.

In general, when you take a scan, the camera captures it into the software program, and then you move the camera approximately 5 feet. And

the important part of that is to make sure your next scan can see where the previous scan was, and if you go too far and it's misaligned, it won't capture the scan.

So it checks where it was previous to the scan before it scans and processes the next scan.

Q. And when you say misaligns, can you explain what you mean there?

A. Misaligned? I can't -- that's the -- that's the error that comes up on the screen, and the way -- from a nontechnical interpretation is that I went -- or the scanner went too far.

That happens when you're going through doorways from one room to another. It happens when you go too far.

So there's different things that can happen during the scan that will give you the misaligned error, and then in that instance, you just go back closer to the previous scan. Sometimes you have to go back within a foot or two and capture multiple scans.

Q. And just so I can wrap my head around all this, Mr. Anderson, so in the case of Mr. Peterson, the camera would capture or perform

about 50 to 60 scans, and then the device would need to be moved 5 feet to perform the next series of scans and so on and so on; correct?

A. Each scan would -- each scan takes place that's -- that's -- the camera goes around in a 360 circle and that is one scan, and then you move the camera 5 feet and that would be a second scan.

Q. And is that process pretty standard for your industry?

A. I would say, you know, the feedback I get from my clients, from Travelers and Liberty Mutual, anybody else that they use that would be my competition doesn't use this technology, and they find it very useful and effective in handling the claim.

So I think that's why I get an abundance of work and referrals from them is because of this technology.

Q. And the standard you used here for Mr. Peterson's home, you would use that in other similar homes; correct?

A. Yes. It's the same process and protocol that I follow on other referrals.

Q. Is any of the LiDAR scanning impacted by environmental factors?

A. Sunlight, that will cause a misalignment. When there are maybe a door that -- if you come into a room and you scan it and there's a closet door and the door moves, those are environmental factors that will cause a misalignment.

Q. Outside of those, are there any others that you're aware of?

A. No.

Q. And LiDAR can't see through solid objects such as walls or furniture; correct?

A. No.

Q. Mr. Anderson, I'm going to share my screen again, returning back to your report. Specifically I'm going to be looking at appendix D.

Are you able to see my screen, Mr. Anderson?

A. Yes.

Q. So appendix D of your report contains all of your opinions on the estimated materials and costs of construction for Mr. Peterson's property; correct?

A. Yes.

Q. And each of these lines represents an individual item; correct?

A. Yes, a -- a category. It could be an item. It could be a category.

Q. Okay. And how for each of these was the quantity determined?

A. From the LiDAR scan and the floor plan.

Q. Outside of the LiDAR scan and floor plan, were there any other factors that determined the quantity?

A. I think maybe some personal, you know, opinion or perception based on, you know, experience and visual clues that were -- that could be obtained from the LiDAR scan.

Q. And I may have missed this earlier. Forgive me, Mr. Anderson. Was LiDAR scanning used for the outside of Mr. Peterson's home as well?

A. The LiDAR scan -- there's a different technology for the outside because there's -- there's a 3 -- there's a 3D scan which, you know, as I mentioned before, it's -- it's a -- a ray that goes out, hits an object and comes back, that's 3D and that creates a LiDAR.

When you go outside, that 360 scan -- it's very difficult to have -- to make it work, so you can, but what I did in this case is a 360 scan,

which is just a visual scan and not a LiDAR or a modeling scan.

So there's two different scans. The inside of the house was the 3D LiDAR. The outside, because it's such a broad area, a large area without objects, it was a 360 scan.

Q. Okay. Gotcha. So for some of -- for the items in your appendix D that are outdoors, you would have used this 360 scan and maybe some documents relating to the house to determine some of the quantities; correct?

A. Yes.

Q. What does the wastage column in this appendix refer to?

A. Wastage is -- you know, for the very first thing, if I go down to the wastage, there's 5 percent concrete. That might be that you buy X amount of concrete, but you don't use it all. Because you typically buy more than what you need. So it's unused or wasted materials.

Q. And how did you calculate the wastage percentage -- percentages in this appendix?

A. That is -- it's provided by the cost data software. It's a recommended amount that's provided, and then you can -- you can override that

if you want, you know, based on experience, discretion.

Q. Are these -- for the wastage numbers or percentages that appear in the case of Mr. Peterson, are these standard to the software?

A. I would assume yes. I'm not sure, but they're more of industry standards.

Q. And I notice some of these items have a wastage percentage of zero. What's going on in those cases?

A. In those cases -- for example, you know, if you look at a door, line 12, there's zero percent there because the door doesn't have -- it's -- it's a -- fixed and a pre-hung. So it's an assembled product, so none of that product is wasted, compared to, say, maybe flooring, where you have a piece of floor that needs to be cut to fit a particular area.

Q. So the wasted percentage of zero is typically used when it's just a single item that doesn't need to be cut or modified?

A. Yes.

Q. And does wastage percentage impact the ultimate cost of an individual item in your appendix?

A. I'm sorry? What -- I missed that.
Q. Does the wastage percentage that you list for each item impact the ultimate cost of an item in your appendix?
A. It impacts the cost because you have to buy more material to accommodate the wastage to in this case install the floor so that -- so the wastage does have a direct effect on that.
Q. Is that -- is there a calculation that's performed to determine that total?
A. That's done within the program or established by industry standards or actually from experience as well.
Q. I'm going to switch to the unit material costs column now. For the items in this appendix, specifically looking at this column, are these costs calibrated to the local level?
A. Yes.
Q. So these are specific to Mr. Peterson's area as in Memphis, Tennessee?
A. Yeah, in addition to the -- the month and the year.
Q. And how does month and year impact the unit material cost?
A. If there is a -- a geographical

event -- sort of like this storm would be a great example -- labor to repair items is going to be scarce because there's a demand for it.

And also an example of that would be during COVID, pricing for lumber went very high because, again, the supply for the material was limited. So it's supply and demand based on geographical considerations.

Q. And for the individual items, how did you calculate or reach the unit material cost?

A. It's provided by the program.

Q. And did you use the values provided by the program in this case?

A. For the most part, yes.

Sometimes when you look at a line item, we'll just say an industry standard. Let's say a contractor who performs a decent amount of work, they -- they collect and maintain materials cost and also labor cost for particular items in the project, and when the -- when the cost estimate program comes back, sometimes you want to calibrate that based on historical project data or maybe something that is happening now.

Typically the program is updated every month, but maybe, like in this example, a storm

would impact cost today for a service that needed to be rendered, you know, within the next couple days.

Q. And do you know how the cost estimate program collects or sources these individual unit material costs?

A. They -- they particularly will go out to the market and price and calibrate their -- their expenses based on current market pricing at distributors.

Q. So they consult with multiple sources for materials for populating this value?

A. Yes.

Q. And in the case of Mr. Peterson, do you know when these costs were calculated or estimated?

A. December 2024.

Q. Looking now at the total material costs column, how are each of these calculated?

A. Looking at the material cost -- I'm trying to find which...

Q. It is the column right after --

A. The total material costs? Okay. I'm sorry. So it -- that takes into consideration the market rate for the product, times the quantity, times -- and then it considers the -- the wastage.

So in the example of number 12, a door, the door is 2,850, and it's got a zero waste, and the unit is one. So the material cost is -- it's just the math on that.

Q. And are there any sub-costs that are associated with the total material cost?

A. In some cases -- sub-cost, I'm not sure what you're referring to.

But let me just say for the -- for the example of the concrete, number 10, sometimes you'll have costs categories that include, say in this example, stone.

Usually when you -- good practice, industry practice for concrete is putting a stone base and then rebar. So in that example, that, I think, is what you're referring to.

There's subcategories of expenses under a description. Not all of them have it. It will provide you that information on a -- you know, on an item-by-item basis.

Q. Thank you, Mr. Anderson. I'm sure I did a poor job of explaining there.

Do you know if transportation, materials, and locations are included in that cost as well?

A. Yes.
Q. And do you know if these costs are current as of today?
A. These costs are current as of December 2024.
Q. And is that true for the unit material cost column as well?
A. Yes.
Q. For the unit labor cost column, how are those numbers populated?
A. They -- I'm not sure what their source are, but they will do a -- a study or an audit of local labor expenses. I'm -- I'm not sure if they have -- if they consult with a group or a pool of contractors, but they -- they calculate the -- the skill of the individual doing the job at the hourly rate and then the projected cost to do the -- the job, the service.
Q. And do you know if hourly compensation is included within the unit labor cost?
A. It is.
Q. And, again, that's not something you yourself came up with; right? That's populated by the cost estimate program?
A. Yes, that's -- that's populated by the

cost estimate program.

Q. And then I have a similar question for total labor cost. Do you know how that cost was calculated?

A. That is the -- that's the hourly rate times the quantity or the unit multiplied out into a total item cost.

Q. And for the total item cost, are there any additional factors that went into calculating that value?

A. I did mention that sometimes you -- a contractor will use his own -- his or her own data based on projects.

So at times you might want to override the labor cost based on the skill of your -- your worker, how efficient they are, and you -- you could at times override either, you know, the -- the amount of time or the hourly expense for labor.

Q. And does trade cost -- are those values calculated similar to the other ones?

A. Yes, it -- it -- it's an addition of the columns. So the trade cost on the general is $20,670.

Q. Is trade cost impacted by any changes in the other columns within your appendix?

A. Yes.
Q. Do you know which ones impact trade cost?
A. I'm just referring to what I previously noted that impacts trade cost, and that's geographical considerations in the area for materials and labors -- labor. That is what I understood the question to be.
Q. Now, in the case of Mr. Peterson, is this the most expensive in terms of total cost to accommodate the recommendations for his home?
A. Can you ask that differently? You -- you --
Q. Yeah, sure thing.
Mr. Anderson, is Mr. Peterson's total evaluation the most expensive evaluation you've ever provided to a client based on the recommendations?
A. No.
Q. Is Mr. Peterson's the cheapest?
A. No.
Q. Where would you say Mr. Peterson's total falls within your other clients in terms of total estimated costs for the recommendations?
A. I would say it's -- it's right on par. My projects will range -- I mean, you can see

something as low as 30-, $40,000 for a bathroom. That's an exception, but in general, the prices for my project usually are between 150- and $350,000.

Q. And do you know if you've ever recommended against home modifications because of the total estimated cost?

A. Yes.

Q. Do you know how many times you've recommended against this?

A. I can't -- I can't quantify it, but that happens when the cost to cure the barriers of a home might exceed the value of the home or substitute housing could be cheaper.

Q. Were there any rec- -- sorry. Were there any recommendations for Mr. Peterson's home that fell into this category?

A. No.

Q. And do you know if Mr. Peterson has begun construction or modification on his home, including any of your recommendations as of today?

A. Just clarify. You asked if any of these recommendations were -- were completed?

Q. If any of these projects have been started?

A. I'm not aware of that.

Q. And, Mr. Anderson, when you perform your home assessments and feasibility studies for your clients, do you ever factor in life expectency?

A. I do not.

Q. Do you know if the industry standard accounts for life expectency?

A. I'm not sure.

Q. Mr. Anderson, I'm switching to page 3 of your report. On this page, you state that all work on the property needs to be reviewed and approved by the Central Garden Association and Memphis Landmarks Commission; correct?

A. Yes.

Q. And why does all of this work need their approval?

A. There are statutes and codes in place for that area that these associations govern the work and monitor the work in that area, and they're also part of the permit process.

So if you're going to obtain a permit in this area, they're going to reference and make sure that these associations sign off on the work.

Q. And Mr. Peterson's home is located in an area that requires this type of approval; correct?

A. Yes.
Q. And do you know what the total cost to receive approval is?
A. No. That's what the contingency of the 10 percent in my report is.
Q. And do you have any prior experience working with historical districts, historical associations, and landmark commissions when it comes to remodeling?
A. From time to time, associations come up. I have worked on historical projects in the past. It's not very often.
Q. How many would you say you've worked on?
A. Probably a dozen.
Q. And that work and experience is what led you to conclude it's more expensive than remodeling a traditional home; correct?
A. Yes, there's additional steps and services and expenses associated with the implementation of the recommendations.
Q. Can you provide some detail on -- you know, in what ways those are more expensive than your traditional home?
A. Yeah, as I mentioned previously,

the -- the associations listed would -- would review the proposed modifications, and they may require civil engineer drawings or stamps.

In the example I gave you was runoff. If you're going to alter concrete or impervious surfaces that can't absorb the water, these types of -- of associations and historical districts want to monitor that, and that is just one example of -- of what -- of what is required above and beyond what a traditional project would entail.

Q. So you would agree that work performed on historical homes such as Mr. Peterson's property requires a lot more specificity than standard homes?

A. Yes.

Q. And this includes meeting more codes?

A. Yes.

Q. And generally would you say this includes more work?

A. Yes.

Q. Would you agree that this work is easier to perform in person versus remote?

A. The work that is required would be completed by local licensed contractors and professionals, so this work could not be done remote.

Q. Leading into that, Mr. Anderson, you just alluded to this too. Your report also states that the increased -- this increases the cost since licensed professionals are required for this process.

In this, what type of professionals are you referring to when you say licensed professionals?

A. Civil engineers, physical engineers.

Q. Are those the only two licensed professionals that you would include in this?

A. I am not -- I'm going to say yes, that's what I considered, but I am not actual -- I have never gone through the process itself through these associations, so I just have reviewed their -- their documentation online.

Q. Do you ever work with any historians or historical restoration or renovation contractors --

A. Yes.

Q. -- for this?

And are there specific licenses you're looking for them to have in these cases?

A. No. They're -- that would be governed by the jurisdiction that the work is being performed

in.

Q. And in your work, have you ever employed unlicensed professionals for similar processes or jobs?

A. No.

Q. Is there a situation where you would employee unlicensed professionals at all?

A. No.

Q. In the case of Mr. Peterson, do you know what the cost of using licensed professionals versus unlicensed professionals would be?

A. No.

Q. Now, Mr. Anderson, on page 1 of your report, you also state that all modifications of the house must comply with the architectural guidelines of the Central Garden Association and the Memphis Landmarks Commission; is that correct?

A. Yes.

Q. And you also provided a link to these guidelines; is that correct?

A. Yes.

MR. TURNER: For the record, I am now putting what I'm marking as Exhibit 6 into the chat, and I will be sharing it on my screen.

(Whereupon, Exhibit 6 marked for identification.)

BY MR. TURNER:

Q. Mr. Anderson, can you let me know when you can see the document on the screen.

A. I can see that.

Q. And have you seen this document before?

A. Yes.

Q. And have you reviewed it in its entirety?

A. Yes.

Q. I'm going to turn to numbered page 5 of this document, Mr. Anderson. It's page 12, if you're looking at the bottom. And can you see step 5 on the screen, Mr. Anderson?

A. Yes.

Q. And step 5 reads "Consider consulting Memphis Landmarks Commission staff before submitting a proposal. Scheduling a preliminary review with the MLC staff prior to creating drawings for final review is strongly recommended. Staff can help identify potential conflicts with the design guidelines. Again, doing so may help facilitate the review process."

Did I read that accurately?

A. Yes.

Q. Have you submitted a proposal with the CGA Landmarks committee as of today?

A. No.

Q. And your report also contains drawings of Mr. Peterson's property; correct?

A. Yes.

Q. And did you schedule a preliminary review with the Memphis Landmarks Commission staff prior to creating the drawings of Mr. Peterson's property?

A. No.

Q. Has anyone with the Memphis Landmarks Commission reviewed your drawings?

A. No.

Q. As of today, are you aware of any conflicts with your recommendations and design guidelines?

A. No.

Q. To the right of step 5, you see a drawing; correct?

A. Yes.

Q. And the caption for this drawing imagery is "Preferred drawing mechanically drafted

to scale. This drawing best conveys the character of the proposed work."

Did I read that correctly?

A. Yes.

Q. And are the drawings of -- in -- of Mr. Peterson's report in your report mechanically drafted to scale?

A. No.

Q. Now, Mr. Anderson, do you see step 6 on the same page?

A. Yes.

Q. I'll give you a moment to read it since it's rather lengthy. Can you let me know once you've finished.

A. I'm familiar with it.

Q. Have you completed and submitted an application packet to the City of Memphis at this time?

A. No.

Q. And have you received a certificate of appropriateness from the Memphis Landmarks Commission at this time?

A. No.

MR. TURNER: Counsel, I'd like to go off record.

MR. ROMANO: Agreed.
VIDEOGRAPHER: Going off video record, 12:14 p.m.
(Recess taken.)
VIDEOGRAPHER: Back on video record, 12:19 p.m.
MR. TURNER: Mr. Anderson, I just want to thank you for your time today.
Counsel, I have no further questions.
MR. ROMANO: I will have some questions.

EXAMINATION

BY MR. ROMANO:

Q. Mr. Anderson, how would you best describe your background and qualifications in terms of your movement into this area of specialization?

A. How would I describe my background?

Q. Yeah. In other words, what was it that brought you into this field?

A. I -- I started a -- a business called Allied Rehab Services where I would employ PT, OT, and speech, and I got up to 43 therapists, and I would contract them out to hospitals and we would provide services for home health services such as PT, OT, and speech in the home.

And the therapists would go in the home and issues would come up with the patients that would -- would involve modifications or work to their home to make it accessible.

So I got into out-of-pocket equipment, such as bathroom safety equipment, that is not covered by insurance that the patient would need.

So I started to sell with USA Rehab Medical supplies, such as bathroom safety equipment, and that -- that slowly progressed from 1998 all the way to when I started Accessible Housing Services.

So just being in the home, seeing the need, out-of-pocket expenses, things that would keep patients homebound sort of matriculated into this company and service I provide.

Q. And for how many years have you been working as a specialist in this particular field?

A. Informally since 1998, and I say informally because I would produce drawings or concepts.

The therapists would be in the home. Nurses would be in the home. I would be installing -- I would be setting up a power wheelchair.

Through the course of conversations,

they would ask me, you know, my opinion on how to get the wheelchair out of the house, and so I started doing drawings and, you know, napkin sketches, basically.

And so that sort of lit -- lit the candle or fuse to start pursuing this professionally, and that's what, you know, got me to the point where I am now and taking the classes and obtaining the licenses.

Q. You stated earlier in the deposition that you had been hired on numbers of occasions over the years as an expert in this field.

And did I understand you've been hired both by the plaintiff and the defense side in doing these assessments? Was that accurate?

A. Yes.

Q. In this particular instance, did you conduct an assessment to determine the feasibility and projected costs of necessary modifications for Captain Peterson's home?

A. Yes.

Q. And did you do that?

A. Yes.

Q. You rendered a report, and that is the report that we have attached to this deposition

already as an exhibit; right?

A. Yes.

Q. Earlier in the deposition, you were asked a few questions having to do with your -- your very own mother. Do you remember that?

A. Yes.

Q. Did your mother have a condition or disease?

A. Yes.

Q. What was that condition or disease?

A. She -- her primary diagnosis was Parkinson's and she had a secondary of dementia.

Q. Was there a time when you became a caregiver for your mother?

A. Yes.

Q. For how many years were you personally a caregiver for your mother, who had Parkinson's disease and dementia?

A. She moved in with me. I modified the main level of my house, my current house I live in now, to have a main level bedroom and bathroom so she had one-level living. That was in 2018, and she lived with me for four years, and she passed in 2022.

Q. During that four years and in your

experience with your very own mother, did you come to see and understand those items needed for your home in terms of feasible and necessary renovations because of the experience with your own mother's Parkinson's and dementia?

A. Yes.

Q. In terms of the steps that you took to make your evaluations in this case or your methodology for these assessments, would you briefly walk us through the steps you took once you were retained on the case in order to go step by step by step in order to assess this matter and render opinions.

A. Yes. The first step was meeting the Petersons virtually face to face through Zoom, introducing myself, explaining who I am, what I would be doing, the methodology, and asked them --

I talked to them about a gentleman coming in the house to scan the house and explained that process. It takes two hours, or roughly so, and asked them if they would have a problem with that. They agreed to that, and then I coordinated the scan of their house.

And then after the scan was completed, I started working on the project through the LiDAR

scan, independent of any -- any input from anybody, using my experience and my knowledge. I started to, you know, play with the space, we'll say.

I -- the goal was to create one-level living using the four walls of the main level and doing different configurations and considering how the changes might impact the ability of the caregiver and Mr. Peterson's safety and also marketability in resale of the house.

It was -- it's a very desirable community, from what I understand, and so I had to respect the house.

And so at that point I had a good idea of what was going on and the options. I then contacted the Petersons and I reviewed the Matterport tour. We virtually went through the house together.

I asked them their thoughts, their ideas just as a -- as a -- just being courteous. I like to give the -- the homeowner and patient and caregiver the ability to express their opinion and their desires.

They asked for things that I didn't think were, you know, reasonable. For example, they really wanted an addition on the back of their

house. That was their preference. They also wanted modifications to the second level, and I just, you know, told them that I would take notes on that.

And after that call, I actually called you at that point and said: John, I need some guidance here. I -- what they're asking for and what my recommendations are aren't going to be the same.

I -- they have unused space in the house that can be repurposed to meet his needs that doesn't affect resale value, and it's cost effective compared to an addition or an elevator. These are some of the things that they asked for.

You told me that it would be reasonable to work within the space and that -- we conferred that I was going to work within the four -- the four walls.

I put together a plan to create one-level living, and those are some of the documents in my report.

And it's important to note that this is a feasibility study. It -- these designs are to determine if it's actually appropriate and reasonable and feasible to create one-level living, and that's what I did.

And so I -- I concluded by saying: Okay, this is going to be, I think, a good representation of what this one-level living would look like. These are the changes that are needed, and then I then started to gather the cost involved with those feasible ideas to come up with a price that could be reasonably expected to be obtained from a licensed contractor to then implement those designs and construction.

Q. Was it important for you to factor in his physical needs, meaning Captain Peterson's physical needs, as a part of your work and assessment?

A. It's -- it's important to hear them and to ask them how they see bathing and grooming and getting into and out of the house.

But like I referenced, universal design, really if you implement that, he -- it pretty much eliminates the need for specific or specialized design.

And one thing I would like to note, John, in my CV, I -- in 2005-2006, I bought a house in Baltimore, Maryland, and I made it into a universal design house.

I took a -- just a small house. I

modified it, incorporated 70 features of universal design, and I operated that as a model house for over 10 years. During that time, it was a fully furnished house.

And so part of the feedback I wanted to get is -- I rented it to Johns Hopkins patients coming into Baltimore for spinal cord -- Christopher Reeve's doctor was very prominent down there.

And so I would have individuals with disabilities come in and live in this universal design house, and it was an incredible opportunity to get feedback because everyone's abilities were different.

They lived in the house. They stayed in the house up to a month. I was able to get really good feedback on what worked and what didn't work.

And for the most part, universal design accommodated ADLs, activities of daily living. They were able to get into the house, park, enter the house, get to all areas, use the bathroom, use the toilet, use the shower, use the -- use the laundry, use the kitchen, sit on the back deck, you know.

So I was able to get really good

feedback on universal design, and for the most part, when I asked them what would change, what were their difficulties, for the most part, they didn't have any.

So that is an illustration of how universal design can accommodate a wide range of people, regardless of diagnosis and -- and caregiver assistance, without the need to modify it for each individual or for the progression of the disease.

Q. The recommendations you're making for the Peterson home are recommendations which in your opinion are reasonable, necessary, and feasible?

A. Yes.

Q. You spoke earlier in the deposition about the software which allows you to conduct your analysis by not having to ever enter the home in person. Would you elaborate on that as to how it is that you do that.

A. Depending on the location, as I mentioned, I -- I don't know if I mentioned this, but I provide this service all throughout the US. At this point, after 20 years, I think I might have completed a project in every state. I even did one in Hawaii last year, and I completed a project in Alaska.

What I do is I hire a professional licensed business to go into the house, con- -- conduct the LiDAR scan.

The LiDAR scan creates an OBJ file, and I'm able to import that into my Design Architect program, and within a matter of a couple days, I can have the house -- they call it a digital twin -- be in my -- in my software, and I'm able to interact with the environment virtually through my computer, and this technology is extremely accurate.

What -- what happens is I will do a set of plans. They -- like in this example, they would be estimating plans. They're not construction plans; they're estimating plans.

And I will solicit bids from contractors for this -- this -- this work, and I will get feedback from the contractors about the plans, whether they were accurate or whether they weren't, and in -- in most cases, it's within a couple inches off.

And so to overcome that, when the contractor is hired, they will go on-site and do a preconstruction meeting with me, and I will share the architect program screen.

They will walk around the environment

with a tape measure, and we will calibrate the drawings to be sure that the drawings are construction ready, and so that's a process that takes some time to work through with different steps.

Q. Within your specialty, is it accurate to say that is the standard as to how these steps are taken when conducting that particular evaluation or analysis?

A. I would think, yes. I -- and I say I think because I'm not sure what other people do. There -- I don't know many competitors to me in the field of accessibility.

So what -- what is standard industry -- what is industry standard I think is provided to me on feedback from my clients when they say that, hey, this technology is great. We're there.

And it really brings the parties together because we're able to see and walk through the house virtually together as a group so everybody is on the same page, and not many people of my competitors do that.

Q. You mentioned earlier in the deposition when you were asked about taking notes

that in a certain fashion your notes are -- and I thought I heard you say "on the canvas."

A. Yes.

Q. First, is that you what said, first of all?

A. Yes, and I --

Q. Okay.

A. -- I said canvas referencing the program.

Q. Okay. Now, would you tell us what that means when you say there are notes, so to speak, and they are "on the canvas."

A. Okay. So when I open up the program and start, it's a blank file. It's like a -- almost like a piece of grid paper, we'll say, and I will make notes on that grid paper, and that's the screen, and that's what I call the canvas. And so that canvas is used for the drawings, and I will incorporate those notes into the drawings and the final product.

Q. Were the opinions which you have expressed in your report as well as the opinions which you are expressing here today in this deposition opinions within a reasonable degree of certainty in your capacity as an accessible -- an

accessible housing needs specialist?

A. Yes.

Q. Since this house was originally built back in 1912, what factors do you consider as a part of your assessment that are important because of the age of the original home?

A. Well, in 1912, the construction methods were vastly different, and so the one thing is there's plaster throughout the house, and that is a practice that is no longer current. It's now drywall.

Also the house has 10-foot ceilings. So rarely do you go into a residential house and see 10-foot ceilings.

So with the age of the construction, the methodology of construction, and some of the physical characteristics, such as 10-foot ceilings, those are things that need to be considered when putting together a cost estimate.

Q. You have spoken a good bit today about the principles of universal design. Did you, in fact, in this instance for Captain Peterson's home conduct your analysis and evaluation considering and factoring in the seven principles of universal design?

A. Yes.

MR. ROMANO: Thank you very much. Those are all the questions I have.

MR. TURNER: No further questions on my end, Counsel.

VIDEOGRAPHER: Please stand by. This concludes today's video deposition. Going off video record, 1:23:40 p.m.

MR. TURNER: Thank you.

COURT REPORTER: And then, Counsel, just before you guys hop off, will you just please indicate if you wish to purchase the transcript.

MR. TURNER: We -- our standing order is fine.

COURT REPORTER: Okay.

MR. TURNER: Yeah, just go with that.

COURT REPORTER: I'm sorry. I just have to have it on the record that you're ordering, yeah.

MR. TURNER: Yeah, that's fine.

MR. ROMANO: Yes, whatever the understanding is. I know yes, we are going to want a copy. If there's any change in that, Lisa, I'll call you within 30 minutes.

_ _ _

(Remote videotaped videoconference deposition concludes, 1:24 p.m.)

C E R T I F I C A T E

I, Lisa Taylor, Registered Professional Reporter and notary public certify:

That the foregoing deposition of Eric Anderson was taken before me at the time and place therein set forth at which time the witness personally appeared before me via videoconferencing and was duly remotely sworn or affirmed;

That the testimony of the witness and all objections made at the time of the deposition were recorded stenographically by me and thereafter transcribed;

That the foregoing deposition is a true record of the testimony and of all objections made at the time of the deposition.

I further certify that I am neither counsel for nor related to any party to said action, nor in any way interested in the outcome thereof.

My certification as to the accuracy of this transcript, if it has been reformatted or altered from its original form in any manner, is null and void.

In witness whereof, I have subscribed my name this 3rd day of February 2026.

_____

Lisa Taylor
Registered Professional Reporter
Notary Public

ERRATA SHEET

Deponent: Eric Anderson
Date of Deposition: January 28, 2026
In Re: Camp Lejeune Water Litigation
INSTRUCTIONS TO THE DEPONENT:
In compliance with the Rules of Civil Procedure, a copy of your deposition is provided for your review and signature. Any corrections/changes to the deposition that you care to make are to be made on this sheet.

PAGE	LINE	CORRECTION/CHANGE &	REASON FOR CORRECTION/CHANGE

DEPONENT CERTIFICATE

I have read the foregoing transcript of my oral deposition taken on the date and at the location indicated on the title page of the deposition transcript and I certify that the said transcript is true and correct, with the provision that any corrections and changes appearing therein have been corrected/changed personally by myself by listing them on a separate sheet indicating the page number, line number, and content of correction or change.

I further understand that upon completion of the reading and correcting/changing of the deposition transcript that I am to sign this deponent's certificate in the presence of a notary public and then return this original deponent's certificate with my list of corrections/changes and the deposition transcript to the person so indicated to me by my counsel or the court reporter.

I further understand that if I do not carry out all of the above-mentioned instructions within thirty (30) days from receipt, I automatically waive my right to read and sign the deposition transcript and, thereupon, the original transcript can be filed accordingly.

PRINTED NAME:_____

SIGNATURE:_____

DATE:_____

Notary seal

Sworn to and subscribed before me this _____day of_____ 2026

Notary Signature:_____

&

& 18:8 100:8

0

00897 1:3

1

1 4:4 9:16,18 58:9,13,19 79:13
10 4:5 34:14 44:24 50:14,18 50:21,25 51:3 51:10,12 52:6 52:10 53:9,12 54:2,18 55:5,7 55:18 56:25 57:1,7 70:10 76:5 91:3 96:12,14,17
100 41:9
10:06 1:11 5:2 5:12
10:44 32:23
10:49 33:1
10th 33:24 34:19
1100 2:15
11:25 57:14
11:35 57:17
12 27:19 66:12 70:1 80:14
12:14 83:3
12:19 83:6
15 4:6 27:7 60:4
150 74:3
1509 35:8
1912 53:11 96:4,7
1991 16:6 18:15
1996 18:6
1998 18:13,14 18:16 84:10,18
1:23:40 97:8
1:24 98:3

2

2 4:5 10:21,24 32:6 33:15,15 39:23
2,850 70:2
20 27:7 33:18 57:2 92:22
20,670 72:23
200 30:15,18 31:3
20005 2:16
2005-2006 90:22
2006 20:1,4
2007 22:6,25
2008 25:13
2010 27:6
2012 24:1
2018 86:22
202 2:16
2022 24:1 86:24
2024 29:14 32:8 33:18,24 34:14 69:16 71:5
2026 1:7 5:12 99:16 100:2 101:21
20th 34:17
21053 9:11
21601 9:10
219 2:5
21st 33:19 34:16
24/7 36:3
2701 2:9
28 1:7 5:11 100:2
28,000 54:22
28,998 50:19 54:23
289,000 50:6
289,979 50:7
29440 2:5

3

3 4:6 15:3,5 50:5 64:19 75:8
3,200 30:8 32:14
30 74:1 97:25 101:12
33 4:7 21:18 22:2
33143 99:19
33409 2:9
350 30:15,19
350,000 74:3
36 48:14
360 37:25 62:6 64:23,25 65:6 65:9
38104 35:9
3d 37:21 64:19 64:21 65:4
3rd 99:16

4

4 4:7 32:18 33:3,6
40,000 74:1
42 48:13,14
43 83:22
45 4:9

5

5 4:9 45:7,10 60:25 62:2,7 65:17 80:13,16 80:18 81:21
50 60:22 62:1
533-6700 2:10
561 2:10

6

6 3:6 4:11 79:23 80:1 82:9
60 60:22 62:1
66 21:21

7

7 4:9
70 91:1
75 55:21
7:23 1:3

8

80 4:11
83 3:7
877.370.3377 1:24
880-6104 2:16

9

9 4:4
917.591.5672 1:24

a

a.m. 1:11 5:2 5:12 32:23 33:1 57:14,17
abilities 47:12 91:12
ability 6:19 58:16 88:7,21
able 7:20 11:2 47:5 48:9 63:16 91:15,20 91:25 93:5,8 94:20
above 1:10 77:9 101:12
absorb 77:6
abundance 62:17
accepted 43:9 43:13,17 44:3 44:22
access 36:4
accessibility 28:15 40:8,9 40:11 41:3,11 41:19 42:17 43:6 45:1 47:19,21 94:13
accessible 4:5 12:19 13:1,24 14:6 18:10 19:25 22:4 24:24 43:9,14 43:19 84:4,11 95:25 96:1
accommodate 13:4 28:15 44:18 48:14,20 67:6 73:11 92:6
accommodated 91:19
account 40:15 52:6 54:25
accounts 19:14 75:6
accuracy 58:7 99:13
accurate 8:12 15:16 85:15 93:10,18 94:6
accurately 7:9 7:21 81:1
achieve 48:2
action 17:22,25 99:12
actively 21:23
activities 20:18 91:19
actual 58:20 78:13
actually 52:6 54:1 67:12 89:4,23
adapt 43:1
add 7:14 9:15
adding 10:21 15:2 45:7
addition 35:14 67:21 72:21 88:25 89:12
additional 23:1 25:3 39:15 40:6 51:7,10 52:25 53:2,14 54:18 55:1,5 55:18 56:3,8 57:1 72:9 76:19
address 9:9,10 35:8
adls 91:19
affect 89:11
affidavits 27:23
affirmed 99:6
age 96:6,15
aging 25:14
agree 26:14,16 26:17,20,21,25 43:8,12,16 44:2 77:11,20
agreed 5:19 44:1 83:1 87:22
agreement 29:11
alaska 92:25
alfred 2:8,11
allied 83:21
allow 44:15 60:7
allows 36:2 42:3 92:15
alluded 20:23 51:14 78:2
alter 77:5
altered 99:14
amount 52:13 65:18,24 68:17 72:18
amputees 23:18,18

analysis 92:16 94:9 96:23
anderson 1:6 3:5 4:6,8 5:17 6:4,9,17 8:5,24 9:6,8,21 11:2 12:12,18 13:20 14:3 15:8 16:14 18:3,12 19:22 20:23 22:3 23:3 24:5 25:24 27:1 28:9 30:23 33:9,14 35:7 37:9 39:22 43:5,24 45:13 46:19 50:3 51:14 52:15 54:17 56:13,24 57:5,19 61:24 63:13,17 64:15 70:21 73:15 75:1,8 78:1 79:13 80:4,14 80:16 82:9 83:7,14 99:4 100:2
annual 32:4,8
answer 6:18,21 7:10,23 8:8,8 9:3 34:12 60:17
answered 34:17
answering 7:5 7:8,24
answers 7:9
anybody 62:12 88:1
apartments 42:8
apologies 37:9 56:20
appear 66:4
appeared 99:5
appearing 5:19 101:4
appendix 63:15 63:19 65:8,14 65:22 66:25 67:4,16 72:25
appliance 47:10 48:16 49:14
application 59:21,24 82:17
approach 46:17 47:1
appropriate 44:21 89:23
appropriaten... 82:21
approval 75:15 75:24 76:3
approved 75:11
approximately 10:13 60:25
architect 34:5 34:23 51:8 93:5,24
architects 58:10
architectural 4:11 55:21 79:15
area 24:6,10 44:9 65:5,5 66:18 67:20 73:6 75:17,18 75:21,24 83:16
areas 91:21
articles 25:5,15 25:18
artificial 60:15
asked 9:2 29:1 74:21 86:4 87:17,21 88:18 88:23 89:13 92:2 94:25
asking 6:17 7:2 89:6
assemble 19:11
assembled 66:15
assess 29:2 87:12
assessing 20:19
assessment 13:3 18:17 24:6,10 25:5 40:9,11,14 85:18 90:13 96:5
assessments 41:12 75:2 85:15 87:9
assignment 35:21 36:5
assignments 40:25 47:4
assist 13:22 14:24 19:19
assistance 12:17 23:4 92:8
assistive 25:2
associated 31:13 55:12 70:6 76:20
association 24:16,19 55:22 75:11 79:16
associations 55:11 75:17,22 76:8,10 77:1,7 78:15
assume 6:22 47:16 56:5 66:6
attached 85:25
attention 49:12
attorney 8:7 29:7
attorneys 8:6

audit 71:12
authority 44:20
automated 58:25
automatically 101:12
available 36:3
avenue 35:8
aware 16:2 28:8 44:21 45:2 58:25 59:2 63:8 74:25 81:17

b

b 2:14 4:2
bachelor 16:11
back 32:25 37:20 39:22 47:18 57:16 61:20,21 63:14 64:21 68:21 83:5 88:25 91:23 96:4
background 15:22 31:10 83:15,17
baltimore 38:20 90:23 91:7
barrier 42:10
barriers 74:11
base 70:15
based 24:23 56:10,11 57:22 59:17 64:11 66:1 68:7,22 69:8 72:13,15 73:17
baseline 47:22 47:23 48:4
basically 85:4
basis 70:20
bathing 90:15
bathroom 74:1 84:6,9 86:21 91:21
bathtub 42:4
beach 2:9
beam 37:19
bear 45:21
bearing 56:7
bedroom 86:21
beginning 19:9 22:6
begun 74:19
behalf 2:3,13
believe 30:2 33:19 50:4 55:20
bell 2:4
belllegalgrou... 2:6
best 6:18,20 8:2 82:1 83:14
beyond 56:9 77:9
bids 93:15
billing 19:13,14
bit 24:4 44:12 45:22 96:20
blank 95:14
board 16:23
bodied 47:5
body 17:22
books 25:5
bottom 80:15
bought 90:22
boulevard 2:9
brain 23:17
break 8:25 9:1 9:2,3 57:7
briefly 5:22 87:9
bring 53:14
brings 49:11 94:19
broad 65:5
brought 53:17 83:19
buffalo 16:7
built 53:11 96:3
bulleted 47:20
business 18:6 19:9 20:4 83:20 93:2
buy 48:2 65:17 65:19 67:6

c

c 2:2 99:1,1
calculate 65:21 68:10 71:15
calculated 69:14,18 72:4 72:20
calculating 72:9
calculation 14:12,16,20 67:9
calibrate 68:21 69:7 94:1
calibrated 67:17
calibration 58:22 59:1
call 28:18 34:11,15 89:4 93:7 95:17 97:25
called 31:9 34:5 83:20 89:4
camera 36:10 36:11,15,15 37:11,22,25 38:1,4 58:5 59:25 60:6,11 60:13,24,25 61:25 62:5,7
cameras 60:1,7

camp 1:3 5:14 100:3
candle 85:6
canvas 34:24 95:2,8,12,17,18
capacity 95:25
captain 85:20 90:11 96:22
caption 81:24
capture 61:3,21 61:25
captures 59:4 60:24
capturing 60:20
care 12:16,17 26:19,23 41:15 43:3 100:6
caregiver 86:14 86:17 88:8,21 92:7
carolina 1:1,13 5:16
carriers 21:1 23:2
carry 101:11
case 12:1,14,22 13:14 19:21 21:7 22:5,9,16 22:21 23:4,10 23:14,15 27:3 27:20 28:1,10 28:11 29:1,9 29:16 30:1,4 31:17,20 32:9 32:10 35:5 39:4,8 40:3 41:22 42:15 44:13 50:10 52:3,19 53:3,6 56:18,22 59:6 59:20 60:11 61:24 64:25 66:4 67:7 68:13 69:13 73:9 79:9 87:8 87:11
cases 22:22 27:5,10,13 32:2 41:16 51:2 66:10,11 70:7 78:23 93:19
catastrophic 12:22,24 13:5 20:10 21:7 22:5,9,16 23:4 23:13,15 40:24 41:22
categories 70:11
category 64:1,2 74:16
cause 63:1,5
ceiling 52:21,22
ceilings 53:12 96:12,14,17
censured 17:22 17:25
central 4:11 75:11 79:16
centre 4:9
certain 42:11 43:19,21 95:1
certainty 95:25
certificate 82:20 101:1,8 101:9
certification 99:13
certify 99:3,11 101:3
cga 81:4
chair 42:5
chan 2:22 5:9
chance 52:12
change 50:15 52:16 53:6,24 54:9 92:2 97:24 100:8,8 101:6
changed 101:5
changes 72:24 88:7 90:4 100:6 101:4,9
changing 101:7
character 82:1
characteristics 96:17
charge 30:10 30:13 31:4,21
charging 30:18 31:19
chat 9:16 10:22 15:4 32:18 33:4 45:8 79:24
cheaper 74:13
cheapest 73:19
checks 61:5
chief 34:5,23
christopher 91:7
circle 62:6
city 82:17
civil 51:8 56:10 77:3 78:9 100:5
claim 62:15
claims 12:24
clarify 6:21 59:10 74:21
clarifying 17:20
classes 85:8
clear 39:18
client 20:25 30:14 49:2 73:17
client's 41:15
clients 13:6 21:16,19,23 22:24,25 23:22 39:2 62:11 73:22 75:3

94:16
close 60:4
closer 61:20
closet 63:4
cloud 36:3 59:17
clues 64:12
code 53:15,18
codes 43:9,17 44:3,22 75:16 77:15
collect 37:7,16 68:18
collecting 20:12
collection 22:17
collects 69:4
column 65:13 67:15,16 69:18 69:21 71:7,9
columns 72:22 72:25
come 20:9 48:8 52:20 63:3 76:10 84:2 87:1 90:6 91:10
comes 37:20 61:11 64:21 68:21 76:8
coming 87:19 91:7
commences 5:2
commencing 1:10
commercial 58:11
commission 17:3,18 75:12 79:17 80:19 81:10,15 82:22
commissions 76:8
committee 81:4
communicate 12:3 41:14,21 41:23
communicated 12:5,10
communicates 48:24
communicati... 11:25
community 88:11
comp 12:24 20:10,11,16 23:2 24:19 32:2
companies 58:11
company 84:15
compared 30:20 32:1 66:16 89:12
compatible 60:8
compensation 13:9 30:3 31:15 71:19
competition 62:13
competitors 94:12,23
complete 7:2 15:21
completed 27:7 74:22 77:23 82:16 87:24 92:23,24
completely 5:23 7:5 34:25
completion 101:7
compliance 55:1,25 100:5
complicated 39:4
comply 79:15
components 51:20
computer 31:10 93:9
con 93:2
concepts 84:20
conclude 76:17
concluded 90:1
concludes 97:7 98:3
concrete 49:9 56:11 65:17,18 70:10,14 77:5
condition 86:7 86:10
conduct 38:7 38:25 39:11 57:21 85:18 92:15 93:3 96:23
conducted 34:1 35:15 58:5
conducting 94:8
conferences 24:16,20
conferred 89:16
configurations 88:6
confirm 39:25 45:21
conflict 49:24 50:2
conflicts 80:23 81:18
connection 11:13 30:4
consider 47:6 48:10 80:18 96:4
consideration 69:23

considerations 68:8 73:6
considered 14:16,20 35:3 40:16 48:1 53:10 78:13 96:18
considering 88:6 96:23
considers 69:25
consists 20:25
construction 22:19 53:19 58:11 63:21 74:19 90:9 93:13 94:3 96:7,15,16
consult 69:10 71:14
consulting 22:4 80:18
contacted 28:23,25 88:15
contain 40:2
contains 63:19 81:6
contemplated 53:8
content 24:21 101:6
contingency 50:14,18,21,24 51:3,11 52:7 52:10 54:2,18 54:22 55:6,7,8 55:18 56:25 57:1 76:4
contract 83:23
contractor 18:7 20:20 22:19 51:5 68:17 72:12 90:8 93:22
contractor's 16:18 17:7,18
contractors 20:17 71:15 77:23 78:19 93:16,17
controlled 36:11
controller 36:25
conversation 7:1
conversations 84:25
convert 38:2
conveys 82:1
coordinate 20:18
coordinated 87:22
coordinating 22:16
copy 97:24 100:5
cord 23:17 42:3 91:7
correct 10:15 10:16 16:7,18 16:19 17:3,14 18:13 19:17 20:1 21:3 22:6 25:25 26:1,3,4 26:6,7,9,10,12 26:13 33:18,24 34:6 35:9,12 36:13 37:4,14 39:20,21 50:16 50:19 53:22 54:19,23 55:3 55:4 56:15 57:4,22 58:5 59:18 62:3,21 63:11,22,25 65:11 75:12,25 76:18 79:17,20 81:7,22 101:4
corrected 101:5
correcting 101:7
correction 100:8,8 101:6
corrections 100:6 101:4,9
correctly 82:3
correspond 58:13
corresponding 54:21
cost 13:22 18:22 20:21 22:18 38:22 42:9 50:6,15 52:11 53:2 57:2 65:23 66:24 67:3,5 67:24 68:10,19 68:19,20 69:1 69:3,19 70:3,6 70:7,24 71:7,9 71:17,20,24 72:1,3,3,7,8,15 72:19,22,24 73:3,5,10 74:6 74:11 76:2 78:3 79:10 89:11 90:5 96:19
costs 26:23 31:13 38:18 63:21 67:15,17 69:5,14,18,22 70:5,11 71:2,4 73:23 85:19
counsel 5:24 10:6,14 20:17 29:18 32:19 57:10 82:24 83:9 97:5,10 99:12 101:10
couple 69:2 93:6,20

course 32:20 84:25
court 1:1 5:15 6:1,12 7:3,7,16 7:18 17:25 27:24 28:7 97:10,16,18 101:10
courteous 88:19
courtroom 6:13
covered 25:8 84:7
covid 68:5
create 88:4 89:18,24
creates 37:20 64:22 93:4
creating 22:18 80:21 81:11
cure 51:25 74:11
current 9:9,10 69:8 71:3,4 86:20 96:10
currently 8:18 15:18 18:5 33:10
curriculum 4:6
custom 58:18
cut 66:17,21
cv 1:3 15:12,16 16:1,4 18:20 19:15 20:24 22:3 24:5 90:22

d

d 3:3 4:2 63:15 63:19 65:8
daily 91:19
damage 51:20
data 22:17 37:16 60:16 65:24 68:22 72:12
date 5:11 15:17 18:21 30:7 40:3 54:5,10 54:14 100:2 101:2,17
day 38:15,15 99:16 101:20
days 69:2 93:6 101:12
dc 2:16
debbie 20:11
debilitating 40:19
deborah 12:18 12:21 13:6
december 33:24 34:14,19 69:16 71:5
decent 68:17
decide 44:12
decision 44:7
deck 91:23
declarations 27:24
default 45:3
defects 51:6
defendant 2:13 20:15 27:15
defendant's 4:8
defense 85:14
define 47:15
definitively 51:23
degree 16:9,13 25:25 95:24
degrees 16:9
deliver 19:11
delivering 47:10
delivery 47:9
demand 68:3,7
dementia 86:12 86:18 87:5
demolition 51:17
department 2:14 16:22 18:8,9
dependent 31:16
depending 30:15 38:19 92:19
depends 30:14
deponent 5:17 100:2,4 101:1
deponent's 101:8,9
deposition 1:10 4:8 5:2,6,13,18 8:6 10:3 12:6 28:2,3 57:20 85:10,25 86:3 92:14 94:25 95:24 97:7 98:3 99:4,7,9 99:10 100:2,5 100:6 101:2,3 101:8,10,13
deps 1:25
describe 18:4 19:6 22:8 23:12 30:23 83:15,17
description 4:3 70:18
design 4:10,11 18:22 24:23 25:14,19,22 28:14 42:23,23 42:23 43:3,18 44:4,8,13,14,17 44:18,21 45:4 45:19,24 46:20 46:21,22,22 47:1,15 48:5,9 48:13,19 49:10 49:21 80:23

81:18 90:18,20 90:24 91:2,11 91:19 92:1,6 93:5 96:21,25
designing 20:20 48:10
designs 22:18 25:13 89:22 90:9
desirable 88:10
desires 88:22
desk 30:21,23 31:1,2
detail 30:17 76:22
determine 65:10 67:10 85:18 89:23
determined 64:4,8
determining 38:25 41:19 42:17
device 36:25 42:4 62:1
devices 25:3
diagnosed 23:25
diagnoses 23:19,20 41:1
diagnosis 12:16 86:11 92:7
died 24:1
difference 30:18
different 25:8 25:15 47:12 48:20 55:11 61:17 64:17 65:3 88:6 91:13 94:4 96:8
differently 43:22 52:8 73:12
difficult 64:24
difficulties 92:3
digital 93:7
direct 67:8
disabilities 18:10 40:10,15 47:6 91:10
disciplinary 17:22,25
discretion 66:2
discussions 42:13
disease 23:23 24:2 26:3,19 26:24 40:21 43:2 44:18 86:8,10,18 92:9
disorders 26:6 40:23 41:8
distance 58:14
distributors 69:9
district 1:1,1 5:15,16
districts 76:7 77:7
division 1:24 5:10
doctor 41:15 91:8
doctors 41:10
document 9:22 9:23,25 11:6,9 11:10 12:6 15:9,21 33:9 33:12,15 45:14 45:17 53:4 55:21 80:5,7 80:14
documentation 78:16
documents 9:13 11:12,15 20:20 65:10 89:20
doing 7:25 34:12 37:17 71:16 80:24 85:3,14 87:17 88:6
dollar 54:21
dollied 49:13
door 63:2,4,4 66:12,13 70:2
doorways 61:15
dozen 76:15
draft 14:23 27:20
drafted 15:13 81:25 82:7
drafting 11:20 14:24 20:20
drawing 81:22 81:24,25 82:1
drawings 56:6 56:9 77:3 80:21 81:6,11 81:15 82:5 84:19 85:3 94:2,2 95:18 95:19
drive 31:14 38:20
dropoff 49:10
dropping 33:3
drywall 96:11
due 5:21 31:25
duly 6:4 99:6
dwelling 48:2
dwellings 42:8
dynamics 39:4

e

e 2:2,2 3:3,3 4:2 4:2 12:7 99:1,1

earlier 48:21 57:19 60:2 64:14 85:10 86:3 92:14 94:24
early 29:12
earned 32:4,8
easier 77:21
eastern 1:1,11 5:3,12,15
edgar 4:5 33:17
edification 57:24
education 16:3 19:13 26:2,5
educational 15:22
effect 67:8
effective 62:14 89:11
efficient 72:16
effort 46:13
either 34:22 72:17
elaborate 40:12 43:22 92:17
elaborated 44:11
elevator 89:12
eliminated 42:11
eliminates 42:5 90:19
employ 37:22 83:21
employed 13:3 79:3
employee 12:19 13:24 79:7
employment 16:4
employs 37:13 59:1
encounter 55:24
engage 13:2 41:18 42:16,20
engagement 29:11
engineer 51:8 52:20 56:10 77:3
engineers 78:9 78:9
enid 2:21
enotary 1:13
ensure 5:23
entail 77:10
entails 20:12
enter 91:21 92:16
entirety 80:11
environment 37:21 47:13 93:9,25
environmental 62:25 63:5
equal 52:12 54:1
equates 50:19
equipment 36:7,9 39:16 42:11 57:21 59:4 84:5,6,9
equitable 45:23 48:18
eric 1:6 3:5 4:6 4:8 5:17 6:4 9:8 99:4 100:2
errata 100:1
error 46:10 49:1,11,16,16 61:11,19
esq 2:4,8,8,14 2:15
established 67:12
estimate 22:18 50:13,16 68:20 69:3 71:24 72:1 96:19
estimated 50:5 63:20 69:15 73:23 74:6
estimating 13:23 18:23 20:21 93:13,14
evaluation 73:16,16 94:8 96:23
evaluations 87:8
event 68:1
everybody 94:21
everyone's 91:12
examination 3:6,7 6:7 16:22 83:12
example 42:2 46:25 48:12 49:4,15 66:11 68:2,4,25 70:1 70:10,12,15 77:4,8 88:24 93:12
exceed 54:2 74:12
excellence 4:10
exception 74:2
excluded 28:6
exclusions 50:15 54:14
exclusively 18:20 50:10
executors 21:1
exercise 16:11
exertion 49:17
exhibit 4:3 9:16 9:18 10:21,24 15:3,5 32:18 33:3,6 39:23 45:7,10 79:23

80:1 86:1
existing 28:13
expected 90:7
expectency 75:3,6
expense 53:2 72:18
expenses 31:13 69:8 70:17 71:13 76:20 84:13
expensive 73:10,16 76:17 76:23
experience 18:4 18:16 24:2 64:11 66:1 67:13 76:6,16 87:1,4 88:2
expert 14:24 27:3,7,13,18,21 29:9 30:11 32:4 85:12
expertise 44:10
experts 12:1
explain 61:9
explained 87:19
explaining 28:19 70:22 87:16
expose 51:17 51:22
exposed 52:23
express 88:21
expressed 95:22
expressing 95:23
extent 12:25 42:24 46:23 47:3 49:23
exterior 44:16 48:11 49:22 55:13
extreme 47:9
extremely 93:10

f

f 2:8 99:1
face 87:15,15
facilitate 80:24
fact 12:15 96:22
factor 38:24 75:3 90:10
factoring 96:24
factors 55:17 62:25 63:5 64:8 72:9 96:4
facts 12:13
fair 15:20 56:24
fall 49:14
falls 41:7 43:3 73:22
familiar 82:15
family 19:12 20:17 39:4
far 47:8 61:3 61:13,16
fashion 95:1
fax 1:24
feasibility 18:17 24:7,11 25:6 28:12 38:18 75:2 85:18 89:22
feasible 87:3 89:24 90:6 92:12
feature 48:11
features 43:10 43:14,19,22 47:21 48:1 49:22 91:1
february 99:16
feedback 62:10 91:5,12,16 92:1 93:17 94:16
feet 60:25 62:2 62:7
fell 74:16
field 83:19 84:17 85:12 94:13
fieldwork 30:20,24,25
fifth 46:10
file 93:4 95:14
filed 101:13
files 58:3
final 46:16 56:15 80:21 95:20
financial 18:21 19:2
find 62:14 69:20
fine 57:9 97:15 97:21
finish 7:4
finished 7:23 49:8 82:14
first 27:6 28:16 28:22 33:20 45:23 65:16 87:14 95:4,4
fit 66:17
five 44:25 60:7
fix 52:18
fixed 66:14
fl 2:9
flexibility 46:1
flexible 48:19
floor 64:5,7 66:17 67:7
flooring 66:16
follow 62:23
follows 6:5
foot 53:12 61:21 96:12,14

96:17
foregoing 99:4 99:9 101:2
forgive 64:15
form 40:5 99:14
formally 29:8 29:16,19
formed 18:6 40:3
forming 11:16
forms 49:7
formulating 22:18
forth 39:17 99:5
fortifying 53:1
founded 18:13 20:1
founder 20:3,7
four 86:23,25 88:5 89:17,17
fourth 46:7
free 42:10
freeland 9:11
friday 10:7
full 9:7
fully 91:3
funds 21:2
furnished 91:4
furniture 63:11
further 42:25 83:9 97:4 99:11 101:7,11
fuse 85:6

g

garden 75:11 79:16
gardens 4:11
gather 39:15 90:5
gears 24:4
general 23:15 50:15 54:13 55:8 60:23 72:22 74:2
generally 18:3 24:21 26:6 77:17
gentleman 87:18
geographical 67:25 68:8 73:6
georgetown 2:5
getting 90:16
give 8:2,12 61:18 82:12 88:20
given 24:9,14 24:18
global 59:12
go 9:3 30:17 32:19 36:2 39:3 57:10 61:3,16,20,21 64:23 65:16 69:6 82:24 84:1 87:11 93:2,22 96:13 97:17
goal 88:4
goes 37:20 62:5 64:21
going 9:15 29:12 32:17,22 39:6,22 45:20 56:6 57:6,13 60:3,22 61:14 63:13,15 66:9 67:14 68:2 75:20,21 77:5 78:12 80:13 83:2 88:14 89:7,16 90:2 97:7,23
golkow 1:24 5:10
golkow.com 1:25
good 6:9 43:3 44:17 46:22 70:13 88:13 90:2 91:16,25 96:20
goodbar 35:8
gotcha 65:7
govern 75:17
governed 16:22 78:24
gps 31:10
graduate 16:10
graduated 16:6 18:15
grass 48:23
great 68:1 94:17
greater 52:24
greatest 42:24 46:23 47:3
grid 95:15,16
grooming 90:15
gross 12:18,21 13:6 20:11
ground 49:9,11 49:15
group 2:4,7 71:14 94:21
guidance 89:6
guide 4:12
guidelines 4:11 55:21 79:15,20 80:24 81:19
guys 97:11

h

h 4:2
hairston 12:4 12:10,14 29:5 29:21
half 10:13
handled 12:24

handles 23:16
handling 20:9 62:14
happen 61:18
happening 68:23
happens 49:6 61:14,15 74:11 93:11
hawaii 92:24
hazard 49:4
head 7:12 21:24 24:17 25:12 27:11,16 29:11 36:20,23 60:21 61:23
health 18:8 83:24
healthcare 24:16,19
hear 8:6 90:14
heard 5:23 95:2
held 5:14 24:5
help 80:22,24
helpful 22:13 60:10
hey 94:17
high 68:5
higher 31:24,25
hire 36:14 52:17,19 93:1
hired 85:11,13 93:22
historians 78:17
historic 4:11
historical 54:25 55:11,16,22,24 68:22 76:7,7 76:11 77:7,12 78:18
hits 64:21
hold 16:20 17:2
home 17:2,17 18:7 25:13 35:7 36:7 37:1 37:17 39:20 42:18 43:20 47:9 53:21 54:7,11,15 57:22 58:8,22 59:6,11 60:19 60:20 62:20 64:16 73:11 74:5,12,12,15 74:19 75:2,23 76:18,24 83:24 83:25 84:2,4 84:12,21,22 85:20 87:3 92:11,16 96:6 96:22
homebound 84:14
homeowner 88:20
homes 43:10,14 43:18 62:21 77:12,13
hop 97:11
hopkins 91:6
hospitals 83:23
hour 9:1 10:13 30:13,15,18,19 31:3 38:21 57:6
hourly 30:12 71:16,19 72:5 72:18
hours 87:20
house 28:13 29:2 38:14 39:17 44:16 47:10 48:11 49:22 51:6 52:18 53:10,17 53:19 55:13 65:4,10 79:15 85:2 86:20,20 87:19,19,23 88:9,12,17 89:1,10 90:16 90:22,24,25 91:2,4,11,14,15 91:20,21 93:2 93:7 94:21 96:3,9,12,13
houses 13:4 42:9 43:18
housing 4:5,5 12:19 13:1,25 14:6 18:17 19:25 24:6,10 24:24 25:5 28:11 74:13 84:11 96:1
hum 7:11 37:12
hung 66:14
hygiene 18:8

i

idea 21:22 56:2 88:13
ideas 88:19 90:6
identification 9:19 10:25 15:6 33:7 45:11 80:2
identified 54:5 54:9,13
identify 11:15 80:23
illnesses 40:19
illustration 92:5
imagery 81:25
impact 66:23 67:3,23 69:1 73:2 88:7
impacted 62:24 72:24

impacts 30:18 67:5 73:5
impair 8:19
impaired 8:16
impervious 77:5
implement 43:19 49:21 90:8,18
implementati... 76:21
implementing 43:9,13
import 93:5
important 61:1 89:21 90:10,14 96:5
improvement 17:3,17 18:7
inches 48:13 93:20
include 55:1,17 70:11 78:11
included 16:1 25:2 70:24 71:20
includes 50:14 77:15,18
including 74:20
income 32:4,8
incorporate 95:19
incorporated 35:1,2 91:1
increased 78:3
increases 78:3
incredible 91:11
independent 88:1
independently 47:7
indicate 97:12
indicated 101:3 101:10
indicating 101:5
individual 42:3 42:6 47:5 63:25 66:24 68:9 69:4 71:16 92:9
individuals 21:2 23:13 29:22 40:18 41:3,7 47:11 48:3,15 91:9
industry 38:16 44:25 47:14,21 50:22 55:6,8 62:9 66:7 67:12 68:16 70:14 75:5 94:15,15
inertial 59:15
informally 84:18,19
information 11:23 13:17 15:15,25 20:13 21:3 29:3,7 38:13 39:15 46:7 48:24 70:19
infrared 37:19
initially 60:4
injured 23:17
injuries 13:5 20:11 40:19
injury 23:17 49:4
input 88:1
inside 39:19 51:22 65:4
insides 51:18
install 19:12 67:7
installing 84:23
instance 61:19 85:17 96:22
instances 41:23
instructions 100:4 101:12
instructs 8:7
insurance 12:23 21:1 22:24 23:2 84:7
intaking 22:15
intelligence 60:15
interact 93:8
interaction 34:20
interested 99:12
interior 44:16 49:22 60:20
international 45:3
interpretation 61:12
interrupt 7:19 7:24
introducing 87:16
introductory 34:11
intuitive 46:4 48:22
invoice 30:8
involve 84:3
involved 20:14 21:23 90:5
issues 39:6 50:14 51:16 52:2,9,16 53:6 53:25 54:6 55:25 84:2
item 63:25 64:2 66:20,24 67:3 67:4 68:16 70:20,20 72:7 72:8

items 47:20 65:8 66:8 67:15 68:2,9 68:19 87:2

j

january 1:7 5:11 100:2
job 51:4,4 70:22 71:16,18
jobs 79:4
john 2:8,10 10:8,10,18 89:5 90:22
johns 91:6
joseph 2:14 6:10
joseph.b.turner 2:17
jurisdiction 53:16 78:25
justice 2:14

k

kay 12:3,10,13 28:19,22 29:5 29:21
keep 31:6 84:13
keller 9:10
kitchen 91:23
klotzbucher 2:15
know 6:20,25 7:22,25 8:25 9:21 14:7 29:10 30:6,22 32:3 34:11 39:5,5,15 45:13 48:18,19 48:22 50:1 52:1,6,14 53:5 53:25 55:23 57:6 58:7 59:3 59:7,10,14,22 59:22 60:11,14 60:21 62:10 64:10,11,19 65:15 66:1,12 69:2,3,14 70:19,23 71:2 71:19 72:3,17 73:2 74:4,8,18 75:5 76:2,23 79:10 80:4 82:13 85:1,3,7 88:3,24 89:3 91:24 92:20 94:12 97:23
knowledge 88:2
known 51:6 55:3 56:15
kyle 9:8

l

l 2:15
labeling 33:3
labor 16:23 68:2,19 71:9 71:13,20 72:3 72:15,18 73:7
labors 73:7
lack 51:5
lag 8:1
lamacchia 2:4
landmark 76:8
landmarks 75:12 79:17 80:19 81:4,10 81:14 82:21
large 65:5
latent 50:14 51:15 52:2,9 54:6
laundry 91:23
law 2:7
leading 78:1
learn 28:16
learned 28:20
lectures 24:9 24:13,22 25:1
led 55:17 76:17
left 12:8 29:5
legal 2:4 20:25 21:14,17 22:1 24:15,19
lehman 2:8 32:20
lejeune 1:3 100:3
lejuene 5:14
length 52:23
lengthy 82:13
leslie 2:4 30:2
level 49:8,9 67:17 86:20,21 86:22 88:4,5 89:2,19,24 90:3
levels 23:16
liberty 12:23 13:3 22:5,23 31:22 62:11
license 16:18 16:20,25 17:3 17:5,6,7,15,16 17:18
licensed 19:16 26:8,11 77:23 78:4,7,10 79:10 90:8 93:2
licenses 16:17 17:14 78:22 85:9
licensing 17:22
lidar 35:23 36:1,6,12 37:7 37:18,18,23 38:2,6,12,17,23 39:13,17 57:22 57:25 58:1,4,8 58:21 59:1,3,7 59:11 60:19 62:24 63:10 64:5,7,13,15,17

64:22 65:1,4 87:25 93:3,4
life 75:3,6
likely 55:14
limited 68:7
line 66:12 68:15 100:8 101:6
lines 63:24
link 79:19
lisa 1:12 6:1 97:25 99:2,20
list 47:20 67:3 101:9
listed 16:4,16 77:1
listing 101:5
lit 85:5,5
litigation 1:3 5:14 21:23 100:3
little 24:4 45:22 49:18
live 86:20 91:10
lived 86:23 91:14
living 86:22 88:5 89:19,24 90:3 91:20
llamacchia 2:6
load 56:7
local 36:14,18 36:22 38:20 67:17 71:13 77:23
located 75:23
location 38:19 38:24 51:4 92:19 101:2
locations 70:24
long 10:12
longer 96:10
look 53:11 56:25 66:12 68:15 90:4
looking 9:12 40:8 63:15 67:16 69:17,19 78:23 80:15
loosely 35:25
lori 33:17
lot 49:6 77:13
low 46:13 49:17 74:1
lower 31:23 51:12
lumber 68:5

m

m 3:3
made 8:9 34:23 36:4 44:7 90:23 99:7,10 100:6
magazine 25:13
magazines 25:8 25:11
mail 12:7
main 86:20,21 88:5
maintain 16:24 68:18
maintaining 17:11,13
make 6:22 9:4 39:12 61:1 64:24 75:21 84:4 87:8 95:16 100:6
makes 60:14
making 92:10
management 16:12 20:22 22:5,9,20,21 23:4,14,16
manager 12:22 22:16
managers 21:7 41:22,24
manner 99:14
manual 47:7
manufactured 60:2,5
marked 9:18 10:24 15:5 33:6 45:10 80:1
market 69:7,8 69:24
marketability 88:9
marking 10:21 15:3 32:18 45:7 79:23
maryland 9:11 16:23 17:2,17 18:6,8,11 90:23
match 52:10
material 55:2 56:14,17,21 67:6,15,24 68:6,10 69:5 69:17,19,22 70:3,6 71:6
materials 55:15 63:20 65:20 68:18 69:11 70:24 73:7
math 70:4
matriculated 84:14
matter 1:10 11:13 13:21 28:17,23 31:16 87:12 93:6
matterport 10:5 37:4,6,13 38:1 53:11 57:25 58:15,17 58:17 59:1,17 59:25 60:2,5 60:13,14 88:16

matterport's 59:21
mean 61:9 73:25
meaning 90:11
means 40:13 59:9 95:11
measure 39:14 58:16,18 94:1
measurement 59:15
measurements 38:14 58:19,20
mechanical 51:18,19 53:17
mechanically 81:25 82:6
medical 19:10 19:13 20:25 21:5,10,20 25:25 26:15,19 26:23 41:11,15 41:18 42:16,21 84:9
medication 8:19
medicine 26:9
meet 10:6,14 89:10
meeting 10:12 10:18 34:9,17 35:14 77:15 87:14 93:23
meetings 34:1,4 34:22
members 20:17
memory 8:15
memphis 35:8 67:20 75:12 79:16 80:19 81:10,14 82:17 82:21
mention 56:14 72:11
mentioned 7:8 7:19 14:7 15:25 19:15 20:24 21:12 22:2,10 32:15 38:7 44:1 46:22 47:2 48:8,21 53:20 57:20 64:20 76:25 92:20,20 94:24 101:12
mentions 22:3
message 12:8 28:19 29:5
met 10:7,9 33:23 34:18
methodology 87:9,17 96:16
methods 96:8
mileage 31:14
minimum 31:3
minute 57:7
minutes 97:25
misaligned 61:3,10,19
misalignment 63:2,6
misaligns 61:8
miscellaneous 23:19 41:1
missed 64:14 67:1
misuse 49:3
mlc 80:21
mobile 59:21 59:23
model 37:21 58:20 91:2
modeling 65:2
modification 18:10 74:19
modifications 41:20 42:17 55:12 74:5 77:2 79:14 84:3 85:19 89:2
modified 13:4 28:14 66:21 86:19 91:1
modify 42:25 48:2 92:8
moment 53:20 82:12
monitor 75:18 77:8
month 67:21,23 68:25 91:15
months 27:19
morning 6:9
mother 23:25 86:5,7,14,17 87:1
mother's 87:4
move 60:25 62:6
moved 62:2 86:19
movement 26:6 40:23 41:7 83:16
moves 63:4
multiple 23:18 36:4 61:22 69:10
multiplied 72:6
mutual 12:23 13:3 22:6,23 31:22 62:12

n

n 2:2 3:3,3,3 4:2
name 5:9 6:9 9:7 14:2 36:19 99:16 101:15
names 27:9,16
napkin 85:3
national 45:2

nature 5:21 41:1
navigation 59:12
necessary 48:24 85:19 87:3 92:12
need 8:25 38:12 38:13 42:25 44:17 52:17 56:10 62:1 65:19 66:21 75:14 84:7,13 89:5 90:19 92:8 96:18
needed 28:14 69:1 87:2 90:4
needs 20:10 51:24 66:17 75:10 89:10 90:11,12 96:1
neither 14:20 99:11
neurological 41:1
never 78:14
new 16:7
newspaper 25:15,18
nod 7:12
nominal 32:13
nontechnical 61:12
normal 6:25
north 1:1,13 5:16
notary 1:13,13 99:3,21 101:8 101:19,22
note 23:25 89:21 90:21
noted 5:24 12:6 20:11 47:22 52:17 54:3 55:10 73:5
notes 10:17 34:6,8,21,23,25 89:3 94:25 95:1,11,16,19
notice 4:8 66:8
null 99:15
number 10:21 15:3 33:15 39:23 70:1,10 101:5,6
numbered 80:13
numbers 66:3 71:10 85:11
nurse 40:24 41:22
nurses 21:8 84:22
nw 2:15

o

o 3:3
oath 6:13
obj 93:4
object 64:21
objection 8:7,9
objections 4:7 99:7,10
objects 63:11 65:6
obligated 6:15
obtain 75:20
obtained 13:5 64:12 90:7
obtaining 85:9
obvious 30:22
occasions 85:11
occupational 14:5 19:17,19 19:23 26:12
occur 51:16 52:2,5,10,16 53:6,25 57:3
october 29:12 29:13
offer 21:9,14 26:18,22
office 31:1,2
okay 7:6,13,17 8:4,10 19:24 57:8 59:24 64:3 65:7 69:22 90:2 95:7,10,13 97:16
okeechobee 2:9
once 51:22 52:21 82:13 87:10
ondazara 2:21
ones 72:20 73:2
online 78:16
open 95:13
operated 19:16 91:2
operations 19:2
opinion 12:13 14:13,17,21 26:18,22 28:11 50:5 55:20 64:11 85:1 88:21 92:12
opinions 11:16 11:21 28:6 40:3,6 51:7 63:20 87:13 95:21,22,24
opportunity 91:11
options 41:25 88:14
oral 101:2
order 87:11,12 97:14
ordering 97:20
orders 50:15 54:9

organization 36:21
original 96:6 99:14 101:9,13
originally 96:3
ot 83:21,25
outcome 31:16 99:12
outdoors 65:8
outside 31:1 55:16 63:7 64:7,16,18,23 65:4
overall 21:25
overcome 93:21
overlapping 52:15
override 65:25 72:14,17
own 57:24 72:12,12 86:5 87:1,4
owned 19:16 43:10,14,18
owner 20:4,7

p

p 2:2,2
p.m. 83:3,6 97:8 98:3
pace 7:15
packet 82:17
page 3:4 4:3 50:5 55:21 75:8,9 79:13 80:13,14 82:10 94:22 100:8 101:3,5
paid 30:6
palm 2:9
paper 95:15,16
papers 25:5
par 73:24
paragraph 56:15
paralegal 2:21
park 91:20
parkinson's 12:16 23:22,25 24:3 26:3,19 26:23 40:21 44:19 86:12,17 87:5
part 35:22 37:3 43:21 44:16 53:18 55:13 58:15 61:1 68:14 75:19 90:12 91:5,18 92:1,3 96:4
partially 19:16
participating 1:14 2:6,11,18 2:20
particular 32:11 47:12 53:18 60:11 66:18 68:19 84:17 85:17 94:8
particularly 69:6
parties 5:18,23 20:14,19 94:19
party 27:12 60:7 99:12
passed 86:23
passive 31:8,8
past 76:12
patient 19:12 84:7 88:20
patients 84:2 84:14 91:6
pause 5:22
pay 21:2
paying 49:12
pennsylvania 1:13,13
people 42:24 46:23 47:2 92:7 94:11,22
percent 21:18 22:2 32:6 41:9 50:14,18,21,25 51:3,10,12 52:7,10 53:9 54:2,18 55:5,7 55:18 56:25 57:1,2 58:9,13 58:19 65:17 66:13 76:5
percentage 21:16,19,25 32:3,7 41:6 54:4 65:22 66:9,19,23 67:2
percentages 65:22 66:4
perceptible 46:7 48:23
perception 64:11
perfect 9:24 11:5
perform 14:11 14:15,19 18:7 38:17,21 40:9 61:25 62:2 75:1 77:21
performed 14:8 14:9 18:25 40:18 41:2 67:10 77:11 78:25
performing 32:4
performs 68:17
permit 75:19 75:20
person 28:22 77:21 92:17 101:10

person's 37:17 41:20
personal 40:15 64:10
personally 86:16 99:5 101:5
peterson 4:5 13:12,15,18 19:21 23:7,10 23:21 28:17,19 28:22 31:20 33:17 36:7 39:8 41:4 42:15 43:20 44:13,15 52:3 53:7 56:22 59:20 60:12 61:25 66:5 69:13 73:9 74:18 79:9 92:11
peterson's 26:18,22 35:5 35:7,19 38:8 39:20 40:10,15 44:4 53:21 54:7,10,15 55:25 56:4,18 57:21 58:8,22 59:6,11 60:19 62:20 63:21 64:16 67:20 73:15,19,21 74:15 75:23 77:12 81:7,11 82:6 85:20 88:8 90:11 96:22
petersons 33:21 34:15 35:15 36:25 87:15 88:15
ph 1:24
phone 28:18 34:11
physical 26:11 36:7 37:11 38:7 42:5 46:13 49:17 78:9 90:11,12 96:17
physically 39:9 39:19 40:19
physicians 35:5
piece 66:17 95:15
pieces 42:11
place 25:14 62:5 75:16 99:5
plaintiff 20:16 27:15 85:14
plaintiffs 2:3
plaintiff's 4:7
plan 64:6,8 89:18
planning 40:5
plans 22:19 93:12,13,14,14 93:18
plaster 96:9
play 88:3
please 5:22 6:18,19 7:8,10 7:22 8:8 9:6 18:4 97:6,12
pocket 84:5,13
point 85:8 88:13 89:5 92:22
pool 51:5 71:14
poor 70:22
populated 71:10,23,25
populating 69:11
populations 48:20
portion 14:24 43:6
position 24:6
possible 42:1 42:25 46:24 47:3
possibly 51:6
potential 80:23
poured 49:5,7
power 47:8 84:23
practice 26:8 42:22 43:4 44:15 70:13,14 96:10
pre 66:14
preconstructi... 93:23
preference 89:1
preferred 81:25
preliminary 80:20 81:9
prepare 10:2
presence 101:8
present 2:20 39:19
presentation 25:14
presented 24:18
preservation 55:1,24
pretty 62:8 90:19
previous 61:2,5 61:20
previously 19:23 21:11 22:10 40:17,18 73:5 76:25
price 69:7 90:6
prices 74:2
pricing 68:5 69:8

primarily 30:20
primary 20:8 22:14,24 23:20 86:11
principle 45:23 46:2,5,8,11,14 46:16 48:6 49:24
principles 4:9 44:15 45:18,21 48:5,7,10,17 49:20,23 96:21 96:24
printed 101:15
prior 10:7 27:3 29:19 41:3 58:23 76:6 80:21 81:11
private 21:2
privately 43:10 43:14,17
pro2 60:13
probably 25:3 27:19 32:6 60:22 76:15
problem 43:24 52:18 87:21
problems 51:25
procedure 100:5
proceeding 6:12
process 20:19 48:9 62:8,22 75:19 78:5,14 80:25 87:20 94:3
processes 61:6 79:4
processing 60:16
produce 84:19
product 47:13 58:3 66:15,15 69:24 95:20
professional 1:12 15:22 16:17 26:15 51:7 55:2,14 56:3,8 93:1 99:2,21
professionally 85:7
professionals 21:1,5,10,14,17 21:20 22:1 41:11,19 42:16 42:21 53:2 77:24 78:4,6,8 78:11 79:3,7 79:10,11
prognosis 24:3
program 18:9 34:5 60:24 67:11 68:11,13 68:21,24 69:4 71:24 72:1 93:6,24 95:9 95:13
progressed 84:10
progression 92:9
project 11:11 20:16,21 22:20 39:7 47:2 57:3 68:20,22 74:3 77:10 87:25 92:23,24
projected 38:18 57:2 71:17 85:19
projects 18:11 18:23 20:22 38:15 58:12 72:13 73:25 74:23 76:11
prominent 91:8
properties 20:13 38:17
property 22:17 35:11,16,19,20 35:24 36:2,5 36:17 37:24 38:8 39:9 55:25 56:4 63:21 75:10 77:12 81:7,12
proposal 80:20 81:3
proposed 77:2 82:2
protocol 62:23
provide 13:17 19:12 23:4,9 27:14 38:17 47:19 70:19 76:22 83:24 84:15 92:21
provided 11:12 12:13 22:4 29:4,6,11 40:25 65:23,25 68:11,12 73:17 79:19 94:16 100:5
provider 41:15
provides 38:13
provision 101:4
pt 83:21,25
public 1:13,13 99:3,21 101:9
publications 16:4 25:9,11 25:15,18,22
published 25:4 25:7
purchase 19:10 60:5 97:12
purpose 37:23 38:11 42:21
pursuing 85:6
put 42:10 89:18

putting 70:14 79:23 96:19

q

qualifications 83:15
qualified 26:18 26:22
quantify 74:10
quantities 65:11
quantity 64:4,9 69:24 72:6
question 6:19 6:21 7:2,5 8:8 8:8 9:2,3 11:18 33:15 37:8 72:2 73:8
questions 6:18 7:8 34:13 41:25 83:9,11 86:4 97:3,4

r

r 2:2 99:1
rafters 52:22 52:25
range 47:11 58:14 73:25 92:6
rarely 96:13
rate 31:19,20 69:24 71:17 72:5
rather 48:23 82:13
ray 64:20
reach 39:16 68:10
read 5:5 81:1 82:3,12 101:2 101:13
reading 101:7
reads 80:18
ready 94:3
really 88:25 90:18 91:16,25 94:19
reason 8:11,15 42:7 100:8
reasonable 7:15 56:5 88:24 89:15,24 92:12 95:24
reasonably 90:7
reasons 51:9 53:9
rebar 70:15
rec 74:14
recall 24:21 25:10 27:9,12 27:17 28:11 29:25 32:7 35:18 36:18,21 39:24 42:20
receipt 101:12
receivable 19:14
receive 13:9 28:18 76:3
received 30:3 82:20
recess 32:24 57:15 83:4
recognize 9:24 11:5 15:8 33:12 45:16,17 45:18
recommend 56:18,22
recommendat... 52:11
recommendat... 19:20 23:9 44:5 50:11 54:6,10,14 56:4 73:11,17 73:23 74:15,20 74:22 76:21 81:18 89:7 92:10,11
recommended 50:6,9 65:24 74:5,9 80:22
recommends 54:18
record 5:9,25 7:3,16,20 9:7 10:20 11:8 15:3 32:19,22 32:25 33:2,16 33:16 36:13 45:6 57:11,13 57:16 79:22 82:25 83:2,5 97:8,19 99:10
recorded 1:12 99:8
reeve's 91:8
refer 13:6,12 65:14
reference 75:21
referenced 17:7 19:22 34:16 90:17
referencing 95:8
referral 22:15 28:20 29:6
referrals 13:10 20:9 23:1 62:17,23
referring 47:24 47:25 50:10 70:8,16 73:4 78:7
reformatted 99:14
regarding 40:10
regardless 92:7
regards 42:1
registered 1:12 21:8 99:2,21

rehab 16:17 18:5,12,20 19:4,16 83:21 84:8
reimbursed 31:12
related 25:18 26:19,23 58:19 99:12
relating 18:16 26:2,5 65:10
relationship 13:1
reliance 12:16
relied 11:16,23 12:15 14:12,20
rely 12:13
remained 20:3
remember 27:15 86:5
remodeling 76:9,18
remote 1:10 5:1 5:13,21 77:21 77:25 98:2
remotely 5:19 5:20 34:2 35:14 99:6
removed 49:8 52:22
render 58:3 87:12
rendered 69:2 85:24
rendering 12:12 14:12,16 14:21
renews 17:1
renovation 78:18
renovations 87:3
rented 91:6
repair 68:2
repeat 43:21
rephrase 6:20 11:19 37:10 43:25 56:19
reply 11:21
report 4:5 10:4 11:10,17,21,24 13:18 14:25 19:20 23:5 27:21 29:15 35:1,12 38:11 39:23,25 40:1 40:2 43:6 47:18 50:4,11 54:17 56:13 63:14,19 75:9 76:5 78:2 79:14 81:6 82:6,6 85:24 85:25 89:20 95:22
reporter 1:13 6:1 7:4,7,16,18 97:10,16,18 99:3,21 101:10
reporting 5:21
reports 27:7
represent 6:10
representation 15:21 90:3
representative 36:14,22,24
representative's 36:19
represents 63:24
repurposed 89:10
request 39:9
require 28:3 36:7 39:3 51:7 55:14 58:22 77:2
required 16:20 16:24 36:9 51:25 53:14 56:3,6 59:25 60:5 77:9,22 78:4
requirement 38:3
requirements 17:8,10
requires 16:21 31:1 53:16 75:24 77:13
requiring 41:3
resale 88:9 89:11
residence 41:20
residential 13:4 17:19 20:13 22:17 43:6 45:1 47:19 48:2 96:13
resolution 59:3
respect 88:12
response 33:15
responses 4:7
responsibilities 20:6 22:14
responsibility 20:8
restoration 78:18
result 49:3
retained 29:8 29:16,19,23,25 87:11
retired 12:23
return 101:9
returning 63:14
review 55:11 55:14,16 77:1 80:20,22,25 81:10 100:5
reviewed 10:4 56:6 75:10 78:15 80:10 81:15 88:15

reviewing 55:20
ridge 2:5
right 8:22 9:12 11:3 28:10 33:10 69:21 71:23 73:24 81:21 86:1 101:13
road 9:10
role 14:4 18:21
roles 19:3,7,8
roll 42:9
rolling 48:16
romano 2:7,8 3:7 32:21 57:12 83:1,10 83:13 97:2,22
romanolawgr... 2:10,11
room 8:21 61:15 63:3
roster 20:25
roughly 30:8 30:15 87:20
rules 100:5
runoff 56:11 77:4
rural 51:5

s

s 2:2
safety 84:6,9 88:8
sake 38:22
satellite 59:12
saying 29:6 59:23 90:1
says 44:21
sc 2:5
scale 82:1,7
scan 35:24 36:1 36:25 37:17 38:2,12,23 57:21 58:3,4,8 58:21 60:23 61:2,2,4,6,7,18 61:20 62:4,4,6 62:7 63:3 64:5 64:7,13,17,19 64:23,25 65:1 65:2,6,9 87:19 87:23,24 88:1 93:3,4
scanned 36:16
scanner 59:7 61:13
scanning 36:6 37:3,7,24 38:6 59:4,21 60:18 62:24 64:15
scans 36:12 60:19,22 61:6 61:22 62:1,3 65:3
scarce 68:3
schedule 81:9
scheduling 80:20
science 16:11 16:12
scope 32:1 51:24
screen 9:13,17 10:23 11:3 33:4,10 39:24 45:8 61:11 63:14,16 79:25 80:5,16 93:24 95:17
scroll 45:20
scrolling 33:14
se 39:17 45:18
seal 101:19
second 46:1 62:7 89:2
secondary 19:1 23:1 86:12
section 40:8 47:19 50:4
see 7:12 9:22 9:23 11:2,4 33:9 39:25 40:1 45:14,15 51:21 52:23 53:12 61:2 63:10,16 73:25 80:5,6,15 81:21 82:9 87:2 90:15 94:20 96:13
seeing 84:12
seen 80:7
self 12:16,17 43:3
sell 84:8
seminars 24:10 24:13,19,22 25:1
send 37:19
sense 6:23 9:4
separate 101:5
september 29:12,13 33:18 33:19 34:16
series 62:2
serve 18:20
served 27:3,17
service 30:16 47:9 69:1 71:18 84:15 92:21
services 4:5 12:19 13:1,2 13:25 14:6 18:7,10 19:1 19:25 21:9,11 21:13 22:4 27:14 30:11 32:5 55:2,14 56:3,8 76:20 83:21,24,24 84:11
serving 27:13

set 93:12 99:5
setbacks 56:11
setting 84:23
seven 45:18 48:7 49:20 96:24
shake 7:12
shara 14:3 19:22
share 9:16 32:17 63:13 93:23
sharing 9:22 10:22 11:3 33:4,10 39:24 45:8,14 79:24
sheet 100:1,7 101:5
short 57:7
shower 42:9,10 91:22
sic 18:6 28:19
side 20:16 27:15 48:16,16 85:14
sidewalk 48:13 48:16,23 49:3 49:5,7,8,14
sign 5:5 75:22 101:8,13
signature 99:19 100:6 101:16 101:22
similar 27:7 31:21 62:21 72:2,20 79:3
simple 46:4
single 66:20
sit 52:1 53:5 91:23
site 20:12 22:16 36:16 38:22 39:1,3,11 51:4 52:20 93:22
sits 31:9
situation 79:6
situations 39:6
six 47:20
sixth 46:13
size 46:16 49:18
sketches 85:4
skill 71:16 72:15
slope 49:18
slowly 84:10
small 90:25
software 34:5 58:1,2 60:24 65:24 66:5 92:15 93:8
sold 60:2
sole 36:24
solicit 93:15
solicitation 20:21 22:19
solid 63:10
solution 48:8
solutions 42:1
somebody 13:22 47:6,8 48:25
someone's 37:24
sorry 11:19 12:5 50:6 54:23 67:1 69:23 74:14 97:18
sort 7:15 58:22 58:25 68:1 84:14 85:5
source 71:11
sources 69:4,10
space 46:17 49:18 88:3 89:9,15
span 52:21,22 52:24
speak 8:3 29:18 29:22 34:15 35:4 47:16 95:12
speaking 5:22 7:15 22:15 32:10
special 20:9
specialist 84:17 96:1
specialization 83:16
specialize 44:17
specialized 39:5 52:18 90:20
specialty 44:9 94:6
specific 59:24 67:19 78:22 90:19
specifically 29:1 40:12 44:18 51:4 63:15 67:16
specificity 77:13
speech 83:22 83:25
spinal 23:16 42:3 91:7
spoke 33:17 34:17 92:14
spoken 33:21 96:20
sports 16:12
staff 13:21 14:11,15,19,23 80:19,21,22 81:10
stamped 53:3
stamps 77:3

stand 97:6
standard 38:16 44:25 47:21 50:22 55:6,9 62:8,19 66:5 68:16 75:5 77:13 94:7,14 94:15
standards 43:13,17 44:3 44:23 45:3 66:7 67:12
standing 97:14
start 7:23 18:24 85:6 95:14
started 6:11 19:9 74:24 83:20 84:8,11 85:3 87:25 88:2 90:5
state 9:7 16:6 16:21,21 50:13 75:9 79:14 92:23
stated 85:10
states 1:1 2:14 5:15 6:10 18:20 78:2
statutes 75:16
stayed 91:14
stenographic 5:25
stenographic... 1:12 99:8
step 80:15,18 81:21 82:9 87:11,11,12,14
steps 76:19 87:7,10 94:5,7
sticking 18:19
stone 70:12,14
storm 68:1,25
street 2:5,15
stress 6:12
strictly 12:7
strongly 80:22
structural 51:20 52:19
structure 53:1 56:7
studies 18:17 24:11 25:6 75:2
study 28:12 71:12 89:22
sub 70:5,7
subcategories 70:17
subject 17:21 17:24 35:12
submit 27:23
submittal 15:18
submitted 11:11 12:7 30:9 81:3 82:16
submitting 80:19
subpoena 4:4
subscribed 99:16 101:20
substitute 74:13
sufficient 38:23 39:17
summary 50:4
sunlight 63:1
supplies 19:10 84:9
supply 68:6,7
support 13:20 14:11,15,19,23 58:1
sure 32:13 40:14,24 56:20 59:8 60:17 61:1 66:6 70:8 70:21 71:11,13 73:14 75:7,22 94:2,11
surface 37:20
surfaces 37:19 77:6
swear 6:2
switch 19:24 39:22 67:14
switching 24:4 27:2 43:5 50:3 75:8
sworn 5:20 6:4 99:6 101:20
system 31:9 42:3,12 59:18
systems 51:19 53:17 59:12

t

t 3:3 4:2 99:1,1
take 10:17 34:5 34:8,21 42:10 47:4 48:17 49:20 57:7 60:23 89:3
taken 1:10 32:24 57:15 83:4 94:8 99:4 101:2
takes 45:22 62:4 69:23 87:20 94:4
talk 7:14
talked 87:18
talking 28:10 59:23
tape 39:14 58:18 94:1
target 48:20
task 14:8
tasks 14:8
taylor 1:12 6:1 99:2,20
teaching 24:6

technologies 37:23 39:13
technology 36:16 37:4,6 37:14,18 38:14 57:20 58:10,16 60:3,4,9 62:13 62:18 64:18 93:10 94:17
tell 6:15 24:17 53:8 95:10
tennessee 35:8 67:20
terms 52:11 73:10,22 83:15 87:3,7
testified 6:5
testify 4:4 28:1 28:4
testimony 8:12 99:7,10
thank 22:13 27:1 46:19 60:10 70:21 83:8 97:2,9
thanks 17:20
therapist 14:5 19:17,19,23 26:12
therapists 83:22 84:1,21
thereof 99:12
thickness 52:23 52:24
thing 65:16 73:14 90:21 96:8
things 44:2 51:20 61:17 84:13 88:23 89:13 96:18
think 27:6 29:10 30:8 35:25 51:14 62:16 64:10 70:16 88:24 90:2 92:22 94:10,11,15
third 46:4 60:7
thirty 101:12
thought 53:9 95:2
thoughts 88:18
three 23:20
time 1:11 5:3 5:12 8:3,24 10:9 12:9 15:18 22:25,25 27:17 29:3 31:7,14 33:20 34:10 36:4 38:22 42:8 55:3,23 56:15 56:23 58:18 72:18 76:10,10 82:18,22 83:8 86:13 91:3 94:4 99:4,5,7 99:10
timekeeping 31:9
timely 31:9
times 10:15 34:19 38:21 41:21 69:24,25 72:6,14,17 74:8
title 25:10 101:3
today 8:13,16 8:25 17:14 39:18 52:1 53:5 57:3 69:1 71:3 74:20 81:4,17 83:8 95:23 96:20
today's 5:11 10:3 97:7
together 88:17 89:18 94:20,21 96:19
toilet 91:22
told 89:3,14
tolerance 46:10 49:1
tolerate 49:11 49:16
took 57:6 87:7 87:10 90:25
top 21:24 24:17 25:12 27:11,16 29:10 36:20,23 60:21
topic 24:25 25:17
topics 25:21 27:2
total 27:5 50:5 67:10 69:17,22 70:6 72:3,7,8 73:10,15,22,23 74:6 76:2
tour 10:5 35:15 35:22,24,24 36:6 38:8 39:1 39:9 53:12 58:17 88:16
toured 35:19 35:20
touring 58:17
tours 36:4 38:17 39:12
track 31:6
tracked 59:7,11 59:14
trade 72:19,22 72:24 73:2,5
trades 52:18
traditional 76:18,24 77:10
transcribe 7:9 7:11
transcribed 1:12 99:8
transcript 5:6 97:13 99:14

101:2,3,3,8,10 101:13,13
transfer 42:3,4 42:12
transfers 42:5 42:5,6
transportation 70:23
traumatic 23:17
travel 31:1,11
travelers 22:23 31:22 62:11
treating 35:5
trial 28:4
tribunal 18:1
true 18:21 71:6 99:9 101:4
trust 21:2
trusts 20:10
truth 6:15 53:8
truthful 8:12
try 7:19 37:9
trying 48:1 69:20
tub 42:2,10,12
turn 80:13
turner 2:14 3:6 6:8,10 9:15,20 10:20 11:1 15:2,7 32:17 33:2,8 45:6,12 57:5,10,18 79:22 80:3 82:24 83:7 97:4,9,14,17,21
turning 47:18
twin 93:7
two 17:1 22:24 34:19 38:21 61:21 65:3 78:10 87:20
type 25:9 31:11 49:3 57:25 75:24 78:6
types 19:1 21:5 23:12 42:13 77:6
typical 7:1
typically 65:19 66:20 68:24

u

ultimate 25:12 66:24 67:3
um 7:11 37:12
unable 8:11
uncertain 57:3
under 6:13 43:3 52:13 53:19 70:18
understand 6:14,19 7:1 11:18 37:8 39:3 51:23 59:8 85:13 87:2 88:11 101:7,11
understanding 97:23
understood 6:22 73:8
uniformly 43:9 43:13,17 44:3 44:22
unit 22:5,9,21 23:4,14,16 67:14,24 68:10 69:4 70:3 71:6 71:9,20 72:6
united 1:1 2:14 5:15 6:10
units 59:15
universal 4:10 24:23 25:13,19 25:22 28:14 42:23,23 43:3 43:18 44:4,7 44:12,14,21 45:4,19,24 46:20,21,25 47:15 48:5,13 49:10,21 90:17 90:24 91:1,10 91:18 92:1,6 96:21,24
university 16:7
unknown 53:13 53:21,23 56:23
unlicensed 79:3 79:7,11
unused 65:20 89:9
updated 68:24
updates 15:24
upgraded 55:15
upgrades 55:2 56:14,17,21
upload 38:1
usa 16:17 18:5 18:12,19 19:4 19:15 84:8
usable 42:24 46:23 47:2 58:3
usdoj.gov 2:17 2:17
use 37:22 38:15 38:24 39:12,14 44:7,12,16 45:3,23 46:1,4 46:17 48:22,25 49:18 51:2 58:23 59:21,25 60:15,20 62:12 62:13,20 65:18 68:12 72:12 91:21,22,22,22 91:22,23
used 34:4 35:25 36:25 37:3 42:12 43:18 44:4 50:24 51:11 57:21

58:1,8,10,21 59:11 60:8,11 62:19 64:15 65:9 66:20 95:18
useful 48:18 58:15 62:14
user 49:2
users 4:12 48:19
uses 47:6
using 42:4 47:12 59:12,14 60:3 79:10 88:2,5
usually 20:15 23:18 24:15 70:13 74:3

v

v 2:15
value 54:21 69:11 72:10 74:12 89:11
values 68:12 72:20
varying 23:16
vastly 96:8
ver 40:12
veritext 1:24 5:10
versus 30:19,23 77:21 79:11
video 5:13 32:22,25 57:13 57:16 83:2,5 97:7,8
videoconfere... 1:10,14 2:6,11 2:18,20 5:1 8:1 98:2
videoconfere... 99:5
videographer 2:22 5:8,10 32:22,25 57:13 57:16 83:2,5 97:6
videotaped 1:10 4:8 5:1 98:2
virtual 35:15 35:24
virtually 35:18 35:20 87:15 88:16 93:9 94:21
visual 64:12 65:1
vitae 4:6
voice 28:18
voicemail 12:6 12:8
void 99:15
volume 31:25

w

wait 7:22
waive 101:12
waiver 18:9
walk 47:5 87:10 93:25 94:20
walking 48:15 48:15
walls 51:18,23 53:13 63:11 88:5 89:17
want 6:11 9:2 48:9 66:1 68:21 72:14 77:7 83:7 97:24
wanted 88:25 89:1 91:5
washington 2:16
wastage 65:13 65:15,16,21 66:3,9,23 67:2 67:6,8 69:25
waste 70:2
wasted 65:20 66:16,19
water 1:3 5:14 51:20 56:11 77:6 100:3
way 31:16 61:12 84:11 99:12
ways 76:23
we've 57:5
wednesday 1:7 5:11
weigh 48:5 49:24
went 36:16 61:13,13 68:5 72:9 88:16
west 2:9
wheel 49:13,13
wheelchair 41:3 47:7,8 49:13 84:24 85:2
whereof 99:16
wide 47:11 92:6
william 2:15,22
william.v.klo... 2:17
wilmington 5:9
wish 97:12
witness 3:4 5:5 5:20 6:2 57:9 99:5,7,16
words 83:18
work 13:5,14 13:21 17:19 18:4,16,19,24 19:25 21:6 22:1,8,22 23:13 25:9

30:4,21,23
31:2,2,13,21
32:1,1,8 40:18
41:2,6,10 50:6
50:9 51:24
52:25 53:14
56:12 62:17
64:24 68:18
75:10,14,18,18
75:22 76:16
77:11,18,20,22
77:24 78:17,25
79:2 82:2 84:3
89:15,16 90:12
91:17 93:16
94:4
worked 23:22
36:22 40:17
76:11,13 91:16
worker 20:10
20:10 72:16
workers 12:24
20:16 23:2,17
24:18 32:1
working 20:13
24:2 28:23
76:7 84:17
87:25
worldwide
58:10
wrap 61:23
write 29:15
writing 11:20

x

x 3:3,3 4:2,2
65:17

y

yeah 7:6 17:17
22:12 67:21
73:14 76:25
83:18 97:17,20
97:21
year 29:13
67:22,23 92:24
years 17:1
24:17 25:16
44:25 60:4,6,7
84:16 85:12
86:16,23,25
91:3 92:22
york 16:7

z

zero 66:9,12,19
70:2
zoning 4:11
zoom 87:15

Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate. The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

DISCLAIMER: THE FOREGOING FEDERAL PROCEDURE RULES ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY. THE ABOVE RULES ARE CURRENT AS OF APRIL 1, 2019. PLEASE REFER TO THE APPLICABLE FEDERAL RULES OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.

VERITEXT LEGAL SOLUTIONS

COMPANY CERTIFICATE AND DISCLOSURE STATEMENT

Veritext Legal Solutions represents that the foregoing transcript is a true, correct and complete transcript of the colloquies, questions and answers as submitted by the court reporter. Veritext Legal Solutions further represents that the attached exhibits, if any, are true, correct and complete documents as submitted by the court reporter and/or attorneys in relation to this deposition and that the documents were processed in accordance with our litigation support and production standards.

Veritext Legal Solutions is committed to maintaining the confidentiality of client and witness information, in accordance with the regulations promulgated under the Health Insurance Portability and Accountability Act (HIPAA), as amended with respect to protected health information and the Gramm-Leach-Bliley Act, as amended, with respect to Personally Identifiable Information (PII). Physical transcripts and exhibits are managed under strict facility and personnel access controls. Electronic files of documents are stored in encrypted form and are transmitted in an encrypted

fashion to authenticated parties who are permitted to access the material. Our data is hosted in a Tier 4 SSAE 16 certified facility.

Veritext Legal Solutions complies with all federal and State regulations with respect to the provision of court reporting services, and maintains its neutrality and independence regardless of relationship or the financial outcome of any litigation. Veritext requires adherence to the foregoing professional and ethical standards from all of its subcontractors in their independent contractor agreements.

Inquiries about Veritext Legal Solutions' confidentiality and security policies and practices should be directed to Veritext's Client Services Associates indicated on the cover of this document or at www.veritext.com.

Exhibit 772

UNITED STATES DISTRICT COURT
FOR THE
EASTERN DISTRICT OF NORTH CAROLINA

IN RE: CAMP LEJEUNE WATER LITIGATION, Plaintiff, vs. UNITED STATES OF AMERICA, Defendants.	Civil Action No. 7:23-cv-00897

VIDEOTAPED DEPOSITION UPON ORAL EXAMINATION OF
ANIRBAN BASU, Ph.D.
SEATTLE, WASHINGTON
MONDAY, FEBRUARY 23, 2026

VERITEXT LEGAL SOLUTIONS
(800)831-6973
www.veritext.com
REPORTED BY: MARY M. FOLEY, CCR NO. 3316
FILE NO: 7879969

UNITED STATES DISTRICT COURT

FOR THE

EASTERN DISTRICT OF NORTH CAROLINA

IN RE: CAMP LEJEUNE WATER LITIGATION,	)	Civil Action No. 7:23-cv-00897
Plaintiff,	)	
vs.	)	
UNITED STATES OF AMERICA,	)	
Defendants.	)	
_____	)	

Videotaped Deposition of ANIRBAN BASU, Ph.D., taken on behalf of Defendant United States of America, at Seattle, Washington, commencing at 9:24 a.m., Monday, February 23, 2026, before Mary M. Foley, CCR No. 3316.

A P P E A R A N C E S

FOR THE PLAINTIFF:
BY: BENJAMIN VANSLYKE, ESQ.
Weitz & Luxenberg
Fisher Building
3011 West Grand Boulevard
24th Floor
Detroit, Michigan 48202
(313)800-4170
BVanSlyke@WeitzLux.com

BY: LESLIE LaMACCHIA, ESQ.
Beasley Allen Law Firm
Post Office Box 4160
Montgomery, Alabama 36103
(334)269-2343

BY: WHITNEY WALLACE, ESQ.
Wallace & Graham, P.A.
525 North Main Street
Salisbury, North Carolina 28144
(704)633-5244

(Appearances Continued)

BY: JENNA BUTLER, ESQ.
Ward & Smith, P.A.
University Corporate Center
127 Racine Drive
Wilmington, North Carolina
(910)794-4877

FOR THE DEFENDANT:
BY: GIOVANNI ANTONUCCI, ESQ.
MELANIE KONSTANTOPOULOS, ESQ.
United States Department of Justice
Civil Division, Torts Branch
Camp Lejeune Justice Act Section
1100 L Street Northwest
Washington, D.C. 20005
(202)880-6104
Giovanni.Antonucci@USDOJ.gov
Melanie.Konstantopoulos@USDOJ.gov

ALSO PRESENT:
ZACHARY HONE - Videographer

INDEX

WITNESS: ANIRBAN BASU, Ph.D.

EXAMINATION	PAGE
Examination by Mr. Antonucci	7
Examination by Mr. VanSlyke	69

EXHIBITS:

NUMBER	DESCRIPTION	REFERENCED
Exhibit 1	Notice of Deposition and Subpoena	12
Exhibit 2	Second Amended Notice of Deposition	14
Exhibit 3	Expert Reporter and Materials Considered List	20; 49; 55; 69
Exhibit 4	White Paper: The Flow of Money Through Pharmaceutical Distribution System - Sood, et al.	45
Exhibit 5	Cost-Effectiveness in Health and Medicine - Neumann, et al.	53
Exhibit 6	Medical Bills Summary Spreadsheet - Cagiano	60
Exhibit 7	Medical Bills Summary Spreadsheet - Dyer	62

THE VIDEOGRAPHER: We are now on the record. My name is Zach Hone, I'm a videographer for Golkow, a Veritext division.

Today's date is February 23rd, 2026, and the time is 9:24 a.m.

This remote video deposition is being held in the matter of Camp Lejeune Water Litigation, Number 7:23-cv-897 v United States of America.

The deponent is Anirban Basu, Ph.D.

All parties to this deposition are appearing remotely and have agreed to the witness being sworn in remotely.

Due to the nature of remote reporting, please pause briefly before speaking to ensure all parties are heard completely.

Counsel will be noted in the stenographic record.

The court reporter is Mary Foley, who will now swear in the witness.

Whereupon,

ANIRBAN BASU, Ph.D.,

having been first duly sworn, was called as a witness herein and was examined and testified as follows:

E X A M I N A T I O N

BY MR. ANTONUCCI:

Q Great. Good morning, Dr. Basu. My name is Giovanni Antonucci, I'm an attorney for the Department of Justice, I represent the United States in the Camp Lejeune Water Litigation that's currently pending in the United States District Court for the Eastern District of North Carolina.

To get started, could you please state your full name, please?

A Yeah, it's Anirban Basu.

Q And could you please state your current address?

A My home address?

Q Could you please state your current business address, please, Dr. Basu?

A Yeah, it's 1959 Northeast Pacific Street, Box 357631, Seattle, Washington, 98195.

Q Have you ever had your deposition taken before?

A No, I have not.

Q Dr. Basu, you took an oath before we started this morning, correct?

A Yes.

Q Do you understand the nature of that oath?

A Yes.

Q The oath requires you to fully answer each question; if you're not sure of an answer or don't have a complete answer, you must still answer the question to the extent you can; do you understand?

A Yes.

Q A court reporter is taking down everything that we say. Because she can only record words, it's important that you answer her questions verbally. For example, you must say yes or no, rather than nodding or shaking your head, okay?

A Yes.

Q Please speak at a reasonably slow pace; I will do my best to do the same, and that's so the court reporter can get down everything we're saying; do you understand?

A Yes.

Q We should also try not to interrupt one another for the same reason. Please wait until I've finished my question before you start to answer, and I will wait until you are done answering my questions before speaking; understand?

A Yes.

Q Once the deposition is complete, you'll be given an opportunity to read a transcript of your testimony and make any corrections, and you will then

be asked to sign it; do you understand that?
A Yes.
Q Only you are testifying today, you must answer to the best of your ability, and you may not ask other people for their help; do you understand?
A Yes.
Q If you do not understand one of my questions, please let me know, and I will try to clarify. If you don't ask for clarification, I will assume you understood the question; is that fair?
A Yes.
Q During the deposition, you may hear other attorneys make objections. Unless the attorney instructs you not to answer the question, please answer the question after the objection has been made; do you understand?
A Yes.
Q Dr. Basu, is there any reason why you're unable to give your most truthful and accurate testimony today?
A No.
Q Is there any reason your memory might be impaired today?
A No.
Q Dr. Basu, you may ask for a break at any

time. Please don't hesitate to ask for a break. Just please make sure that any question I've asked is answered before we break; does that sound good?

A Yes.

Q Okay. Am I correct that you've been retained by the Plaintiffs' Leadership Group as an expert witness in the In Re Camp Lejeune Water Litigation pending in the Eastern District of North Carolina?

A Yes.

Q Approximately when were you hired?

A I don't recall the exact date, but it should be late in 2025.

Q And do you recall who hired you?

A I was approached by Ben here, who is sitting with me, and a few others from his group.

Q Okay. Prior to being retained, had you ever heard about Camp Lejeune?

A No.

Q Okay. So Dr. Basu, I'm going to be dropping some exhibits in the chat for you to see. You should take the opportunity to review the document and make sure you're familiar with it.

The first one I will mark for identification as Exhibit 1.

MR. VANSLYKE: Counsel, if I can just make a

quick objection for the record, I do want to note that -- so the Zoom was unilaterally noticed -- I'm sorry, the deposition was unilaterally noticed for Zoom, we've had discussions off the record, so I am in person.

Just so that you're aware, he does have unaltered copies of his report with him, so he has those physical in addition to anything you drop online.

MR. ANTONUCCI: Okay.

Q (By Mr. Antonucci) For the sake of consistency, and to make sure that I'm understanding everything, Dr. Basu, I ask that you use the copies I'm sharing with you in the chat; do you understand?

A Yes.

MR. VANSLYKE: I'll object to that as well. He is allowed to refer to his reports. He has copies of them with him. You're welcome to use the online version and direct him to things that you'd like to draw attention to in that format, but he is also welcome to use the physical copies in front of him.

MR. ANTONUCCI: All right. Are you done stating your objection?

MR. VANSLYKE: Yes.

Q (By Mr. Antonucci) Okay. Dr. Basu, I am sending you what I'm marking for identification as

Exhibit 1. This is the January 30th, 2026, Notice of Deposition and Subpoena. Please let me know when you're been able to open this.

I'm also, at the same time, going to share my screen.

Are you able to see my screen, Dr. Basu?

A Yeah.

Q Okay. Do you recognize the document that I'm showing you?

A Yes.

Q Okay. So I'll represent to you this is January 30, 2026, Notice of Deposition and Subpoena for your testimony.

I'd like to turn your attention to page eight. Are you able to see page eight, Dr. Basu?

A Yes.

Q Okay. So Request Number 8 -- excuse me, Request Number 7 of page eight of Exhibit 1 requests a copy of all publications, articles, reports, or studies you have authored or co-authored regarding Camp Lejeune; adjustment of incurred healthcare costs to current dollars or present value using a price index; and any other topics covered in your expert report. Did I read that correctly, Dr. Basu?

A Yes.

Q And you testified that you recognized this document earlier, right?
A Yes.
Q Have you seen this request before?
A I have read this request before.
Q Okay. And did you provide anything to your attorneys that are responsive to this request?
(Reporter seeks clarification.)
THE WITNESS: Yes, I have.
Q (By Mr. Antonucci) Okay. Did you provide --
THE REPORTER: I'm sorry, go ahead.
MR. ANTONUCCI: Thank you. I apologize.
Q (By Mr. Antonucci) Did you provide anything to your attorneys that was responsive to this request?
A I provided all the adjustments and my report regarding this case to my attorneys, and I believe that was submitted.
Q Okay. Other than the adjustments in your reports, did you submit anything else to your attorneys with regard to --
A I did submit my CV that had all the details of all the other work outside of the Camp Lejeune work that had been done with healthcare costs in the United States, and that was a long list of academic papers and work, and the CV was also submitted.

Q Okay. So apart from your reports and CV, did you submit anything else to your attorneys responsive to the request for production?

A No, I did not.

Q Okay. All right. Let's stop looking at this, I'm going to stop sharing my screen, and share with you another exhibit. This will be marked for identification as Exhibit 2.

And I will share my screen again and show you Exhibit 2. Are you able to see Exhibit 2, Dr. Basu?

A Yes.

Q Okay. Have you seen this document before?

A Yes.

Q Okay. And I'll represent to you that this is the Second Amended Notice of Deposition, which was sent on February 20th, 2026; is that correct?

A Yeah, yes.

Q I'm going to stop sharing my screen.

Dr. Basu, did you do anything to prepare for your deposition today?

A I did have conversations with my attorney.

Q Okay. Who are you referring to when you say your attorney?

A Ben and Jenna.

Q Okay. And how many times did you discuss

this deposition with your attorneys?
A Twice.
Q And approximately when were each of those discussions?
A One was last Friday and the other one was last Wednesday.
Q Okay. Did those take place in person or over Zoom or telephone?
A Over Zoom.
Q Okay. And approximately how long did you speak to them for on each occasion?
A It was about one hour in each case.
Q And was anyone else present during either of those meetings?
A During the first meeting, both Ben and Jenna were present; in the second meeting, only Jenna was present.
Q Did you review any documents to prepare for your deposition?
A I reviewed my own reports that I prepared.
Q Other than your reports, did you review any other documents to prepare for your deposition?
A No.
Q Have you reviewed any of the other depositions taken in this case?

A No.
Q Dr. Basu, you previously mentioned you've never testified in a deposition. Have you ever testified at trial?
A No, I have not.
Q Have you ever testified in an arbitration?
A No.
Q Have you ever testified in a mediation?
A No.
Q Okay. Have you ever prepared an expert report prior to the one in this case?
A I had been retained a couple of times regarding healthcare cost damages, I have prepared reports as an expert witness, but I believe that none of those reports were used in the cases.
Q Okay. Do you recall the names of any of the cases in which you were retained as an expert witness?
A I don't recall the exact names, but one was regarding smoking and the other was regarding opioid use.
Q Do you recall the jurisdictions that those cases were pending in?
A The opioid use was Washington state; the smoking case was national.
Q And let's talk first about the smoking case.

Were you retained as an expert by plaintiffs or defendants in that case?

A We were -- I was retained by the government side.

Q Okay. And what was the nature of the smoking lawsuit; do you recall?

A It was mostly trying to estimate damages related to smoking.

Q And for the opioid case, do you recall whether you were served -- you served as an expert for plaintiffs or defendants?

A It was again I was working with the state attorney general.

Q Okay. And in the smoking case, did you calculate the present value of past medical services?

A I did.

Q And in the opioid case, did you also calculate the present value of past medical services?

A I was not -- we didn't go there. We had discussions about how to calculate that, but I was not asked to actually calculate that, those values.

Q Why were you not asked to calculate the past value -- or the present value of past medical services in your opioid lawsuit?

A I'm not exactly sure why, but it ended more

quickly. We had -- we had a few discussions, and then that's about it.

Q Did you present the value of past medical services in -- in another format, other than current dollars?

A No, all damages that I calculated, or even I discussed, were in terms of present value.

Q Okay. Have you ever been involved in any personal litigation, so not serving as an expert?

A No.

Q And when did you first begin serving as an expert witness?

A I think the first one would be -- I don't recall the exact year, but it might be 2014, 2015.

Q Okay. And was that for the smoking case or the opioid case?

A Yes, the smoking case.

Q And approximately when was the opioid case?

A About 2018.

Q And other than the smoking case in 2014 and the opioid case in 2018, have you otherwise served as an expert witness in any litigation, arbitration or mediation?

A No, I have not.

Q Dr. Basu, does your payment depend on the

outcome of this case?

A No, it does not.

Q Do you know how much you have billed to date?

A Yes.

Q How much have you billed to date, Dr. Basu?

A I have billed $31,050, I think.

Q I think -- I think it might be 31,125; does that sound right?

A Yes. Yeah, yes, yes.

Q Okay.

A Yeah, yeah.

Q Is your fee schedule in this case the same as fee schedules used in other cases?

A Yes.

Q Okay. All right. Give me one moment, I will introduce a new exhibit.

MR. ANTONUCCI: Okay. I have shared in the chat what I will mark for identification as Exhibit 4. I will now share my screen to show the witness Exhibit 4.

Q (By Mr. Antonucci) Dr. Basu, are you able to see Exhibit 4?

A Yes.

Q This is Exhibit 3, my apologies.

A I'm sorry, yeah. Yes, Exhibit 3.

Q So to be clear, this exhibit, Exhibit 3, this is a copy of your expert report, and I have appended to the end a copy of your Materials Considered list; do you see that, Dr. Basu?

A Yes, I do.

Q So Dr. Basu, you agree that this is the expert report you've disclosed in the Camp Lejeune Water Litigation, correct?

A Yes.

Q And have you read this report in its entirety?

A My own report, yes.

Q Okay. Did you draft this report yourself?

A I did.

Q Did you have the assistance of folks other than attorneys in drafting this report?

A No.

Q And do you agree with all of the opinions and statements made in this report?

A Yes, I do.

Q Okay. I'm going to turn to the last page of Exhibit 3.

A Mm-hmm.

Q The title on this page is Anirban Basu Materials Considered, January 20, 2026, Expert Report

of Anirban Basu, Ph.D. Do you see this Dr. Basu?

A Yes, I do.

Q Is this a fair and accurate copy of your Materials Considered list?

A Yes.

Q And does this Materials Considered list include all of the documents, articles, and materials you reviewed when preparing your report?

A Yes.

Q Okay. Is there anything you considered in rendering your report that is not included on this list?

A I don't think so.

Q Okay. This question pertains to all of Exhibit 3, your entire report. Is there anything in this report that you believe is incorrect?

A No.

MR. VANSLYKE: Objection. Counsel, I think you just haven't scrolled this far, but just to confirm, does this include the appendices or no?

MR. ANTONUCCI: Yes, I'm happy to scroll and show you, but Appendix A is present, as well as Appendix B, which is Dr. Basu's CV. And I believe Appendix C is the list of prior testimony.

MR. VANSLYKE: Okay. So this -- this version

does not include the amended appendices, only the original; is that correct?

MR. ANTONUCCI: No, my apologies. Thank you, Ben. The amended appendices are included in this version as well. They replaced the original appendices. Thank you for pointing that out.

Q (By Mr. Antonucci) Does that make sense, Dr. Basu? Do you understand what I've done here?

A Yes.

Q Okay. So I'll ask the question again. Is there anything in Exhibit 3, which is your report and updated appendices, that you believe is incorrect?

A No.

Q Is there anything in Exhibit 3 that you believe needs to be updated?

A No.

Q And does Exhibit 3 contain a complete statement of all of the opinions you will offer to the court?

MR. VANSLYKE: Objection.

THE WITNESS: So far -- sorry. So far, this is all the opinion that I've offered.

Q (By Mr. Antonucci) Okay. What opinions are not included in Exhibit 3, Dr. Basu?

A Well, I have not been asked to provide any

other opinion at this point, so but if my lawyers do ask me to provide other opinions, I'll be happy to do so.

Q Understood. Okay. I would like to turn to -- this is page 39 of the PDF, December 2025 curriculum vitae that you disclosed; do you see this?

A Yes.

Q Okay. And this document is titled Curriculum Vitae, Anirban Basu, right?

A Yes.

Q Is this a complete and accurate copy of your current resume?

A Yes.

Q Is there anything that you need to change or add to this resume?

A No. I mean, I had a new publication, but that's okay.

Q Okay. Dr. Basu, you have a bachelor's in pharmaceutical technology from Jadavpur University in India, correct?

A Yes.

Q And you received that degree in 1995, right?

A Mm-hmm, yes.

Q You also have a master's in pharmaceutical sciences from the University of Toledo in Ohio, right?

A Yes.
Q And you received that degree in 1997, correct?
A That's right.
Q You have master's in biostatistics from the University of North Carolina, Chapel Hill, right?
A Yes.
Q Which you received in 1999, correct?
A Right.
Q You also have a Ph.D. in public policy with a concentration in health economics from the University of Chicago, right?
A Yes.
Q And you received that degree in 2004, correct?
A Yes.
Q Doctor, you currently serve as the Stergachis Family Endowed Director of the Comparative Health Outcomes Policy and Economics Institute at the University of Washington, right?
A Yes.
Q And you've been in that role since 2017, correct?
A Actually, 2015.
Q Okay, thank you. So you are compensated at

an hourly rate of $500 per hour for your work on the Camp Lejeune matter; is that right?

A Yes.

Q Dr. Basu, do you have a Doctor of Pharmacy degree?

A I do not.

Q Are you a pharmacist?

A I am not.

Q Are you a pharmacy technician?

A No.

Q Have you ever practiced as a pharmacist or pharmacy technician?

A I have not.

Q Do you hold yourself out to be an expert in pharmacy?

A Pharmaceutical economics, but not clinical pharmacy.

Q Understood. Do you have a law degree, Dr. Basu?

A I do not.

Q Are you a licensed attorney?

A No.

Q Do you hold yourself out to be a legal expert?

A No.

Q And do you have a medical degree?
A I do not.
Q Do you hold yourself out to be a medical expert?
A I do not.
Q Okay. Dr. Basu, what was the scope of your assignment for the Plaintiffs?
A I was asked by my lawyers to review Gregory Russo's approach to calculate reasonable values corresponding to the deemed related healthcare equalizations for the Plaintiffs. I did not review or had any opinion on what equalizations were deemed related.
Q I'm going to stop sharing Exhibit 3 for a moment.
So Dr. Basu, just to be clear, Gregory Russo is one of United States's experts; is that your understanding?
A Yes.
Q Okay. And you authored a report on the methods used by Mr. Russo to determine the reasonable value of past medical services rendered to Bellwether Plaintiffs in the Camp Lejeune litigation; is that correct?
A Yes, yes.

Q Okay. And you are not offering an opinion on whether the water at Camp Lejeune may have led to any Plaintiff's development of any disease, correct?
A Yes.
Q You are not offering any opinion on whether any medical service rendered to a Plaintiff should be considered related or not related to any Plaintiff's condition, correct?
A Yes.
Q You did not review the medical records associated with claimed amounts, correct?
A Yes.
Q You did not check to see whether claims were double billed, correct?
A Yes.
Q You did not analyze the accuracy of any medical billing data, correct?
A Yes.
Q You did not evaluate whether up-billing was present in any of the Plaintiffs' medical bills, correct?
A Yes.
Q You did not check Plaintiffs' medical billing data for any evidence of fraud, correct?
A Yes.

Q You are not providing an opinion on the reasonable value of future medical care in any Plaintiff's life care plans, correct?
A Yes.
Q And you did not perform a cost-effectiveness analysis in this case, right?
A Yes.
Q And for the record, cost-effectiveness analysis is a form of economic evaluation that assesses health outcomes and costs of interventions designed to improve people's health; is that right?
A Yes, but it also is used to actually evaluate a specific technology or a treatment.
Q Okay. And that information is then used to inform decisions about resource allocation; is that right?
A Resource allocation and also pricing of those technologies.
Q And just so that I make sure I'm clear, that is not the analysis you performed for your report in this case, correct?
A No, I have not looked at any effectiveness side.
Q Okay.
A I've only looked at the cost side.

Q Understood. I'm going to share my screen and show you Exhibit 3 once again. This is Exhibit 3, page ten. Are you able to see this, Dr. Basu?

A Yes.

Q Okay. In the -- in the first sentence of the last paragraph on page ten of Exhibit 3 --

A Mm-hmm.

Q -- you wrote, I express these determinations with a level of confidence customarily applied in my field and with a reasonable degree of professional certainty. Did I read that correctly?

A Yes.

Q What is the level of confidence customarily applied in your field?

A I'm not exactly sure what -- what you're asking. If you could rephrase it?

Q Sure. You wrote here that you expressed these determinations with the level of confidence customarily applied in your field, right?

A Let me -- oh, yeah, yeah, okay, I'm looking at -- yes. Yes, so this would be the level of confidence that's customarily applied is a level of confidence that would allow you to present my opinion that would be approved in a peer-reviewed academic journal, and also be accepted by, you know, other

experts in the field in terms of peer reviews.

Q Understood. And what does reasonable degree of professional certainty mean?

A I think, from my point of view, it's -- it's something that I can be confident in presenting to a peer group and explain why I followed certain principles or certain methods, which I can -- I am convinced that I can -- I can actually do a good job in making most people accept what I have done.

Q Okay. I'm going to turn now to page four of Exhibit 3. Are you able to see page four, Dr. Basu?

A Yes, I am.

Q Okay. So under subheading three, Summary of Opinions --

A Mm-hmm.

Q -- the first bullet point states, It is appropriate to apply reasonable value calculations to determine the value of past medical expenses because transactional prices in the United States healthcare market do not accurately reflect the true reasonable value of those services. Did I read that correctly?

A Yes.

Q What is a reasonable value calculation?

A The reasonable value calculation is what you would have incurred on average if -- if you randomly

picked, in this case, a private insurance company in the United States, on average what you would have paid for it.

Q Okay. In your opinion, is the willing buyer/willing seller approach a reliable methodology for calculating the reasonable value of past medical expenses?

A Not in the United States, because there is no real market that would actually reflect the transaction amounts or the transaction price for a willing buyer and willing seller.

Because the markets are concentrated, many health insurance have too much market power. So ideally, if it was a competitive market, that principle really holds, but in the absence of a competitive market, we have to do some kind of averaging across all players in the market to see what reasonable value would be.

Q And that averaging that you were just discussing, that's part of the reasonable value calculation; is that right, Doctor?

A Yes.

Q For calculating damages in a lawsuit, why is it more appropriate to use reasonable value than, for example, amounts paid?

MR. VANSLYKE: Object to form. You can go ahead and answer.

THE WITNESS: It's important to calculate reasonable value because it does not include the situation a certain plaintiff may be, depending on what their insurance company has negotiated the prices, whether they have -- have tremendous market power in one setting, or they are in a more urban setting where there is a lot of other players in the market. So if the idea is to say how much would it cost in general to deliver that care, a reasonable calculation makes a lot of sense.

Q And you just stated if the idea is to understand what went into providing that care; is that right, that's what you said?

A Yes, yes. For example -- I can give you an example. When we do a value calculation of the cost calculations for any specific procedures or treatments, we do not rely on any one insurance company, we actually look at broad claims level data and do an average estimate that averages across many, many plans in healthcare insurance.

Q Are you referring to performing a cost-effectiveness analysis, Dr. Basu?

A No. No, I'm referring to actually doing any

healthcare cost analysis.

Q Okay. So I'd like you to look now -- we're still on page four of Exhibit 3.

A Mm-hmm.

Q If you'll look at the third bullet point on this page?

A Mm-hmm.

Q You wrote, The methodology applied by Gregory Russo to determine the reasonable value of the Bellwether Plaintiffs' past medical expenses is appropriate and appears to be reliable, except for omitting this adjustment to present value. Did I read that correctly?

A Yes.

Q Okay. And later in your report, you state that the most comprehensive and accurate approach to calculating reasonable value would be to rely on a national level claims database representing a majority of private insurers, right?

A Yes.

Q And from that database, one can directly estimate average private insurance costs attributable to a condition in a given year, right?

A That's right.

Q You also wrote that such a database is hard

to come by, expensive to access, and mostly nonexistent prior to 2010; is that right?

A That is right.

Q And you wrote that Mr. Russo's approach to calculating reasonable value was the second most comprehensive and accurate approach after that one, right?

A That's right.

Q You also wrote that Mr. Russo's approach to calculating reasonable value provides an acceptable approximation to these average private payer prices for most of the eight service types; is that right?

A That's right.

Q So you did not redo the reasonable value calculation performed by Mr. Russo using a national level claims database, right?

A I did not.

Q Okay. And so instead, you relied on Mr. Russo's reasonable value calculations, which you adjusted to present value, correct?

A That's right.

Q Okay. So I'd like to walk through the summary of -- excuse me, I'd like to walk through your summary of Mr. Russo's methods, which is presented in section four of your report. So that's going to be

Exhibit 3, pages four, five and six.

A Yes.

Q So we can start with -- start with page four of your report. That's Exhibit 3.

So in general, Mr. Russo determined the reasonable value of past medical services, right?

A Yes.

Q And his general framework started by identifying past medical services by CPT code, correct?

A That's right.

Q CPT stands for current procedural terminology, right?

A That's right.

Q Mr. Russo then converted the CPT codes into Medicare payments; is that right?

A That is right.

Q He then multiplied Medicare payments by a private payer cost multiplier, correct?

A That's right.

Q And that gave him the average price of the services in the private market; is that right?

A That is right.

Q Okay. So let's start specifically with Section 4.A of your report, that's Physician and Other Ancillary Clinical Services, and that starts with

professional fees.

So Mr. Russo first used the CPT codes to identify costs incurred by a clinician when rendering a service, right?

A Yeah.

Q And clinicians are paid based on CPT codes that they bill, right?

A They are paid based on RVUs, which is based on CPTs.

Q Okay. So Mr. Russo identified the relative value units, or RVUs, for each CPT code claimed, right?

A That's right.

Q And RVUs are set by the United States Department of Health and Human Services and the American Medical Association; is that right?

A That is right.

Q And there are three kinds of RVUs, which are physician work, practice expenses, and insurance, correct?

A Yes.

Q So after identifying the relative value units, Mr. Russo then adjusted them for geographic practice cost; is that right?

A Based on -- yes, to get to the Medicare expenses, which has a geographic multiplier.

Q And so that was done by multiplying the RVUs by the GPCI, as published --

A Mm-hmm.

Q -- by HHS, correct?

A That's right. That's right.

Q And Dr. Basu, I apologize, but I think you're kind of like vocalizing to state that you agree with the premise of my question. I'd prefer if you just remain silent --

A Yes, I will, okay. Gotcha.

Q -- for purposes of the transcript.

A Sure.

Q I'm sorry to do that to you. I know depositions are unnatural.

But okay. So after -- after Mr. Russo adjusted RVUs for geographic practice cost, he then applied an adjustment factor to determine market rates, right?

A Yes.

Q And to do that, he multiplied by the inflation percentage from RAND reports; is that correct?

A Yes.

Q Okay. Except for not adjusting to present value, you agree that this method for calculating the

reasonable value of past medical services from physicians and other ancillary clinicians is accepted in your field, correct?

A Yes, I agree that the approach taken is the correct approach. I obviously did not review the accuracy of the actual estimates used.

Q Okay. We will -- we will get to that shortly. I'd like to continue walking through the summaries of his methodology first.

So I think that takes us to Laboratory Services. To calculate the reasonable value of past laboratory services, Mr. Russo used 100 percent of the billed rates; is that correct?

A That is right.

Q And except for not adjusting to present value, you agree that this methodology is accepted in your field, correct?

A Yes.

Q And for the reasonable value of past inpatient and outpatient hospital services, I believe that's Section 4.C and 4.G through H of your report; is that right?

A Yes.

Q So in your summary of Mr. Russo's methods, you noted that inpatient bills have three components,

which include the facility fee or overhead costs, the physician fees, and anesthesia fees, right?

A Yes. Would you mind forwarding the page? Yes, thank you.

MR. ANTONUCCI: Okay. And for the record, I changed the exhibit to page six of Exhibit 3.

Q (By Mr. Antonucci) Okay. So for facility fees, the reasonable value can be calculated by pulling hospital cost data, as reported to HHS, dividing by a specific revenue code for charges reported by that hospital for the same revenue, and then multiplying that by the cost-to-charge ratio to determine costs; is that right?

A Yes.

Q And then, after that step, one would need to calculate the reasonable value of the cost using those cost ratios; is that right?

A Yes.

Q And so to do that, Mr. Russo used the RAND report to calculate the ratio of private sector facility fees to public sector facility fees, correct?

A Yes.

Q He determined the federal government's payment-to-cost ratio for specific hospitals using reported data, right?

A Yes.
Q And multiplied the federal government payment-to-cost ratio by state-specific private sector payment percentages, right?
A Yes.
Q Then, he lastly multiplied the charge by the cost-to-charge ratio to determine the reasonable value of costs for inpatient and outpatient facility fees, right?
A Yes.
Q Except for not adjusting to present value, you agree that this methodology is accepted in your field, right?
A Yes.
Q Okay. And the methodology for calculating the reasonable value of past inpatient physician fees is the same as the non-hospital method, right?
A Yes.
Q And that's also true of outpatient physician fees, right?
A Yes.
Q And except for not adjusting to present value, you agree that this methodology is accepted in your field, right?
A Yes.

Q Okay. So for calculating the reasonable value of anesthesia fees, Mr. Russo multiplied the conversion factor times base units plus time units; is that right?

A Yes.

Q And base units are set by the Department of Health and Human Services, time units are 15-minute increments, and the conversion factor is also set by the Department of Health and Human Services, right?

A Yes.

Q So except for not adjusting to present value, you agree that Dr. Russo's methodology for determining the reasonable value of past anesthesia fees is accepted in your field, correct?

A Yes.

Q So Dr. Basu, to calculate the reasonable value of medications, Mr. Russo used GoodRX retail cost data based on the Plaintiffs' zip codes; is that correct?

A Yes.

Q What is -- do you know what GoodRX is, Dr. Basu?

A I do.

Q What is GoodRX?

A It's a platform that -- it's an online

platform that documents kind of the negotiated prices by large pharmacy chains on certain medications.

Q Does GoodRX reflect the discount programs offered by pharmacy benefit managers?

A Yes, they do.

Q Okay. And GoodRX prices represent what consumers could pay at retail pharmacies, right?

A If they're paying out of their pocket, yes.

Q Okay. However, if they're using insurance, that might not necessarily be the case; is that right?

A That's right.

Q Why is that?

A Well, because the discounts negotiated by pharmacy benefits manager with the manufacturers, not all of those discounts are passed on to the insurance companies. And so the insurance companies, the amount that are paid, which is the transactional amount, are not reflected by those from PBM discounted prices.

Q Okay. And when you say PBM, you're referring to pharmacy --

A Pharmacy benefit managers, yeah.

Q So the prices of a given brand of medication on GoodRX reflects the resources used to deliver pharmaceuticals to consumers; do you agree?

A No, because if you think what resources are

used, you would have to include the pharmacy dispensing fee, and some of the profits that are written by the insurance companies, too.

Q Dr. Basu, you suggested using a different methodology for calculating the reasonable value of past outpatient prescription costs, right?

A Yes.

Q Okay. And I'm scrolling now to page eight of Exhibit 3.

A Mm-hmm, yes.

Q And so you can see here, Dr. Basu, that you recommended multiplying the wholesale acquisition cost, or the list price, by roughly 80 percent, to calculate the reasonable value; is that right?

A Yes.

Q And that's continued on to page nine of Exhibit 3, right?

A Yes.

Q Okay. And in your opinion, that method reflects the actual cost incurred in providing the branded drug to the patient; is that right?

A Yes, that is a best approximation we can do. Ideally, you would actually want to see what the insurance company is actually paying, the net prices, but those prices are often not observed, so this is the

best approximation that one could do.

MR. VANSLYKE: Object to form on the last question.

Q (By Mr. Antonucci) Okay. So Dr. Basu, this -- this method of multiplying the wholesale acquisition cost by 80 percent, that's based on the paper by Sood, et al., right?

A Yes.

Q Okay. That's cited there at the bottom of page nine of Exhibit 3, right?

A Yes.

Q Okay. I'm going to stop sharing my screen, and put a copy of that paper in the chat. One moment, please.

MR. ANTONUCCI: I have placed a copy of Sood, et al., 2017, in the chat. I will mark that for identification as Exhibit 4.

Q (By Mr. Antonucci) I will now share my screen to show you Exhibit 4.

A Mm-hmm.

Q Are you able to see Exhibit 4, Sood, et al., Dr. Basu?

A Yes.

Q Okay. And I'd like to look at page five of Sood, et al. Are you able to see page five of Exhibit

4?

A Yes.

Q Okay. So I'd like to read now from the paragraph at the bottom of page five, which says, Figure 2 applies the gross and net margin estimates in Table 2 to illustrate the average flows of funds to distribution system participants for branded and generic drugs combined; Of a $100 expenditure on pharmaceuticals by consumers, composed of both out-of-pocket and insurer payment, roughly $17 goes to drug production costs, $41 dollars accrues to the manufacturers, a third of which is net profit, and $19 accrues to insurers, three dollars of which is a net profit; PBMs keep about five dollars, two dollars net profit, pharmacies keep $15, three dollars net profit, and wholesalers keep about two dollars, 30 cents net profit. Did I read that correctly?

A Right, yes.

Q So Sood, et al., estimate that the actual cost incurred to an insurer in providing a branded drug to a patient is roughly 20 percent of the wholesale acquisition cost, right?

MR. VANSLYKE: Object to form.

THE WITNESS: It's about 80 percent, if I understand correctly.

Q (By Mr. Antonucci) Can you explain to me why that is, please?

A Um --

MR. VANSLYKE: Object to form.

THE WITNESS: Um, if the drug listed by the manufacturer is $100, which is the W -- which is the wholesale acquisition cost list price, the wholesaler adds about $10 to the price and sell it to the pharmacy, and so -- or sorry, one dollar over $100, so one percent becomes about $101. The pharmacy then marks up the drug and adds a dispensing fee, and then -- you know, and that's about, say, you know, $120.

And then, when the drug is dispensed, the patient has -- you know, usually, typically, has a $50 co-pay. And the pharmacy bills the PBM the remaining $115, which is paid by the insurer.

And so at the same time, the PBM has negotiated, on average, $50 rebate for the manufacturer, and keeps about ten percent of that -- of that rebate.

So basically, the -- what that does is the rebate kind of reduces the insurer's cost, which is about $115 to $70. And so if you think about the total cost, the resources, that was kind of, um, used to

actually transfer the drug from the manufacturer to the consumer, is the $70 that the insurers kind of paid, the $50 that the PBM keeps, and then, also, the five dollars that the PBM keeps and the five dollars that the patient kind of pays.

So the total resource must include what the insurance is paying, the profit that the PBM is keeping, and the patient that -- the out-of-pocket cost that the patient is paying.

So that total is kind of the total resources that should be calculated as reasonable value.

Q In general, Dr. Basu, do you know how often the Plaintiffs in this case opted to purchase generic drugs in their past medical bills?

MR. VANSLYKE: Objection.

THE WITNESS: I do not.

Q (By Mr. Antonucci) And do you know how often the average American opts to purchase a generic drug over a branded drug?

MR. VANSLYKE: Objection.

THE WITNESS: I do not. Usually the most -- 80 percent of all prescriptions sold in the United States are generics, but that's a -- that's a different estimate than what percentage of time patients would opt to take a generic.

Q (By Mr. Antonucci) Dr. Basu, ultimately you chose to accept the reasonable values calculated by Mr. Russo for medications, despite his use of the GoodRX method, correct?

A Um, I actually pointed out that this was not the best estimate, and I also pointed out how it could be recalculated. But -- but I would say that this -- this would be an extensive process to recalculate these costs, and I was not asked by my lawyers to do any recalculation.

Q Okay. And to be clear, you weren't asked to recalculate the costs, and you did not recalculate the costs, right?

A Yes.

Q To calculate the reasonable value of physician-administered drugs, Mr. Russo took the HHS average sales price times percent inflation for private insurers, right?

A Yes.

Q I'm going to stop sharing Exhibit 4.

Except for not adjusting to present value, you agree that that methodology is accepted in your field, right?

A Yes.

Q Okay. And to calculate the reasonable value

of home health services, Mr. Russo took the cost of home health services from the HHS website and multiplied by the state-specific inflation rate provided by HHS to yield a market payment rate, right?

A Yes.

Q Except for not adjusting to present value, you agree this methodology is accepted in your field, correct?

A Yes.

Q And to calculate the reasonable value of durable medical equipment, Mr. Russo used the HHS durable medical equipment fee schedule, right?

A Yes.

Q Except for not adjusting to present value, you agree that this methodology is accepted in your field, correct?

A Yes.

Q Okay. I would like to turn back to page nine of Exhibit 3. I will share my screen and show that to you now.

So Dr. Basu, are you able to see page nine of Exhibit 3 on your screen?

A Yes.

Q So in the last paragraph on this page, you wrote, Second, Russo's calculations fail to account for

the present value of the amounts at issue. Did I read that correctly?

A That's right.

Q Next you wrote that, Damages for medical expenses are meant to restore the injured person to the financial position they would have been -- they would have had absent the harm. Did I -- did I read that correctly?

A Yes.

Q And here you're referring to damages awarded in a lawsuit, right?

A Yes.

Q What did you base that -- that statement on?

A It was based on the idea of a compensation principle that we often used in economics that, if somebody have lost -- have experienced a loss, what the value of that loss is.

Q Did you provide a citation in your report that supports that statement?

A Well, I did provide the reason for inflation calculation, the citation for that. If you want -- I don't think I provided a specific citation for loss calculation, which is -- there are many.

Q What part of your -- excuse me, you said that there was a citation for the insurance --

A For the calculation of the use of CPI and why the inflations are done.

Q I see. And are you referring to Brent, et al., 2001, National Research Council 2002, and the Bureau of Labor Statistics 2020?

MR. VANSLYKE: Objection.

THE WITNESS: Yeah, the Bureau of Labor Statistics.

Q (By Mr. Antonucci) Okay. So on page ten of your report, in the paragraph beginning on the top of the page, close to the end here, you wrote, This approach -- do you see where I'm reading from?

A This approach, yes.

Q So page ten of --

A Mm-hmm.

Q -- Exhibit 3, you wrote, This approach also aligns with the time value of money principle behind prejudgment interest, compensation should reflect the lost use and purchasing power of money over time when paid today. Did I read that correctly?

A Yes.

Q What do you mean by prejudgment interest here?

A What I meant is before -- it's calculating the reasonable value for today. If the judgment is

passed today, what the reasonable value would be.

Q Okay. And you're referring to an award of interest in a lawsuit, right?

MR. VANSLYKE: Objection.

THE WITNESS: I was referring to the calculation of loss related to any -- any intervention or any -- anything.

Q (By Mr. Antonucci) Okay. And so the term "prejudgment interest," you're not talking about a judgment in a lawsuit there?

A No, it was more of a general -- general kind of thing. For any decision-making that happens today, that includes -- that needs a reasonable estimate or value for any harm or loss, that would be the amount, the present value should be the amount.

Q I understand. So if you weren't talking about a judgment in a lawsuit, what prejudgment interest were you referring to here?

MR. VANSLYKE: Objection.

THE WITNESS: Yeah, it refers to all -- all sorts of decision-making, whether you want to calculate the attributable cost that has happened in the past of certain interventions when we calculate certain policies. For example, if a state passes a law, and we want to estimate today how much total benefits or

losses that have produced to determine whether that law should be continued or not. So all sorts of decision-making that would be -- that would be made today based on past damages or expenses.

Q (By Mr. Antonucci) Dr. Basu, you used an overall consumer price index, or CPI, to calculate the current dollars adjustments, right?

A Yes.

Q And that was sort of -- that was a choice that you made rather than using a medical CPI, right?

A Yes.

MR. ANTONUCCI: Okay. I'm going to stop sharing Exhibit 3, and share this document I will mark for identification as Exhibit 5.

Q (By Mr. Antonucci) I'm now sharing my screen to show you Exhibit 5.

Dr. Basu, do you recognize the cover of this book?

A Yes.

Q For the record, this is Cost-Effectiveness in Health and Medicine, edited by Neumann, et al. And this was published in 2017, right?

A Yes.

Q And excuse me, this is the second edition of that text, right?

A Yes.
Q Okay. I would like to turn to page 230. Are you able to see recommendation number 20 here, Dr. Basu?
A Yes.
Q Actually, before I do that, what I'm showing you is Chapter 8 of this text --
A Mm-hmm.
Q -- which is titled Estimating Costs and Valuations of Non-Health Benefits in Cost-Effectiveness Analysis, by Anirban Basu, right?
A Yes.
Q Okay. That's you, right?
A Yes.
Q Okay. So now we'll go to page 230 and look at recommendation number 20. Are you able to see it?
A Yes.
Q So here you wrote, Cost-effectiveness analysis should be conducted in constant dollars that removes general price inflation; If the prices in question change at a rate different from general price levels, that variation should be reflected in the adjustments used; For example, in the United States, the personal consumption expenditure, or PCE, price index and the Personal Health Care, PHC, expenditure

deflator should be used to adjust for inflation in healthcare expenditures; For non-healthcare sector expenditures, the regular Consumer Price Index, CPI, should be used. Did I read that right?

A Yes.

MR. VANSLYKE: Objection.

Q (By Mr. Antonucci) Okay. And so you agree that in your non-litigation work, you recommend the use of a different consumer price index than the one you used in this case, right?

A Yes.

MR. VANSLYKE: Objection.

Q (By Mr. Antonucci) I'm going to stop sharing.

Let's go back to Exhibit 3. That, again, is your report. And I am going to turn to page eight. And I'm looking at footnote seven here. Do you see this, Dr. Basu?

A Yes.

Q So Exhibit 3, page eight, note seven, says, My acceptance of Russo's methodology is subject to the following three caveats: First, the implementations of the reasonable cost calculations are uncertain, based upon the relied-upon Excel files, because they provide numbers but do not show the formulas used to calculate

them; Hence, it is unclear whether the described formulas were implemented correctly, though no errors are apparent to me at this time. Did I read that correctly?

A Yes.

Q So I will represent to you, Dr. Basu, that Mr. Russo's spreadsheets with the underlying formulas were produced to attorneys for the Plaintiffs on February 3rd, 2026, with the Bates range CLJ_USA_Russo_1 through 16.

Have you been provided with Mr. Russo's 16 spreadsheets containing his formulas, Dr. Basu?

A Yes.

Q Did you evaluate whether Mr. Russo's formulas were implemented correctly?

A Yes, they were.

Q Okay. So you agree that Mr. Russo's formulas were implemented correctly, right?

A Yes.

Q Did you discover any errors in Mr. Russo's spreadsheets with the formulas included?

A I did not detect any errors in the formulas, but I did not validate any of the numerical estimates used.

Q What do you mean by numerical estimates?

A The actual numbers that were multiplied.
Q Okay. Why did you not validate those?
A I was not asked by my lawyers to validate those.
Q Okay. Have any of your opinions changed in light of your review of Mr. Russo's spreadsheets?
A No.
Q I'm going to stop sharing my screen.
You calculated the reasonable values for past medical services as indicated by Plaintiffs' expert Marjorie Hackett-Wallace, right?
MR. VANSLYKE: Objection.
THE WITNESS: The rebuttal, yes.
Q (By Mr. Antonucci) Okay. So you -- just to be clear, you looked at her relatedness analysis and then calculated the reasonable value of past medical services she determined were related to a Plaintiff's condition, right?
A Yes.
MR. VANSLYKE: Objection.
Q (By Mr. Antonucci) And you also calculated the reasonable values for past medical services indicated as being related to the Plaintiffs' conditions by the United States' clinicians, Dr. Gee and Hassan, right?

A Yes.

MR. VANSLYKE: Objection.

Q (By Mr. Antonucci) You did not independently verify the work of Marjorie Hackett-Wallace, right, Dr. Basu?

A I did not.

Q And your conclusions are based on the work of Ms. Hackett-Wallace, right?

MR. VANSLYKE: Objection.

THE WITNESS: Yes.

Q (By Mr. Antonucci) If Ms. Hackett-Wallace made a mistake, your tables would replicate that mistake, wouldn't they?

MR. VANSLYKE: Objection.

THE WITNESS: Yes.

Q (By Mr. Antonucci) So it's fair to say your reasonable value calculations are only as accurate as Marjorie Hackett-Wallace's analyses, right?

MR. VANSLYKE: Objection.

THE WITNESS: Yes.

Q (By Mr. Antonucci) Okay. I'm going to turn back to Exhibit 3. This is again your report. I'm turning now to Appendix A1. Are you able to see Appendix A1 of Exhibit 3?

A Yes.

Q So this is Table 1 for Plaintiff Mr. Cagiano. This table is titled Past Medical Billed Amounts and Reasonable Value Analyses Based on Plaintiff MHW Reports in 2025 Dollars.

And MHW here refers to Marjorie Hackett-Wallace, right?

A Yes.

Q Okay. So if we look at the column immediately to the right of Column B, this column has the label Reasonable Values of Column B Adjusted to 2025 Dollars, right?

A Yes.

Q And the Noninstitutional Total in this column is $106,931.50, right?

A Yes.

Q Okay. I'm going to stop sharing my screen and show you your spreadsheet, which is going to be marked for identification as Exhibit 6. And I'm going to share my screen to show Exhibit 6.

MR. VANSLYKE: Counsel, feel free to finish your line of questioning, but I think we might be due for a break in the near-ish future.

MR. ANTONUCCI: Sure thing. I'm really close to being done with my all questions, so --

MR. VANSLYKE: Okay.

MR. ANTONUCCI: -- depending on how much more -- how dire the need for a break is, I'm not sure that it's --

MR. VANSLYKE: We can just keep going for now.

MR. ANTONUCCI: Okay.

Q (By Mr. Antonucci) All right. So I put Exhibit 6 in the chat. That is the document with the Bates number PLG-Expert_Basu_2. Are you able to see Exhibit 6 on my screen, Dr. Basu?

A Yes.

Q Okay. And this is the tab of the spreadsheet Medical Bills Summary, right?

A Yes.

Q Okay. And I'll represent to you that this workbook deals with Plaintiff Cagiano, because I'm not sure if it's clear from -- from just this tab. Does that make sense, Dr. Basu?

A Yeah, yeah.

Q Okay. So the -- if we take a look here at the reasonable values in current dollars for Noninstitutional Total, the value is $109,853.13, right?

A Yes.

Q Okay. And as we mentioned in Amended

Appendix 1 of your report, that total is $106,931.50, right?

A Yes.

Q Is there a reason for this discrepancy?

A It's not apparent to me right now, but I'd have to go and check. There shouldn't be.

I think the one that was calculated as 109 -- let me just see. I'd like to see here. Thirty-nine to forty-two is institutional one.

Yeah, 106 would have been -- that might be a typo, because 106 is the total of the institutional and noninstitutional under the revised report.

Q Understood. So if I stop sharing and return to Exhibit 3 -- and again, we are looking at Amended Appendix A1, Table 1 -- you can see that this error impacts the overall total in Table 1, right, which should be $116,427.55, right?

A That's right.

MR. VANSLYKE: Objection.

Q (By Mr. Antonucci) Okay. And instead, it says $113,505.93, right?

A Yeah.

Q Okay. I'm going to stop sharing.

Let's see. Here is another exhibit that I'm going to drop in the chat. This is Exhibit 7. I will

represent to you that this document the Bates numbers PLG-Expert_Basu_7, and this is a spreadsheet that was produced to the United States on January 27th of this year, and it deals with Plaintiff Ms. Dyer.

I'm going to share my screen to show that to you now. Are you able to see Exhibit 7, Dr. Basu?

A Yes.

Q Okay. And so this is the Medical Bill Summary tab of the workbook that ends in Bates number 7, right?

A Mm-hmm, yeah.

Q Okay. And so if we look here at the Provider column, and scroll to Wilmington Health, the reasonable value in current dollars here is $3,915.76, right?

A Yes.

Q Okay. I'm going to stop sharing and return to Exhibit 3.

This is Exhibit 3, Appendix A3, Table 1. Here for Wilmington Health, the reasonable value provided here is $3,750.59, right?

A Yes.

Q And as we just mentioned in your spreadsheet, that value is $3,915.76, right?

A Yes.

Q Do you know the reason for this discrepancy?

MR. VANSLYKE: Objection.

THE WITNESS: I think -- I think the reason is this was split between 3,750, and the Wilmington Pathology Associates 193, which adds up to the 3,900-something.

Q Okay. So --

A If I understand correctly. I think in that summary, it was the summary of both of them together.

Q Okay. Let's take a look at that. I'm going to return to Exhibit 7.

A Yeah. Actually, if you don't mind, I would love to take a break quickly.

Q Sure. Just really quickly --

A Yeah.

Q -- here is Exhibit 7, here is --

A Yeah.

Q -- Wilmington Health. Wilmington Pathology Associates is right underneath that with the value of 193,017, right?

A Okay, yes. Yes.

MR. ANTONUCCI: Okay. I'm going to stop sharing, and let's go off the record.

THE WITNESS: Okay.

THE VIDEOGRAPHER: Off record, the time is 10:43 25 .

(Recess taken.)

THE VIDEOGRAPHER: Back on record, the time 10:51 3 is .

MR. ANTONUCCI: Okay. We're back on the record.

Q (By Mr. Antonucci) Dr. Basu, as a reminder, you are still under oath; do you understand?

A Yes.

Q Did you have any conversations with your attorneys during the break?

A No.

Q You -- did you say anything to them during the break?

A No, I just said I have to look at these numbers that you are -- you are mentioning.

Q Okay. Apart from telling them you needed to look at the numbers, did you have any other discussions with your attorneys during the break?

A No.

Q Okay. So the discrepancies in the Cagiano and Dyer reports that we just talked about, are you -- you agree that those are likely errors or typos, right?

A They are definitely typos. The methods that are laid out still holds. It might be just a transcription typo, but I have to look at the numbers

carefully, because -- yeah.

Q Okay. Are you aware of any other typos or errors in your reports?

A Yeah, no.

Q I'm sorry, are you aware of any other typos or errors in your reports?

A I am not aware of any other typos and errors.

Q Thanks. At the beginning of the deposition, you mentioned that you have a new publication that is not on your CV, right?

A Yes.

Q What is the title of that publication; do you know?

A Can I pull up my document, near a more later CV?

Q Sure.

A Yeah, okay. Let's just see. Where is it? Okay.

MR. VANSLYKE: Objection. Counsel, I don't think we're going to have the witness share an exhibit.

Q (By Mr. Antonucci) Dr. Basu, are you able to read the name of the publication off of your CV?

A Yes.

Q Could you do that for me, please?

A Yeah, I'm opening up the document now. It's

Trends in Utilization and Costs Following a Hepatitis C Elimination Initiative.

Q When was that published?

A February 2nd, 2026.

Q And was that published in a journal?

A It's the JAMA Network Open.

Q Okay. And Dr. Basu, you also -- your -- Mr. VanSlyke noted for the record that you have copies of your reports in physical format in front of you, right?

A Yes.

Q Do those contain any annotations or highlighting?

A No.

Q Are there -- are there any markings of any kind on them, other than what's printed on the page?

A It has a label saying this is the original Appendix A, and the other has Amended Appendix A.

Q Understood. Apart from those labels differentiating the amended appendix from the original appendix, are there any other markings on your copies of your reports?

A No.

Q Okay. Um, all right. Are there any answers you've given to my questions that you wish to change

before we end this deposition?

A No.

Q Is there any information that I asked you about that you didn't recall at the time, but now remember?

A No.

MR. VANSLYKE: Objection.

Q (By Mr. Antonucci) Were there any questions I asked that you did not understand?

A No.

Q Okay. Do you have any other opinions that you have not testified to yet today?

A Yes, I will say two things. The one that you pointed out in my book, my use of PHE and an inflator of the GDP deflator, one of the reasons often -- even though that was recommended, often people don't use them is because those estimates are not available going back to many years, so they are failing you, and that's why they are not used. Even if you look at healthcare cost analysis today in any published estimates, most people use CPI.

And the only other thing I would say, obviously, as I pointed out, medical CPI has a lot of measurement issues. But not using medical CPI, the results I produced are conservative. Medical CPI

inflates much faster. So if I had used them, these numbers would have been much larger than what it is now.

Q Understood. So other than the issues regarding the use of medical CPI, do you have any other opinions you have not testified to today?

A No.

Q Once it's ready, you'll be provided with the transcript of this deposition. I ask that you carefully read, correct, and sign it; do you understand?

A Yes.

MR. ANTONUCCI: Okay. Well, thank you, Dr. Basu, for your patience in answering my questions today.

I pass the witness.

MR. VANSLYKE: Thank you. I think I'd like to go off the record for a few more minutes before we jump into that question.

THE VIDEOGRAPHER: Off record, the time is 10:57 21 .

(Recess taken.)

THE VIDEOGRAPHER: Back on record, the time 11:02 24 is .

MR. VANSLYKE: Thank you.

E X A M I N A T I O N

BY MR. VANSLYKE:

Q I'm going to share, I believe it was marked as Exhibit 3, the copy of his report with the MCL attached. This is the version that was uploaded to the chat. And I'm scrolling to the last page, which is the Materials Considered List.

Dr. Basu, can you see the Materials Considered List on your screen?

A Yes.

Q Okay. And I see here in the first bullet that you cite the rebuttal expert opinion report of Marjorie Hackett-Wallace?

A Yes.

Q Is it correct that you only reviewed the rebuttal and not her previous reports?

A That is correct.

Q And do you understand that the expert reports of Gregory Russo incorporate Russo's interpretation of Marjorie Hackett-Wallace's reports?

A Yes.

MR. ANTONUCCI: Objection.

Q (By Mr. VanSlyke) And when you provided your opinions and your calculations, were those performed on

Dr. Russo's data or on Marjorie Hackett-Wallace's data?

A Only on Dr. Russo's data.

MR. VANSLYKE: Thank you. I have no further questions.

MR. ANTONUCCI: All right. Thank you very much.

THE WITNESS: Thank you.

THE VIDEOGRAPHER: Off record, the time is 11:04.

(End of video record.)

THE REPORTER: Are you ordering the transcript, Mr. Antonucci?

MR. ANTONUCCI: Yeah, for the United States, we have a standing order.

MR. VANSLYKE: Same here, thank you.

(Signature reserved.)

(Deposition concluded at 11:04 a.m.)

C E R T I F I C A T E

STATE OF WASHINGTON)
) ss
COUNTY OF SNOHOMISH)

I, the undersigned Washington Certified Court Reporter, pursuant to RCW 5.28.010, authorized to administer oaths and affirmations in and for the State of Washington, do hereby certify;

That the annexed and foregoing deposition of each witness named herein was taken stenographically before me and reduced to typewriting under my direction;

I further certify that the deposition was submitted to each said witness for examination, reading and signature after the same was transcribed, unless indicated in the record that the parties and each witness waive the signing;

I further certify that all objections made at the time of said examination to my qualifications or the manner of taking the deposition, or to the conduct of any party, have been noted by me upon said deposition;

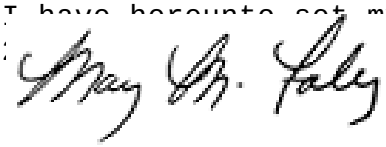
I further certify that I am not a relative or employee or attorney or counsel of any of the parties to said action, or a relative or employee of any such attorney or counsel;

I further certify that I am not in any way financially interested in the said action or the outcome thereof;

I further certify that each witness before examination was by me duly sworn to testify the truth, the whole truth and nothing but the truth;

I further certify that the deposition, as transcribed, is a full, true and correct transcript of the testimony, including questions and answers, and all objections, motions, and exceptions of counsel made and taken at the time of the foregoing examination.

IN WITNESS WHEREOF, I have hereunto set my hand this 9th day of March, 20[illegible].



_____

MARY M. FOLEY, CCR
Court Reporter in and
for the State of Washington,
residing in Snohomish County.

&

& 3:5,20 4:2

0

0 6:5
00897 1:6 2:6

1

1 5:11 10:24 12:1,18 56:10 59:1 61:1,15,16 62:18 64:1 68:1
10 46:8 64:10 68:10
100 38:12 45:8 46:6,9
101 46:10
106 61:10,11
106,931.50 59:14 61:1
109 61:7
109,853.13 60:22
10:43 63:24
10:51 64:3
10:57 68:21
11 64:11 68:11
1100 4:14
113,505.93 61:21
115 46:17,24
116,427.55 61:17
11:02 68:24
11:04 70:9,17
12 5:11 64:12 68:12
120 46:13
127 4:4
13 64:13 68:13
14 5:12 64:14 68:14
15 41:7 45:15 64:15 68:15
16 56:10,11 64:16 68:16
17 45:10 64:17 68:17
18 64:18 68:18
19 45:12 64:19 68:19
193 63:4
193,017 63:19
1959 7:16
1995 23:22
1997 24:2
1999 24:8

2

2 5:12 14:8,10 14:10 45:5,6 60:9 64:2 68:2
20 5:13 20:25 45:21 54:3,16 64:20 68:20
20005 4:15
2001 51:4
2002 51:4
2004 24:14
2010 34:2
2014 18:14,20
2015 18:14 24:24
2017 24:22 44:16 53:22
2018 18:19,21
202 4:16
2020 51:5
2025 10:12 23:5 59:4,11
2026 1:17 2:17 6:4 12:1,12 14:16 20:25 56:9 66:4 71:21
20th 14:16
21 64:21 68:21
22 64:22 68:22
23 1:17 2:17 64:23 68:23
230 54:2,15
23rd 6:4
24 64:24 68:24
24th 3:8
25 63:24 64:25 68:25
269-2343 3:17
27579 71:22
27th 62:3
28144 3:22
2nd 66:4

3

3 5:13 19:24,25 20:1,22 21:15 22:11,14,17,24 26:14 29:2,2,6 30:11 33:3 35:1 35:4 39:6 43:9 43:17 44:10 49:19,22 51:16 53:13 55:15,20 58:22,24 61:14 62:17,18 64:3 68:3 69:5
3,750 63:3
3,750.59 62:20
3,900 63:5
3,915.76 62:14 62:23
30 12:12 45:16
3011 3:7
30th 12:1
31,050 19:6
31,125 19:7
313 3:10
3316 1:24 2:18
334 3:17
357631 7:17
36103 3:16
39 23:5
3rd 56:9

4

4 5:15 19:18,20 19:22 44:17,19

44:21 45:1 48:20 64:4 68:4
4.a 35:24
4.c 38:21
4.g 38:21
41 45:11
4160 3:15
45 5:15
48202 3:9
49 5:13

5

5 5:18 53:14,16 64:5 68:5
5.28.010 71:4
50 46:15,19 47:3
500 25:1
525 3:21
53 5:18
55 5:14

6

6 5:20 59:18,19 60:8,10 64:6 68:6
60 5:20
62 5:22
633-5244 3:23
69 5:6,14

7

7 5:5,22 12:18 61:25 62:2,6,10 63:10,15 64:7 68:7
70 46:24 47:2
704 3:23
7879969 1:25
794-4877 4:6
7:23 1:6 2:6 6:8

8

8 12:17 54:7 64:8 68:8
80 43:13 44:6 45:24 47:22
800 1:22
800-4170 3:10
831-6973 1:22
880-6104 4:16
897 6:8

9

9 64:9 68:9
910 4:6
98195 7:17
9:24 2:16 6:5
9th 71:21

a

a.m. 2:16 6:5 70:17
a1 58:23,24 61:15
a3 62:18
ability 9:4
able 12:3,6,15 14:10 19:21 29:3 30:11 44:21,25 49:21 54:3,16 58:23 60:9 62:6 65:21
absence 31:15
absent 50:7
academic 13:24 29:24
accept 30:9 48:2
acceptable 34:10
acceptance 55:21
accepted 29:25 38:2,16 40:12 40:23 41:14 48:22 49:7,15
access 34:1
account 49:25
accrues 45:11 45:13
accuracy 27:16 38:6
accurate 9:19 21:3 23:11 33:16 34:6 58:17
accurately 30:20
acquisition 43:12 44:6 45:22 46:7
act 4:13
action 1:5 2:5 71:13,14
actual 38:6 43:20 45:19 57:1
actually 17:21 24:24 28:12 30:8 31:9 32:20 32:25 43:23,24 47:1 48:5 54:6 63:11
add 23:15
addition 11:8
address 7:12,13 7:15
adds 46:8,11 63:4
adjust 55:1
adjusted 34:20 36:22 37:16 59:10
adjusting 37:24 38:15 40:11,22 41:11 48:21 49:6,14
adjustment 12:21 33:12 37:17
adjustments 13:15,18 53:7 54:23
administer 71:4
administered 48:16

affirmations 71:5
agree 20:6,18 37:7,25 38:4,16 40:12,23 41:12 42:24 48:22 49:7,15 55:7 56:17 64:22
agreed 6:11
ahead 13:11 32:2
al 5:17,19 44:7 44:16,21,25 45:19 51:4 53:21
alabama 3:16
aligns 51:17
allen 3:14
allocation 28:15,17
allow 29:23
allowed 11:16
amended 5:12 14:15 22:1,4 60:25 61:14 66:18,20
america 1:9 2:9 2:15 6:8
american 36:15 47:18
amount 42:16 42:17 52:14,15
amounts 27:11 31:10,25 50:1 59:2
analyses 58:18 59:3
analysis 28:6,9 28:20 32:24 33:1 54:11,19 57:15 67:20
analyze 27:16
ancillary 35:25 38:2
anesthesia 39:2 41:2,13
anirban 1:15 2:14 5:3 6:9,21 7:10 20:24 21:1 23:9 54:11
annexed 71:6
annotations 66:12
answer 8:1,2,3 8:3,8,19 9:4,14 9:14 32:2
answered 10:3
answering 8:20 68:14
answers 66:24 71:18
antonucci 4:9 5:5 7:1,3 11:9 11:10,21,24 13:10,12,13 19:17,21 21:21 22:3,7,23 39:5 39:7 44:4,15,18 46:1 47:17 48:1 51:9 52:8 53:5 53:12,15 55:7 55:13 57:14,21 58:3,11,16,21 59:23 60:1,6,7 61:20 63:21 64:4,6 65:21 67:8 68:13 69:23 70:5,12 70:13
apart 14:1 64:16 66:19
apologies 19:24 22:3
apologize 13:12 37:6
apparent 56:3 61:5
appearances 3:25
appearing 6:10
appears 33:11
appended 20:2
appendices 21:20 22:1,4,6 22:12
appendix 21:22 21:23,24 58:23 58:24 61:1,15 62:18 66:18,18 66:20,21
applied 29:9,14 29:19,22 33:8 37:17
applies 45:5
apply 30:17
approach 26:9 31:5 33:16 34:4 34:6,9 38:4,5 51:12,13,16
approached 10:14
appropriate 30:17 31:24 33:11
approved 29:24
approximately 10:10 15:3,10 18:18
approximation 34:11 43:22 44:1
arbitration 16:6 18:22
articles 12:19 21:7
asked 9:1 10:2 17:21,22 22:25 26:8 48:9,11 57:3 67:3,9
asking 29:16
assesses 28:9
assignment 26:7
assistance 20:15

associated 27:11
associates 63:4 63:18
association 36:15
assume 9:9
attached 69:6
attention 11:19 12:14
attorney 7:3 9:13 14:21,23 17:13 25:21 71:12,13
attorneys 9:13 13:7,14,16,19 14:2 15:1 20:16 56:8 64:10,18
attributable 33:22 52:22
authored 12:20 12:20 26:20
authorized 71:4
available 67:17
average 30:25 31:2 32:21 33:22 34:11 35:20 45:6 46:19 47:18 48:17
averages 32:21
averaging 31:16,19
award 52:2
awarded 50:10
aware 11:6 65:2,5,7

b

b 21:23 59:9,10
bachelor's 23:18
back 49:18 55:15 58:22 64:2,4 67:18 68:23
base 41:3,6 50:13
based 36:6,8,8 36:24 41:18 44:6 50:14 53:4 55:23 58:7 59:3
basically 46:22
basu 1:15 2:14 5:3 6:9,21 7:2 7:10,15,21 9:18 9:25 10:19 11:12,24 12:6 12:15,24 14:10 14:19 16:2 18:25 19:5,21 20:4,6,24 21:1 21:1 22:8,24 23:9,18 25:4,19 26:6,16 29:3 30:11 32:24 37:6 41:16,22 43:4,11 44:4,22 47:12 48:1 49:21 53:5,17 54:4,11 55:18 56:6,12 58:5 60:9,10,18 62:2 62:6 64:6 65:21 66:7 68:14 69:9
basu's 21:23
bates 56:9 60:9 62:1,9
beasley 3:14
beginning 51:10 65:8
behalf 2:15
believe 13:16 16:14 21:16,23 22:12,15 38:20 69:4
bellwether 26:22 33:10
ben 10:14 14:24 15:15 22:4
benefit 42:4,21
benefits 42:14 52:25 54:10
benjamin 3:4
best 8:13 9:4 43:22 44:1 48:6
bill 36:7 62:8
billed 19:3,5,6 27:14 38:13 59:2
billing 27:17,19 27:23
bills 5:20,22 27:20 38:25 46:16 47:14 60:13
biostatistics 24:5
book 53:18 67:14
bottom 44:9 45:4
boulevard 3:7
box 3:15 7:16
branch 4:12
brand 42:22
branded 43:21 45:7,20 47:19
break 9:25 10:1 10:3 59:22 60:2 63:12 64:10,13 64:18
brent 51:3
briefly 6:14
broad 32:20
building 3:6
bullet 30:16 33:5 69:12
bureau 51:5,7
business 7:14
butler 4:1
buyer 31:5,10
bvanslyke 3:11

c

c 3:1 21:24 66:1 71:1,1
cagiano 5:21 59:1 60:16 64:20
calculate 17:15 17:18,20,21,22 26:9 32:3 38:11 39:16,20 41:16 43:13 48:15,25 49:10 52:21,23 53:6 55:25
calculated 18:6 39:8 47:11 48:2 57:9,16,21 61:7
calculating 31:6,23 33:17 34:5,10 37:25 40:15 41:1 43:5 51:24
calculation 30:23,24 31:21 32:11,17 34:15 50:21,23 51:1 52:6
calculations 30:17 32:18 34:19 49:25 55:23 58:17 69:25
called 6:22
camp 1:5 2:5 4:13 6:7 7:4 10:7,17 12:20 13:22 20:7 25:2 26:23 27:2
care 28:2,3 32:11,14 54:25
carefully 65:1 68:10
carolina 1:3 2:3 3:22 4:5 7:7 10:8 24:6
case 13:16 15:12,25 16:11 16:24,25 17:2,9 17:14,17 18:15 18:16,17,18,20 18:21 19:1,12 28:6,21 31:1 42:10 47:13 55:10
cases 16:15,17 16:22 19:13
caveats 55:22
ccr 1:24 2:17 71:23
center 4:3
cents 45:16
certain 30:6,7 32:5 42:2 52:23 52:23
certainty 29:11 30:3
certified 71:4
certify 71:5,7 71:10,12,14,15 71:17
chains 42:2
change 23:14 54:21 66:25
changed 39:6 57:5
chapel 24:6
chapter 54:7
charge 39:12 40:6,7
charges 39:10
chat 10:20 11:13 19:18 44:13,16 60:8 61:25 69:7
check 27:13,23 61:6
chicago 24:12
choice 53:9
chose 48:2
citation 50:18 50:21,22,25
cite 69:13
cited 44:9
civil 1:5 2:5 4:12
claimed 27:11 36:11
claims 27:13 32:20 33:18 34:16
clarification 9:9 13:8
clarify 9:8
clear 20:1 26:16 28:19 48:11 57:15 60:17
clinical 25:16 35:25
clinician 36:3
clinicians 36:6 38:2 57:24
clj 56:10
close 51:11 59:23
code 35:9 36:11 39:10
codes 35:14 36:2,6 41:18
column 59:8,9 59:9,10,13 62:13
combined 45:8
come 34:1
commencing 2:16
companies 42:16,16 43:3
company 31:1 32:6,19 43:24
comparative 24:18
compensated 24:25
compensation 50:14 51:18

competitive 31:14,15
complete 8:3 8:23 22:17 23:11
completely 6:15
components 38:25
composed 45:9
comprehensive 33:16 34:6
concentrated 31:12
concentration 24:11
concluded 70:17
conclusions 58:7
condition 27:8 33:23 57:18
conditions 57:24
conduct 71:11
conducted 54:19
confidence 29:9 29:13,18,22,23
confident 30:5
confirm 21:20
conservative 67:25
considered 5:14 20:3,25 21:4,6,10 27:7 69:8,10
consistency 11:11
constant 54:19
consumer 47:2 53:6 55:3,9
consumers 42:7 42:24 45:9
consumption 54:24
contain 22:17 66:12
containing 56:12
continue 38:8
continued 3:25 43:16 53:2
conversations 14:21 64:9
conversion 41:3,8
converted 35:14
convinced 30:8
copies 11:7,12 11:16,20 66:8 66:21
copy 12:19 20:2 20:3 21:3 23:11 44:13,15 69:5
corporate 4:3
correct 7:22 10:5 14:16 20:8 22:2 23:20 24:3 24:8,15,23 26:24 27:3,8,11 27:14,17,21,24 28:3,21 34:20 35:9,18 36:19 37:4,22 38:3,5 38:13,17 39:21 41:14,19 48:4 49:8,16 68:10 69:16,18 71:17
corrections 8:25
correctly 12:24 29:11 30:21 33:13 45:17,25 50:2,8 51:20 56:2,4,15,18 63:7
corresponding 26:10
cost 5:18 16:13 28:5,8,25 32:10 32:17,24 33:1 35:18 36:23 37:16 39:9,12 39:16,17,24 40:3,7 41:17 43:12,20 44:6 45:20,22 46:7 46:23,25 47:8 49:1 52:22 53:20 54:10,18 55:23 67:20
costs 12:21 13:23 28:10 33:22 36:3 39:1 39:12 40:8 43:6 45:11 48:9,12 48:13 54:9 66:1
council 51:4
counsel 6:16 10:25 21:18 59:20 65:19 71:12,13,18
county 71:3,25
couple 16:12
court 1:1 2:1 6:18 7:6 8:6,13 22:19 71:4,24
cover 53:17
covered 12:23
cpi 51:1 53:6,10 55:3 67:21,23 67:24,25 68:5
cpt 35:9,11,14 36:2,6,11
cpts 36:9
current 7:11,14 12:22 18:4 23:12 35:11 53:7 60:21 62:14
currently 7:5 24:17

curriculum 23:6,8
customarily 29:9,13,19,22
cv 1:6 2:6 6:8 13:21,25 14:1 21:23 65:10,15 65:22

d

d.c. 4:15
damages 16:13 17:7 18:6 31:23 50:4,10 53:4
data 27:17,24 32:20 39:9,25 41:18 70:1,1,2
database 33:18 33:21,25 34:16
date 6:4 10:11 19:3,5
day 71:21
deals 60:16 62:4
december 23:5
decision 52:12 52:21 53:3
decisions 28:15
deemed 26:10 26:12
defendant 2:15 4:8
defendants 1:10 2:10 17:2 17:11
definitely 64:23
deflator 55:1 67:15
degree 23:22 24:2,14 25:5,18 26:1 29:10 30:2
deliver 32:11 42:23
department 4:11 7:3 36:14 41:6,9
depend 18:25
depending 32:5 60:1
deponent 6:9
deposition 1:14 2:14 5:11,12 6:6,10 7:18 8:23 9:12 11:3 12:2,12 14:15 14:20 15:1,19 15:22 16:3 65:8 67:1 68:9 70:17 71:6,7,11,11,17
depositions 15:25 37:14
described 56:1
description 5:10
designed 28:10
despite 48:3
details 13:21
detect 56:22
determinations 29:8,18
determine 26:21 30:18 33:9 37:17 39:12 40:7 53:1
determined 35:5 39:23 57:17
determining 41:12
detroit 3:9
development 27:3
different 43:4 47:23 54:21 55:9
differentiating 66:20
dire 60:2
direct 11:18
direction 71:7
directly 33:21
director 24:18
disclosed 20:7 23:6
discount 42:3
discounted 42:18
discounts 42:13 42:15
discover 56:20
discrepancies 64:20
discrepancy 61:4 62:25
discuss 14:25
discussed 18:7
discussing 31:20
discussions 11:4 15:4 17:20 18:1 64:17
disease 27:3
dispensed 46:14
dispensing 43:1 46:11
distribution 5:16 45:7
district 1:1,3 2:1,3 7:6,7 10:8
dividing 39:9
division 4:12 6:3
doctor 24:17 25:4 31:21
document 10:21 12:8 13:2 14:12 23:8 53:13 60:8 62:1 65:14,25
documents 15:18,22 21:7 42:1
doing 32:25
dollar 46:9

dollars 12:22 18:5 45:11,13 45:14,14,15,16 47:4,4 53:7 54:19 59:4,11 60:21 62:14
double 27:14
dr 7:2,15,21 9:18,25 10:19 11:12,24 12:6 12:15,24 14:10 14:19 16:2 18:25 19:5,21 20:4,6 21:1,23 22:8,24 23:18 25:4,19 26:6,16 29:3 30:11 32:24 37:6 41:12,16,22 43:4,11 44:4,22 47:12 48:1 49:21 53:5,17 54:4 55:18 56:6 56:12 57:24 58:5 60:10,18 62:6 64:6 65:21 66:7 68:14 69:9 70:1,2
draft 20:13
drafting 20:16
draw 11:19
drive 4:4
drop 11:8 61:25
dropping 10:19
drug 43:21 45:11,20 46:5 46:11,14 47:1 47:18,19
drugs 45:8 47:14 48:16
due 6:13 59:21
duly 6:22 71:16
durable 49:11 49:12
dyer 5:23 62:4 64:21

e

e 3:1,1 6:25 69:2 71:1,1
earlier 13:2
eastern 1:3 2:3 7:6 10:8
economic 28:9
economics 24:11,19 25:16 50:15
edited 53:21
edition 53:24
effectiveness 5:18 28:5,8,22 32:24 53:20 54:10,18
eight 12:15,15 12:18 34:12 43:8 55:16,20
either 15:13
elimination 66:2
employee 71:12 71:13
ended 17:25
endowed 24:18
ends 62:9
ensure 6:14
entire 21:15
entirety 20:11
equalizations 26:11,12
equipment 49:11,12
error 61:15
errors 56:2,20 56:22 64:22 65:3,6,7
esq 3:4,13,19 4:1,9,10
estimate 17:7 32:21 33:22 45:19 47:24 48:6 52:13,25
estimates 38:6 45:5 56:23,25 67:17,20
estimating 54:9
et 5:17,19 44:7 44:16,21,25 45:19 51:4 53:21
evaluate 27:19 28:12 56:14
evaluation 28:9
evidence 27:24
exact 10:11 16:18 18:14
exactly 17:25 29:15
examination 1:14 5:4,5,6 71:8,10,15,19
examined 6:23
example 8:9 31:25 32:16,17 52:24 54:23
excel 55:24
except 33:11 37:24 38:15 40:11,22 41:11 48:21 49:6,14
exceptions 71:18
excuse 12:17 34:23 50:24 53:24
exhibit 5:11,12 5:13,15,18,20 5:22 10:24 12:1 12:18 14:7,8,10 14:10 19:16,18 19:19,22,24,25 20:1,1,22 21:15 22:11,14,17,24 26:14 29:2,2,6 30:11 33:3 35:1 35:4 39:6,6

43:9,17 44:10 44:17,19,21,25 48:20 49:19,22 51:16 53:13,14 53:16 55:15,20 58:22,24 59:18 59:19 60:8,10 61:14,24,25 62:6,17,18 63:10,15 65:20 69:5
exhibits 5:9 10:20
expenditure 45:8 54:24,25
expenditures 55:2,3
expenses 30:18 31:7 33:10 36:18,25 50:5 53:4
expensive 34:1
experienced 50:16
expert 5:13 10:6 12:23 16:10,14,17 17:1,10 18:9,12 18:22 20:2,7,25 25:14,24 26:4 57:10 60:9 62:2 69:13,19
experts 26:17 30:1
explain 30:6 46:1
express 29:8
expressed 29:17
extensive 48:8
extent 8:4

f

f 71:1
facility 39:1,7 39:21,21 40:8
factor 37:17 41:3,8
fail 49:25
failing 67:18
fair 9:10 21:3 58:16
familiar 10:22
family 24:18
far 21:19 22:21 22:21
faster 68:1
february 1:17 2:17 6:4 14:16 56:9 66:4
federal 39:23 40:2
fee 19:12,13 39:1 43:2 46:11 49:12
feel 59:20
fees 36:1 39:2,2 39:8,21,21 40:8 40:16,20 41:2 41:13
field 29:10,14 29:19 30:1 38:3 38:17 40:13,24 41:14 48:23 49:7,16
figure 45:5
file 1:25
files 55:24
financial 50:6
financially 71:14
finish 59:20
finished 8:19
firm 3:14
first 6:22 10:23 15:15 16:25 18:11,13 29:5 30:16 36:2 38:9 55:22 69:12
fisher 3:6
five 35:1 44:24 44:25 45:4,14 47:3,4
floor 3:8
flow 5:15
flows 45:6
foley 1:24 2:17 6:18 71:23
folks 20:15
followed 30:6
following 55:22 66:1
follows 6:23
footnote 55:17
foregoing 71:6 71:19
form 28:9 32:1 44:2 45:23 46:4
format 11:19 18:4 66:9
formulas 55:25 56:2,7,12,14,17 56:21,22
forty 61:9
forwarding 39:3
four 30:10,11 33:3 34:25 35:1 35:3
framework 35:8
fraud 27:24
free 59:20
friday 15:5
front 11:20 66:9
full 7:9 71:17
fully 8:1
funds 45:6
further 70:3 71:7,10,12,14 71:15,17
future 28:2 59:22

g

gdp 67:15
gee 57:24
general 17:13 32:10 35:5,8 47:12 52:11,11 54:20,21
generic 45:8 47:13,18,25
generics 47:23
geographic 36:22,25 37:16
giovanni 4:9 7:3
giovanni.anto... 4:17
give 9:19 19:15 32:16
given 8:24 33:23 42:22 66:25
go 13:11 17:19 32:1 54:15 55:15 61:6 63:22 68:18
goes 45:10
going 10:19 12:4 14:6,18 20:21 26:14 29:1 30:10 34:25 44:12 48:20 53:12 55:13,16 57:8 58:21 59:16,17 59:18 60:4 61:23,25 62:5 62:16 63:9,21 65:20 67:17 69:4
golkow 6:2
good 7:2 10:3 30:8
goodrx 41:17 41:21,24 42:3,6 42:23 48:4
gotcha 37:10
government 17:3 40:2
government's 39:23
gpci 37:2
graham 3:20
grand 3:7
great 7:2
gregory 26:8 26:16 33:8 69:20
gross 45:5
group 10:6,15 30:6

h

h 38:21
hackett 57:11 58:4,8,11,18 59:6 69:14,21 70:1
hand 71:20
happened 52:22
happens 52:12
happy 21:21 23:2
hard 33:25
harm 50:7 52:14
hassan 57:25
head 8:10
health 5:18 24:11,18 28:10 28:11 31:13 36:14 41:7,9 49:1,2 53:21 54:10,25 62:13 62:19 63:17
healthcare 12:21 13:23 16:13 26:10 30:19 32:22 33:1 55:2,2 67:19
hear 9:12
heard 6:15 10:17
held 6:6
help 9:5
hepatitis 66:1
hereunto 71:20
hesitate 10:1
hhs 37:4 39:9 48:16 49:2,4,11
highlighting 66:13
hill 24:6
hired 10:10,13
hmm 20:23 23:23 29:7 30:15 33:4,7 37:3 43:10 44:20 51:15 54:8 62:11
hold 25:14,23 26:3
holds 31:15 64:24
home 7:13 49:1 49:2
hone 4:21 6:2
hospital 38:20 39:9,11 40:17
hospitals 39:24
hour 15:12 25:1
hourly 25:1
human 36:14 41:7,9

i

idea 32:10,13 50:14
ideally 31:14 43:23
identification 10:23 11:25 14:8 19:18 44:17 53:14 59:18

identified 36:10
identify 36:3
identifying 35:9 36:21
illustrate 45:6
immediately 59:9
impacts 61:16
impaired 9:23
implementati... 55:22
implemented 56:2,15,18
important 8:8 32:3
improve 28:11
include 21:7,20 22:1 32:4 39:1 43:1 47:6
included 21:11 22:4,24 56:21
includes 52:13
including 71:18
incorporate 69:20
incorrect 21:16 22:12
increments 41:8
incurred 12:21 30:25 36:3 43:20 45:20
independently 58:3
index 5:2 12:22 53:6 54:25 55:3 55:9
india 23:20
indicated 57:10 57:23 71:9
inflates 68:1
inflation 37:21 48:17 49:3 50:20 54:20 55:1
inflations 51:2
inflator 67:14
inform 28:15
information 28:14 67:3
initiative 66:2
injured 50:5
inpatient 38:20 38:25 40:8,16
institute 24:19
institutional 61:9,11
instructs 9:14
insurance 31:1 31:13 32:6,19 32:22 33:22 36:18 42:9,15 42:16 43:3,24 47:7 50:25
insurer 45:10 45:20 46:17
insurer's 46:23
insurers 33:19 45:13 47:2 48:18
interest 51:18 51:22 52:3,9,18
interested 71:14
interpretation 69:20
interrupt 8:17
intervention 52:6
interventions 28:10 52:23
introduce 19:16
involved 18:8
ish 59:22
issue 50:1
issues 67:24 68:4

j

jadavpur 23:19
jama 66:6
january 12:1 12:12 20:25 62:3
jenna 4:1 14:24 15:15,16
job 30:8
journal 29:25 66:5
judgment 51:25 52:10,17
jump 68:19
jurisdictions 16:21
justice 4:11,13 7:4

k

keep 45:14,15 45:16 60:4
keeping 47:8
keeps 46:20 47:3,4
kind 31:16 37:7 42:1 46:23,25 47:2,5,10 52:11 66:16
kinds 36:17
know 9:8 12:2 19:3 29:25 37:13 41:21 46:12,12,15 47:12,17 62:25 65:13
konstantopou... 4:10

l

l 4:14
label 59:10 66:17
labels 66:19
labor 51:5,7
laboratory 38:10,12

laid 64:24
lamacchia 3:13
large 42:2
larger 68:2
lastly 40:6
late 10:12
law 3:14 25:18 52:24 53:1
lawsuit 17:6,24 31:23 50:11 52:3,10,17
lawyers 23:1 26:8 48:9 57:3
leadership 10:6
led 27:2
legal 1:22 25:23
lejeune 1:5 2:5 4:13 6:7 7:5 10:7,17 12:21 13:22 20:7 25:2 26:23 27:2
leslie 3:13
level 29:9,13,18 29:21,22 32:20 33:18 34:16
levels 54:22
licensed 25:21
life 28:3
light 57:6
likely 64:22
line 59:21
list 5:14 13:24 20:3 21:4,6,12 21:24 43:13 46:7 69:8,10
listed 46:5
litigation 1:6 2:6 6:7 7:5 10:7 18:9,22 20:8 26:23 55:8
long 13:24 15:10
look 32:20 33:2 33:5 44:24 54:15 59:8 60:20 62:12 63:9 64:14,17 64:25 67:19
looked 28:22,25 57:15
looking 14:5 29:20 55:17 61:14
loss 50:16,17,22 52:6,14
losses 53:1
lost 50:16 51:19
lot 32:9,11 67:23
love 63:12
luxenberg 3:5

m

m 1:24 2:17 6:25 69:2 71:23
made 9:15 20:19 53:3,10 58:12 71:10,19
main 3:21
majority 33:18
make 8:25 9:13 10:2,21,25 11:11 22:7 28:19 60:18
makes 32:11
making 30:9 52:12,21 53:3
manager 42:14
managers 42:4 42:21
manner 71:10
manufacturer 46:6,20 47:1
manufacturers 42:14 45:12
march 71:21
margin 45:5
marjorie 57:11 58:4,18 59:5 69:14,21 70:1
mark 10:23 19:18 44:16 53:13
marked 14:7 59:18 69:4
market 30:20 31:9,13,14,16 31:17 32:7,9 35:21 37:17 49:4
markets 31:12
marking 11:25
markings 66:15 66:21
marks 46:11
mary 1:24 2:17 6:18 71:23
master's 23:24 24:5
materials 5:13 20:3,25 21:4,6 21:7 69:8,9
matter 6:7 25:2
mcl 69:5
mean 23:16 30:3 51:22 56:25
meant 50:5 51:24
measurement 67:24
mediation 16:8 18:23
medical 5:20,22 17:15,18,23 18:3 26:1,3,22 27:6,10,17,20 27:23 28:2 30:18 31:6 33:10 35:6,9 36:15 38:1 47:14 49:11,12 50:4 53:10 57:10,16,22 59:2 60:13 62:8

67:23,24,25 68:5
medicare 35:15 35:17 36:24
medication 42:22
medications 41:17 42:2 48:3
medicine 5:19 53:21
meeting 15:15 15:16
meetings 15:14
melanie 4:10
melanie.kons... 4:18
memory 9:22
mentioned 16:2 60:25 62:22 65:9
mentioning 64:15
method 37:25 40:17 43:19 44:5 48:4
methodology 31:5 33:8 38:9 38:16 40:12,15 40:23 41:12 43:5 48:22 49:7 49:15 55:21
methods 26:21 30:7 34:24 38:24 64:23
mhw 59:3,5
michigan 3:9
mind 39:3 63:11
minute 41:7
minutes 68:18
mistake 58:12 58:13
mm 20:23 23:23 29:7 30:15 33:4,7 37:3 43:10 44:20 51:15 54:8 62:11
moment 19:15 26:15 44:13
monday 1:17 2:17
money 5:15 51:17,19
montgomery 3:16
morning 7:2,22
motions 71:18
multiplied 35:17 37:20 40:2,6 41:2 49:3 57:1
multiplier 35:18 36:25
multiplying 37:1 39:11 43:12 44:5

n

n 3:1 6:25,25 69:2,2
name 6:2 7:2,9 65:22
named 71:6
names 16:16,18
national 16:24 33:18 34:15 51:4
nature 6:13 7:24 17:5
near 59:22 65:14
necessarily 42:10
need 23:14 39:15 60:2
needed 64:16
needs 22:15 52:13
negotiated 32:6 42:1,13 46:19
net 43:24 45:5 45:12,13,14,15 45:16
network 66:6
neumann 5:19 53:21
never 16:3
new 19:16 23:16 65:9
nine 43:16 44:10 49:18,21 61:8
nodding 8:9
non 40:17 54:10 55:2,8
nonexistent 34:1
noninstitutional 59:13 60:22 61:12
north 1:3 2:3 3:21,22 4:5 7:7 10:8 24:6
northeast 7:16
northwest 4:14
note 11:1 55:20
noted 6:16 38:25 66:8 71:11
notice 5:11,12 12:1,12 14:15
noticed 11:2,3
number 5:10 6:7 12:17,18 54:3,16 60:9 62:9
numbers 55:25 57:1 62:1 64:15 64:17,25 68:2
numerical 56:23,25

o

o 6:25 69:2
oath 7:21,24 8:1 64:7

oaths 71:5
object 11:15 32:1 44:2 45:23 46:4
objection 9:15 11:1,22 21:18 22:20 47:15,20 51:6 52:4,19 55:6,12 57:12 57:20 58:2,9,14 58:19 61:19 63:1 65:19 67:7 69:23
objections 9:13 71:10,18
observed 43:25
obviously 38:5 67:23
occasion 15:11
offer 22:18
offered 22:22 42:4
offering 27:1,5
office 3:15
oh 29:20
ohio 23:25
okay 8:10 10:5 10:16,19 11:9 11:24 12:8,11 12:17 13:6,10 13:18 14:1,5,12 14:14,22,25 15:7,10 16:10 16:16 17:5,14 18:8,15 19:10 19:15,17 20:13 20:21 21:10,14 21:25 22:10,23 23:4,8,17,18 24:25 26:6,20 27:1 28:14,24 29:5,20 30:10 30:13 31:4 33:2 33:15 34:18,22 35:23 36:10 37:10,15,24 38:7 39:5,7 40:15 41:1 42:6 42:9,19 43:8,19 44:4,9,12,24 45:3 48:11,25 49:18 51:9 52:2 52:8 53:12 54:2 54:13,15 55:7 56:17 57:2,5,14 58:21 59:8,16 59:25 60:6,12 60:15,20,25 61:20,23 62:8 62:12,16 63:6,9 63:20,21,23 64:4,16,20 65:2 65:17,18 66:7 66:24 67:11 68:13 69:12
omitting 33:12
once 8:23 29:2 68:8
online 11:8,17 41:25
open 12:3 66:6
opening 65:25
opinion 22:22 23:1 26:12 27:1 27:5 28:1 29:23 31:4 43:19 69:13
opinions 20:18 22:18,23 23:2 30:14 57:5 67:11 68:6 69:25
opioid 16:19,23 17:9,17,24 18:16,18,21
opportunity 8:24 10:21
opt 47:25
opted 47:13
opts 47:18
oral 1:14
order 70:14
ordering 70:11
original 22:2,5 66:17,20
outcome 19:1 71:15
outcomes 24:19 28:10
outpatient 38:20 40:8,19 43:6
outside 13:22
overall 53:6 61:16
overhead 39:1
own 15:20 20:12

p

p 3:1,1
p.a. 3:20 4:2
pace 8:12
pacific 7:16
page 5:4 12:14 12:15,18 20:21 20:24 23:5 29:2 29:6 30:10,11 33:3,6 35:3 39:3,6 43:8,16 44:10,24,25 45:4 49:18,21 49:24 51:9,11 51:14 54:2,15 55:16,20 66:16 69:7
pages 35:1
paid 31:2,25 36:6,8 42:17 46:17 47:2 51:20
paper 5:15 44:7 44:13
papers 13:24
paragraph 29:6 45:4 49:24 51:10

part 31:20 50:24
participants 45:7
parties 6:10,14 71:9,12
party 71:11
pass 68:16
passed 42:15 52:1
passes 52:24
past 17:15,18 17:22,23 18:3 26:22 30:18 31:6 33:10 35:6 35:9 38:1,11,19 40:16 41:13 43:6 47:14 52:22 53:4 57:9 57:16,22 59:2
pathology 63:4 63:17
patience 68:14
patient 43:21 45:21 46:15 47:5,8,9
patients 47:24
pause 6:14
pay 42:7 46:16
payer 34:11 35:18
paying 42:8 43:24 47:7,9
payment 18:25 39:24 40:3,4 45:10 49:4
payments 35:15,17
pays 47:5
pbm 42:18,19 46:16,18 47:3,4 47:7
pbms 45:14
pce 54:24
pdf 23:5
peer 29:24 30:1 30:6
pending 7:5 10:8 16:22
people 9:5 30:9 67:16,21
people's 28:11
percent 38:12 43:13 44:6 45:21,24 46:10 46:20 47:22 48:17
percentage 37:21 47:24
percentages 40:4
perform 28:5
performed 28:20 34:15 69:25
performing 32:23
person 11:5 15:7 50:5
personal 18:9 54:24,25
pertains 21:14
ph.d. 1:15 2:14 5:3 6:9,21 21:1 24:10
pharmaceutical 5:16 23:19,24 25:16
pharmaceutic... 42:24 45:9
pharmacies 42:7 45:15
pharmacist 25:7,11
pharmacy 25:4 25:9,12,15,17 42:2,4,14,20,21 43:1 46:9,10,16
phc 54:25
phe 67:14
physical 11:8 11:20 66:9
physician 35:24 36:18 39:2 40:16,19 48:16
physicians 38:2
picked 31:1
place 15:7
placed 44:15
plaintiff 1:7 2:7 3:3 27:6 32:5 59:1,3 60:16 62:4
plaintiff's 27:3 27:7 28:3 57:17
plaintiffs 10:6 17:1,11 26:7,11 26:23 27:20,23 33:10 41:18 47:13 56:8 57:10,23
plans 28:3 32:21
platform 41:25 42:1
players 31:17 32:9
please 6:13 7:8 7:9,11,14,15 8:12,18 9:8,14 10:1,2 12:2 44:14 46:2 65:24
plg 60:9 62:2
plus 41:3
pocket 42:8 45:10 47:8
point 23:1 30:4 30:16 33:5
pointed 48:5,6 67:14,23
pointing 22:6
policies 52:24
policy 24:10,19

position 50:6
post 3:15
power 31:13 32:7 51:19
practice 36:18 36:23 37:16
practiced 25:11
prefer 37:8
prejudgment 51:18,22 52:9 52:17
premise 37:8
prepare 14:19 15:18,22
prepared 15:20 16:10,13
preparing 21:8
prescription 43:6
prescriptions 47:22
present 4:20 12:22 15:13,16 15:17 17:15,18 17:23 18:3,7 21:22 27:20 29:23 33:12 34:20 37:24 38:15 40:11,22 41:11 48:21 49:6,14 50:1 52:15
presented 34:24
presenting 30:5
previous 69:17
previously 16:2
price 12:22 31:10 35:20 43:13 46:7,8 48:17 53:6 54:20,21,24 55:3,9
prices 30:19 32:6 34:11 42:1 42:6,18,22 43:24,25 54:20
pricing 28:17
principle 31:14 50:15 51:17
principles 30:7
printed 66:16
prior 10:16 16:11 21:24 34:2
private 31:1 33:19,22 34:11 35:18,21 39:20 40:3 48:17
procedural 35:11
procedures 32:18
process 48:8
produced 53:1 56:8 62:3 67:25
production 14:3 45:11
professional 29:10 30:3 36:1
profit 45:12,14 45:15,15,17 47:7
profits 43:2
programs 42:3
provide 13:6,10 13:13 22:25 23:2 50:18,20 55:24
provided 13:15 49:4 50:22 56:11 62:20 68:8 69:24
provider 62:12
provides 34:10
providing 28:1 32:14 43:20 45:20
public 24:10 39:21
publication 23:16 65:9,12 65:22
publications 12:19
published 37:2 53:22 66:3,5 67:20
pull 65:14
pulling 39:8
purchase 47:13 47:18
purchasing 51:19
purposes 37:11
pursuant 71:4
put 44:13 60:7

q

qualifications 71:10
question 8:2,3 8:19 9:10,14,15 10:2 21:14 22:10 37:8 44:3 54:21 68:19
questioning 59:21
questions 8:8 8:20 9:7 59:24 66:25 67:8 68:14 70:4 71:18
quick 11:1
quickly 18:1 63:12,13

r

r 3:1 71:1
racine 4:4
rand 37:21 39:19
randomly 30:25
range 56:9
rate 25:1 49:3,4 54:21

rates 37:17 38:13
rather 8:9 53:10
ratio 39:12,20 39:24 40:3,7
ratios 39:17
rcw 71:4
read 8:24 12:24 13:5 20:10 29:11 30:21 33:12 45:3,17 50:1,7 51:20 55:4 56:3 65:22 68:10
reading 51:12 71:8
ready 68:8
real 31:9
really 31:15 59:23 63:13
reason 8:18 9:18,22 50:20 61:4 62:25 63:2
reasonable 26:9,21 28:2 29:10 30:2,17 30:20,23,24 31:6,17,20,24 32:4,11 33:9,17 34:5,10,14,19 35:6 38:1,11,19 39:8,16 40:7,16 41:1,13,16 43:5 43:14 47:11 48:2,15,25 49:10 51:25 52:1,13 55:23 57:9,16,22 58:17 59:3,10 60:21 62:13,19
reasonably 8:12
reasons 67:15
rebate 46:19,21 46:23
rebuttal 57:13 69:13,17
recalculate 48:8,12,12
recalculated 48:7
recalculation 48:10
recall 10:11,13 16:16,18,21 17:6,9 18:14 67:4
received 23:22 24:2,8,14
recess 64:1 68:22
recognize 12:8 53:17
recognized 13:1
recommend 55:8
recommendat... 54:3,16
recommended 43:12 67:16
record 6:1,17 8:7 11:1,4 28:8 39:5 53:20 63:22,24 64:2,5 66:8 68:18,20 68:23 70:8,10 71:9
records 27:10
redo 34:14
reduced 71:7
reduces 46:23
refer 11:16
referenced 5:10
referring 14:22 32:23,25 42:19 50:10 51:3 52:2 52:5,18
refers 52:20 59:5
reflect 30:20 31:9 42:3 51:18
reflected 42:18 54:22
reflects 42:23 43:20
regard 13:20
regarding 12:20 13:16 16:13,19,19 68:5
regular 55:3
related 17:8 26:10,13 27:7,7 52:6 57:17,23
relatedness 57:15
relative 36:10 36:21 71:12,13
reliable 31:5 33:11
relied 34:18 55:24
rely 32:19 33:17
remain 37:9
remaining 46:16
remember 67:5
reminder 64:6
remote 6:6,13
remotely 6:11 6:12
removes 54:20
rendered 26:22 27:6
rendering 21:11 36:3
rephrase 29:16
replaced 22:5
replicate 58:12
report 11:7 12:23 13:15 16:11 20:2,7,10

20:12,13,16,19 20:25 21:8,11 21:15,16 22:11 26:20 28:20 33:15 34:25 35:4,24 38:21 39:20 50:18 51:10 55:16 58:22 61:1,12 69:5,13
reported 1:24 39:9,10,25
reporter 5:13 6:18 8:6,14 13:8,11 70:11 71:4,24
reporting 6:13
reports 11:16 12:19 13:19 14:1 15:20,21 16:14,15 37:21 59:4 64:21 65:3 65:6 66:9,22 69:17,19,21
represent 7:4 12:11 14:14 42:6 56:6 60:15 62:1
representing 33:18
request 12:17 12:18 13:4,5,7 13:14 14:3
requests 12:18
requires 8:1
research 51:4
reserved 70:16
residing 71:25
resource 28:15 28:17 47:6
resources 42:23 42:25 46:25 47:10
responsive 13:7 13:14 14:2
restore 50:5
results 67:25
resume 23:12 23:15
retail 41:17 42:7
retained 10:5 10:16 16:12,17 17:1,3
return 61:13 62:16 63:10
revenue 39:10 39:11
review 10:21 15:18,21 26:8 26:11 27:10 38:5 57:6
reviewed 15:20 15:24 21:8 29:24 69:16
reviews 30:1
revised 61:12
right 11:21 13:2 14:5 19:8 19:15 23:9,22 23:25 24:4,6,9 24:12,20 25:2 28:6,11,16 29:19 31:21 32:15 33:19,23 33:24 34:2,3,7 34:8,12,13,16 34:21 35:6,10 35:12,13,15,16 35:19,21,22 36:4,7,11,12,15 36:16,23 37:5,5 37:18 38:14,22 39:2,13,17,25 40:4,9,13,17,20 40:24 41:4,9 42:7,10,11 43:6 43:14,17,21 44:7,10 45:18 45:22 48:13,18 48:23 49:4,12 50:3,11 52:3 53:7,10,22,25 54:11,13 55:4 55:10 56:18 57:11,18,25 58:4,8,18 59:6 59:9,11,14 60:7 60:13,23 61:2,5 61:16,17,18,21 62:10,14,20,23 63:18,19 64:22 65:10 66:10,24 70:5
role 24:22
roughly 43:13 45:10,21
russo 26:16,21 33:9 34:15 35:5 35:14 36:2,10 36:22 37:15 38:12 39:19 41:2,17 48:3,16 49:1,11 56:10 69:20
russo's 26:9 34:4,9,19,24 38:24 41:12 49:25 55:21 56:7,11,14,17 56:20 57:6 69:20 70:1,2
rvus 36:8,11,13 36:17 37:1,16

s

s 3:1
sake 11:10
sales 48:17
salisbury 3:22
saying 8:14 66:17
says 45:4 55:20 61:21

schedule 19:12 49:12
schedules 19:13
sciences 23:25
scope 26:6
screen 12:5,6 14:6,9,18 19:19 29:1 44:12,19 49:19,22 53:15 57:8 59:16,19 60:10 62:5 69:10
scroll 21:21 62:13
scrolled 21:19
scrolling 43:8 69:7
seattle 1:16 2:16 7:17
second 5:12 14:15 15:16 34:5 49:25 53:24
section 4:13 34:25 35:24 38:21
sector 39:20,21 40:3 55:2
see 10:20 12:6 12:15 14:10 19:22 20:4 21:1 23:6 27:13 29:3 30:11 31:17 43:11,23 44:21 44:25 49:21 51:3,12 54:3,16 55:17 58:23 60:9 61:8,8,15 61:24 62:6 65:17 69:9,12
seeks 13:8
seen 13:4 14:12
sell 46:8
seller 31:5,11
sending 11:25
sense 22:7 32:12 60:18
sent 14:15
sentence 29:5
serve 24:17
served 17:10,10 18:21
service 27:6 34:12 36:4
services 17:15 17:18,23 18:4 26:22 30:21 35:6,9,21,25 36:14 38:1,11 38:12,20 41:7,9 49:1,2 57:10,17 57:22
serving 18:9,11
set 36:13 41:6,8 71:20
setting 32:8,8
seven 55:17,20
shaking 8:10
share 12:4 14:6 14:9 19:19 29:1 44:18 49:19 53:13 59:19 62:5 65:20 69:4
shared 19:17
sharing 11:13 14:6,18 26:14 44:12 48:20 53:13,15 55:14 57:8 59:16 61:13,23 62:16 63:22
shortly 38:8
show 14:9 19:19 21:22 29:2 44:19 49:19 53:16 55:25 59:17,19 62:5
showing 12:9 54:6
side 17:4 28:23 28:25
sign 9:1 68:10
signature 70:16 71:8,22
signing 71:9
silent 37:9
sitting 10:14
situation 32:5
six 35:1 39:6
slow 8:12
smith 4:2
smoking 16:19 16:24,25 17:5,8 17:14 18:15,17 18:20
snohomish 71:3 71:25
sold 47:22
solutions 1:22
somebody 50:16
sood 5:17 44:7 44:15,21,25 45:19
sorry 11:3 13:11 19:25 22:21 37:13 46:9 65:5
sort 53:9
sorts 52:21 53:2
sound 10:3 19:8
speak 8:12 15:11
speaking 6:14 8:21
specific 28:13 32:18 39:10,24 40:3 49:3 50:22
specifically 35:23
split 63:3
spreadsheet 5:20,22 59:17

60:12 62:2,22
spreadsheets 56:7,12,21 57:6
ss 71:2
standing 70:14
stands 35:11
start 8:19 35:3 35:3,23
started 7:8,21 35:8
starts 35:25
state 7:8,11,14 16:23 17:12 33:15 37:7 40:3 49:3 52:24 71:2 71:5,24
stated 32:13
statement 22:18 50:13,19
statements 20:19
states 1:1,9 2:1 2:9,15 4:11 6:8 7:4,6 13:24 30:16,19 31:2,8 36:13 47:23 54:23 57:24 62:3 70:13
states's 26:17
stating 11:22
statistics 51:5,8
stenographic 6:16
stenographic... 71:6
step 39:15
stergachis 24:17
stop 14:5,6,18 26:14 44:12 48:20 53:12 55:13 57:8 59:16 61:13,23 62:16 63:21
street 3:21 4:14 7:16
studies 12:19
subheading 30:13
subject 55:21
submit 13:19 13:21 14:2
submitted 13:17,25 71:8
subpoena 5:11 12:2,12
suggested 43:4
summaries 38:9
summary 5:20 5:22 30:13 34:23,24 38:24 60:13 62:9 63:8 63:8
supports 50:19
sure 8:2 10:2 10:22 11:11 17:25 28:19 29:15,17 37:12 59:23 60:2,17 63:13 65:16
swear 6:19
sworn 6:11,22 71:16
system 5:16 45:7

t

t 6:25 69:2 71:1 71:1
tab 60:12,17 62:9
table 45:6 59:1 59:2 61:15,16 62:18
tables 58:12
take 10:21 15:7 47:25 60:20 63:9,12
taken 2:15 7:18 15:25 38:4 64:1 68:22 71:6,19
takes 38:10
talk 16:25
talked 64:21
talking 52:9,16
technician 25:9 25:12
technologies 28:18
technology 23:19 28:13
telephone 15:8
telling 64:16
ten 29:3,6 46:20 51:9,14
term 52:8
terminology 35:12
terms 18:7 30:1
testified 6:23 13:1 16:3,4,6,8 67:12 68:6
testify 71:16
testifying 9:3
testimony 8:25 9:20 12:13 21:24 71:18
text 53:25 54:7
thank 13:12 22:3,6 24:25 39:4 68:13,17 68:25 70:3,5,7 70:15
thanks 65:8
thereof 71:15
thing 52:12 59:23 67:22
things 11:18 67:13
think 18:13 19:6,7,7 21:13 21:18 30:4 37:6 38:10 42:25 46:24 50:22 59:21 61:7 63:2

63:2,7 65:20 68:17
third 33:5 45:12
thirty 61:8
three 30:13 36:17 38:25 45:13,15 55:22
time 6:5 10:1 12:4 41:3,7 46:18 47:24 51:17,19 56:3 63:24 64:2 67:4 68:20,23 70:8 71:10,19
times 14:25 16:12 41:3 48:17
title 20:24 65:12
titled 23:8 54:9 59:2
today 9:3,20,23 14:20 51:20,25 52:1,12,25 53:4 67:12,20 68:6 68:15
today's 6:4
together 63:8
toledo 23:25
took 7:21 48:16 49:1
top 51:10
topics 12:23
torts 4:12
total 46:24 47:6 47:10,10 52:25 59:13 60:22 61:1,11,16
transaction 31:9,10
transactional 30:19 42:17
transcribed 71:8,17
transcript 8:24 37:11 68:9 70:12 71:17
transcription 64:25
transfer 47:1
treatment 28:13
treatments 32:18
tremendous 32:7
trends 66:1
trial 16:4
true 30:20 40:19 71:17
truth 71:16,16 71:16
truthful 9:19
try 8:17 9:8
trying 17:7
turn 12:14 20:21 23:4 30:10 49:18 54:2 55:16 58:21
turning 58:23
twice 15:2
two 45:14,16 61:9 67:13
types 34:12
typewriting 71:7
typically 46:15
typo 61:11 64:25
typos 64:22,23 65:2,5,7

u

ultimately 48:1
um 46:3,5,25 48:5 66:24
unable 9:19
unaltered 11:7
uncertain 55:23
unclear 56:1
under 30:13 61:12 64:7 71:7
underlying 56:7
underneath 63:18
undersigned 71:4
understand 7:24 8:4,15,21 9:1,5,7,16 11:13 22:8 32:14 45:25 52:16 63:7 64:7 67:9 68:11 69:19
understanding 11:11 26:18
understood 9:10 23:4 25:18 29:1 30:2 61:13 66:19 68:4
unilaterally 11:2,3
united 1:1,9 2:1 2:9,15 4:11 6:8 7:4,6 13:23 26:17 30:19 31:2,8 36:13 47:22 54:23 57:24 62:3 70:13
units 36:11,22 41:3,3,6,7
university 4:3 23:19,25 24:6 24:11,20
unnatural 37:14
updated 22:12 22:15

uploaded 69:6
urban 32:8
usa 56:10
usdoj.gov 4:17 4:18
use 11:12,17,20 16:20,23 31:24 48:3 51:1,19 55:8 67:14,16 67:21 68:5
used 16:15 19:13 26:21 28:12,14 36:2 38:6,12 39:19 41:17 42:23 43:1 46:25 49:11 50:15 53:5 54:23 55:1 55:4,10,25 56:24 67:19 68:1
using 12:22 34:15 39:16,24 42:9 43:4 53:10 67:24
usually 46:15 47:21
utilization 66:1

v

v 6:8
validate 56:23 57:2,3
valuations 54:10
value 12:22 17:15,18,23,23 18:3,7 26:22 28:2 30:17,18 30:21,23,24 31:6,17,20,24 32:4,17 33:9,12 33:17 34:5,10 34:14,19,20 35:6 36:11,21 37:25 38:1,11 38:16,19 39:8 39:16 40:7,11 40:16,23 41:2 41:11,13,17 43:5,14 47:11 48:15,21,25 49:6,10,14 50:1 50:17 51:17,25 52:1,14,15 57:16 58:17 59:3 60:22 62:14,19,23 63:18
values 17:21 26:9 48:2 57:9 57:22 59:10 60:21
vanslyke 3:4 5:6 10:25 11:15 11:23 21:18,25 22:20 32:1 44:2 45:23 46:4 47:15,20 51:6 52:4,19 55:6,12 57:12,20 58:2,9 58:14,19 59:20 59:25 60:4 61:19 63:1 65:19 66:8 67:7 68:17,25 69:3 69:24 70:3,15
variation 54:22
verbally 8:8
verify 58:4
veritext 1:22 6:3
version 11:18 21:25 22:5 69:6
video 6:6 70:10
videographer 4:21 6:1,2 63:24 64:2 68:20,23 70:8
videotaped 1:14 2:14
view 30:4
vitae 23:6,9
vocalizing 37:7
vs 1:8 2:8

w

w 46:6
wait 8:18,20
waive 71:9
walk 34:22,23
walking 38:8
wallace 3:19,20 57:11 58:4,8,11 59:6 69:14
wallace's 58:18 69:21 70:1
want 11:1 43:23 50:21 52:21,25
ward 4:2
washington 1:16 2:16 4:15 7:17 16:23 24:20 71:2,4,5 71:24
water 1:5 2:5 6:7 7:5 10:7 20:8 27:2
way 71:14
we've 11:4
website 49:2
wednesday 15:6
weitz 3:5
weitzlux.com 3:11
welcome 11:17 11:20
went 32:14
west 3:7
whereof 71:20
white 5:15
whitney 3:19
wholesale 43:12 44:5 45:21 46:7

wholesaler 46:7
wholesalers 45:16
willing 31:4,5 31:10,11
wilmington 4:5 62:13,19 63:3 63:17,17
wish 66:25
witness 5:3 6:11,19,22 10:7 13:9 16:14,17 18:12,22 19:19 22:21 32:3 45:24 46:5 47:16,21 51:7 52:5,20 57:13 58:10,15,20 63:2,23 65:20 68:16 70:7 71:6 71:8,9,15,20
words 8:7
work 13:22,22 13:25 25:1 36:18 55:8 58:4 58:7
workbook 60:16 62:9
working 17:12
written 43:2
wrote 29:8,17 33:8,25 34:4,9 49:25 50:4 51:11,16 54:18
www.veritext... 1:23

x

x 6:25 69:2

y

yeah 7:10,16 12:7 14:17 19:9 19:11,11,25 29:20,20 36:5 42:21 51:7 52:20 60:19,19 61:10,22 62:11 63:11,14,16 65:1,4,17,25 70:13
year 18:14 33:23 62:4
years 67:18
yield 49:4

z

zach 6:2
zachary 4:21
zip 41:18
zoom 11:2,4 15:8,9

Exhibit 773

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF NORTH CAROLINA
SOUTHERN DIVISION
No. 7:23-CV-897

IN RE:
CAMP LEJEUNE WATER LITIGATION

This Document Relates to:
ALL CASES

REMOTE VIDEO-RECORDED EXPERT DEPOSITION OF
HEATHER A. FORD

Wednesday, February 25, 2026
8:58 AM Eastern Time

JOB NO.: 7887242
Reported by: Denise Dobner Vickery, CRR, RMR

Wednesday, February 25, 2026

8:58 AM Eastern Time

Remote Video-Recorded Expert Deposition of Heather A. Ford, held in the location of the witness in Washington, DC.

Pursuant to notice, before Denise Dobner Vickery, Certified Realtime Reporter, Registered Merit Reporter, and Notary Public in and for the District of Columbia.

REMOTE APPEARANCES:

Representing the Plaintiffs Leadership Group:

WALLACE & GRAHAM, PA
BY: WHITNEY WALLACE, ESQ.
525 N. Main Street
Salisbury, NC 28144
704.633.5244
wwallace@wallacegraham.com

Representing the United States of America:

U.S. DEPARTMENT OF JUSTICE
CIVIL DIVISION, TORTS BRANCH
BY: WILLIAM V. KLOTZBUCHER, ESQ.
1100 L Street NW, Room 4055
Washington, DC 20005
202.532.5193
william.v.klotzbucher@usdoj.gov

VIDEOGRAPHER: DAVID LANE
ALSO PRESENT:
JENNA BUTLER, ESQ. - Ward and Smith - Plaintiffs
MATTHEW SOLIS, ESQ. - U.S. Department of Veterans Affairs, Office of General Counsel

INDEX

EXAMINATION OF HEATHER A. FORD	PAGE
BY MS. WALLACE	9
AFTERNOON SESSION	152

FORD DEPOSITION EXHIBITS

(Attached to transcript.)

NUMBER		PAGE
EXHIBIT 1	The United States' Second Disclosure Of Expert Testimony For Phase III Pursuant to FED.R. CIV.P. 26(a)(2) and D.E. 630	22
EXHIBIT 2	Plaintiffs' Notice of Deposition of Heather Ford	29
EXHIBIT 3	United States' Responses and Objections to Plaintiffs' Notice of Deposition and Subpoena for the Production of Documents to Heather Ford	29
EXHIBIT 4	DOJ Letter of February 19, 2026 Re: Camp Lejeune Water Litigation - United States' Production of Documents - CLJA_USA_FORD_0000000001 - CLJA_USA_FORD_0000000002,	29

	CLJA_USA_MCILROY_0000000001 - CLJA_USA_MCILROY_0000000009, CLJA_USA_PIPER_0000000001 - CLJA_USA_PIPER_0000000020	
EXHIBIT 5	Curriculum Vitae Heather A. Ford CLJA_USA_FORD_0000000001	30
EXHIBIT 6	DOJ Letter of February 19, 2026 Re: Camp Lejeune Water Litigation - United States' Production of Documents - CLJA_USA_FORD_0000000003 - CLJA_USA_FORD_0000000007	30
EXHIBIT 7	Position Description - VHA Chief Financial Officer CLJA_USA_FORD_0000000003 - CLJA_USA_FORD_0000000007	30
EXHIBIT 8	U.S. Department of Veterans Affairs FY 2026 Budget Submission Budget In Brief May 2025	76
EXHIBIT 9	GAO April 2023 High - Risk Series Efforts Made to Achieve Progress Need to Be Maintained and Expanded to Fully Address All Areas GAO-23-106203	153

EXHIBIT 10	GAO Report May 17, 2023 - Veterans Health Care - Staffing Challenges and Recommendations for Improvement GAO-23-106836	162
EXHIBIT 11	GAO Report March 2024 - Veterans Community Care Program - Additional Information on VA Statutory Appointment Timeliness Measurements Is Needed GAO-24-105308	169
EXHIBIT 12	GAO Report August 2024 - Veterans Community Care Program - VA Needs to Strengthen Contract Oversight GAO-24-106390	172
EXHIBIT 13	GAO Report November 2024 - Veterans Health Administration - Additional Actions Needed to Improve Oversight of Health Care System GAO-25-106969	176
EXHIBIT 14	Statement Of The Honorable Douglas A. Collins, Secretary Of Veterans Affairs, Department Of Veterans Affairs (VA) Before The Committee On Veterans' Affairs United States House of	181

Representatives On Opportunities
With VHA Reorganization
February 11, 2026, Pages 1-4
EXHIBIT 14B "VA secretary criticizes 'scary stories' about plans to modernize the VA - February 11, 2026 181

P R O C E E D I N G S

- - -

THE VIDEOGRAPHER: We're now on the record.

My name is David Lane. Videographer for Golkow, a Veritext division. Today's date is February 25, 2026. Our time on the record is 8:58 AM Eastern Time.

This remote video deposition is being held in the matter of Camp Lejeune Water Litigation.

Our deponent today is Heather Ford.

All parties to this deposition are appearing remotely and have agreed to the witness being sworn in remotely. Due to the nature of remote reporting, please pause briefly before speaking so that all parties are heard completely.

Counsel, please introduce yourselves and state whom you represent.

MS. WALLACE: Whitney Wallace and I represent the Plaintiffs Leadership

Group and my firm is Wallace & Graham.

MR. KLOTZBUCHER: My name is Bill Klotzbucher from the U.S. Department of Justice representing the Defendant in this action.

THE VIDEOGRAPHER: Our court reporter today is Denise Vickery and will now swear in our witness.

- - -

HEATHER A. FORD

called for examination, and, after having been duly sworn, was examined and testified as follows:

THE VIDEOGRAPHER: Please begin.

- - -

EXAMINATION

- - -

BY MS. WALLACE:

Q. Good morning, Ms. Ford. How are you this morning?

A. I'm fine. Thank you.

MS. WALLACE: Good.

Before we get started, there

is a case management order in effect that requires defense counsel and I to affirm on the record the following statement, and I will read it.

The parties agree that no communication with the deponent by any means, including but not limited to text messaging, will occur out of the view of the other parties while the deposition is proceeding on the record. I affirm.

MR. KLOTZBUCHER: I affirm.

MS. WALLACE: Right.

BY MS. WALLACE:

Q. Will you please state your full name for the record?

A. Heather Ardell, A-r-d-e-l-l, Ford, F-o-r-d.

Q. What is your date of birth, Ms. Ford?

A. [redacted] 1975.

Q. Who is your current employer?

A. The Department of Veterans Affairs.

Q. What is your current job title?

A. Chief financial officer, Veterans

Health Administration.

Q. Do you understand all of your testimony today is under oath?

A. Yes.

Q. Is there any reason that you're not able to be fully truthful today?

A. No.

Q. Can you tell us for the record where you are physically located today?

A. Washington, DC.

Q. Where are you physically? Are you in your office in Washington, DC?

A. Yes, in my office.

Q. Where is your office in DC?

A. 810 Vermont Avenue Northwest.

Q. Is that a department headquarter for the Department of Veterans Affairs in DC?

A. Yes, it's the headquarters building.

Q. Can you tell the me how many people from VHA work in your building?

A. I could not tell you how many VHA employees there are currently located in this building.

Q. Is it more than a hundred?

A. Yes, I would -- I would say it's more than a hundred.
Q. Is anyone present with you today in your office?
A. No.
Q. Because we are remote, do you understand that you can't access your internet for any reason or use your cell phone during the deposition?
A. Yes, I understand.
Q. Do you have any documents there with you today?
A. No.
Q. Are you familiar with the Camp Lejeune water contamination litigation?
A. Not specifically, only limited to the notice of deposition.
Q. Do you know generally what the lawsuit is about?
A. No.
Q. Do you know that it's about water contamination at Camp Lejeune?
A. Yes.
Q. And nothing further than that?

A. Nothing further than that.
Q. Are you or any of your family members veterans?
A. Yes.
Q. Who?
A. My partner is a veteran, my -- both of my grandfathers were veterans, and my great uncle was a veteran, along with --
Q. Did any --
A. -- other family members as well.
Q. Thank you for your family's service.
Do you know anyone that has filed a claim in the Camp Lejeune water contamination litigation?
A. Not that I'm aware of.
Q. Do you know how many persons have filed claims?
A. No.
Q. In this litigation, it's approximately 406,000 have administrative claim forms filed.
Is that greater than you thought the litigation was, or you had no knowledge?
MR. KLOTZBUCHER: Objection.

Foundation.

You may answer.

THE WITNESS: It was -- I'm not surprised.

BY MS. WALLACE:

Q. Do you -- are you aware of your role in this litigation and why you have been designated as an expert?

A. Yes.

Q. Can you describe in your own words what that reasoning is?

A. It is that VHA provides health care to veterans, some of which may be impacted by conditions that they have developed based upon exposure to contaminants, such as water at Camp Lejeune, and there's a cost of that health care.

Q. A cost of that health care to the VHA?

A. Well, to the taxpayer and to VHA.

Q. Have you ever given a deposition before?

A. No.

Q. Have you ever been a party in any civil litigation?

A. No.
Q. Have you ever testified before Congress before?
A. Yes.
Q. What were the circumstances, please?
A. There was a hearing on a potential piece of legislation revolving -- involving the ability to essentially seek funding from -- involving Medicare and Medicaid, and so I testified on that.
Q. Were you in your current role when that occurred?
A. I was in an acting position as the CFO when that occurred.
Q. How is that distinguished from your current position?
A. So that acting means I was detailed into that position for a period of 120 days. So I was not officially in this position permanently, and being the CFO now, I am in this position permanently meaning that's where my job aligns.
Q. So you were in a role that was a pre -- a direct precursor to your current role --
A. Correct.

Q. -- or a temporary?
A. Yes.
Q. Okay. And you said you were seeking funding for Medicare, Medicaid, and how did that relate to the VHA?
A. That relates to VHA in terms of our ability to bill and collect revenue.
Q. Can you explain that to me a little further?
A. Essentially, we don't have the ability to bill Medicare and collect funding from Medicare. That piece of legislation would have allowed us or would allow us to bill -- bill and collect from Medicare and Medicaid, which is a change in our authorities in how we would collect funding.
Q. In what circumstance would you need to bill and collect from Medicare and Medicaid?
A. If the -- if the veteran was part of Medicare or Medicaid and fell into a priority group where, like, copays were due or payments were due, we would have that ability to bill. Just like we would any other health insurance provider.

Q. Your testimony then is that right now the VHA does not have the ability to collect from Medicare or Medicaid?

A. Yes.

Q. And so you were testifying, and if you had been successful or that bill had been successful, it would have allowed VHA an additional revenue source?

A. Correct.

Q. And was that revenue source in the form of copays, or also did it have to do with primary/secondary payor situations?

A. To my recollection, I can't remember that detail or nuance of the bill.

Q. Was the bill successful?

A. It has not been passed into law.

Q. Is that bill the Sharri Briley and Eric Edmundson Veterans Benefits Expansion Act of 2025, otherwise known as GUARD Veterans' Health Care Act?

A. It is the GUARD Act.

Q. And it's your understanding is that's currently pending?

A. Correct.

Q. If that ends up being passed, how would that impact the VHA revenue stream?

A. We would essentially have to adjust how -- first we would have to address our ability to collect. So we would have to update our systems, and then start working through the processes by which we would do that. And once we established those processes, we would bill and collect like we would any other insurance.

Q. Would it have a significant impact on VHA revenue stream?

A. The cost estimates have not been completed, so I couldn't speak to exactly the financial impact.

Q. Based on the analysis done in order to support the bill, did you have a preliminary opinion on that?

A. It would increase revenues but --

MR. KLOTZBUCHER: I'm sorry. I didn't mean to talk over you, Ms. Ford. Objection. Foundation.

You may answer.

THE WITNESS: Okay. Thank you. Apologies for not pausing either.

MR. KLOTZBUCHER: That's fine.

THE WITNESS: Our preliminary analysis was that it would increase revenues. The magnitude or the amount was not finalized or had not been reasonably determined what that would look like.

BY MS. WALLACE:

Q. Thank you.

Any other testimony before an administrative panel or committee --

A. No.

Q. -- that you can think of?

Okay. Regarding your deposition today, when did you learn that you were going to be deposed in the Camp Lejeune contaminated water litigation?

A. I would say I believe it was, like, the November/December time frame.

Q. How did you learn that you were requested to be an expert witness in this litigation?

And please don't -- for all of my questions don't divulge any substance of

communications with counsel.

A. I was notified by VA OGC counsel that an expert witness was being sought, and then I was notified through a notice of deposition via VA OGC.

Q. Did you volunteer to testify once you realized that they were seeking an expert witness on the issues that are under your scope?

A. Yes.

Q. Without divulging the contents of any communication with your counsel, can you tell me how you prepared for your deposition today?

A. I reviewed the notice of deposition. I reviewed my resumé, made sure that was updated. And then I reviewed the scope of what was originally intended to be my expert area -- my area of expertise.

Q. Did you meet with any of your counsel?

A. Yes.

Q. Which -- without telling me the contents of communications, which counsel did you meet with, please?

A. I've met with DOJ attorneys as well

as VA attorneys present.

Q. How many meetings have you had to prepare for your deposition today?

A. Three.

Q. Are you able to tell me the duration of each of those meetings?

A. Total, approximately three to four hours total. So approximately -- so approximately one hour per meeting.

Q. Were there any individuals that are not counsel on those prep session meetings?

A. No.

Q. Are there any materials that you reviewed during your prep session that relate to the scope of your testimony that you've been designated for?

A. Just the notice of deposition.

Q. No other materials?

A. As well as the -- again, the scope of what my expert testimony was intended to be.

Q. Have you had conversations with any other government agency employees related to this litigation, such as CMS, TriWest, TRICARE, Community Care Network employees, VBA?

A. No outside parties or no one from VBA.

Q. Did you do anything else to prepare for today's deposition?

A. No.

Q. All right. I'm going to -- the way we will share exhibits today is, I will upload them into the chat feature and then I will also put them on the screen for your review.

MS. WALLACE: So I'm going to upload what's been previously marked as Exhibit 1.

(Document marked for identification as Ford Exhibit 1.)

BY MS. WALLACE:

Q. And it is uploaded into the chat and I'm going to put it on to the screen for you, Ms. Ford.

A. And I'm going to look up to the left just because I have a larger screen up there.

Q. Okay. I totally understand.

Do you recognize this document?

A. I do not.

Q. Do you recognize your disclosure

topics, which occur on page -- oh, did I pass that? Ah -- 3 and 4?

A. Yes.

Q. Did you help to prepare this paragraph and the designations on pages 3 and 4 of Exhibit 1?

A. I reviewed it and made any technical edits to it in terms of nomenclature or naming conventions.

Q. You were able to make any edits that you saw fit in order to ensure its accuracy?

A. Correct.

Q. Is the items identified on pages 3 and 4 -- do you expect that to be the full scope of your testimony in this litigation?

A. Yes.

Q. Were you asked by your counsel to produce any documents that supported these opinions?

A. No.

Q. Are there any documents that support the opinions that you will be giving that are not publicly available?

A. Not that I am aware of.

Q. Regarding your testimony today, did you sign a retainer agreement with counsel in order to testify?
A. No.
Q. Is it your understanding you're an unretained expert in this litigation?
A. Yes.
Q. And the VHA is an agency of the federal government, true?
A. Yes.
Q. And you're aware that the federal government is the defendant in this litigation?
A. Yes.
Q. And you are a full-time federal employee as you testify here today, correct?
A. Yes.
Q. Your salary is paid by the federal government?
A. Yes.
Q. Are you being compensated in addition to your salary for your testimony today?
A. No.
Q. Does the same answer apply to your preparation sessions? Were you paid any

additional amounts related to your testimony?
A. I was not paid any additional amounts.
Q. And you did not prepare an expert report for this litigation; is that true?
A. That is correct.
Q. Have you reviewed any expert reports in this litigation?
A. No.
Q. Do you have any facts related to any of the bellwether plaintiffs in this litigation, any data, any facts, any information?
A. No.
Q. And if we had -- we have received data from the VHA related to past medical managerial costs for the bellwether plaintiffs.
Were you involved in compiling that data in any way?
A. No.
Q. Were you aware that it existed?
A. I became aware it existed.
Q. When is that?
A. August of 2025.
Q. And how did you become aware that it

existed?

A. When one of my employees was requested to be deposed.

Q. You did not know of it until that, until he was asked to be deposed?

A. Correct.

Q. Is that individual Daniel Clarke?

A. Correct.

Q. And Daniel Clarke is the acting associate CFO of the Managerial Cost Accounting Office for the VHA Office of Finance; is that right?

A. Correct.

Q. I imagine that you have a much clearer understanding of the -- of how that role relates to your role.

Would you be able to describe the organizational chart that compares the two of you's roles, please?

A. Sure. So the CFO resides at the top of the organizational chart under --

Q. Is that you?

A. Correct. That is me.

Q. Okay.

A. There is a deputy CFO that is currently vacant, and then under the deputy CFO are several offices which have either executive directors or associate CFOs, of which the Managerial Cost Accounting group is one of those offices.

Q. And is he at the top of that office?

A. Yes.

Q. And so how many -- so he is certainly your subordinate. You're his boss?

A. I am now.

Q. And you were not then?

A. At that time in an acting position, I have a role as a supervisor, but it was not a permanent structure at that point in time.

Q. Were you involved any way in the data that he pulled for the bellwether plaintiffs?

A. No.

Q. Have you ever reviewed it in any way?

A. No.

Q. Did you consult with him prior to his deposition testimony?

A. He had only mentioned that he was

being asked to be deposed and that he was going to do that because the previous executive director had left, and there was a need for someone with knowledge to provide test -- or provide a deposition in this case.

Q. Can you tell me, just while I have it somewhat visualized, what other offices are beneath you underneath the deputy CFO?

A. Sure. There is an Office of Budget Formulation, which is headed by an ACFO. And I'll use that term to avoid saying associate CFO, chief financial officer. There is an Office of Revenue Operations, which has an executive director. There is Payment Operations, which also has an executive director. There is an Office of Budget Execution, which has an ACFO.

There is -- I'm trying to count here. There's aligned to the deputy is the ARC, which is the Allocation Resource Center. There is -- also I feel like -- oh, there's audit -- there's two offices that do -- there's a Financial Management Office, which has, I believe, an ACFO. It could be an executive director. And then there's Financial Policy and Training, and I think

that's it. There's...

Q. Your role oversees and manages all of that?

A. Correct.

MS. WALLACE: I am going to upload into the chat several additional exhibits and put any on the screen that I want to discuss.

I'm going to upload as Exhibit 2 your notice of deposition.

(Document marked for identification as Ford Exhibit 2.)

MS. WALLACE: Exhibit 3 your responses and objections.

(Document marked for identification as Ford Exhibit 3.)

MS. WALLACE: The cover letter dated 2/19/26 providing us with documents for your deposition.

(Document marked for identification as Ford Exhibit 4.)

I'm including the documents that were provided, which is Exhibit 5, your CV, which has the Bates stamp number

CLJA_USA_FORD_ 1 through 2.

(Document marked for identification as Ford Exhibit 5.)

And another cover letter dated 2/23/2026, which produced additional documents, which are pre-marked as Exhibit 7, which bears the Bates stamp CJLA_USA_FORD_ 3 through 7.

Is that true? Yes.

(Document marked for identification as Ford Exhibit 6.)

(Document marked for identification as Ford Exhibit 7.)

BY MS. WALLACE:

Q. I believe you testified before that you did receive and review your notice of deposition, Ms. Ford?

A. Yes.

Q. I am going to put on the screen what's been previously marked and shared as Exhibit 4 -- excuse me -- 3.

Do you recognize this document?

Anytime you need me to zoom in, please just let me know and I'm happy to.

A. If you could. (Laugh). Thank you.
Q. Sure.
A. That document does look familiar.
Q. Were you asked to produce your resumé and job position description in advance of your deposition?
A. Yes.
Q. And we talked earlier. You don't have any billing invoices between you and counsel or any other government agency related to your testimony, correct?
A. Correct.
Q. Were you asked to identify and produce all documents and materials you reviewed, considered, or relied upon in the course of developing your opinions, which is paragraph 8 on page 6 of 17 on Exhibit 3?
A. Yes.
Q. And did you provide this website source?
A. (Reviews document.)
I don't remember if I provided that source directly.
Q. Is that a source you're familiar

with?

A. Yes.

Q. In the course of your work, how often do you reference publicly available documents to perform your job?

A. Fairly frequently.

Q. Is this one of those websites?

A. On occasion I would reference that website, but not with a lot of frequency.

Q. It looks like that website takes me to the VHA Office of Integrated Veteran Care, which has documents linked, such as fact sheets, forms, policy manuals, program guides, external resources, and contacts.

Is that your understanding as well?

A. Yes.

Q. Which one of those documents would you say that your testimony relies upon?

A. I would say my testimony would be more focused on financial policy, not necessarily community care policy.

Q. Community care is also under your purview from a CFO perspective; is that true?

A. The funding for community care, yes.

Q. As well as the funding for VHA medical services indirect care?

A. Correct.

Q. Can you think of any other notes or memos or charts or presentations that you have given that would be relevant to your testimony before the court that you have not provided to plaintiffs?

A. Nothing that I can think of today.

Q. Are there presentations that you've given or PowerPoint slides that are relevant to the opinions that you have listed in your designations in this case?

A. Not that I can think of at this moment.

Q. And were you asked if you have any e-mails with any of the experts that you see on this screen in paragraph 13?

A. Specific e-mails? I don't think I was asked for that.

Q. Do you have any e-mails or correspondence with the individuals listed on the screen related to this litigation or any topics to which you expect to offer testimony in this

litigation?

A. Other than Dan Clarke, no.

Q. And what do you have between you and Dan Clarke related to this litigation and/or the topics that you are expected to offer in this litigation?

A. Again, notification that he would be requested to provide a deposition in this case.

Q. Any other relevant information or e-mails that you can think of with Daniel?

A. Not that I can think of.

Q. Thank you.

And, again, you testified earlier you have not accessed any information to jog your memory prior to creating the designations in this case?

A. No.

Q. I'm going to open what's been previously marked as Exhibit 5, which has been shared in the chat feature.

Do you recognize this document?

A. Yes.

Q. What is this?

A. That's my current resumé.

Q. Did you prepare this document?
A. I did.
Q. And you testified earlier that you reviewed it prior to this deposition to ensure its accuracy.
Is there anything that you felt you excluded or needed to change or modify in your resumé?
A. The only thing that needed to be updated was the "VHA Chief Financial Officer January 2026 to Present." I had just been officially placed into that role, so I added that.
Q. It's accurate in its current form?
A. Yes.
Q. Let's -- I'm going to -- it's a two-page resumé. I'm going to scroll to the second page, which is CLJA_USA_FORD_ 2.
Can you briefly describe your educational background for the court?
A. I received a Bachelor's in History from what was then Towson State University now Towson University, and then I pursued a Master's of Business Administration and Public Management at Hood College. And those are my two graduate or

my two degrees.

Q. I didn't have a date for your education. So I'm not certain how the resumé jumps from graduating from with an MBA to your next employment position.

Can you help me understand that?

A. I received my Bachelor of Science in 1997, and I believe I received my Bachelor's of Administration in 2007, 2008 maybe.

Q. You went back to grad school?

A. Correct.

Q. Was there a reason that you decided to do that, a job reason or personal reason?

A. Personal.

Q. What -- what type of employment did you have prior to the first -- okay.

Is that under Early Career?

A. Correct.

Q. Will you walk me briefly through those positions just to explain how your career progressed after graduating from undergraduate?

A. In 2001, I accepted a position with what was BearingPoint Consulting. I started off as a consultant, finalized my career there,

finished my career there as a senior consultant. And I worked for several clients, mostly the U.S. military or the U.S. Army specifically, providing different types of service -- client services for them focused on business functions and resource management-type work.

I then left BearingPoint and went to the Defense Intelligence Agency from 2007 to 2008, and I was a program analyst there working in the what would be known as, like, the JH Shop, which is a resource shop.

I then left the Defense Intelligence Agency and went to what was then the TRICARE management activity. It's now known as the Defense Health Agency. I began my career there as a budget analyst. I specifically was working the research development and test and evaluation portfolio for the Defense Health Program, which is an appropriation. I spent my time there doing that.

I was then promoted to a supervisory budget analyst working as the director essentially for the Defense Health Programming Office, and that's where I ended my career there.

Q. What is -- how does the Defense Health Programming Office compare, like, how does that relate to TRICARE under VHA?

A. So the Defense Health Programming Office is responsible for building the internal budget request, as well as the President's budget submission. Those documents request funding to support health care delivery to military service members, their families and retirees, and TRICARE falls under that umbrella.

Q. I see.

And so it sounds like from your first job out of college you were already working as a consultant with the federal government?

A. I had a brief stint prior to becoming a consultant working for Towson University in the Orientation Office. That is not on my resumé.

Q. I see.

But as early it says you -- oh, and you graduated in '97?

A. Correct.

Q. And you began -- you began working with as a consultant for the federal government by

January 2001?

A. Correct.

Q. And you have -- and that was the last time you were a consultant.

It sounds like you transitioned into employee roles with the federal government starting approximately March of 2007?

A. Correct. I transitioned to federal service.

Q. And you've worked -- your resumé reflects that you started your work under the DHA, which is a different department than the VHA?

A. I started my federal service with the Defense Intelligence Agency and then transitioned to TRICARE management activity, which is now called the Defense Health Agency.

Q. Were you working -- you weren't working with VHA in these early years?

A. No.

Q. And so were you working in an entirely different location and office building during those times?

A. For my tenure at Defense Health Agency, I was working in Falls Church at the

Defense Health Headquarters. When I was working at the TRICARE management activity, we were also working in Falls Church in a different building.

Q. When you transitioned to working with the DHDVA -- let me try this. VHA.

When you transitioned to working with the VHA, it looks like that was approximately July of 2019. Where did your office shift to?

A. So when I came to the Department of Veterans Affairs, I started off in the Office of Management, which is the senior advisor role. I did not transition to VHA until this -- this January.

Q. I see.

Explain the how -- explain the difference between that job working for the Department of Veterans Affairs and then your position now with the VHA.

A. So the department -- the Department of Veterans Affairs is the umbrella organization. So when I worked at the Office of Management or within the Office of Budget, I was part of the overarching umbrella or headquarters organization under which there are different administrations.

VHA being one of those. So that's the difference is working under -- working on the umbrella or working under the umbrella.

Q. Thank you.

And yesterday we deposed Andrew McIlroy, who is the Deputy Assistant Secretary for budget VA-wide.

He would be more in that umbrella role that you just described?

A. Correct.

Q. Do you know him?

A. I do. He was my boss until this January.

Q. Okay. So you worked briefly as the senior advisor, Department of Veterans Affairs, and that position was located in Washington, DC in the July 2019 to December 2019 time frame?

A. Correct.

Q. Was that beneath Mr. McIlroy?

A. No, that was for the Assistant Secretary's office. So that would be above Mr. McIlroy.

Q. And so the VA Secretary is currently Doug Collins.

The Assistant Secretary is currently?

A. Richard Topping.

Q. Richard Topping.

And you worked for those two gentlemen or those positions?

A. Those positions.

Q. As a senior advisor.

So that -- so how would you describe that position?

A. It was a job where you are doing a lot of cross-coordination, reviewing correspondence, responses, reports, ensuring it has the voice of the Assistant Secretary, and providing any advice, counsel related to ongoing matters within the broader Assistant Secretary of Management's purview.

Q. Your resumé reflects that in September 2019 you shifted to the acting Associate Deputy Assistant Secretary.

Can you tell me why that transition occurred so quickly?

A. The office had lost the Associate Deputy Assistant Secretary. That position needed

to be filled, and based upon my background and experience, I was asked if I would assume that acting role.

Q. What did you do in that role?

A. I was -- so I oversaw two portfolios under that role: the Veterans Health Administration as well as the Office of Information & Technology and the Electronic Health Record Modernization.

And essentially I provided direct oversight for the budget requests for those, both the internal bill as well as the President's budget request, worked on apportionments requests from -- meaning we requesting our money from OM -- the Office of Management and Budget.

I worked on Congressional Reports, correspondence, and any projects that required attention or fell within those -- within those buckets of responsibility or within those portfolios of responsibility.

Q. I remember reading that there was a lot of issues with that electronic modernization effort.

Do you have any recollection of your

work on that during that job position?

A. Yes.

Q. Can you share that with me?

A. So we oversaw the budget requests for the Electronic Health Record Modernization program. So this would be how much funding they would request annually from Congress. That -- those budget requests were based upon a lifecycle cost estimate that had been built at that point in time.

Q. And what were the -- were there complaints or efficiency issues that you had to work through during that role with the electronic modernization program?

A. From a funding perspective, not necessarily. Those were all technical issues and outside my -- my scope of expertise.

Q. Someone not you was work -- was dealing with that?

A. Yes.

Q. Okay. And so you transitioned out of that role a little less than a year later and moved into the -- into your current role, Associate Deputy Assistant Secretary, but I'm

telling -- let me -- will you explain to me this, how the July 2024 to December 2024 fits into the Associate Deputy Assistant Secretary time frame?

A. So I had been made permanent into that, the Associate Deputy Assistant Secretary role in, I think it was -- let me see -- August of 2020. In July of 2024, the then Assistant Secretary for Management departed, and there was a leadership shuffle at that point in time.

So Mr. McIlroy became the principal Deputy Assistant Secretary for Management, and when he assumed that temporary job, I then moved into the acting position of the Deputy Assistant Secretary role. So I was still permanently within my Associate Deputy Assistant Secretary role and detailed into that position for that period of time.

Q. And help me understand how your job duties changed during that period.

A. So during that period, rather than being focused on just a single portfolio, I was in charge of the entire Office of Budget from day-to-day management, supervision of staff, assigning workload, and that then included

oversight of all equities that fell within the Office of Budget purview.

Q. Essentially, the job duties that Mr. McIlroy would have testified that he performs, you were working on the same --

A. Correct.

Q. -- information?

Okay. And so you have significant experience working on budgeting for the entire -- entirety of the Department of Veterans Affairs, and it wasn't until recently that you have -- that you have only worked for the VHA component of the Department of Veterans Affairs?

A. So under my job within the Office of Budget, VHA was part of my portfolio. I did not move over to VHA as the acting CFO until this past August.

Q. And that's under experience "Acting, VHA Chief Financial Officer (Detail) August 2025 to January 2026"?

A. Correct.

Q. Do you consider yourself knowledgeable and to have expertise on budgeting affecting the entirety of the Department of

Veterans Affairs in addition to VHA?

A. To an extent, yes.

Q. You worked on budgeting for that department since?

When would you say that you -- would that be the August 2020 or would it be the July 2019?

A. I would say the July 20 -- I would say August 2005. Hold on. I'm sorry. Like it's hard -- I have to look up at the left screen.

September 2019 is when I started to become more familiar with and involved in budgeting for VA-wide.

Q. And at the present time, you're responsible for providing leadership and direction over all VHA budget, finance, and managerial cost accounting operations; is that right?

A. Correct.

Q. And your resumé reflects and your job position that you produced that includes oversight of over 200 full-time equivalent professional staff?

A. Could you rephrase that for me?

Q. Sure. Uh-huh.

Your current job position includes oversight of more than 200 VHA staff?

A. Yes.

Q. Would that be the offices that we discussed earlier?

A. Yes.

Q. And those are primarily administrative positions?

A. No.

Q. How would you describe those?

A. Revenue ops is more operational as well as payment ops being more operational, with the remainder of the offices being more administrative oversight with some involvement in terms of operational, like, operational direction.

Q. Your current job title of chief financial officer for the VHA, you are senior leadership for that department?

A. Yes.

Q. Do you oversee the preparation and execution of the VHA budget?

A. From a top level, yes.

Q. What do you mean by "from a top level"?

A. So from a total resource perspective, yes, but the day-to-day execution of funds does not necessarily fall within the scope of this office's operations.

Q. Where would that fall?

A. It falls within program offices as well as other divisions within VHA.

Q. Who runs the program offices?

A. Various senior leaders.

Q. How -- your -- let's look at -- let's look at your job position that you produced.

I have previously shared that document as Exhibit 7, and I will put it on the screen for you.

Do you recognize this document?

A. I do.

Q. What is this?

A. This is my position description or the position description for the CFO.

Q. Do you review this before you accept your current position?

A. I did look at it briefly after the fact.

Q. Do you -- we'll read the position summary together. It says:

"Chief financial officer (CFO), fully responsible for over $150 billion in financial assets."

And I think your resumé reflects that it's increased since this was written?

A. Yes.

Q. To how much now?

A. Approximately 160 billion.

Q. "Incumbent" -- and that's you. That's whomever has this position, right?

A. Correct.

Q. "Incumbent is responsible for providing leadership and direction of all VHA budget, finance, and managerial cost accounting operations through more than 200 full-time equivalent professional staff members in subordinate in-house directorates and out-based data analyses centers."

That's your current job responsibilities?

A. Yes.

Q. And so you are responsible for

direction of all VHA budget and finance and managerial cost accounting operations?

A. Correct.

Q. And it says as a part of this job, you report to the department's DCFO.

What is that job title and who is that currently?

A. Could you increase it real quick?

Q. Of course.

A. I report to the Mr. -- Mr. Ed Murray, Edward Murray, who is the Principal Deputy Assistant Secretary and the deputy CFO for VA.

Q. And if we go down to the Bates number 5 for this document, there's a more in-depth description of your major duties and responsibilities, correct?

A. Correct.

Q. You direct and monitor the financial execution of the VHA's budget?

A. Correct.

Q. And so the way that I have been trying to understand the difference between your role and Mr. McIlroy's yesterday is: He helps to determine how much total funding the Department of

Veterans Affairs requests, how the funds are structured in the budget, and you ensure that you help execute the budget that has been appropriated for the VHA and ensure that the VHA stays within its appropriations.

Am I understanding that correctly?

A. Correct.

Q. Do you often have -- because it's important for you to understand how the budget works in execution, what is -- how do you go about that in your job position? What -- how do you ensure that?

A. So we monitor execution monthly. We can pull reports and develop reports regarding execution -- I'll use the term -- obligations. That's the appropriate word for it. How much funding VHA as well as any of its subordinate organizations have obligated.

We track to make sure that we are not over -- over-obligated, that we will stay within the bounds of the total funds that have been appropriated. If there is a need to move funds between entities, VHA entities, we will do that.

We can -- we will also then work to ensure if we need to transfer funds. We will work the appropriate notifications and approval requests for that, as well as if we are running, hypothetically, short of funds, we would then flag that and work appropriate courses of action.

Q. Are you the individual that would decide, or individuals that work for you, which -- which and how much facilities receive allocations?

A. So we do provide the resource allocations. We do present that to VHA leadership for their knowledge and understanding, and if there's any adjustments that they would like to have made, we would do that, but typically that does not -- adjustments would not occur initially. They would occur during the year of execution.

Q. On an as-needed basis?

A. Correct.

Q. And if you have to increase the amount allocated to one facility, you have to come up with that allocation from somewhere else? You have to pull that money from somewhere else?

A. So we would stay within the bounds of the funds that we have been appropriated. We

cannot just move funds between our accounts. So we would do things like internal swaps, or if we had not moved all -- pushed all the funds out, we could work to move funds to the proper organization. But the top-line control and then the control by appropriated accounts stays the same unless we seek approval to move money.

Q. Who do you seek that approval from?

A. Depending on the statutory requirements, most likely it would be Congress.

Q. And so you need Congressional approval to move -- to do internal swaps? That's not within -- you don't have the authority to do that unilaterally?

A. So yes, we require -- we have a cap in terms of how much we can swap, and the current law has a restriction in terms of what that looks like.

Q. And if it goes above the cap, then you have to seek statutory approval from Congress?

A. Correct.

Q. When there are complaints at individual facilities about inadequate number of doctors or resources, does that make its way up to

you as it relates to the execution of the budget?

A. It can.

Q. And is that when -- are those -- is that an example of a moment where you might try to do internal swaps under the cap?

A. So first it would be an HR matter in terms of positions. However, if it turned into a funding matter, it would then -- they would then loop in my office and my team on that.

Q. How often does that occur in your role?

A. In the six months that I've been here, I can't think of a time where we have been asked to move money to make that happen, with the exception being the EHR deployments.

Q. What is that?

A. That's the new Electronic Health Record.

Q. And you were asked to move money to support that? Can you tell me about that?

A. We were asked to provide additional funding to support hiring of nurses, informaticists to essentially provide surge support for the new Electronic Health Record

deployment.

Q. How much? Do you remember?

A. Not off the top of my head. I do not recall.

Q. Would it be in the millions or?

A. Yes.

Q. And so when a request comes in like that, it's your job to find a place to take that money away from to make room for the new funding?

A. So in this case, we had anticipated the cost of the new Electronic Health Record based upon past deployments. So we had budgeted for -- budgeted funding to support any requirements that would come about as the result of that. So we didn't have to necessarily reduce a facility's budget. We had that money already available within our budget request.

Q. It had already been worked into the budget and a reduction had been made to support it in anticipation of it coming due?

A. The budget request reflected that, and then it was appropriate -- it was included as part of our overall appropriated dollars.

Q. Do you know, was it all new money

allocated or was it a reorganization, if you know?
A. I don't believe it would be considered new money appropriated since the Electronic Health Record has been an existing project. However, given the deployment schedule, we would have adjusted the funds requested based upon that schedule.
Q. And so you testified that -- so you've only really been in this role for six months?
A. Yes.
Q. But you've been working with the VHA for approximately how long?
A. Since I think it was 2020.
Q. And has that always been in a budgeting/financial role?
A. Yes.
Q. As a part of your current role, do you interact with the OMB and the GAO regarding financial and budgeting issues?
A. Yes.
Q. You are aware of those agencies and their role in the -- as it relates to the VHA?
A. Yes.

Q. Will you describe that for me?

A. The Office of Management and Budget is the Administration's arm for development of the overall funding request for the federal government. We interact with a team over there that oversees the Veterans Administration portfolio.

So that would be the group that we would interact with in terms of submitting our budget requests, any budgetary decision-making. They would assist if we were going to do a transfer. They would -- we would engage with them to ensure that they had awareness of that.

We would brief them on -- we brief them monthly on the status of our budget execution, and then GAO is -- comes in and often does reviews depending on, it could be, you know, requested by Congress or something that they're interested in. So they often do reviews of VHA and not necessarily singularly scoped on funding matters.

Q. What about the GAO?

A. The GAO is like -- as I said, it would do reviews of VHA. It could be operational

matters. It could be funding matters. And then they generate reports that are provided to Congress and I believe are made public.

Q. Is it part of your job to review those reports and to make any changes that they recommend?

A. Yes, we are often -- for any report that applies to our area for which we've been involved in the review, we are provided the opportunity to review that report and offer comments.

Q. And now you're in this -- the role that you're in as CFO, that responsibility would fall to you to manage or prepare?

A. If it was applicable to this office, yes, but we do not review every GAO report.

Q. Why is that?

A. Some of them are operational reports that don't involve budgetary resources. So we would not review those types of reports.

Q. But you do review all GAO reports that are relevant to VHA and budgetary and financial matters?

A. Yes.

Q. You -- it says on the screen that you -- part of your job position is to support the administrative -- Administration's strategic and business planning processes.

Is part of your job ensuring that the VHA budget reflects the current Secretary's goals and policies?

A. Yes.

Q. And it's my understanding that right now the VA Secretary Doug Collins has a large initiative that he's pursuing; is that right?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: I can't speak to which initiative you're talking about. There -- I don't know which one you would -- I would need additional information in order to answer.

BY MS. WALLACE:

Q. Are you aware he's recommending a complete restructuring of the VHA?

A. Yes.

Q. Currently?

A. Yes.
Q. And that complete restructuring has a lot to do with the organization's finances and budgeting; is that right?
A. I would not --
MR. KLOTZBUCHER: Objection. Foundation.
You may answer.
THE WITNESS: I would not necessarily characterize it as a budgetary matter or a resource matter.
BY MS. WALLACE:
Q. Can you tell me? My understanding was that he is promoting the dissolution of approximately 40,000 positions. I would have thought that had an impact on budget and finance for VHA.
A. My understanding --
MR. KLOTZBUCHER: Objection to form.
You may answer.
THE WITNESS: My understanding is that is where previously -- those positions have been

vacant for some period of time, and depending on how long those positions have been vacant, it's possible -- it's likely we had not requested budgetary resources. Those positions may have been on the books for many years without being filled.

BY MS. WALLACE:

Q. What do you understand to be Secretary Collins' restructuring plan that he's pursuing for 2026/2027?

A. Of the VHA?

Q. Yes.

A. My understanding is that this is to gain efficiencies, to look at how we change the operational dynamic of VHA, ensure that we do not -- that we are aligning like functions with like functions. Ensuring that we create a seamless organization that breaks down barriers and helps -- helps the veteran's experience in their interaction with VHA.

Q. Have you been consulted regarding how his restructuring plan could affect budgeting or finance for VHA?

A. I have not been directly consulted by VHA leadership.

Q. Have you seen the -- have you visualized the plan from a budgeting perspective, the reorganization plan?

A. I have seen the new versions of the new org chart, yes.

Q. Is it your testimony that you don't expect the restructuring plan of Secretary Collins to affect the budget moving forward?

A. I do not expect a change in the processes we use to budget. I do not expect a change in our overall way that we go about monitoring and executing resources. And I do not expect that, you know, I do not see where we would significantly adjust today the budget for VHA.

Q. Have you seen the risk analyses that the VHA department has performed related to the restructuring?

A. I have seen parts of it.

Q. It's my understanding that it hasn't been publicly produced to date; is that right?

A. My understanding is a lot of documentation has -- is -- remains predecisional.

Q. Regarding the restructuring plan?
A. Correct.
Q. Meaning not available for public?
A. Correct.
MS. WALLACE: Do you guys want to take a break?
I try to break every hour, Ms. Ford. I went a little bit over. Do you want to take, like, a 5- or 10-minute break?
THE WITNESS: That would be fantastic. Thank you.
MS. WALLACE: Okay. I'll see you back at maybe what time, everybody? 10:25?
MR. KLOTZBUCHER: Okay.
THE VIDEOGRAPHER: All right. We're going off the record at 10:16.
(A recess was taken.)
THE VIDEOGRAPHER: We're back on the record at 10:27 AM.
BY MS. WALLACE:
Q. Ms. Ford, I want to finish just going over a couple things on Exhibit 7, and then

I want to talk a little bit more about the budget that you oversee.

So to confirm, do you agree that all of the descriptions on the screen in Exhibit 7 under Description of Major Duties and Responsibilities, do you agree that those are all of your job functions in your current role?

A. Yes, as of today.

Q. As of is it approximately six months?

A. Yes.

Q. And if so and just from A, it looks like it is your job responsibility to take the budget that's been allocated by the VHA and to make sure that the implementation of that budget efficiently supports health care delivered to the nation's veterans, correct?

A. Correct.

Q. And it also appears that in -- I was looking at L -- it's your responsibility to prevent anti-deficiency violations --

A. Correct.

Q. -- and to notify the department's DCFO on a timely basis that a violation may have

or has occurred?

A. Correct.

Q. When it says "anti-deficiency violations," is that under the Anti-Deficiency Act?

A. Correct.

Q. Describe for the court. What is the Anti-Deficiency Act and how does it relate to your role?

A. So it's a law that it makes -- essentially ensures that funds are used appropriately and within the bounds for which they are intended to be used. And for the purposes of the CFO role, it's important that we are using the appropriated funds as Congress intends.

So that would be ensuring that there is a bona fide need, that we are adhering to timelines for execution of funds, that we're not using them for purposes that were not -- that are not legally permitted.

Q. In your role, what happens in the circumstance if Congress fails to pass a full year appropriation by the start of the fiscal year?

A. For VHA, they receive or the

Administration has what's known as the advance appropriation where they receive the next year's fiscal year funding is appropriated in advance of the start of that fiscal year.

So, for example, as part of the 2026 appropriation, there was an advance appropriation for 2027. So VHA has funding appropriated for F -- for fiscal year '27 today.

Q. And I know --

A. So there are --

Q. Go ahead.

A. So there are no impacts under a CR.

Q. And when you use the word "CR," you're referring to Congress passing a continuing resolution?

A. Correct.

Q. Is that what you just described?

A. What I described is the advance appropriation and the impacts it has under a CR scenario for the federal government, or does not enact a continuing resolution.

Q. So what is a continuing resolution?

A. A continuing resolution would provide funding for the government to continue

operations for a specified period of time, allowing Congress additional time to appropriate a full year's budget for departments and agencies.

Q. Would you agree that continuing resolutions can create uncertainty for VA budget planning?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: For VA-wide, it can have impacts for other areas of the department.

BY MS. WALLACE:

Q. Are you saying it would not have an impact on the VHA, or it hasn't since you've been there?

A. It would not have an impact on the VHA because of the advance appropriation.

Q. Have you -- do you have knowledge in the past of the department notifying a potential violation?

A. There have been ADA violations in my six years with VA.

Q. Have you had one since you've been

there?

A. In my role as the CFO?

Q. Yes.

A. No.

Q. But there have been violations throughout the course of your six years with the VA?

A. Yes.

Q. And so based on the job position description, you are the senior official responsible for VHA's budget formulation, financial execution, managerial cost accounting, internal controls, and compliance with federal fiscal law.

Do I understand that correctly?

A. Correct.

Q. And it states on page Bates stamp 6 that your assignments are influenced by the policies and directives issued by the department CFO in governing federal organizations, such as OMB, Treasure, GAO -- I think I meant Treasury -- GAO, etc.?

A. Correct.

Q. And your work is evaluated on the

results achieved.

And would that be results achieved meaning staying within appropriation? No violations? How would you define the results achieved for your role?

A. That would be -- I would say that that would be part of that. Results would be staying within budget, staying within fiscal law meaning no Anti-Deficiency Act violations, ensuring our audit is completed, that we are working to reduce any corrective actions.

So the full span of financial management would drive my evaluated -- would drive the evaluation of results.

Q. It also states in other significant facts that you have to independently -- I think it meant to say -- execute significant actions relating to all CFO financial management functions of VHA's headquarters and field facilities.

Tell me what you do to manage financials for field facilities.

A. So currently we provide funds down to the facility level. We monitor those, the execution of those funds, and then we work to

resolve any funding issues that a facility may have.

Q. And how many facilities are there?

A. Over a hundred.

Q. So when you say "facilities," you don't mean the thousand VA centers?

A. It would only be VHA facilities. So health care medical centers, community-based outpatient clinics, and any other facilities that VHA would be the primary occupant or owner of. Although we probably don't own property.

Q. And so in order to accomplish the oversight of all of that, I imagine that you have people that are responsible for certain things and they all report to you for in your leadership role?

A. Not all CFOs or folks who execute funds report directly to me currently.

Q. Not all?

A. Not all.

Q. Who doesn't?

A. A VISN CFO does not report to me, a facility CFO does not report to me, and any budget staff or finance staff within program offices do

not report directly to me.

Q. Is that part of what Secretary Collins is working to shift the organizational structure to achieve?

A. Yes.

Q. Are you -- have you been consulting with him on the changes that he's recommending and making recommendations to him?

A. For the CFO function, I have been working with the Assistant Secretary for Management as well as VHA leadership generally in terms of what the CFO function will look like moving forward.

Q. Well, it will have increased oversight?

A. That is the goal.

Q. And I understand that it will eliminate many, the majority of the VISNs? V-I-S-N.

A. It will reduce the number of VISNs.

Q. Just so the court understands, will you tell the court what a VISN is?

A. Essentially, it's think of it like a region within the United States where health care

is delivered, and there are currently 18 VISNs. They make up different parts of this country. They oversee the health care operations. They have a number of facilities that fall within that area. They provide funding oversight, guidance direction. So that is essentially what a VISN is.

Q. And am I understanding correctly that you've been in collaboration on the restructuring plan in order to reduce the VISNs?

A. I have not specifically been in any discussions regarding the VISN restructuring. I have only been in discussions regarding the broader organization and some discussions specifically focused on the CFO shop.

Q. Could you say that last word again? CFO?

A. CFO shop.

Q. Shop?

A. Office. Shop or office.

Q. Okay. So you've been involved on how it -- how your office might be able to absorb additional job duties and functions under the new restructuring plan?

A. I've been involved in discussions in

terms of how we could reorganize the finance community, what that would look like potentially moving forward, and where there's efforts to consolidate like functions. Those would be -- that's the nature of those discussions.

Q. Okay. Do you agree with these additional job duties that are listed on pages 6 and 7 that they are consistent with your current role and expertise?

A. (Reviews document.)

Yes.

Q. Thank you.

Part of what you have been designated to talk about before the court in the Camp Lejeune litigation has to do with how the VHA receives its funding from Congress, and your designations E and F state:

"VHA's activities are primarily funded through annual Congressional appropriations.

"These appropriations are from the general fund, meaning care rendered by VHA is primarily funded through general taxpayer revenues and federal borrowing."

Is that your -- what your testimony will be?

A. Yes.

Q. VHA is not funded through a trust the same way that Medicare is.

Are you familiar with how Medicare is funded?

A. Not explicitly.

Q. Were you familiar with how TRICARE was funded when you worked for TRICARE?

A. Yes.

Q. How do you compare how TRICARE is funded versus VHA funding?

A. They're very similar.

Q. How is -- how describe in your own words does VHA receive its funding?

A. VHA submits an annual budget request to Congress through the Administration. That budget request outlines the amount and use of those funds. It breaks it down by account. And then once Congress appropriates funds, we receive those based upon the request we submitted.

MS. WALLACE: Okay. I want to share a document with you that I have

previously marked as Exhibit 8.

(Document marked for identification as Exhibit 8.)

BY MS. WALLACE:

Q. I'm going to upload it in the chat feature. It is called "Budget in Brief 2026."

We looked at it yesterday with Mr. McIlroy.

Have you seen -- have you ever seen this document?

Let me scroll to the top for a moment.

A. Yes, I'm familiar with the document.

Q. Did you help prepare this document at all or contribute to this document?

A. Yes, I helped prepare the document.

Q. Which parts did you prepare?

A. I reviewed the Overview.

Could you scroll down some more, please?

Q. Yes.

A. I reviewed the VHA section, the OIT section, anything dealing with the Electronic Health Record, as well as reviewed the table that

you're showing on page BiB-4. I reviewed the table on BiB-5. I worked -- helped work on the Cost of War Toxic Exposures Fund, or the TEF, details. I reviewed the table on BiB-7. The table on BiB-8. I reviewed the Secretarial Vision section. I reviewed the Veterans Health or the Veterans Health Administration.

Q. Did you review the entirety of the document?

A. No.

Q. Just certain sections --

A. Correct.

Q. -- as you've indicated?

A. Correct.

Q. Did you do the original drafting for any of the document?

A. No.

Q. I wanted to use the document for you to help explain which accounts that the VHA budget includes --

A. VHA --

Q. -- for its -- go ahead.

A. It receives mandatory discretionary medical collections and in some cases the

transformational fund.

Q. And so when we look at page BiB-3, we see a chart that shows VA Funding and beneath funding history it has a distinction between mandatory and discretionary funding.

As it relates to the VHA, can you tell me, would you agree that the majority of VHA appropriations are falling under Discretionary Funding that we see on BiB-4?

A. Yes.

Q. And so that would be Discretionary Funding includes nonemergency appropriations, if you look at Footnote 1, provided in annual appropriations acts and in the 2026 President's budget request.

And it looks like Mr. McIlroy explained yesterday that for VHA would include these different accounts: Medical Services, Medical Community Care, Medical Support and Compliance, and Medical Facilities, correct?

A. Correct.

Q. And that makes up the bulk 119 billion of the VHA's funding categories, correct?

A. That does make up the bulk.

Q. And so let's -- I wanted to understand Medical Services, which is the largest quantity in the billions, 69 billion of the funding for the fiscal year 2026 request.

What does Medical Services include for under the VHA?

A. Predominantly, it would provide health care within the VA system so at VA facilities, as well as support certain programs that VA is required to provide by law.

Q. And so this -- this category if we were just going to say in common sense what it was, if there are over a thousand VA facilities where there are doctors and nurses and staff and landscaping and property costs, is that -- what of that is falling under Medical Services?

A. So direct medical care would -- doctors, nurses, health care delivery would fall under there, not necessarily some of the facility-related costs.

Q. Because that would fall under Medical Facilities which has an $8.89 billion designation?

A. For 2025 yes, an 8 -- 8. -- or I'm

sorry -- 2024 enacted 8.5, yes.

Q. 8.9 or? You want me to zoom in?

A. Yeah. (Laugh). Sorry.

Q. No, you're fine.

A. 8. -- yes, 8.9 in 2024. 9.5 in 2025 enacted.

Q. And the request for 2026 is 11.7?

A. Correct. For 20 -- yes, 2026.

Q. And the amount requested for Medical Services I see has decreased from 2024. It went from 69 billion in 2024 to 69 enacted in 2025, but the request for 2026 is 57 billion, which is a negative change of 12 billion?

A. Correct.

Q. Do you know why that allocation has gone down?

A. There could be a lot of reasons for that to go down in terms of changes in health care demand. It could be lots of staff that attrited. There could be several reasons for that.

Q. Weren't you involved in preparing the 2026 request for Medical Services in your role?

A. Yes.

Q. So don't you know the answer to that? Why it went down 12 billion?

A. Well, there would be a lot of different reasons. There may not be one specific driver for a decrease in funding.

Q. And so for -- this is this year. So do you know what the most significant driver was for the $12 billion decrease?

A. I believe some of it was loss of staff.

Q. Meaning layoffs?

A. Meaning departures over the last year.

Q. What is your understanding as to why physicians have been departing the VA facilities?

A. In some cases, they may have left retired. They may have left for other jobs. They could have left under the Deferred Resignation Program or under a voluntary early retirement.

Q. Do you know how many left?

A. I don't know off the top of my head how many physicians left.

Q. Do you know how many staff and

physicians left?

MR. KLOTZBUCHER: Object to form.

You may answer.

THE WITNESS: For VHA, I believe it was in excess of 4,000 total people left.

BY MS. WALLACE:

Q. And that was in which year?

A. 2025 into 2026.

Q. That's a significant loss for VHA. Would you agree with me?

A. It is.

MR. KLOTZBUCHER: Object to form.

You may answer.

THE WITNESS: I would agree it's significant.

BY MS. WALLACE:

Q. Were they offered retirement packages? Was there -- do you understand the reason for such a significant exodus of physicians and staff from VA hospitals and facilities?

A. It could be -- again, I don't know

everyone's individual circumstance. It could be that they -- they accepted the Deferred Resignation Program. Coupled with that could have been a voluntary early retirement. Some people may have been already eligible for retirement and were planning to retire or some may have just found other positions and left.

I don't know, again, what the preponderance of that attrition was.

Q. That didn't come to you in a report?

A. I have not seen a breakdown of attrition over the last year in terms of reasons why for VHA.

Q. When you say "for VHA," you mean? What do you mean?

A. Meaning I have not seen a VHA report breaking that information down.

Q. So as far as funding goes, the exodus of approximately 4,000 staff has resulted in 12 -- approximately 12 billion or less dollars being allocated for Medical Services in 2026?

A. It would be a portion of that, not the whole amount. Because 4,000 would be across the entirety of VHA, which could occur in all

accounts with the exception of Medical Community Care.

Q. Correct.

Because the community care does not directly employ physicians under the VHA. So they would not be included in the 12 -- in the 4,000 or in the 12 billion loss?

A. So Medical Community Care is strictly funding community care. It does not include VHA employee costs.

Q. Right.

Was the accepted deferred resignation, was that a part of the current restructuring plan of Secretary Collins?

A. That preceded the current restructuring.

Q. Was that associated with DOGE?

MR. KLOTZBUCHER: Objection. Foundation.

You may answer.

THE WITNESS: I believe, yes.

BY MS. WALLACE:

Q. And DOGE do you understand was established under the Trump Administration and

Elon Musk as the Department of Government Efficiency.

Is that your understanding?

A. Yes.

Q. And part of the recommendation from DOGE was to increase efficiencies in government agencies, including health care agencies; is that right?

MR. KLOTZBUCHER: Objection. Foundation.

You may answer.

THE WITNESS: I'm sorry. Could you repeat the question?

BY MS. WALLACE:

Q. Yes.

DOGE, their goal was to increase efficiencies in government agencies, particularly health agencies?

MR. KLOTZBUCHER: Same objection.

You may answer.

THE WITNESS: That would be part of their plan, but not necessarily the driver of it.

BY MS. WALLACE:

Q. Let me just make sure.

So I understand that you've been with the Veterans Health Administration for six years total.

So you were an employee and working for VA when DOGE initiatives went into effect, correct?

A. Correct.

Q. Which was in approximately the 2024 time frame?

A. January 2025.

Q. And so that was that were you in your -- you were not yet in your current role but you --

A. Correct.

Q. What role were you in during that time?

A. I was in the Associate Deputy Assistant Secretary role.

Q. Do you understand that DOGE sent operatives into the VA to identify wasteful contracts and eliminated bureaucracy and reduce costs?

MR. KLOTZBUCHER: Objection as to form.

You may answer.

THE WITNESS: It is my understanding there were DOGE employees within the VA.

BY MS. WALLACE:

Q. Do you recall that part of the DOGE plan the leadership announced plans to cancel 875 contracts worth approximately $2 billion?

A. I am aware.

Q. And did you have any role in developing the impact to the budget or to resources or to delivering quality care to veterans that that would have made to the program?

A. Yes.

Q. And what was your response?

A. My -- my role was to collect the cost impacts of those contract reductions to then understand what those would look like and, as part of those cost reductions, help develop a transfer request of savings.

Q. What savings?

A. Contract savings.

Q. Meaning if the -- if the contracts were canceled?

A. Correct.

Q. And so explain to me, again, what your recommendation was, please.

A. The out -- the out -- the result of my work was the total amount based upon a point in time and based upon data collected from each administration and staff office of the contract -- of the cost of the contracts that had been canceled.

Q. Was that the $2 billion that I just stated?

A. No.

Q. What was it?

A. It was less than that at that point in time.

Q. And so am I understanding that you were tasked to evaluate the cost -- the savings to the program if they canceled 875 contracts?

A. My task was to collect that data from the various administrations and staff offices and then calculate the total amount.

Q. Did you have an opinion on whether

or not the cancellation of those contracts would have been good for the veterans?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: I did not.

BY MS. WALLACE:

Q. You have no opinion?

A. Professionally, no.

Q. Because it's not a part of your accounting job to have opinions. You're there to crunch the numbers.

Is that what you mean?

A. My job was simply to gather the information, calculate the costs, and make sure that the data was accurate to the best of our ability at that point in time. So I tried to leave any personal feelings outside of my professional work.

Q. Did you have a personal opinion on what the cuts would have -- how they would have impacted veterans like your family members?

MR. KLOTZBUCHER: Objection. Form and foundation.

You may answer.
THE WITNESS: Yes.
BY MS. WALLACE:
Q. What is it?
MR. KLOTZBUCHER: Objection. Again, form and foundation.
THE WITNESS: I -- I felt that in some cases there may have been hasty decisions made without a full understanding of impacts, but that was not just for the VA but government-wide.
BY MS. WALLACE:
Q. Thank you.
The accepted Deferred Resignation Program came out of that initiative; is that -- is that correct?
A. It was one of the DOGE initiatives or it was one of the initiatives of the Administration via DOGE.
Q. What were the other ones, if you recall?
MR. KLOTZBUCHER: Objection. Foundation.
You may answer.

THE WITNESS: There -- there was a look at changing the -- how certain government positions are, whether they should be career or schedule policy.

There was a review of union contracts at that point in time. There was Buy America or Buy American Initiatives. There were initiatives to review certain programs and then determine whether those should be funded.

That's all that comes off the top of my head, but there were -- there were many.

BY MS. WALLACE:

Q. Many initiatives under DOGE that would have -- that the goal was to create -- improve efficiencies in the department through -- through a variety of means?

A. Within the department and across government. It was not just singularly focused on VA.

Q. My understanding is that after pushback from lawmakers and veteran advocacy groups, the VA temporarily paused some of the

contract cancellations?

MR. KLOTZBUCHER: Object to form.

BY MS. WALLACE:

Q. Is that your understanding?

MR. KLOTZBUCHER: I'm sorry. Objection. Form.

You may answer.

THE WITNESS: I believe that is accurate.

BY MS. WALLACE:

Q. Was the goal, if you recall, aimed to reduce the VA workforce, including potentially thousands of employees to approximately 2019 staffing levels?

Do you recall that being a goal of DOGE?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: I can't say if I remember that was a DOGE goal, but there were -- there were -- if I recall correctly 2019 and maintaining VA at that

staffing level was a goal overall for VA.
BY MS. WALLACE:
Q. What was a goal? Say that one more time. I'm sorry.
A. To maintain -- to keep VA at the 2019 staffing level.
Q. And that's regardless of the growing number of veterans in the programs or under the PACT Act?
A. I believe, yes.
Q. Because the PACT Act was initiated in 2022 and staffing levels they wanted to freeze at 2019?
A. Correct.
Q. Do you recall there being the advocacy groups were significantly concerned about the impact to access to care and increased wait times and delays on receiving medical treatment at VA facilities?
MR. KLOTZBUCHER: Objection. Form.
You may answer.
THE WITNESS: In terms of the staffing impacts or the contract impacts?

BY MS. WALLACE:
Q. Yes.
A. Yes.
Q. That was the pushback from the public and the VAs?
A. I would say external stakeholders and interested parties.
Q. Is it true that the DOGE recommendations did not have any goals explicitly aimed to improve veterans' access to care or expand health care coverage for veterans?
MR. KLOTZBUCHER: Objection. Form.
You may answer.
THE WITNESS: To the best of my knowledge, I'm not aware of those.
BY MS. WALLACE:
Q. Are you aware of any initiatives under DOGE to shorten wait times for veterans?
A. To the best of my recollection, I am not aware of any.
Q. Or to expand mental health services?
A. There have been efforts to expand mental health services, but I don't know if those

directly came from DOGE.
Q. That's been more recent, correct?
A. Correct.
Q. Part of the DOGE efforts did not involve broadening benefits coverage; is that true?
A. Not --
MR. KLOTZBUCHER: Object --
THE WITNESS: -- that I am aware.
Go ahead, Bill. Sorry.
MR. KLOTZBUCHER: No, I apologize for talking over you.
I said: Objection.
Foundation.
You may answer.
THE WITNESS: Not that I'm aware of.
BY MS. WALLACE:
Q. And so there was also some -- some goals that came out of DOGE regarding increased AI tools being introduced into the VHA.
Do you recall that?
A. Yes.

Q. Do you know what the result of that initiative was with regard to AI?

A. I do not know the results of that.

Q. So regardless of the fact that some of the DOGE initiatives were paused, as we sit here today, from 2025 to 2026 we've had 4,000-person attrition in the physicians and staff across VA hospitals, correct?

A. As of -- it could -- as of a point in time there, that was the number. I can't speak to what that number is exactly today.

Q. It could be higher today?

A. It could be.

Q. Do you know when the last time you recall hearing that 4,000 number was? Was it right when you arrived in the role or during the role?

A. I would say probably around my arrival time in August of 2020 -- or September of 2025. August/September 2025. Sorry.

Q. And so we don't have an update on the 4,000 over the past approximately six months?

A. I have not seen any updated numbers.

Q. Going back to Medical Services on

the screen -- I'm sorry that we digressed from our exhibit -- I wanted to understand.

You also have designations C and D that we're going to talk about a bit later, but for the purpose of this question, I wanted to understand that the veterans who are eligible for enrollment in the VHA related to their residency at Camp Lejeune for 30 or more days, does that fall under this Discretionary Funding that we're looking at on the screen here, or is that under the mandatory funding?

Do you understand my question?

A. I do.

It could be both.

Q. Okay. Tell me how it is under the Discretionary Funding that we're looking at on the screen.

A. So this could be -- so if they are receiving health care or had been receiving health care, that would have -- at a VA facility -- that's important -- they would have -- that health care would have been paid through Medical Services.

Q. And was your testimony that

they -- if they had been -- if they qualified under the -- explain it to me, again, how we know that they were under the VHA discretionary.

A. So -- so if they were eligible and receiving care --

Q. Already?

A. -- already --

Q. Let's say.

A. -- through the VHA, even today, they could -- that could be paid for using medical services.

Q. And how would they -- and just so we're clear, so we're looking at the discretionary section. There is also a mandatory funding section that starts on page BiB- 5.

How would our Camp Lejeune veterans have ended up under this section -- receiving funding under this section?

A. So you'll note that there is a Cost of War Toxic Exposures Fund section. That is considered mandatory funding, which included certain presumptives as part of the PACT Act legislation. It is possible, depending on the nature of the care being provided to those

veterans, that it could be paid for by the Toxic Exposures Fund.

Q. Have you seen any data or analysis as to whether the Camp Lejeune veterans' and family members' eligibility has mostly been compensate under the discretionary versus the mandatory funding?

A. I have not seen a specific split of how health care was delivered or paid for -- sorry -- for those specific veterans.

Q. The Toxic Exposures Fund, do you know when that originated?

A. 2022 within the PACT Act.

Q. And the legislation that allowed veterans access to medical care if they were exposed for 30 days or more at Camp Lejeune, it's my understanding that that legislation predated the PACT Act and it was established in approximately 2012?

A. That would have preceded my time at VA, and I'm not aware of that specific piece of legislation.

Q. Well, you're designated to talk about it under C.

A. Okay.
Q. You're designated to talk about access to health care for the "Veterans who served on active duty at Camp Lejeune for 30 days or more between August 1, 1953 and December 31, 1987" and their eligibility for enrollment in the VHA.
A. Yes, we can talk about that. But that specific piece of legislation I have not looked at, and I'm not familiar with what's included in that specific piece of legislation.
Q. I see.
So if I were to tell you that the -- that legislation was passed in approximately 2012 and the PACT Act was in 2022, would -- would it make sense to you that most of the funding related to those veterans would fall into the discretionary bucket --
A. Yes.
Q. -- of compensation?
A. Yes.
Q. Okay. All VHA funding ultimately depends on federal statutes enacted by Congress, correct?
A. Correct.

Q. Do you agree that Congress has the authority to amend or repeal those federal statutes?

A. Yes.

Q. And that authority applies to both discretionary and mandatory funding statutes, correct?

A. Correct.

Q. Discretionary VHA funding has to be appropriated annually by Congress, correct?

A. Yes.

Q. And Congress determines the amount of discretionary funding each fiscal year as a part of that requirement, correct?

A. Correct.

Q. Congress may increase, decrease, or maintain that funding level from year to year.

Do you agree?

A. Yes.

Q. Do you agree there is no legal guarantee that future discretionary appropriations will remain at the current levels that we see in the report we're looking at?

A. It's possible. So yes.

Q. Yes, you agree?
A. Yes.
Q. Mandatory funding exists only for as long as the authorizing statute remains in effect.
Do you agree?
A. Yes.
Q. Congress can amend or appeal mandatory funding statutes, true?
A. True.
Q. Congress can modify mandatory funding levels through subsequent legislation.
Do you agree?
A. Yes.
Q. Congress can rescind unobligated mandatory balances.
Do you agree?
A. Yes.
Q. Mandatory status does not make the funding Constitutionally protected.
Do you agree?
A. Yes.
Q. The eligibility criteria for VHA enrollment is established by statute.
Do you agree?

A. Yes.
Q. And like with appropriations, Congress can modify eligibility categories in the future, correct?
A. Yes.
Q. Copayment exemptions that you mention in your designations C and D, those are also statutory and can be amended, correct?
A. Yes.
Q. The list of covered conditions that you mention, the 15 covered illnesses and conditions, those can also be revised through legislation; is that true?
A. Yes.
Q. Do you agree with me that the VA reimbursement methodology as it relates to the Community Care Network, which includes Medicare base rates for community care, do you agree that those are established by statute and regulation?
A. Yes.
Q. Do you agree that Congress has the authority to change those reimbursement formulas?
A. Yes.
Q. And payment methodologies are not

permanently fixed by law, correct?

A. Yes, correct.

Q. A patient's access to care depends in the VHA program, not only on eligibility, but also on available funding and staffing.

Do you agree with me?

A. (Pause). Yes.

Q. If funding levels change, do you agree that operational capacity could be affected?

A. Yes.

Q. Do you agree that future funding levels for the VHA depends on future Congressional decisions?

A. Yes.

MR. KLOTZBUCHER: Objection.

THE WITNESS: Oh.

MR. KLOTZBUCHER: You may answer.

THE WITNESS: Yes.

BY MS. WALLACE:

Q. So as we look at current Exhibit 8, the budget that you helped to prepare, no matter whether funding is discretionary or mandatory, continued payment at current levels depends on

ongoing Congressional authorizations and appropriations; is that true?

A. Yes.

Q. Your job in the role that you currently have as CFO for the VHA, you cannot obligate funds in excess of your appropriated authority for the agency, correct?

A. Correct.

Q. Are you familiar with the VA financial policy documents that are published on the VA's website that address appropriations law and funds control?

A. Yes.

Q. What do you use those documents in your role for?

A. So those provide overarching guidance and direction not only to my office and my team, but also to the VISNs and the -- or the VISNs and the field CFOs in terms of use of funds, how to -- how to obligate. So general financial and fiscal policy surrounding monies appropriated by Congress.

Q. Does that have to do with the appropriate -- you have to stay within appropriate

federal laws and regulations as you appropriate funds?

A. Yes.

Q. In your role, you do not have the authority to create a new budget or to spend beyond the appropriated amount provided to you?

A. Correct.

Q. And so the VA's ability to pay benefits is constrained by the amount Congress has apportioned; is that right?

A. The funding we request is sufficient to provide health care for that fiscal year.

Q. The amount that you request?

A. The amount that we request and then is appropriated typically is -- matches what we requested and is sufficient to provide health care.

Q. Do you agree with Secretary Collins that the VA is not fully staffed?

MR. KLOTZBUCHER: Objection. Form and foundation.

You may answer.

THE WITNESS: I would say that there -- that there are staffing

challenges throughout the department.
BY MS. WALLACE:
Q. Are you aware that he testified before the -- as a part of his role, he has to testify before the Congressional committees for veteran affairs.
Do you understand that?
A. Yes.
Q. Is that on an annual basis?
A. It's typically when he is asked to testify.
Q. And were you with him at all when he's testified recently within the last six months before both the House Veterans' Affairs Committee and the Senate Veterans' Affairs Committee?
A. I have not been present for those.
Q. If he testified that the VA is "not fully staffed and we haven't been in 15 years!" do you agree with him on that?
MR. KLOTZBUCHER: Objection. Form.
You may answer.
THE WITNESS: Staffing is all -- I would say there are times when

staffing has been challenged over the last six years I've been here. I think it depends on the administration, the office, but there's always staffing issues. But generally, yes, staffing can be a challenge.

BY MS. WALLACE:

Q. Do you agree with his statement that the VHA is not fully staffed and has not been in 15 years?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: I can only speak to the last six months and then my observations from my time at the Office of Management. I would not necessarily agree with that.

BY MS. WALLACE:

Q. And what is that opinion based on?

A. Observation of hiring -- of hiring and information contained within the budget documents in terms of requested full-time equivalent levels.

Q. Is it your testimony that even with the loss of 4,000 physicians and staff, is it your position that the VA is fully sufficiently staffed currently?

MR. KLOTZBUCHER: Objection. Form and foundation.

You may answer.

THE WITNESS: Was the question specific for VA or VHA? I'm sorry.

BY MS. WALLACE:

Q. VHA, and I'm actually very specifically talking about VHA facility -- their direct care facilities.

A. I can't speak to the VA -- VHA facility level. That would be a facility-by-facility question.

Q. And so you don't have an opinion on whether, like, at the facility, VA facility level whether the VHA is being properly staffed?

A. I think it depends on the facility.

Q. Some are fully staffed perhaps and some are not.

A. I would generally agree with that

statement.

Q. Based on your experience working with the VA and the VHA specifically, what is the effect on the veteran when a VA facility is not fully staffed?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: It can have an impact on health care delivery. It could mean that veterans do not receive care at that facility under a VA physician. They could be referred to the community for that care instead. Or it may delay the time that they have access to VA providers.

BY MS. WALLACE:

Q. The VHA under your direction has to manage staffing contracts and payments within its available funding, correct?

A. We work with -- on the staffing piece, we work with human resources on that, but yes, we need to stay within our -- our budgeted amount.

Q. And as it relates to the budget right now, you guys actually saved money.

You're saving $12 billion in your budget from last fiscal year to 2026 related to --

A. I would --

Q. -- the departure of staff in VA facilities?

A. I would not --

MR. KLOTZBUCHER: Objection.

You may answer.

THE WITNESS: I would not necessarily characterize it as a savings but a --

BY MS. WALLACE:

Q. It's reallocated?

A. -- budgetary change.

Because the overall budget did increase from 2025 to 2026.

Q. That's fair.

It is a re- -- it's a $12 billion opportunity to reallocate those funds elsewhere in the budget.

Is that a better way to say it?

A. Potentially.

Q. Would you mind explaining to us just briefly what the makeup is of these other -- there's four VHA buckets, essentially, of where the funds are spent under this Discretionary Funding column: Medical Services, Medical Community Care, Medical Support and Compliance, Medical Facilities.

We talked a lot about the doctors in the direct care and the nurses at the VA facilities.

Tell me what is falling under the Medical Community Care Discretionary Funding bucket --

A. That --

Q. -- up to 30 billion.

A. That's health care delivered by providers outside of the VA system. So it would be local providers within a community, and then VA -- they submit claims to VA that VA then pays through companies like TriWest and Optum.

Q. The majority of this funding makes up the -- what's called now the Community Care Network?

A. Correct.

Q. And my understanding is that the Community Care Network allows a veteran to receive care outside of a VA facility for a variety of reasons, such as if the care wasn't available in his rural community or may potentially it's a specialized care that might be not offered at the VA facility near his home.

And the VHA contracts with a third party administrator, such as TriWest or Optum, who manages -- who manages that reimbursement event on behalf of the VHA.

Is that your understanding?

A. Correct.

Q. And as a part of what TriWest and Optum, the third party administrators hired by the VHA, do is they apply reimbursement rates according to the service received, the CPT code, the ICD-9 code, the ICD-10 code, and it's their job to pay this outside medical provider the appropriate reimbursement rate for the care?

A. And it has to be within -- I would agree with that, with the -- with the follow-on statement that it has to be based within what the veteran was referred for.

Q. Correct.

And so this is not a situation where the veteran can just go to any doctor he wishes. There is a full process involved with him seeking authorization to receive that care outside of the VA, correct?

A. Correct.

Q. Do you know that process as a part of your role, or is that outside of your expertise?

A. It's outside my area of expertise.

Q. But you do know that it's not automatic eligibility. There are requirements such as medical necessity, preauthorizations, that type of requirement?

A. Yes, I'm familiar that there are requirements and the general -- the general process for it, but the specifics I do not know.

MS. WALLACE: You testified earlier that your -- well, are we -- are we at a break period? I lost track of break.

MR. KLOTZBUCHER: An hour has passed. So.

MS. WALLACE: Do you guys want to do a break?

Do you want to do another -- like maybe do a 5- to 10-minute break and we'll do another hour and then we'll break for lunch?

MR. KLOTZBUCHER: Okay.

THE VIDEOGRAPHER: Okay. We're going to go off the record 11:32 AM.

(A recess was taken.)

THE VIDEOGRAPHER: We're back on the record at 11:45 AM.

BY MS. WALLACE:

Q. Ms. Ford, welcome back. Before the break, we were talking about the budget document that I was sharing on the screen, Exhibit 8, and I will put it back up for us. I have a couple more questions about it, if you don't mind.

The $165 billion that you put on your resumé that you manage for the VHA funding, where -- I see discretionary funding of 100 -- of -- let's look at this year's 2026 -- 114 billion.

Does the other part of VHA funding come from the mandatory section, if you scroll down?

A. Most of that would. However, in the discretionary budget, there's also the medical research piece, which is -- falls under the CFO and VHA. So that would comprise part of that as well as the mandatory funding as well as the collections line as well.

Q. I see.

So tell me which one item then we're looking at to add in research to your budget.

A. Right below the subtotal for Medical Care + BRAVE with MCCF, you will see Medical and Prosthetics Research.

Q. And so the VHA has a separate -- how would you -- department that performs medical and prosthetic research on behalf of the health care services that it offers?

A. Yes, and funds -- funds are appropriated separately for that.

Q. And that's approximately $943 million for fiscal year 2026?

A. Correct.

Q. Do you know, is that research spread out across the country? Is it consolidated? Is it grants? How does that work?

A. Most of it is spread throughout the country at VA facilities.

Q. And that falls under your purview and under the VHA $165 billion budget?

A. Correct.

Q. So, so far we have Medical Services, Medical Community Care which is Community Care Network, Medical Support and Compliance, which we haven't talked about yet, and Medical Facilities and then Medical and Prosthetic Research, correct?

A. Correct.

Q. Tell us --

A. You also -- go ahead. Sorry.

Q. No, you go ahead.

A. In the Medical Collections Fund above that is also included.

Q. What is that?

A. So that is revenue from collections from veterans. It could be other health insurance through copayments. So that's also included as part of the VHA budget.

Q. And that's not an expense. That would be income?

A. Correct. It's revenue.

Q. And that's in the amount for 2026 of $4.5 billion in collected funds from either the patient or other insurance?

A. For 2026, that was our estimated collections.

Q. And what was actually received in 2025? Is that on the screen? Is that the 4.3 billion?

A. As of this document date, May 2025, that fiscal year had not closed out yet. So that was still an estimate.

Q. Is it a pretty reasonable estimate based on your knowledge of how much the VHA received from other insurance and patient payments?

A. Within a reasonable ballpark.

Q. And what else -- first let's describe Medical Support and Compliance and what that section supports for veterans, and it looks like the 2026 request is 12 billion.

A. Medical Support and Compliance funds

Central Office functions and activities, as well as it can support the VISN staff. So, for example, my salary would be paid for medical -- from Medical Support and Compliance, as well as any additional costs related to my position such as travel. So that would be what I would call overhead management might be a more reasonable term for it, not using governmenty terms.

Q. Sure.

Do you know if the Community Care Network third party administrators are paid also out of the Medical Support and Compliance bucket?

A. The third party administrators are paid for out of community care, the Medical Community Care.

Q. Okay. So the Medical Community Care includes both the payment of the third party administrators and reimbursement costs to outside, you know, outside providers. It's bundled together?

A. Correct. The total -- the cost of community care from that perspective, excluding any VA -- VA staff, is included in that appropriation line.

Q. Is that broken down anywhere on this document so I can see how much we're paying the TPAs versus for actual veteran care?

A. I don't believe in the Budget in Brief you will see a specific breakdown of that. This tends to be a high-level document.

Q. Do you know off the top of your head?

A. I don't know the total cost off the top of my head.

Q. Okay. But the Medical Support and Compliance, the 12 billion, that's primarily administrative in operation staff across the country?

A. For the Central Office. So the headquarters of VHA, as well as the VISNs, can be funded out of Medical Support and Compliance. The VISN offices and staff could be funded out of there.

Q. And there are currently 17 or 18 VISNs across the country?

A. 18 VISNs.

Q. And they are supposed to have regional monitoring of the VA facilities in their

region?

A. Essentially.

Q. Do they have a physical location, these VISNs?

A. I believe some do. Some may not have a physical office anymore.

Q. And then Medical Facilities. Can I assume that is the cost of the direct care VA facilities?

A. So yes, it would be maintaining the physical infrastructure, like, the facility. It does not necessarily include all costs associated with maintaining a facility.

Q. Where -- where would that extra cost be -- come?

A. In some cases, depending on the work that's done at a medical facility, we can use minor construction money for improvements at those facilities. So it depends on the scope of the project and the cost of the project. We could use minor construction as well to maintain and improve our facilities.

Q. Thank you.

Do you budget for the copayments and

other patient payments that are expected to be received from the veteran?

A. Could you rephrase that or clarify what you're asking?

Q. It looks to me like you budget with the understanding that you will receive a certain amount of patient contributions and other health insurance contributions based on the current budget that we're looking at, Budget in Brief?

A. Correct. We estimate the cost of that -- or estimate the collection. Sorry.

Q. Understood.

Is there any other category on the page that we're looking at right now, which is BiB-4, other than Medical Services, Medical Community Care, Medical Support and Compliance, Medical Facilities, Medical Care Collections Funds and Medical and Prosthetic Research that is included in the VHA's approximately $165 billion budget?

A. The Bridging Rental Assistance for Veteran Empowerment, BRAVE, would be included in that. Let's see.

The DoD transfers to Joint Accounts

at the bottom would be included in that.

Q. What is that?

A. It's the -- we common -- so there is a joint health care facility in North Chicago. Some people call it the level facility. That's a joint facility with the Department of War and we can -- each department contributes money to running that facility. So we budget for our portion of that.

And then there's the Joint Incentive Fund, which is for, like, innovative projection that we work in coordination and collaboration with the Department of War, and we typically budget money for that as well.

Q. And you have 180 million on that line item for 2026?

A. Yes.

Q. What else on this on the page would be under your budget?

A. Grants for State Extended Care Facilities. So that -- that would also be included.

Q. 171 million?

A. Yes.

Q. Anything else?
A. (Pause).
Q. Is the construction not on your budget?
A. That's a separate appropriation. So I don't have direct oversight of that, and it does not fall under my purview of responsibility or my line of responsibility.
Q. The Medical Facilities bucket.
A. Uh-huh.
Q. Is that -- help me understand. Is that like every year? Is that -- I assume you guys own the property for the VA direct facilities. So help me understand what that annual budget -- like so for 2026 it's 11.7 billion.

What is that actually going towards in 2026?
A. So some of that money will go towards things like repairing walls, painting. It could be that there's a project to renovate a space.

So think of it like if you were going to renovate your bathroom at home, we would

use money from that particular appropriation line to do that. Or if you're going to renovate your kitchen, it would be used for that. So for certain renovation projects.

Again, the scope of those projects as well as the total dollar amount dictates whether we can use that funding or we have go to a different source, like, minor construction for that funding. So that's -- it would be general upkeep for major I would say improvements to a facility.

Q. Thank you.

Anything else before we look at the mandatory funding page?

A. No.

Q. Okay. We are now looking at page BiB-5 of Exhibit 8. Can you tell me which line items would be -- would fall under your VHA budget under mandatory funding?

A. PACT Act section -- well, PACT Act Section 707 typically is for VHA. It does not necessarily. So that would be there. That's for leases.

And then under the Cost of War Toxic

Exposures Fund, the Medical Services line, Medical Community Care, Medical Support and Compliance, and Medical Prosthetic and Research.

Q. And, again, we see similar buckets but they're under -- as above, but they're under the TEF fund, such as Medical Services, Medical Community Care, Medical Support and Compliance, Medical and Prosthetic Research?

A. Correct.

Q. And so this is a relatively new funding stream established in 2022 by the PACT Act?

A. Correct.

Q. And it looks like there's been some allocated increases in that program as it's gotten underway.

Has that been under your purview?

A. Both in this role and my previous role, yes.

Q. And so do you know why this -- this particular item is under the Mandatory Funding section according to the federal statute PACT Act that -- that created it?

A. Correct.

Q. Do you -- can you tell me why you've anticipated such a significant increase in that funding?

A. I would -- number one, I would say there's several reasons. There's been an increase in terms of claims submitted which results in changes in priority groups for veterans which can increase veteran costs related to the presumptives that were outlined in the PACT Act.

Under the PACT Act as well, we were initially supposed to ramp in each of the presumptives over time. However, the Secretary was able to use his authority to essentially waive that and all presumptives became essentially avail -- I hate to use the word "available" but became open for claims to be submitted.

Q. Eligible?

A. Correct.

Q. They became eligible to apply?

A. Correct.

Q. Okay. Thank you.

I wanted to shift gears just a little bit and talk about billing-related practices at direct VHA care facilities.

Do you agree with me that for ordinary care at VA hospitals and facilities, veterans are not billed for their treatment?

A. I would say typically that would be true.

Q. They have patient contributions, but they don't receive a bill?

A. I don't believe they receive, like, a physical paper bill or an electronic bill.

Q. And as far as understanding how -- what the cost is to the VHA for a veteran to receive care at a VA facility, do you agree with me that your -- the managerial cost accounting process is -- is the best method that the VHA has to understand the cost to the VHA of seeing a veteran for a certain service?

A. Yes.

MR. KLOTZBUCHER: Objection. Form. I apologize.

THE WITNESS: (Laugh).

BY MS. WALLACE:

Q. Was your answer yes?

A. Yes.

Q. And you oversee and have expertise

in the managerial cost accounting, and I understand that it is one of the offices that you oversee, including used to oversee with Daniel Clarke?

A. Yes, I oversee the office. I would not say that I am an expert in managerial cost accounting.

Q. For when you were doing your budgeting process, to understand how much money to allocate to VA direct facilities, is managerial cost accounting one of the primary resources that you use in order to understand how to allocate resources?

A. Can I ask for clarification if you're asking about when we develop the budget that we submit to Congress?

Q. Well, so I'm -- so what I'm asking is: If we were looking back at that budget sheet -- and I'm happy to put it back up for you.

And -- here, I'll put it back up just so we can look at it together.

And we have Medical Services line item and it's estimated at 57 billion for 2026 down from 69 billion in 2025, is -- do you use --

is managerial accounting one of the methods that you use to best understand what the cost of care is going to continue to be in those VA facilities?

A. No.

Q. What is? What do you use?

A. There is an actuarial model that's been developed that informs about 90 percent of -- would inform 90 percent of our budget request.

Q. What is that? Do you know anything about how the actuarial model is formulated?

A. I've received many briefings on it, but I will tell you. I do not have knowledge nor the expertise to discuss how the actuaries build that model.

Q. Do you -- and so you don't know yes or no whether managerial cost accounting is one of the methods or considerations that they take into account when trying to understand the cost to the VHA of medical services in these facilities?

A. I'm not. I do not know if they use our managerial cost accounting data.

Q. What role does managerial cost accounting play in understanding the cost of delivering direct care medical services under the

VHA?

A. So that comes in more to -- more when we are actually working to -- we've received money from Congress. It has been apportioned down from OMB, and then we are working to allocate those resources and execute the funding.

Q. So it's actually used in practice to understand how much of your funds to put into the VA direct care?

A. It's -- it's one piece of that puzzle that we use.

Q. It's probably a pretty important piece?

A. Yes.

MR. KLOTZBUCHER: Objection.

BY MS. WALLACE:

Q. And so can I ask? If you are looking to receive the money apportioned and allocate resources for medical services for direct care at VHA facilities, is the reimbursement rates for the Community Care Network, is that anything that you look at in that capacity, or is that a completely, like, irrelevant factor for VHA direct care?

A. So there are considerations in terms of how much care has been provided in the community, what the projections potentially could look like moving forward, and then looking to understand based upon the resources how much should be allocated to community care.

But, again, most of the medical services is driven through that, number one, when it's requested through the actuarial model, but there's different practices that come into play when we actually operationalize and execute the money.

Q. Okay. Let me try my question again. It was a tiny bit different.

I think your answer was that: We always take into account the allocation between how much money we give Community Care Network and how much money we give the VHA direct care facilities.

And my question is: Does reimbursement rates for Community Care Network, that would not have anything to do with how much -- with the allocation of funds for VA direct care?

A. Not necessarily.
Q. No?
A. No.
Q. Okay. Because that's not how you -- that's not how you would analyze the VHA direct care in order to allocate resources. It's not one of the factors?
A. It's not one of the direct factors.
Q. Only with the sense of how much money to give to Community Care Network versus how much money to give to VHA, not to determine the amount of finances or funding to give to VHA direct care?
A. If I could rephrase it?
Q. Yes.
A. We use it. We use community care historic information to inform on the community care budget. For medical services, as we would use things like historic workload data from a facility to understand allocations by VISN and facility. That would be one factor in determining allocations.

But when it comes to requesting money, again, not all of those -- not every factor

comes into play, and the actuaries could give you more information in terms -- the actuaries would have to say how they kind of use data to build the model.

Q. The Community Care Network reimbursement rates, they're used to allocate resources to the Community Care Network, but they're not used to allocate resources to the VHA direct facility?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: I would say that's generally true.

BY MS. WALLACE:

Q. In the MCA, managerial cost accounting, it uses activity-based costing to determine costs, which can sometimes mean the costs are based on the volume of services provided at a VHA direct facility?

A. I believe that's an accurate statement.

Q. And the MCA National Data Extracts, NDEs, report the total cost of each encounter as

well as cost subtotals divided at the department and product level?

A. I'm not familiar with that specific extract, so I couldn't speak to what it contains.

Q. Do you know if MCAs are divided into three categories: fixed direct costs, variable direct costs, and indirect costs, and the sum of these costs equal the total cost?

A. I would say that that -- that is a general principle of managerial cost accounting, as I understand it.

Q. And do you know if the MCA NDEs do not include the cost of care provided by community providers?

A. I am not familiar with the reports and data pulls that they use to inform their cost development. So I could not speak to whether that's included or not.

Q. Does the VA publish its managerial cost accounting or is it internal VA work -- workup?

A. I don't believe we -- it's a public-facing document. At least that I'm aware of that we don't publish it.

Q. Has there ever been, to your knowledge, a comparison between the per unit cost of a service at a direct VA care facility versus the cost of the same care via a reimbursement rate through the Community Care Network?

A. I'm not aware of a per unit cost review or analysis.

Q. Are you aware of whether the VA is costing itself more money to pay for Community Care Network care or to deliver care to veterans through its VA facilities?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: If I could ask for clarification. Are you asking -- are you asking if VHA is conducting cost analysis as to whether it is conducting cost analysis to see the cost of VA care versus direct community care?

BY MS. WALLACE:

Q. Yes.

A. They -- my understanding is that has been done historically in the past. I don't know

the outcome of that.

Q. You don't know whether the VA determined that it's costing them more money to pay out Community Care Network providers or whether to use its existing VA facilities?

A. I haven't seen any reports that would indicate the cost difference or what that would mean. So it would be purely speculative for me to respond to what that would be.

Q. Understand.

And so you're not able to say whether the marginal cost of delivering services inside of an existing VA facility is lower than the reimbursement rate paid under the Community Care Network?

A. Not with any authoritative information or knowledge of what that data would look like.

Q. But you can't testify that they're -- they're not apples to apples. One of them the VA is paying out a certain rate that usually follows the Medicare rates for services, and the other it's an internal cost that's reflected best with managerial accounting?

A. I would generally agree it's not necessarily an apples-to-apples comparison and there are nuances with VHA that need to be taken into account when trying to do comparative analysis.

Q. Which hasn't been done, to your knowledge?

A. I'm not aware of any output of that.

Q. Do you meet with the third party administrators for the community cost network to understand the budgetary impact of that program for the VHA budget?

A. I have not met with the third party administrators.

Q. Do they submit reports or data for your review?

A. They do not report -- they do not submit anything to this office.

Q. And how do you get -- how does your office get the amount of money for the budget for administration costs that goes under the Medical Community Care bucket of your funding?

A. We would work with the integrated veteran care group to understand any cost impacts.

Q. And so that money -- that number comes to you and it's incorporated into -- into your budget, but it -- but you're not directly managing that, the third party component cost component?

A. Correct. We are not directly managing the third party cost.

Q. I wanted to talk to you. We have about 15 minutes until our next break.

You have been designated to -- to talk about the veterans who receive eligibility for VHA medical benefits as a result of residing at Camp Lejeune, both veterans and family members; is that right?

A. Yes.

Q. And you state that:

"Enrolled veterans are eligible for hospital care and medical services under the VHA medical benefits package."

And "Family members of Veterans who resided at Camp Lejeune for 30 days or more between August 1, 1953 and December 31, 1987 are eligible for reimbursement of health care costs related to one or more of 15 covered illnesses and

conditions."

Is that right?

A. Correct.

Q. And you have received the execution of VHA's appropriated funds as it relates to the Camp Lejeune eligibility; is that right?

A. We do not have a specific shred of that data or, you know, a report on execution of that information -- of that particular group.

Q. Meaning you don't know how much -- how many veterans or family members are qualifying for health care under that statute?

A. The Managerial Cost Accounting group may have access to that data, but we don't have from a budgetary perspective how much we have used in appropriated funds for that specific group.

Q. And I want to make sure this is clear for the record.

You -- your testimony is going to have do with eligibility for the program, not how many are using it or what that budget amount is?

A. Correct.

Q. And your testimony also won't have to do with barriers to access to that care or

difficulty with access to that care?
A. Correct.
Q. Are you familiar with the Janey Ensminger Act? Does that ring a bell to you?
A. It does not.
Q. Okay. And if I were to tell you that that is the Act that was codified in 38 USC 1710 that allowed for family members' access to health care based on the Camp Lejeune exposure, does that jog your memory?
A. Not specifically.
Q. Do you know anything about veterans' access to care and the criteria related to their access to care under that Act?
A. I couldn't speak to the specific criteria for care as outlined in that specific act.
Q. Do you know what the list of 15 diseases are, or is that something that you are familiar with?
A. I believe I have knowledge of a few, but not necessarily all 15.
Q. Do you know if the statute that created that eligibility, do you know if it offers

health care to these veterans and family members for any preventative care?

A. That I do not know.

Q. And if I told you that it does not offer that for family members, do you have any reason to disagree with me?

A. Without seeing the specific language, I couldn't opine one way or another.

Q. Do you know if that care creates comprehensive health care coverage for those veterans or family members --

MR. KLOTZBUCHER: Object --

BY MS. WALLACE:

Q. -- exposed at Camp Lejeune?

MR. KLOTZBUCHER: I'm sorry. Objection. Form.

You may answer.

THE WITNESS: I couldn't speak to comprehensive health care. I would need to understand the definition of that within the -- within the Act.

BY MS. WALLACE:

Q. And your testimony states that these family members are "eligible for hospital care and

medical services under the VHA medical benefits package."

Are you testifying that you don't know the extent of the care that could be offered or provided to the veteran or family member under that program?

A. The care that would be provided would be whatever was outlined within the statute in terms of eligibility, but specifics for each veteran or specifics for that group I would not be able to say with definitive -- with a high level of confidence.

Q. And so you -- it doesn't sound like you're going to be testifying that those veterans if they served or if they resided at Camp Lejeune for 30 days or more between August 1, 1953 and December 31, 1987, you don't know today what -- what health care costs may or may not be covered for those veterans under the VHA?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: Could you repeat the question?

BY MS. WALLACE:

Q. Yes.

And so for veterans or family members that served or resided at Camp Lejeune for 30 days or more between August 1, 1953 and December 31, 1987, you've stated that they are eligible for hospital care and medical services or reimbursement of health care costs related to one or more of the 15 covered illnesses and conditions, but it doesn't sound like your expertise extends to which -- the extent of health care services that that would be offered to them in accordance with that statute?

A. I could not speak to the specific health care services that would be offered.

Q. And so help me understand exactly what you mean by these designations.

Do you just mean, "I know that Congress passed a statute that allowed eligibility based on time at Camp Lejeune"?

A. I would say that the extent of my ability to respond to any questions would be that a law was passed. The law increased or opened access for this group of veterans and family

members to receive health care through VHA and through the VA for the list -- for the list of conditions that was outlined within that specific law.

But in terms of the health care that they have received or could receive, I could not specify what they are -- what today they are receiving or have received in the past.

Q. Okay.

A. Just that they would be eligible for care.

Q. Do you know if it would be required that the -- what the process might be to gain coverage, such as would they have to meet medical necessity requirements?

A. Based upon my knowledge, if it was outlined within a statute that these veterans and family members could receive health care for these for a list of conditions, that they would, I would assume, file a claim to identify themselves as Camp Lejeune veterans and family members or as Camp Lejeune veterans. Family members have a separate process.

And then based upon the outcome of

that, they would then receive care for, you know, that would increase -- that would change potentially their priority level, but then they would be receiving care for those specific at no cost to them.

Q. Do you know -- I'm going to stop sharing for just a second.

Do you know whether or not there's an application process required for the family member program?

A. I believe there is a process for family members. I don't know if I would use the word "apply" but, you know, to receive benefit -- or health care and benefits through that program -- through the CHAMPVA or other programs.

Q. Do you know if the statute was applied retroactively or whether the care had to be provided on or after March 26, 2013, but no more than two years prior to the date the VA received the application?

A. That I don't know.

Q. Do you know whether receiving care must include a certification from a treating physician that the care relates to covered

illness, and it also must provide information from the physician as to any comorbidities, risk factors, or other exposures that may have contributed to the illness or condition?

A. If that was included in the statute, then, yes, I would agree that that's a requirement. But I don't know the specifics of the statute again.

Q. Do you know if the VA member has to use other health insurance if it's available before it can have access to the VA assistance?

A. I believe that's an accurate statement.

Q. Do you know if the VA has to make a clinical finding under VA Clinical Practice Guidelines that the illness or condition did not result from a cause other than the residence of the family member at Camp Lejeune before coverage will be provided?

A. I'm not familiar with the clinical practices -- how clinicians make those determinations or the Clinical Practice Guidelines.

Q. And so when you say "eligibility,"

you mean just that.

You don't know how this statute, in effect, it's been able to be accessible by family members or veterans under the program?

A. I couldn't speak to specifics. It would be speculative in some cases.

Q. Do you know if the program only provides reimbursement for certain qualifying medical expenses?

A. I believe that to be true.

Q. Do you know how the VHA takes into account the exposure component of the statute that they must have resided at Camp Lejeune for at least 30 days?

A. I'm not sure what documentation or other information would have to be provided to show that they were a resident there for 30 or more days.

Q. Would you agree that the qualifying residency or exposure must be documented according to the VA satisfaction in order to qualify?

MR. KLOTZBUCHER: Objection. Form and foundation.

You may answer.

THE WITNESS: Generally speaking, I would say yes, but it would have to meet VA's criteria.

BY MS. WALLACE:

Q. Do you know if in the case of an individual who has a history of breast cancer, which is one of the enumerated conditions, do you know if the VA would cover the cost of future mammograms for preventative care under that program?

MR. KLOTZBUCHER: Objection. Foundation.

You may answer.

THE WITNESS: That's outside my scope of knowledge and expertise.

BY MS. WALLACE:

Q. Who would be the best person to better explain?

Because it sounds like you're going to testify that these individuals are eligible for hospital care and medical services and reimbursement, but I don't have an individual who's able to say the difficulties of qualifying for care and, in reality, how that's worked out.

Who might that be?

A. We have an eligibility group. So that, and there's also -- for family members, there's a CHAMPVA group. So someone from one or both of those offices could provide more information in terms of eligibility and the mechanics of applying for the -- for family member benefits.

Q. Is -- which department of the VHA would that fall under?

A. So there's CHAMPVA. I don't know if they're an office or a group. And then they may fall under the eligibility group but, frankly, I don't know their current name. But someone within those offices, or whatever they are currently called, could probably -- would be the best subject matter experts in terms of that.

Q. As far as budgeting and cost allocation, you're not able to tell me today and therefore you won't be testifying as to how much the -- how much the VHA spends on offering health care or reimbursement for health care to veterans or family members under the Camp Lejeune program, correct?

A. Correct. I have not seen any documentation that would allow me to definitively provide information on those costs.

MS. WALLACE: Okay. I think we are at a perfect stopping point for our lunch break.

THE VIDEOGRAPHER: Okay. We're going to go off the record at 12:34 PM.

(Whereupon, at 12:34 PM, a luncheon recess was taken.)

AFTERNOON SESSION

(1:18 PM)

HEATHER A. FORD

called for continued examination and, having been previously duly sworn, was examined and testified further as follows:

EXAMINATION (CONTINUED).

THE VIDEOGRAPHER: Back on the record at 1:18 PM.

BY MS. WALLACE:

Q. Ms. Ford, earlier this morning you testified that part of your job duties currently with the VHA include assignments that are influenced by the policies and directives issued by the department CFO and governing federal organizations, for example, the OMB, Treasury, GAO, correct?

A. Correct.

Q. And so part of your job duties can often involve taking guidance from the GAO reports and influencing your budget and determinations based on the guidance that the GAO provides?

A. I would not -- I would not agree with that statement from a funding perspective.

Q. How would you modify what I said?
If a GAO provides guidance to you, what do you do with it related to VHA health?
A. So if there are recommendations that GAO makes, we would work to implement those recommendations to the best of our ability. Whether or not that would impact how we request or allocate resources may not necessarily be fully implemented. It would depend on the nature of the recommendation that was made by GAO.
Q. But it is within your job description to work to implement the recommendations of GAO?
A. Yes, where applicable.
MS. WALLACE: All right. We're going to look through just a couple of GAO recommendations that relate to VHA health over the past couple years.
I am going to put in the chat what's been previously marked as Exhibit 9, which is GAO-23-106203, and I have uploaded it into the chat and I'm going to put it on the screen for you.
(Document marked for

identification as Ford Exhibit 9.)

BY MS. WALLACE:

Q. This is an April 2023 GAO report entitled "High - Risk Series - Efforts Made to Achieve Progress Need to Be Maintained and Expanded to Fully Address All Areas."

And I want to scroll down and this -- first of all, have you seen this particular GAO report?

A. I have not seen it nor have I -- so I have not read it in detail.

Q. Okay. And if I scroll down to High-risk areas identified by GAO, I see -- and it's highlighted on the screen -- that one of those high-risk areas is "Managing Risks and Improving VA Health Care."

Do you see that?

A. I do see that.

Q. And then if you go down to the Contents section, we find that we can jump to that section by clicking on the correct link -- one second -- which is on page 258 of the document.

Do you see that?

A. I do see it.

Q. Are you aware in your current role that the VA health care has been on the GAO's High-Risk List since 2015?

A. I am aware that there are -- that there are areas of high risk, but I was not aware that they had been on the High-Risk List since 2015.

Q. Do you see there in the first paragraph:

"VA operates one of the largest health care systems in the nation. It provides services to more than 9 million veterans who generally have greater health care needs than the broader population. Due to challenges we identified with VA's ability to provide timely, cost-effective, and quality care, we added VA health care to the High-Risk List in 2015 with five areas of concern: (1) ambiguous policies and inconsistent processes; (2) inadequate oversight and accountability; (3) IT challenges; (4) inadequate training for VA staff; and (5) unclear resource needs and allocation priorities."

Do you see that?

A. I do see that.

Q. Were you aware of those challenges?
A. Broadly. I have been in conversations where those have been broadly discussed but not tied to this specific GAO report.
Q. You are aware of those challenges within the VA health system?
A. Yes, but, again, not tied to this specific GAO report.
Q. Understood.
The next paragraph states:
"VA has continued to face system-wide challenges since our 2021 High-Risk Report. These challenges include overseeing patient safety and access to care, addressing critical staffing, and meeting future infrastructure needs. Additionally, VA has a number of major modernization initiatives that are still in the early stages of implementation, including those related to financial management and electronic health records."
Do you see that language?
A. I do.
Q. Can you describe for the court what

your understanding is of the challenges described in that paragraph?

A. So VA is undergoing a modernization effort of its financial management system currently known as the Financial Management System, FMS, and they are working to deploy a new system. I think the FMS is fairly old, and this implementation in the new financial management system has not started, has only dipped its toe, so to speak, into VHA. So yes, that would be considered a risk area.

Q. Do you know how GAO defines high risk?

A. Not specifically.

Q. In your role, you are aware that VA health is high risk.

Are you working on any of these areas for improvement personally?

A. So --

MR. KLOTZBUCHER: Objection.

You may answer.

THE WITNESS: -- the financial management modernization would fall under the purview of the CFO as that is

deployed within the -- the VA health system. Part of the reorganization touches upon the remaining areas.

BY MS. WALLACE:

Q. If we scroll down, the report begins to go through the various high-risk categories, including the "Ambiguous Policies and Inconsistent Processes."

Do you see that?

A. I do.

Q. And then it says at the bottom of this section:

"VA should also continue to implement our other recommendations. Since March 2021, we have made 14 new recommendations, four of which have been implemented. For example, we recommended that VA establish a national policy to document complaints about community living center care so that they can be tracked and resolved."

Do you see that?

A. I do see that.

Q. Are you aware of the recommendations that are in effect from the GAO as it relates to VHA currently?

A. I'm not aware of where GAO stands in terms of resolving those high-risk recommendations.

Q. Do you mean where VHA is?

A. I'm sorry. Yes, VHA. Sorry.

Q. No problem.

But you are aware in your role that they exist because part of your job is to work to implement recommendations --

A. Correct.

Q. -- of the GAO?

A. Correct.

Q. Under the section and on the screen that states "What Remains to Be Done," it states:

"We have made 508 recommendations related to this high-risk area since 2010. As of February 2023, 104 recommendations remain open. For example:

"We recommended in June 2018 that VHA establish a metric for its Veterans Community Care Program to monitor whether veterans are receiving community care within time frames comparable to those at VA facilities. The Consolidated Appropriations Act, 2023, requires

VHA to apply designated access standards as an overall performance measure for community care. This will allow VHA to monitor timeliness under the Veterans Community Care Program. We plan to review VHA's implementation of this requirement."

Are you aware that there has been a continual problem with timeliness of receiving appropriate care through the Community Care Network for veterans?

A. I'm generally aware that there have been continued concerns around the timely access of care both within VA and the community.

Q. Are you aware that the GAO has been collecting data regarding appointment scheduling challenges and clinical care concerns, as it states on page 267?

A. I was not aware within -- within my role currently or formerly that they were collecting that information for that specific high-risk area.

Q. Are you aware they're also collecting data to attempt to resolve pending enrollment applications and timely processing of applications and accurate enrollment

determinations to prevent veterans from experiencing unnecessary delays when enrolling for health care benefits?

A. Similar response. I was not aware that GAO was collecting that information. It's outside the scope of my position within VA and the -- and my responsibilities.

Q. Because that particular, like, that particular data doesn't relate to financial planning?

A. It's because that responsibility for maintaining enrollment data is outside the Office of Finance.

Q. But in your role as CFO, you are aware that these types of deficiencies within the VHA program do exist?

A. So -- so, again, broadly, I'm aware that there are challenges within VHA around these types of areas, but, again, the providing of data to GAO falls outside the scope of the Office of Finance. We are not the holders of that data.

Q. And my question just has to do with the deficiencies in the program.

You're aware that the deficiencies

identified by the GAO do exist in the program?

A. I'm aware generally that there remains concerns around timely access to care and other issues surrounding the community care for veterans.

MS. WALLACE: Let's look at another report.

I'm going to upload what's been previously marked as GAO -- I'm sorry -- Exhibit 10, which is GAO-23-106836.

(Document marked for identification as Ford Exhibit 10.)

BY MS. WALLACE:

Q. Do you recognize this GAO report released on approximately May 17, 2023?

A. This one looks familiar, but the contents of it I can't say that I could -- I have read in-depth.

Q. Under the section "What GAO Found," it states in the second sentence:

"VHA's ability to attract, hire, and retain high-performing staff is critical to its mission to provide quality and timely care for the

nation's veterans. In recent work, GAO has made several recommendations to VHA to help address certain staffing challenges, which would help the agency meet veterans' health care needs. VA has agreed with these recommendations and reported steps to implement them."

Do you see that?

A. I do.

Q. And it looks like, again, the GAO has identified staffing issues connecting with the community care needs. They state specifically in the first bullet that:

"Additionally, facility staff GAO spoke with -- spoke with reported challenges, recruiting and retaining administrative and clinical staff needed to support the community care program. GAO recommended that VA medical facility leadership assess their facilities' needs and develop a plan to address any identified risks, including strategies to address recruitment and retention challenges."

Do you see that?

A. Yes.

Q. And is my understanding from that

there is an issue that there's not enough administrative staff and clinical staff needed to support the preauthorization and processing of these veterans' community care requests so that they can be seen with authorization at community care providers?

A. So I can speak to the generally that there are -- my understanding is there are staffing issues within VHA facilities -- some VHA facilities and across VHA, but the specifics around community care, I cannot speak to what those -- what those shortages or shortfalls would look like.

Q. If the issue is a staffing issue, wouldn't -- if the VA was working on correcting that issue, wouldn't they need to allocate additional funding for that staffing and go through you to do that?

A. So generally, yes, if staffing is an issue. However, from a budgetary perspective, it's not necessarily down to the eaches of why we're providing more funding for staffing increases. It could be broadly.

HR could provide a broad assessment

that we need to hire more of and this will cost Y dollars, and then we would then provide the funding for that need.

And in some cases, these are local decisions. So they can roll up, again, into broader needs, and so we may not know every time the specifics for the staffing requirements.

Q. Can you tell me whether during your six months that you've been in your current role have you -- have you been made aware of this issue for low staffing in the Community Care Network area in order to properly budget or allocate funding for that particular need?

A. For community care or for I'll say community care support, I have not been made specifically aware of that staffing shortage and need for additional funding.

Q. And so that would mean that it's not -- no adjustment has been made into the budget for this particular reason; is that right?

A. Specifically for community care support? No. Broader FT -- or broader needs, again, could be wrapped up in those.

Q. Broader needs related to community

care?

A. Broader needs in terms of staffing overall.

Q. You have been made aware of staffing issues also in the VHA direct facilities and you have allocated funds for that?

A. So we have allocated funding to -- to facilities for staffing -- for staffing. Again, some of these decisions are local decisions, and so they would be provided a number of people, like, an up-to number and then those facilities would determine what folks they needed to hire to meet their needs.

So we would provide money to them, but it's a local decision in terms of hiring.

Q. But it doesn't sound like any specific adjustments were made in the budget to include for additional hiring for the community care staff needs that are identified in this GAO report?

A. Yes. No staffing -- no specific budget adjustments were made for this specific need.

Q. Do you see in this also in this GAO

report in the second bullet:

"GAO recommended that VHA comprehensively evaluate and implement strategies to help mitigate staffing challenges" connected to the mental health care for veterans?

A. Yes.

Q. Do you know if that has been an issue that's been brought to your attention for fund allocations?

A. There have. I've been privy to discussions where mental health needs and mental health care providers are needed in terms of addressing staffing issues and what the potential level of resources would be needed for that.

Q. Do you see in the third bullet that GAO identified that:

"VHA lacks the reliable data -- complete, accurate, and timely -- needed to monitor the completion of key onboarding tasks for new hires"?

I'll highlight it for you.

A. Thank you.

Q. My pleasure.

A. Yes, I see that.

Q. Have you been made aware of that?
A. Within the scope of my job responsibilities, I am aware that there are discussions and have been discussions about how to improve the onboarding process.
Q. For -- for new hires.
Does that have to do with training?
A. I can't speak to the span of it, but it could -- it could be the credentialing process, background checks, a myriad of issues. HR could provide more information in terms of what that would look like. It's not within my scope.
Q. And that's a very important factor to ensure that veterans receive quality care from quality medical providers.
Would you agree with me?
A. I would agree. Timely hiring is important.
Q. Well, timely hiring as well as background checks and proper training.
A. Yes.
Q. Do you agree?
A. Hiring meaning the broad -- the tooth-to-tail process for that for VHA, which

would include onboarding tasks.

MS. WALLACE: Let's look at another GAO report. I'm uploading into the chat what's been previously marked as Exhibit 11, which is GAO-24-105308.

(Document marked for identification as Ford Exhibit 11.)

BY MS. WALLACE:

Q. Do you recognize this March 2024 Veterans Community Care Program report that states "Additional Information on VA Statutory Appointment Timeliness Measures Is Needed?"

A. I have not seen this particular report.

Q. Based on the section under "What GAO Found," it sounds like GAO is a little critical of the VA that it has not met "the statutorily required measurements on the timeliness of scheduling community care appointments because its approach prevents it from making certain measurements. Specifically, VA's approach cannot yield data on a certain time point -- the date a provider accepts a referral for care -- which is needed to calculate two required measurements.

According to VA, staff are not required to collect referral acceptance dates."

Do you see that?

A. I do.

Q. And if you go to -- would you agree with me that the GAO has found that it's difficult for them to assess whether VAs are getting timely appointments at a Community Care Network because the VA doesn't seem to be measuring it. They state that the VA is not capturing the date the provider accepts the referral for care.

Do you agree with how I characterized that?

A. Based upon what I'm seeing in this document, that's how I would read that highlighted section.

Q. And are you familiar with the Isakson-Roe Act which requires the VA to measure community care appointment timeliness?

A. I am familiar with the Act.

Q. The statute requires measurement from the date care is required to the date the appointment occurs.

Is that your understanding?

A. I believe that is contained within the statute.

Q. In this report, the VA is admitting that it cannot calculate certain required measurements under that Act.

Do you agree with me?

A. Based upon what I'm seeing here, I can't say whether or not GAO is specifically tying it to that statute based on the yellow highlighted section. So I couldn't opine whether --

Q. It's right here.

A. Sorry.

Q. No problem.

Do you see that in the first paragraph?

A. Oh, yes, I see it there at the bottom. Okay.

Yes. Then I would say yes.

Q. Do you agree with the GAO's findings that there are challenges the VA has had in ensuring community care appointments are scheduled by VHA medical facility staff in a timely manner and overseeing the appointment scheduling process?

A. Based upon my position within VHA as

well as my previous position, I could not provide specifics in terms whether or not that's accurate.

Q. And you can't dispute its accuracy either?

A. I could not dispute its accuracy.

Q. Is this an area that you have allocated any additional reallocated any funds to address the deficiencies that have been identified in this report?

A. (Reviews document.)

I can't recall if there were specific budget adjustments related to these specific findings.

Q. Do you know at all what efforts the VHA is making to address these findings at the current time?

A. Since most of these areas fall outside of the financial or budgetary area, I can't speak to what efforts other offices may or may not be taking to address them.

MS. WALLACE: I'm going to upload into the chat Exhibit 12, which has been -- which is GAO-24-106390.

(Document marked for

identification as Ford Exhibit 12.)

BY MS. WALLACE:

Q. And I will share it on the screen for you.

Do you recognize this GAO report from August 2024 entitled "Veterans Community Care Program - VA Needs to Strengthen Contract Oversight"?

A. I did not review this specific GAO report.

Q. From your position in financial management and oversight, would this particular action item fall under your purview related to the VA needing to strengthen contract oversight?

A. I would need to understand the contents of the report in order to understand what potential financial impacts there would be from an oversight perspective.

Q. We're looking at the first page under "What GAO Found" and it states that:

"The program -- Community Care Program -- has grown rapidly in recent years and accounted for nearly 40 percent of VA's total contract obligations in fiscal year 2023."

Is that also your understanding based on your views of the budget?

A. I would not dispute that statement.

Q. "Contract oversight is complex and responsibility for oversight is spread across multiple areas within the Office of Integrated Veteran Care (IVC). IVC was created in 2022, and it continues to restructure some roles, such as the Contracting Officer's Representatives (COR), who keep contracting officers informed and provide technical direction to contractors."

Do you see that?

A. I do.

Q. And it says below:

"IVC has not developed a clear and complete set of documentation to guide contract oversight."

Were you aware of that deficiency on behalf of IVC, or does that fall outside of your purview?

A. That falls outside of my purview.

Q. What about the next paragraph?

"IVC has eliminated a program manager position identified in the oversight plans

for the contracts."

A. That --

Q. Sorry. I was just going to read the next sentence.

"While IVC officials identified alternative processes for some program manager functions, officials have not assessed whether they fulfill all functions. Additionally, VA has not updated its plans to reflect its current processes. These gaps increase contract oversight risks."

Does this deficiency fall within your purview?

A. It does not.

Q. Were you aware of this generally or not?

A. No.

Q. Would a deficiency such as this affect the budget or appropriation allocations?

A. It could.

Q. Do you have an opinion on whether that this deficiency could affect quality of care or access to care for veterans?

A. I couldn't opine on that given the

information that I see there what impact it would have on access or delivery of care.

MS. WALLACE: I think I have one last GAO to show to you. This is marked as Exhibit 13, GAO-25-106969.

(Document marked for identification as Ford Exhibit 13.)

BY MS. WALLACE:

Q. Have you seen this GAO report of November 2024 "Veterans Health Administration - Additional Actions Needed to Improve Oversight of Health Care System"?

A. This one does not look familiar from the title alone.

Q. We're on the first page. The first paragraph it states that:

"GAO found that VHA has made various organizational changes to its oversight offices since 2015. Most recently it reorganized them in 2024 with the goal of eliminating fragmentation, overlap, and duplication, according to the VHA."

Do you see that?

A. I do.

Q. Were you involved in collaborating

on that reorganization?

A. No.

Q. Because you weren't yet in the role that you are now at this in 2024?

A. Correct.

Q. And you testified earlier that you are involved in collaborating on the current reorganization that Secretary Collins is working on implementing; is that right?

A. Correct.

Q. Do you know how the reorganization referenced in this article -- and you can see a chart of it on the screen in this document.

Do you know how that might affect finance or budgeting under your department?

A. Could you increase it so I could read the teal boxes?

Q. Certainly.

A. I couldn't speak to how this would impact this particular office during that time based upon the org chart that's shown.

Q. Okay. Thank you.

As a part of your role, do you -- are you also informed of Veteran Service

Organization requests related to VHA care?

A. I have limited engagement with the Veteran Service Organizations or requests that they may have, unless it's particularly -- unless it's directly related to funding and budgetary matters.

Q. And can you think of any time that you've been in the role for the six months that you've been there that there has been a VSO request or concern that has made it to you related to budget matters?

A. I can't think of anything that has come across my desk within the last six months specifically related to budget or funding matters.

Q. If those organizations are continuing to discuss capacity and staffing as an access to care problem, that has not made it to you in the budget office, correct?

A. Correct.

Q. And if they are continuing to discuss wait time issues for access to care for veterans, that has not made it to you in the budget office?

A. Correct.

Q. And issues with community care coordination and standards in access, that also has not made it to you in the budget office, right?

A. From the VSO? Correct. It has not come across my desk from the VSOs.

Q. What about their concerns with coverage disputes, requesting additional preventative care, and expanded eligibility coverage and plus long-term care support for severely disabled veterans?

A. That, again, has not specifically -- I have not seen any e-mail traffic or information from the Veteran Service Organizations regarding those matters.

Q. Have you received any requests regarding PACT Act funding for contractors responsible for implementing the PACT Act?

A. In the last six months, I can't think of anything directly related to contractors implementing the PACT Act for VHA.

Q. Have you received any feedback that there are delays, denials, or disruption in those benefits affecting veterans?

A. I have not received any feedback related to that.

Q. Have you been involved in drafting any VHA responses to concerns about Secretary Collins' current plans to restructure the VHA?

A. Yes.

Q. What has that role been, please?

A. Development of responses to Congressional questions related to the reorganization.

Q. Can you tell me which responses that you have personally developed responses to?

A. I believe there's two from a recent hearing. I can't think of the verbatim words of the questions that were asked, but it was around resourcing and budgeting.

Q. Do you remember the substance of what you drafted?

A. One -- I do.

Q. Could you share that with us?

A. One was in regards to whether or not a cost estimate had been prepared for the reorganization, and I can't think of the second one.

Q. Has a cost estimate been prepared for the restructuring recommended by Secretary Collins?

A. There's an internal predeliberative estimate that's been prepared but not shared publicly.

Q. Does Congress have access to it at the current time, to your knowledge?

A. I don't know.

Q. And you can't remember the other content, right?

A. Not the specific question or the content of the specific response. It's been a while since I looked at that.

MS. WALLACE: I'm going to upload into the chat what's been previously marked as Exhibit 14 and 14B, which is Secretary Collins' statement before Congress written and an article about his presentation.

(Document marked for identification as Ford Exhibit 14.)

(Document marked for identification as Ford Exhibit 14B.)

BY MS. WALLACE:

Q. Did you testify earlier that you were not present at the hearing before Congress on the VHA's restructuring?

A. Correct. I have not been present at any point Secretary Collins has testified.

Q. At the hearing, he testified that he wants to put resources where they need to be and not send them to some amorphous administrative office.

Is that your understanding of his plan for the restructuring?

A. Yes.

Q. And it looks like he was criticized at the hearing based on Congress -- particularly Congressman Takano, who's the chair of the House Veterans Benefits Committee, testified that -- stated:

"That the VA is poised to restructure the nation's largest health care system 'with little more than a half-page notification and a 10-page slide deck' for Congress."

Are you aware of that criticism of

the restructuring plan by the Congressman?

A. I did not watch the hearing. So I cannot state with certainty if that is what he said.

Q. And this is this month.

Representative Morgan McGarvey.

Let me share my screen at 14B. Sorry. This is what I'm reading from.

Representative Morgan McGarvey said, "Here's the problem -- we don't know what the changes are. What you have provided here is not much."

Were you aware of that feedback from Congress as to the restructuring?

A. Again, I didn't watch the hearing or read any news articles or anything after the fact. So I'm not aware of committee members quotes.

Q. Are you aware that the VHA was criticized for not putting sufficient information regarding the restructuring before Congress?

A. It is my understanding through conversations that I have heard that there was concerns from Congress, but specific concerns I don't know.

Q. So tell me what you are aware of that the feedback was regarding the restructuring.

A. That generally --

MR. KLOTZBUCHER: Objection. Foundation.

You may answer.

THE WITNESS: Generally that there were concerns with parts of the structure, but the feedback received internally has been that overall it was positive.

But, again, I haven't watched any of the hearing. So I can't speak to specific concerns that have been raised.

BY MS. WALLACE:

Q. Are you aware that he has testified before Congress that he is aware that GAO's VHA health has remained on the High-Risk List for more than a decade?

A. I'm not aware that he specifically testified to that, but I believe there's general knowledge that VHA has high-risk issues, as identified by GAO.

Q. He also testified that VHA currently

has vacant clinical positions.

I think you stated that you agreed with that earlier in your testimony; is that true?

A. I --

MR. KLOTZBUCHER: Object to form.

You may answer.

THE WITNESS: I would generally agree to that.

BY MS. WALLACE:

Q. And those vacancies include doctors, nurses, and specialty providers.

Do you agree?

A. I can't speak to specific vacancies.

Q. Do you know if some of the 4,000 or more vacancies would include physicians, nurses, and specialty providers?

A. I would state generally I would. There likely are vacancies within those areas.

Q. Would you agree that staffing levels can directly affect appointment availability?

A. Yes.

Q. Would you agree that if a specialty clinic is understaffed, it can see fewer patients?

A. Yes.
Q. Do you agree that fewer available equipments can result in longer wait times?
A. I would generally agree with that.
Q. Would you generally agree that longer wait times can delay diagnosis or treatment?
A. Yes, it's possible.
Q. So today you would agree that access to care for veterans would depend on staffing capacity?
A. I would generally agree seeking care within the VA health system, meaning VA facilities, could be impacted by staffing levels.
Q. I understand we talked earlier that a risk assessment has not been fully either performed and/or released by the VHA regarding the restructuring, correct?
A. Correct. I -- correct.
Q. And part of the restructuring recommendation is the reduction of VISNs which oversee multiple medical -- VA medical centers and outpatient clinics; is that correct?
MR. KLOTZBUCHER: Objection.

You may answer.
Object to form.
You may answer. Excuse me.
THE WITNESS: Correct. There is an intent to reduce the number of VISNs. V-I-S-Ns.
BY MS. WALLACE:
Q. Do you agree that VISNs manage regional staffing and budget execution currently?
A. I would agree with that.
Q. Do you -- does the VHA understand at the present time how a reduction in VISNs could affect access to quality patient care across the VA direct care facilities?
MR. KLOTZBUCHER: Object to form.
You may answer.
THE WITNESS: I can't speak to any assessment that's been done in terms of impacts to health care delivery by reducing the number of V-I-S-Ns, VISNs.
BY MS. WALLACE:
Q. Do you agree that the restructuring

recommends the elimination or cancellation of tens of thousands of physicians that currently exist under the VHA?

MR. KLOTZBUCHER: Object to form.

You may answer.

THE WITNESS: I would not necessarily agree. I would not agree with that description.

BY MS. WALLACE:

Q. Do you disagree with the description?

A. As I understand the reorganization, I would disagree with that description.

Q. How many jobs do you anticipate the restructuring will eliminate or cancel, if you have a better understanding?

A. My understanding is that there will be no reductions in the workforce as a result of reorganization. That everyone will have a job within VHA. It just may not be -- you may not work for the supervisor that you work for today, but there is no plans to reduce the overall size of the workforce as part of that reorganization.

Q. And if Secretary Collins quoted a 40,000-person number, you do not know what he's referencing?

A. That was --

MR. KLOTZBUCHER: Objection.

You may answer.

THE WITNESS: That was based upon a review of open positions or unfilled positions in a manning document and positions, again, that were unfilled for a significant period of time were -- or had not been activated were removed from the manning document. So they were unfilled positions.

BY MS. WALLACE:

Q. So you have 40,000 positions that should be filled but aren't?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: I would not agree with that description of it.

BY MS. WALLACE:

Q. How would you rephrase that? Is it

40,000 designated positions that aren't filled?

A. I would -- I would describe it as it's possible that people requested positions be added at some point in time with the intent to fill those positions, but those positions were never filled for whatever reason, and so they have essentially been sitting on our manning document or personnel document. If you want to phrase it that way.

And given that they have been, let's say, vacant for 10 years, they were removed because they were no -- they were seen as not being needed because they had been unfilled.

Q. But when they were established, there was the intent from the VHA that they were to be filled, correct?

A. I would -- I would assume, yes.

Q. And that intent would be to provide veterans with quality and timely access to health care?

A. I don't know the specific positions that were eliminated off the manning document. So I can't speak to whether they were direct care providers or support staff. I could only make

assumptions.

MS. WALLACE: Let's take a quick look at Exhibit 14 that I uploaded into the chat.

BY MS. WALLACE:

Q. This is a written statement by Secretary Collins.

Have you ever seen this statement?

A. No.

Q. So I take it you did not help prepare this for him for his testimony on this earlier this month February 11, 2026?

A. Correct. I did not help prepare his written testimony.

Q. He states:

"The current VHA leadership structure is burdened with redundancies that slow decision making, create confusion, and foster competing priorities -- each of which undermine the quality of care for Veterans."

Do you agree with Secretary Collins on that point?

A. Based upon my time within this position, I would -- I would agree with that.

Q. Do you agree with his next sentence:

"The current structure also lacks clear accountability, leading to the frustration we hear from Veterans and staff regarding VA operations"?

A. I would agree with that.

Q. And then he states in the next paragraph:

"But you do not have to take my word for it. This is the same conclusion we have heard for years from the VA's Office of Inspector General (OIG), the Government Accountability Office (GAO), and many in Congress -- all of whom have repeatedly underscored the need to reorganize VHA."

Do you agree with him?

A. I can't speak to specific OIG or GAO reports, but I would generally agree that concerns have been raised from certain external stakeholders, such as Congress.

Q. He quotes the 2024 OIG report and he states:

"Weaknesses in VA's governance and oversight have affected many aspects of the

program's performance and operations."

Do you agree with Secretary Collins on that point?

A. Could you highlight that for me? I'm sorry.

Q. No problem.

A. I apologize. Is that bullet 4?

Q. Yes, it is.

A. (Reviews document.)

I would agree with that.

Q. And then he quotes Chairman Moran.

Did you tell me earlier that's your superior? No.

A. I'm sorry. You broke up a little bit.

Q. Chairman Moran. Do you know who that is?

A. I do.

Q. Who is that?

A. I believe he's chair of the -- maybe the SVAC or the FVAC -- HVAC or SVAC.

Q. Is that -- I'm sorry. Forgive me.

Is that within VHA or not?

A. No, he's a Congressional member.

Q. Oh, thank you. Okay.

He said Chairman Moran said last year "The VA needs reform. If the status quo were working, we would not spent two weeks hearing from VSOs on the way the VA needs to improve."

Do you see that?

A. I do.

Q. Were you involved in any of those hearings where the VSOs testified before Congress on the ways that VA needed to improve?

A. No, I was not.

Q. But this statement is contained within Secretary Collins' written statement before Congress, correct?

A. Correct.

Q. Secretary Collins indicates that it is his -- one of his goals to improve health care quality for veterans, empower local hospital directors, eliminate duplicative layers of bureaucracy, and ensure consistent application of VA policies across all medical facilities.

Do you see that?

A. Yes.

Q. And he's outlined clear -- "clear

lines of authority and accountability to ensure that everyone is focused on what they need to do to improve our service to veterans."

Do you see that?

A. Yes.

Q. And it states:

"The VHA Central Office will have responsibility for setting policy goals and conducting financial management, oversight, and compliance."

That is you, right?

A. Correct.

Q. And so really you're the -- you'd be the tip head of that effort in, like, we talked about earlier that would end up consolidating more oversight and financial management on you that the VISNs right now are currently performing, correct?

A. Correct. That is the intent.

Q. And the VISNs will take policy direction from VHA Central Office -- that's you -- to develop operational quality and performance standards that will guide VA's nearly 1300 medical facilities; is that right?

A. Correct.

Q. And so I guess I'm confused as to I thought that you were already -- based on your job description, which is very detailed, I thought you already had that organizational control over conducting financial management, oversight, and compliance over the entirety of the VA medical facilities structure.

So help me understand how this would -- is that not true?

A. So that is true, but, again, not every -- not every chief financial officer reports to this office and so that can create duplicative or overlapping responsibilities.

Q. The VISNs are more knowledgeable right now. They're more focused and specialized in the region in which they operate, correct?

A. Correct.

Q. And if there's only 18 of them and there's 50 states, that would mean that their regions are -- include multiple entire states for many of them, correct?

A. Correct.

Q. Is that the reason that -- because that's already a pretty large territory to

understand VA hospitals on a minute level.
Do you agree with me?
MR. KLOTZBUCHER: Object to form.
You can answer.
THE WITNESS: I would say that, yes, the current span of a VISN is -- is broad and encompasses large portions of the continental United States.
BY MS. WALLACE:
Q. So now instead of 18 of those, they recommend going to five, and they would have the responsibility for covering an even greater geographic area related to how the VA facilities' needs and budgetary allocations are?
Do I understand that correctly?
A. Yes.
Q. And no change will be made until Congress approves it; is that right?
A. I don't know if there needs to be Congressional approval of the reorganization. There is a notification process that is required of Congress, but specific approval I do not -- I

do not know if that's required by statute.

Q. Is that why the reorganization has already been underway even prior to the risk allocation being completed?

A. Could you rephrase that? I'm sorry. I'm thinking about it.

Q. No problem.

The reorganization, is it already underway?

A. Reorganization.

Q. And so what is needed from Congress in order to -- for Secretary Collins to implement his restructuring program, if anything?

A. So my understanding is that we need to provide Congress with notification of our intent to restructure and then wait 45 days. Again, I have not read that specific part of the statute to see whether or not it requires Congressional approval before we can proceed, but we do have to provide Congressional notification with a 45-day wait time.

Q. So the --

A. But that --

Q. Go ahead.

A. No, go ahead. Sorry.
Q. The reorganization of the VHA is not one of the -- does not require Congressional approval.
Is that your testimony? It just requires Congressional notice and a wait period?
A. I can't -- I can't say whether or not the stat -- the specific statute -- I have not read it -- requires Congressional approval, but notification is required.
Q. And I think you agreed with me earlier that there hasn't been a fully completed budget assessment done with regard to the reorganization?
MR. KLOTZBUCHER: Object to form.
You may answer.
THE WITNESS: Correct. A comprehensive budget review of impacts has not been completed.
BY MS. WALLACE:
Q. But yet the reorganization is already underway, right?
A. I would say discussions of the

reorganization are occurring. However, the mechanics of reorganizing have not begun.

Q. Is that because -- are you waiting on the 45-day?

A. I believe there's been -- there's still ongoing discussions in terms of the organizistic -- the organizational structure, and then also the need to provide Congress that notification. So there's still a lot of work that's being done while we work the Congressional notification as well.

Q. And you testified earlier that there has not been a risk analysis done involving the reorganization as it relates to how the reorganization could affect access to care?

A. I have not seen a specific risk analysis involving the reorganization and its impacts to access to care.

Q. Do you agree that organizational restructuring can create transitional instability in some cases?

A. In some cases, yes.

Q. So we have several variables in that the VHA is currently addressing with regard to its

reorganization that could affect access to care.

Do you agree with that?

A. Since access to care is mostly a policy determination, I can't -- I cannot from where I sit today, or what my knowledge of the reorganization is, see where that would impact the policy around access to care.

Q. What about the in-reality access to care is in community care and access measurement weaknesses?

Are you able to state with certainty that the scope of VHA care and eligibility will remain material unchanged -- materially unchanged over the coming years?

MR. KLOTZBUCHER: I'd object to foundation.

You may answer.

THE WITNESS: I can't say with certainty, but also access to care is in the metrics, and a lot of what we've discussed today is not within the purview of the Office of Finance in terms of how that could change or be impacted out.

BY MS. WALLACE:

Q. Office of Finance doesn't analyze how allocations affect access to care? That's not a part of your department?

A. So we would certainly look at access to -- or workload data from a facility perspective. However, sometimes impacts are not felt immediately. They are felt over time and so, again, today I could not say whether or not there would be a budgetary impact without seeing data and what that would look like.

Q. You cannot say whether there would be a budgetary impact as a result of what?

A. If we changed metrics or a policy change or staffing changes, I would want to see the workload data to better understand the impacts of that because there's a lot of variables that go into development of a budget and the allocation of resources.

Q. Are you aware of any of VA Secretary Collins' initiatives to reduce direct care in rural communities?

A. No, I am not.

Q. We've talked about a lot of

high-risk criteria that have been identified by the GAO and then many of which was mentioned in Secretary Collins' statement before Congress, including issues with staffing, weaknesses in oversight, deficiencies in the VHA's organizational structure, the need for a new governance model. And that's all current.

Would you agree with me?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: I would agree those are problems that still exist today or challenges that still exist today.

BY MS. WALLACE:

Q. Your designation indicates your opinion that the general scope of care and eligibility for care for veterans is unlikely to be significantly constricted in the future.

Based upon all of the deficiencies and high-risk designations and issues that we've discussed today, does that remain your professional opinion?

A. Yes.

Q. Are you able to guarantee to a veteran that the scope of his care and his eligibility care is unlikely to be constrained in the future?

MR. KLOTZBUCHER: Object to foundation.

You may answer.

THE WITNESS: That's certainly not a guarantee I could make.

BY MS. WALLACE:

Q. Do you have any idea what Congress may do to address the national deficit moving forward as it relates to VHA funding?

MR. KLOTZBUCHER: Object to foundation.

You may answer.

THE WITNESS: No.

BY MS. WALLACE:

Q. And my understanding is that VA spending, both mandatory and discretionary, is a part of the federal -- the broader federal debt.

Is that true?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: Yes.

BY MS. WALLACE:

Q. Do you agree with me that in the federal budget debate, programs such as VHA are increasingly the focus of deficit reductions discussions?

MR. KLOTZBUCHER: Object to form.

You may answer.

THE WITNESS: Based upon my knowledge and experience to date, I would not necessarily agree with that statement.

BY MS. WALLACE:

Q. Did you agree with it when the DOGE efforts were being underwent in the 2025 time frame?

MR. KLOTZBUCHER: Object to form.

You may answer.

THE WITNESS: Professionally, I could understand the need to gain efficiencies within the federal

government and look at ways to make improvements.

BY MS. WALLACE:

Q. Do you agree that in the broader federal budget debate, programs such as the VHA have been the increasing focus of deficit reduction discussions?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: No, I would not agree with that.

BY MS. WALLACE:

Q. And so you don't agree that DOGE was looking at reductions to the VHA in the 2024/2025 time frame?

A. I would agree that DOGE was looking at reductions across the veterans -- the Department of Veterans Affairs or ways to gain cost savings and efficiencies.

Q. And didn't you say earlier that it was also -- it also looked they were announcing plans to cancel 875 contracts worth roughly $2 billion?

MR. KLOTZBUCHER: Object to form.

You may answer.

THE WITNESS: That was the -- my understanding is that was the total amount that came out of that review.

BY MS. WALLACE:

Q. The criticism from veterans and the public was that many of these contracts were tied to medical service care, cancer -- sorry -- cancer care infrastructure, doctor recruitment, exposure assessments, and other health-related functions.

You recall that?

A. I haven't seen a complete list of contracts that were canceled. So I can't opine as to what -- whether those were included on the final list.

Q. Didn't we also talk earlier about DOGE's agenda emphasized workforce reduction and reorganization, and we talked earlier that that is where the severance opportunity packages came from? Accepted deferred resignation is what it's called.

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: Yes, the Deferred Resignation Program was part of a DOGE effort to restructure and reduce the size of the workforce.

BY MS. WALLACE:

Q. And so I guess I'm trying to understand why you don't disagree with the statement that VHA has increasingly become the focus of deficit reduction discussions on behalf of the broader federal budget debate.

MR. KLOTZBUCHER: Objection. Form and foundation.

You may answer.

THE WITNESS: Through the lens of budgetary requests and appropriations, the VHA budget has grown over time, not decreased. So the overall resources provided by Congress have -- have only grown.

BY MS. WALLACE:

Q. Didn't we talk earlier about they

wanted to return staffing to 2019 levels?

So while the program may be growing as a whole, that doesn't necessarily mean that medical services has grown.

Do you agree with that?

A. I believe when you look at the total resources available, both mandatory and discretionary, for medical services, it would show that they have grown over time or at least remain steady-state.

Q. And mandatory and discretionary includes all of those categories that we talked about earlier?

A. Correct.

Q. And so while the budget has grown since you've been with the program, that doesn't mean necessarily that it's grown in each category each year. For example, we talked earlier about the $12 billion decrease in funding for direct care at VA medical facilities.

Remember that?

A. Yes.

Q. And so while it's increased as a whole, that doesn't mean that necessarily

services -- that each category is increasing each year?

A. I would agree with that from a discretionary budget perspective there, that adjustment or that decrease exists within the discretionary side of the funding.

Q. Do you think that there is -- actually, let's take a quick break. It's been an hour.

THE VIDEOGRAPHER: Okay. We're going to go off the record at 2:42 PM.

(A recess was taken.)

THE VIDEOGRAPHER: Back on the record at 2:55 PM.

BY MS. WALLACE:

Q. Ms. Ford, before the break, we were talking about eligibility under the VHA program.

Do you remember that?

A. Yes.

Q. And we talked earlier today that your opinions with regard to Camp Lejeune eligibility are -- are limited in that you do not have an opinion on how -- on access to care for

veterans under that program.

Is that true?

A. I don't have any influence or involvement in the -- in the process for eligibility. So I can't opine on -- on people being eligible for care.

Q. And you have one of your designations: Congress has not constricted eligibility for care through VHA since its establishment.

Is that true?

A. From a statutory perspective, I would agree with that.

Q. There are other ways that Congress could restrict access to care other than through eligibility statutes.

Do you agree with that?

Such as reducing funding?

A. I can't -- I can't see reduced -- reductions in funding impacting eligibility since eligibility is a separate. It's -- it's essentially different than funding.

Q. Yes, and my question had to do with access to care.

A. It is possible that funding reductions could result in challenges to access to care.

Q. Being eligible for VA care does not guarantee necessarily that the veteran receives medical care through the VHA.

Do you agree with that?

A. Yes.

MR. KLOTZBUCHER: Objection. Form.

You may answer. I apologize.

THE WITNESS: That's okay.

Yes, because it's a veteran's choice as to whether to receive care from VA.

BY MS. WALLACE:

Q. Well, and there are also eligibility criteria that we touched on earlier relating to Camp Lejeune that can also be a barrier in a more broad and general sense.

And you testified you're not an expert on the criteria needed to access care, just on the fact that the statute allows for a veteran to be eligible for the care.

Is that true?

A. Correct.

Q. And so, for example, being eligible for VA care does not guarantee that a veteran can receive a timely appointment for needed medical treatment; is that true?

A. I would generally agree with that.

Q. And being eligible for care does not necessarily mean that there is an available provider within a plaintiff's geographic area that can treat his medical needs at any given time.

Do you agree with that?

A. Are you referring to a VA provider or a community provider?

Q. Both.

A. That is possible.

Q. Being eligible for VA care does not mean that the veteran will be able to timely receive the care that he needs.

Do you agree with that?

A. Could you repeat that?

Q. Being eligible for VA care does not guarantee the veteran will receive timely medical treatment that he or she needs.

A. That would be a fair assumption.
Q. There are certain types of medical care, such as mental health and specialty care, that are among the hardest to fill.
Do you agree with that?
MR. KLOTZBUCHER: Objection to form.
You may answer.
THE WITNESS: Based upon my understanding, those are -- that is an accurate statement.
BY MS. WALLACE:
Q. And when positions remain unfilled, that increases or decreases -- that can decrease access to care for veterans or at the very least increase wait times for them to receive the care that they need.
Do you agree with that?
A. I would agree that for the ability to access care within the VA direct care system that could have an impact.
Q. And we talked earlier about GAO recognized deficiencies in wait times for referrals under the Community Care Network.

Remember that?

A. Correct.

Q. And so just because a veteran has access to VA care, that does not mean that he or she won't have barriers to timely access to medical treatment, including under the Community Care Network program, correct?

A. That could be a possibility.

Q. It sounds like it currently is. It is occurring currently based on what we've reviewed today by Secretary Collins and the GAO reports.

MR. KLOTZBUCHER: Objection to form much.

You can answer.

BY MS. WALLACE:

Q. Do you agree with me?

MR. KLOTZBUCHER: You may answer.

Objection to form.

THE WITNESS: I'm sorry. Could you repeat the question?

BY MS. WALLACE:

Q. Yes.

I think you said that's a possibility that wait times could be increased in the Community Care Network program for veterans, but we've talked a lot today about Secretary Collins acknowledging those current deficiencies under the VA. And we also analyzed GAO reports that identified that deficiency with regard to VHA provided services at the present time.

Do you agree with that?

MR. KLOTZBUCHER: Same objection to form.

THE WITNESS: Based upon the body of information provided to me today, I could agree with that.

BY MS. WALLACE:

Q. Do you agree that many eligible veterans can often live hours from a full service VA facility?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: I couldn't state with certainty whether many or most veterans live -- their distance from a VA

facility. I have not seen population data to support that characterization.

BY MS. WALLACE:

Q. Would you imagine that based on the number of VA direct facilities nationwide and the number of veterans nationwide that there are many that live hours from a full service VA facility?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: I can -- I could imagine where there are veterans who live many hours. But, again, not understanding the population data and whether most veterans live within urban or rural areas, I couldn't provide specifics in terms of quantity or percent or number of.

BY MS. WALLACE:

Q. And I don't need anything specific. My question was just that most likely many eligible veterans live hours from a full service VA facility, correct?

MR. KLOTZBUCHER: Object to

form.

You may answer.

THE WITNESS: Again, I can't say many. I will say there are veterans who live hours fracture VA facility.

BY MS. WALLACE:

Q. That's fine. Thank you.

Would you agree with me that rural veterans face greater barriers to in-person care than urban veterans?

A. I would say that's -- that's a fair characterization.

Q. And some rural regions may disproportionately lack specialty providers under direct VHA facilities.

Do you agree with that?

A. Based upon the knowledge and information I have, I could generally agree with that.

Q. And based upon the representation of Secretary Collins that we discussed earlier to Congress earlier this month that the VHA is not fully staffed and has not been in 15 years, would you agree that staff shortages would affect access

to care for veterans in the VHA program?

A. So, again, I would agree that staff shortages at any point in time could impact access to care.

Q. And if staffing shortages are occurring at the present point in time, then that would affect access to care?

A. Yes, at those facilities that are experiencing shortages.

Q. Do you have stats on how many VA facilities of the -- is it 1200 are experiencing staff shortages?

A. That's out of the scope of my office's responsibility.

Q. Does the VA systematically measure unmet demand across the system?

A. I'm not familiar with any reports or data that I have been privy to that would show that information.

Q. And so maintaining eligibility does not necessarily guarantee that a plaintiff will continue -- will have access to care under the VA system.

Do you agree with that?

MR. KLOTZBUCHER: I'm going to object to form.

You may answer.

THE WITNESS: Could you repeat that, please?

BY MS. WALLACE:

Q. Sure.

Maintaining eligibility -- statutory eligibility does not guarantee that any patient will have timely access to care.

MR. KLOTZBUCHER: Same objection.

You may answer.

THE WITNESS: Based upon the information I am aware of, I would generally agree with that.

BY MS. WALLACE:

Q. And maintaining eligibility statutorily does not guarantee that a patient will have access to quality care.

Do you agree with that?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: Yes, I would generally agree with that.

BY MS. WALLACE:

Q. And so your testimony that is focused around eligibility, you are not providing testimony, and don't intend to, that that eligibility would equate to access to care, ease of care, geographic access to care, the type of care, whether their reasonable necessity requirements were met, timeliness, quality of care. You're giving just an eligibility opinion.

Do I understand that correctly?

A. A general --

MR. KLOTZBUCHER: Object to form.

You may answer.

THE WITNESS: Correct. I'm giving a general eligibility response.

BY MS. WALLACE:

Q. Okay. An eligibility opinion that the eligibility -- the statutory eligibility has not significantly changed since you've been there?

What's the scope of your opinion on eligibility?

A. In general, eligibility has not changed. However, certain statutory changes like a PACT Act can change eligibility.

Q. Yes, we talked earlier that anytime it wants to, Congress could reduce, modify, or increase eligibility for veterans, correct?

A. Yes, that's a fair statement.

Q. We talked earlier about how the VA uses managerial cost accounting to determine the cost of delivering care within its VHA facilities, correct?

A. Correct.

Q. And you testified that managerial accounting is the best method that you have available to you to understand the cost of delivering care within VHA facilities, correct?

MR. KLOTZBUCHER: Object to form.

You may answer.

THE WITNESS: It's a best managerial cost accounting practice, and it's one tool that we could use to determine that and it's a finance tool.

BY MS. WALLACE:

Q. And did you testify earlier it's the primary tool that you use?

A. It's one of the primary tools we use.

Q. Are you familiar with the HERC "Technical Report Practical Guide to Using MCA"?

A. No.

Q. It states that "MCA data is the national source of cost information for VA."

Do you agree with that?

MR. KLOTZBUCHER: Object to form.

BY MS. WALLACE:

Q. I'm happy to put it on the screen if you'd like to see it.

A. I would generally agree that, yes, managerial cost accounting is a source of data for costs.

Q. It says "MCA data are the national source of cost information for VA."

Do you agree with that?

A. Could you put the document up on the screen for me?

Q. Happy to.

Do you see this document is "Technical Report 44: Practical Guide to Using MCA NDEs in VA Research and Operations"?

A. Uh-huh. Yes.

Q. Does this look familiar to you at all, this document?

A. No.

Q. It says:

"Overview. The VA Managerial Cost Accounting program (MCA) provides detailed cost information for all VA provided services, including the cost of all VA inpatient and outpatient encounters. The Managerial Cost Accounting Office (MCAO) creates National Data Extracts to facilitate access to workload and cost data."

And then it says:

"MCA data quick facts."

First "MCA data are the national source of cost information for VA."

Do you see that?

A. I do:

Q. And then it says.

"MCA uses activity-based costing to

determine costs, which means that costs are based on the volume of services provided."

Do you see that?

A. I do.

Q. And it refers to the MCA in the fourth bullet as being "divided into three categories: fixed direct costs, variable direct costs, and indirect costs."

Do you see that?

A. I do.

Q. And it says:

"The MCA NDEs do not include the cost of care that is provided by community providers, often referred to as community care."

And my questions are: Do you agree with all of those facts articulated on this document?

A. Based upon what I can see in the document, yes, I would agree with the highlighted sections.

Q. Great.

And so when a veteran receives care through the Community Care Network, the VA does not incur those costs like it would medical

treatment received in a VA facility.

Do you agree with that?

A. Yes, I would agree with that.

Q. And just like the document said that we just looked at, managerial cost accounting does not take into account those reimbursement rates for VHA direct costs.

Do you agree with that?

A. It would not include the costs of community care.

Q. And so when the VHA is evaluating direct care at a VHA facility, it's using managerial cost accounting. And when the VHA is evaluating the cost of care under the Community Care Network, it's applying the reimbursement rates paid to outside providers. And these are two very different methods of assessing costs.

Do you agree with me?

MR. KLOTZBUCHER: Object to form.

You may answer.

THE WITNESS: I would agree generally with that statement.

BY MS. WALLACE:

Q. And for the reimbursement rate cost, it sounds like the way that your allocation takes into account Community Care Network costs is: They bundle the reimbursement rates paid to outside providers, which follows Medicare methodologies, and they add an additional administrative cost that they pay to the third party administrator, such as TriWest or Optum, and that is how they would assess the cost to the VA associated with Community Care Network.

The combination of those two factors; is that correct?

A. I would agree that's how today those costs would be assessed.

Q. And so if we wanted to know how much care costs to the VA under the VA direct care system, we're going to use managerial accounting?

A. That would be a source of information to determine those costs.

Q. And we're not going to use reimbursement rates, correct?

A. I would not utilize the reimbursement rates.

Q. For VHA direct care?

A. Correct.
Q. I wanted to confirm.
You do not have any opinion on whether -- on how the VA may quantify costs in the future related to the bellwether plaintiffs' estimated future life care plans in this litigation; is that right?
A. I do not have an opinion. Correct.
Q. And you don't have an opinion on the quantity of offsets as it relates to the VHA in the future?
A. Correct.
Q. And you don't have an opinion in the future that could guarantee that plaintiffs would have access to care in the future under the VHA program?
A. I can only speak to today's access. I could not hypothesize what the future access would look like.
Q. Is there anything that we have discussed today that you think I have misunderstood that you'd like to clarify?
A. (Pause). I can't think of anything at this time.

Q. All right. Then that is all the questions I have for you today, Ms. Ford. I thank you for your patience with me.

A. Thank you.

MR. KLOTZBUCHER: Can we just go off the record for five minutes, take a short break?

MS. WALLACE: Sure.

THE VIDEOGRAPHER: We're going to go off the record at 3:20 PM.

(A recess was taken.)

THE VIDEOGRAPHER: We're back on the record. Time is 3:26 PM.

MR. KLOTZBUCHER: Ms. Ford, how are you doing?

THE WITNESS: I am pretty tired right now, to be honest.

MR. KLOTZBUCHER: I understand.

Well, I want to thank you for your time. I have nothing further.

I appreciate you taking the time to sit and -- sit through the deposition and give your honest answers.

So thank you. I have nothing further.

MS. WALLACE: Thank you, Ms. Ford. I echo that sentiment, and I'm sorry you're tired. I am too, if it's any consolation.

THE VIDEOGRAPHER: All right. This ends today's deposition. We're going to go off the record. The time is 3:27 PM.

(Signature not waived, the deposition concluded at 3:27 PM.)

* * *

ERRATA SHEET

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

DECLARATION UNDER PENALTY OF PERJURY

I declare under penalty of perjury that I have read the entire transcript of my Deposition taken in the captioned matter or the same has been read to me, and the same is true and accurate, save and except for changes and/or corrections, if any, as indicated by me on the DEPOSITION ERRATA SHEET hereof, with the understanding that I offer these changes as if still under oath.

Signed on the _____ day of _____, 2026.

_____

HEATHER A. FORD

CERTIFICATE OF REPORTER

DISTRICT OF COLUMBIA)

I, Denise Dobner Vickery, a Registered Court Reporter and Notary Public of the District of Columbia, do hereby certify that the witness was first remotely duly sworn by me.

I do further certify that the foregoing is a verbatim transcript of the testimony as taken stenographically by me at the time, place and on the date herein set forth, to the best of my ability.

I do further certify that I am neither a relative nor employee nor counsel of any of the parties to this action, and that I am neither a relative nor employee of such counsel, and that I am not financially interested in the outcome of this action.

Denise D. Vickery

DENISE DOBNER VICKERY, CRR,RMR
Notary Public in and for the
District of Columbia

My Commission expires: March 14, 2028

&

& 3:4 9:1 43:8

0

0000000001 4:23 5:1,3,6
0000000002 4:24
0000000003 5:10,14
0000000007 5:11,15
0000000009 5:2
0000000020 5:4

1

1 4:9 22:12,14 23:6 30:1 78:13 100:5 139:22 143:16 144:5 155:18
1-4 7:3
10 6:1 64:9 113:18 115:4 162:10,13 182:22 190:11
100 115:22
104 159:17
10:16 64:18
10:25 64:15
10:27 64:21
11 6:5 7:3,6 169:5,7 191:12
11.7 80:7 124:15
1100 3:15
114 115:23
119 78:22
11:45 115:13
12 6:10 80:13 81:2,8 83:20,20 84:6,7 111:3,20 118:23 120:12 172:22 173:1 209:19
120 15:18
1200 219:11
13 6:14 33:18 176:5,7
1300 195:22
14 6:19 158:15 181:17,22 191:3 233:24
14b 7:4 181:17 181:24 183:7
15 103:11 107:18 108:10 139:9,24 141:18,22 144:9 218:23
150 50:4
152 4:4
15207 233:20
153 5:19
160 50:10
162 6:1
165 115:20 117:7 122:19
169 6:5
17 6:1 31:17 120:20 162:16
171 123:23
1710 141:8
172 6:10
176 6:14
18 73:1 120:20 120:22 196:18 197:12
180 123:15
181 6:19 7:4
19 4:20 5:7
1953 100:5 139:22 143:16 144:5
1975 10:20
1987 100:5 139:22 143:17 144:6
1997 36:8
1:18 152:2,9

2

2 4:12,13 29:10 29:12 30:1 35:17 87:10 88:12 155:19 206:24
2/19/26 29:18
2/23/2026 30:5
20 47:8 80:8
200 47:21 48:2 50:17
20005 3:16
2001 36:22 39:1
2005 47:9
2007 36:9 37:8 39:7
2008 36:9 37:8
2010 159:16
2012 99:19 100:13
2013 146:18
2015 155:3,7,17 176:19
2018 159:19
2019 40:8 41:17 41:17 42:19 47:7,11 92:14 92:24 93:6,13 209:1
202.532.5193 3:17
2020 45:7 47:6 57:14 96:19
2021 156:13 158:15
2022 93:12 99:13 100:14 126:11 174:7
2023 5:19 6:1 154:3 159:17 159:24 162:16 173:24
2024 6:5,10,14 45:2,2,7 80:1,5 80:10,11 86:10

169:9 173:6 176:10,20 177:4 192:21
2024/2025 206:15
2025 5:18 17:19 25:23 46:19 79:24 80:5,11 82:10 86:12 96:6,20,20 111:18 118:10 118:12 129:24 205:17
2026 1:16 2:8 4:20 5:7,17 7:3 7:6 8:8 35:11 46:20 67:5 76:6 78:14 79:4 80:7 80:8,12,22 82:10 83:21 96:6 111:4,18 115:23 116:23 118:4,7,23 123:16 124:15 124:18 129:23 191:12 232:16
2026/2027 62:11
2027 67:7
2028 233:24
22 4:9
23-106203 5:23 153:21
23-106836 6:4 162:11
24-105308 6:9 169:5
24-106390 6:13 172:23
25 1:16 2:8 8:7
25-106969 6:18 176:5
258 154:22
26 4:12 146:18
267 160:16
27 67:8
28144 3:7
29 4:13,15,20
2:55 210:15

3

3 4:15 23:2,5,13 29:13,16 30:8 30:21 31:17 78:2 155:20
30 5:5,7,12 97:8 99:16 100:4 112:15 139:21 143:16 144:5 148:14,17
31 100:5 139:22 143:17 144:6
38 141:7
3:20 229:10
3:26 229:13
3:27 230:9,11

4

4 4:20 23:2,5,14 29:21 30:21 77:1 78:9 122:15 155:20 193:7
4,000 82:6 83:19,23 84:6 96:7,15,22 109:2 185:15
4.3 118:10
4.5 118:5
40 173:23
40,000 61:15 189:2,16 190:1
4055 3:15
406,000 13:20
44 224:2
45 198:16,21 200:4

5

5 5:5 29:23 30:3 34:19 51:14 64:9 77:2 98:15 115:4 125:17 155:21
50 196:19
508 159:15
525 3:6
57 80:12 129:23

6

6 5:7 30:11 31:17 69:17 74:7
630 4:12
69 79:3 80:11 80:11 129:24

7

7 5:12 10:20 30:7,8,13 49:14 64:24 65:4 74:8 77:4
704.633.5244 3:8
707 125:21
76 5:16
7887242 1:23
7:23 1:4

8

8 5:16 31:16 76:1,3 77:5 79:24,24 80:5 104:21 115:17 125:17
8.5 80:1
8.89 79:22
8.9 80:2,5
810 11:15
875 87:9 88:20 206:23
897 1:4
8:58 1:17 2:9 8:8

9

9 4:3 5:19 113:18 153:21 154:1 155:12
9.5 80:5
90 130:7,8
943 116:23
97 38:21

a

ability 15:8 16:7,11,22 17:2 18:4 89:17 106:8 144:22 153:6 155:15 162:22 214:19 233:11
able 11:6 21:5 23:10 26:17 73:21 127:13 137:11 143:11 148:3 149:23 150:19 201:11 204:1 213:18
above 41:21 54:19 117:19 126:5
absorb 73:21
accept 49:21
acceptance 170:2
accepted 36:22 83:2 84:12 90:14 207:23
accepts 169:23 170:11
access 12:7 93:17 94:10 99:15 100:3 104:3 110:15 140:14,24 141:1,8,13,14 144:24 147:11 156:15 160:1 160:11 162:3 175:23 176:2 178:17,21 179:2 181:7 186:9 187:13 190:19 200:15 200:18 201:1,3 201:7,8,9,19 202:3,5 210:24 211:15,24 212:2,22 214:15,20 215:4,5 218:24 219:3,7,22 220:10,20 221:7,8 224:15 228:15,17,18
accessed 34:14
accessible 148:3
accomplish 71:12
accordance 144:13
account 75:20 130:18 132:16 138:4 148:12 226:6 227:3
accountability 155:20 192:3 192:12 195:1
accounted 173:23
accounting 26:10 27:5 47:17 50:16 51:2 69:12 89:11 128:13 129:1,7,11 130:1,16,21,23 134:17 135:10 135:20 137:24 140:13 222:9 222:14,21 223:17 224:10 224:14 226:5 226:13 227:17
accounts 54:1,6 77:19 78:18 84:1 122:24
accuracy 23:11 35:5 172:3,5
accurate 35:13 89:16 92:10 134:21 147:12 160:24 167:18 172:2 214:11 232:8
acfo 28:10,16 28:22
achieve 5:20 72:4 154:5
achieved 70:1,2 70:5
acknowledging 216:5
act 17:18,20,21 66:5,8 70:9 93:9,11 98:22 99:13,18 100:14 125:20 125:20 126:12 126:22 127:9 127:10 141:4,7 141:14,17 142:21 159:24 170:18,20 171:5 179:17 179:18,21 222:3
acting 15:13,17 26:9 27:13 42:19 43:3 45:13 46:16,18
action 9:5 53:6 173:13 233:14 233:17
actions 6:16 70:11,17 176:11
activated 189:12

active 100:4
activities 74:18 119:1
activity 37:14 39:15 40:2 134:17 224:24
acts 78:14
actual 120:3
actually 109:12 111:2 118:9 124:17 131:3,7 132:11 210:8
actuarial 130:6 130:10 132:9
actuaries 130:13 134:1,2
ada 68:22
add 116:12 227:6
added 35:12 155:16 190:4
addition 24:21 47:1
additional 6:6 6:16 17:8 25:1 25:2 29:6 30:5 55:21 60:18 68:2 73:22 74:7 119:5 164:17 165:17 166:18 169:11 172:7 176:11 179:8 227:6
additionally 156:17 163:13 175:8
address 5:22 18:4 105:11 154:6 163:2,19 163:20 172:8 172:15,20 204:12
addressing 156:15 167:13 200:24
adhering 66:17
adjust 18:3 63:16
adjusted 57:6
adjustment 165:19 210:5
adjustments 53:13,15 166:17,22 172:12
administration 6:15 11:1 35:23 36:9 43:7 58:6 67:1 75:18 77:7 84:24 86:4 88:9 90:19 108:3 138:21 176:10
administratio... 58:3 60:3
administrations 40:24 88:22
administrative 13:20 19:11 48:8,14 60:3 120:13 163:15 164:2 182:9 227:7
administrator 113:9 227:8
administrators 113:15 119:11 119:13,18 138:10,14
admitting 171:3
advance 31:5 67:1,3,6,18 68:18
advice 42:15
advisor 40:11 41:15 42:8
advocacy 91:23 93:16
affairs 3:24 5:17 6:21,22,23 10:22 11:17 40:10,17,20 41:15 46:10,13 47:1 52:1 107:6 107:14,15 206:19
affect 62:23 63:10 175:19 175:22 177:14 185:21 187:13
200:15 201:1 202:3 218:24 219:7
affected 104:9 192:24
affecting 46:24 179:24
affirm 10:2,10 10:11
afternoon 4:4 152:1
agencies 57:22 68:3 85:7,7,17 85:18
agency 21:22 24:8 31:10 37:8 37:13,15 39:14 39:16,24 105:7 163:4
agenda 207:20
agree 10:5 65:3 65:6 68:4 74:6 78:7 82:12,17 101:1,18,20 102:1,5,12,16 102:20,24 103:15,18,21 104:6,9,11 106:18 107:19 108:8,18 109:24 113:22 128:1,12 138:1 147:6 148:19 152:23 168:16

168:17,22 170:5,12 171:6 171:19 185:9 185:13,20,23 186:2,4,5,9,12 187:8,10,24 188:8,8 189:22 191:21,24 192:1,6,16,18 193:2,10 197:2 200:19 201:2 203:8,12 205:4 205:13,16 206:4,12,14,17 209:5 210:3 211:13,17 212:7 213:7,12 213:20 214:5 214:18,19 215:17 216:9 216:14,16 218:8,16,18,24 219:2,24 220:16,21 221:2 223:10 223:16,21 225:15,19 226:2,3,8,18,22 227:13

agreed 8:16 163:5 185:2 199:11

agreement 24:2

ah 23:2

ahead 67:11 77:22 95:11 117:16,17 198:24 199:1

ai 95:21 96:2

aimed 92:12 94:10

aligned 28:18

aligning 62:17

aligns 15:21

allocate 129:10 129:12 131:5 131:19 133:6 134:6,8 153:8 164:16 165:12

allocated 53:20 57:1 65:14 83:21 126:15 132:6 166:6,7 172:7

allocation 28:19 53:21 80:15 132:16 132:23 150:19 155:22 198:4 202:18 227:2

allocations 53:9 53:11 133:20 133:22 167:9 175:19 197:16 202:3

allow 16:13 151:2 160:3

allowed 16:13 17:7 99:14 141:8 144:19

allowing 68:2

allows 113:2 212:23

alternative 175:6

ambiguous 155:18 158:7

amend 101:2 102:7

amended 103:8

america 3:11 91:7

american 91:7

amorphous 182:9

amount 19:4 53:20 75:19 80:9 83:23 88:7 88:23 101:12 106:6,9,13,14 110:24 118:4 122:7 125:6 133:12 138:20 140:21 207:6

amounts 25:1,3

analyses 50:20 63:17

analysis 18:15 19:3 99:3 136:7 136:18,19 138:5 200:13 200:17

analyst 37:9,16 37:22

analyze 133:5 202:2

analyzed 216:6

andrew 41:5

announced 87:9

announcing 206:22

annual 74:19 75:17 78:13 107:9 124:15

annually 44:7 101:10

answer 14:2 18:22 24:23 60:14,19 61:8 61:21 68:9 81:1 82:4,16 84:20 85:11,21 87:3 89:5 90:1,24 92:8,20 93:22 94:14 95:16 104:18 106:22 107:22 108:13 109:7 110:8 111:10 128:22 132:15 134:12 136:14 142:17 143:22 148:24 149:13 157:21 184:6 185:7

187:1,3,17 188:6 189:6,20 197:5 199:17 201:17 203:11 204:7,16 205:1 205:10,21 206:10 207:3 208:3,16 212:11 214:8 215:15,19 216:21 217:10 218:2 220:3,13 220:24 221:16 222:19 226:21
answers 229:24
anti 65:21 66:3 66:4,8 70:9
anticipate 188:15
anticipated 56:10 127:2
anticipation 56:20
anymore 121:6
anytime 30:23 222:4
apologies 18:24
apologize 95:13 128:19 193:7 212:11
appeal 102:7
appearances 3:1
appearing 8:16
appears 65:19
apples 137:20 137:20 138:2,2
applicable 59:15 153:14
application 146:9,20 194:20
applications 160:23,24
applied 146:17
applies 59:8 101:5
apply 24:23 113:16 127:19 146:13 160:1
applying 150:7 226:15
appointment 6:8 160:14 169:12 170:19 170:23 171:23 185:21 213:5
appointments 169:19 170:8 171:21
apportioned 106:10 131:4 131:18
apportionments 43:13
appreciate 229:22
approach 169:20,21
appropriate 52:16 53:3,6 56:22 68:2 105:24,24 106:1 113:20 160:8
appropriated 52:3,22 53:24 54:6 56:23 57:3 66:15 67:3,7 101:10 105:6 105:21 106:6 106:15 116:21 140:5,16
appropriately 66:12
appropriates 75:21
appropriation 37:19 66:23 67:2,6,6,19 68:18 70:3 119:24 124:5 125:1 175:19
appropriations 52:5 74:20,21 78:8,12,14 101:21 103:2 105:2,11 159:24 208:19
approval 53:3 54:7,8,12,20 197:22,24 198:19 199:4,9
approves 197:20
approximately 13:20 21:7,8,8 39:7 40:7 50:10 57:13 61:15 65:9 83:19,20 86:10 87:10 92:14 96:22 99:19 100:13 116:22 122:19 162:16
april 5:19 154:3
arc 28:18
ardell 10:16
area 20:16,17 59:8 73:5 114:11 157:11 159:16 160:20 165:12 172:6 172:18 197:15 213:10
areas 5:22 68:11 154:6,13 154:15 155:5 155:18 157:18 158:3 161:19 172:17 174:6 185:19 217:16
arm 58:3
army 37:3

arrival 96:19
arrived 96:16
article 177:12 181:19
articles 183:16
articulated 225:16
asked 23:17 26:5 28:1 31:4 31:13 33:16,20 43:2 55:14,19 55:21 107:10 180:15
asking 122:4 129:15,17 136:16,17
aspects 192:24
assess 163:18 170:7 227:9
assessed 175:7 227:14
assessing 226:17
assessment 164:24 186:16 187:19 199:13
assessments 207:13
assets 50:5
assigning 45:24
assignments 69:18 152:13
assist 58:11
assistance 122:21 147:11
assistant 41:6 41:20 42:1,14 42:16,20,24 44:24 45:3,5,7 45:11,13,15 51:12 72:10 86:20
associate 26:10 27:4 28:11 42:19,23 44:24 45:3,5,15 86:19
associated 84:17 121:12 227:10
assume 43:2 121:8 124:12 145:20 190:17
assumed 45:12
assumption 214:1
assumptions 191:1
attached 4:7
attempt 160:22
attention 43:18 167:8
attorneys 20:24 21:1
attract 162:22
attrited 80:19
attrition 83:9 83:12 96:7
audit 28:20 70:10
august 6:10 25:23 45:6 46:17,19 47:6,9 96:19,20 100:5 139:22 143:16 144:5 173:6
authoritative 137:16
authorities 16:15
authority 54:13 101:2,5 103:22 105:7 106:5 127:13 195:1
authorization 114:5 164:5
authorizations 105:1
authorizing 102:4
automatic 114:13
avail 127:15
availability 185:21
available 23:23 32:4 56:16 64:3 104:5 110:20 113:4 127:15 147:10 186:2 209:7 213:9 222:15
avenue 11:15
avoid 28:11
aware 13:15 14:6 23:24 24:11 25:20,21 25:24 57:22 60:21 87:11 94:16,18,21 95:10,18 99:21 107:3 135:23 136:6,8 138:8 155:1,4,5 156:1 156:6 157:15 158:22 159:1,7 160:6,10,13,17 160:21 161:4 161:15,17,24 162:2 165:10 165:16 166:4 168:1,3 174:18 175:15 182:24 183:13,17,18 184:1,16,17,20 202:20 220:15
awareness 58:13

b

bachelor 36:7
bachelor's 35:20 36:8
back 36:10 64:14,20 96:24 115:12,15,18 129:18,19,20

152:8 210:14 229:12
background 35:19 43:1 168:10,20
balances 102:15
ballpark 118:19
barrier 212:19
barriers 62:19 140:24 215:5 218:9
base 103:18
based 14:14 18:15 43:1 44:8 50:19 56:11 57:6 69:9 71:8 75:22 88:7,8 108:20 110:2 113:23 118:16 122:8 132:5 134:17,19 141:9 144:20 145:16,24 152:22 169:15 170:14 171:7,9 171:24 174:2 177:21 182:15 189:7 191:23 196:2 203:20 205:11 214:9 215:10 216:12 217:4 218:17 218:20 220:14 224:24 225:1 225:18
basis 53:17 65:24 107:9
bates 29:24 30:7 51:13 69:17
bathroom 124:24
bearingpoint 36:23 37:7
bears 30:7
becoming 38:16
began 37:15 38:23,23
begins 158:5
begun 200:2
behalf 113:11 116:18 174:19 208:12
believe 19:18 28:22 30:15 36:8 57:2 59:3 81:10 82:6 84:21 92:9 93:10 120:4 121:5 128:8 134:21 135:22 141:21 146:11 147:12 148:10 171:1 180:13 184:21 193:20 200:5 209:6
bell 141:4
bellwether 25:11,16 27:17 228:5
beneath 28:8 41:19 78:3
benefit 146:13
benefits 17:18 95:5 106:9 139:12,19 143:1 146:14 150:8 161:3 179:24 182:17
best 89:16 94:15,20 128:14 130:2 137:24 149:17 150:16 153:6 222:14,20 233:11
better 111:23 149:18 188:17 202:16
beyond 106:6
bib 77:1,2,4,5 78:2,9 98:15 122:15 125:17
bill 9:3 16:7,11 16:13,13,18,22 17:6,14,15,17 18:8,16 43:12 95:11 128:7,9,9
billed 128:3
billing 31:9 127:23
billion 50:4,10 78:23 79:3,22 80:11,12,13 81:2,8 83:20 84:7 87:10 88:12 111:3,20 112:15 115:20 115:24 117:7 118:5,11,23 120:12 122:19 124:16 129:23 129:24 206:24 209:19
billions 79:3
birth 10:18
bit 64:8 65:1 97:4 127:23 132:14 193:15
body 216:13
bona 66:17
books 62:6
borrowing 74:24
boss 27:10 41:12
bottom 123:1 158:11 171:17
bounds 52:21 53:23 66:12
boxes 177:17

branch 3:13
brave 116:14 122:22
break 64:6,7,10 114:21,22 115:2,4,6,16 139:9 151:6 210:8,17 229:7
breakdown 83:11 120:5
breaking 83:17
breaks 62:19 75:20
breast 149:6
bridging 122:21
brief 5:18 38:15 58:14,14 76:6 120:5 122:9
briefings 130:11
briefly 8:19 35:18 36:19 41:14 49:23 112:2
briley 17:17
broad 164:24 168:23 197:8 212:20
broadening 95:5
broader 42:16 73:13 155:14 165:6,22,22,24 166:2 204:21 206:4 208:13
broadly 156:2,3 161:17 164:23
broke 193:14
broken 120:1
brought 167:8
bucket 100:17 112:13 119:12 124:9 138:22
buckets 43:19 112:3 126:4
budget 5:17,18 28:9,15 37:16 37:22 38:6,6 40:22 41:7 43:11,13,15 44:4,8 45:22 46:2,15 47:16 48:21 50:16 51:1,19 52:2,3 52:9 55:1 56:16 56:17,19,21 58:2,10,15 60:6 61:16 63:10,12 63:16 65:1,14 65:15 68:3,5 69:11 70:8 71:23 75:17,19 76:6 77:19 78:15 87:13 104:22 106:5 108:22 111:1,4 111:17,22 115:16 116:5 116:12 117:7 117:24 120:4 121:24 122:5,9 122:9,20 123:8 123:14,19 124:4,15 125:18 129:15 129:18 130:8 133:18 138:12 138:20 139:3 140:21 152:21 165:12,19 166:17,22 172:12 174:2 175:19 178:11 178:14,18,23 179:3 187:9 199:13,19 202:18 205:5 206:5 208:13 208:19 209:15 210:4
budgetary 58:10 59:19,22 61:11 62:4 111:16 138:11 140:15 164:20 172:18 178:5 197:16 202:10 202:13 208:18
budgeted 56:12 56:13 110:23
budgeting 46:9 46:23 47:3,13 57:16,20 61:4 62:23 63:4 129:9 150:18 177:15 180:16
build 130:13 134:3
building 11:18 11:20,23 38:5 39:21 40:3
built 44:9
bulk 78:22,24
bullet 163:12 167:1,15 193:7 225:6
bundle 227:4
bundled 119:19
burdened 191:17
bureaucracy 86:23 194:20
business 35:23 37:5 60:4
butler 3:22
buy 91:7,7

c

c 8:1 97:3 99:24 103:7
calculate 88:23 89:15 169:24 171:4
call 119:6 123:5

called 9:11 39:16 76:6 112:22 150:16 152:4 207:24
camp 1:7 4:21 5:8 8:11 12:14 12:22 13:13 14:15 19:16 74:15 97:8 98:16 99:4,16 100:4 139:13 139:21 140:6 141:9 142:14 143:15 144:4 144:20 145:21 145:22 147:18 148:13 150:23 210:22 212:19
cancel 87:9 188:16 206:23
canceled 88:2 88:11,20 207:16
cancellation 89:1 188:1
cancellations 92:1
cancer 149:6 207:11,11
cap 54:15,19 55:5
capacity 104:9 131:22 178:16 186:11
captioned 232:6
capturing 170:10
care 6:2,6,11 6:17 14:12,16 14:17 17:20 21:24 32:11,21 32:22,24 33:2 38:8 65:16 71:8 72:24 73:3 74:22 78:19 79:8,17,18 80:18 84:2,4,8 84:9 85:7 87:14 93:17 94:10,11 97:19,20,22 98:5,24 99:9,15 100:3 103:17 103:18 104:3 106:12,17 109:14 110:10 110:11,14 112:6,9,12,16 112:22 113:2,3 113:4,6,20 114:5 116:14 116:18 117:10 117:10 119:10 119:14,15,16 119:22 120:3 121:8 122:16 122:17 123:4 123:20 126:2,7 127:24 128:2 128:12 130:2 130:24 131:9 131:20,21,24 132:2,6,17,18 132:21,24 133:6,10,13,16 133:18 134:5,7 135:13 136:3,4 136:5,10,10,10 136:19,20 137:4,15 138:22,24 139:18,23 140:12,24 141:1,9,13,14 141:16 142:1,2 142:9,10,19,24 143:4,7,18 144:7,8,12,15 145:1,5,11,18 146:1,4,14,17 146:22,24 149:9,21,24 150:22,22 154:16 155:2 155:11,13,16 155:17 156:15 158:19 159:21 159:22 160:2,4 160:8,8,12,15 161:3 162:3,4 162:24 163:4 163:11,17 164:4,6,11 165:11,14,15 165:21 166:1 166:19 167:5 167:12 168:14 169:10,19,23 170:8,11,19,22 171:21 173:6 173:21 174:7 175:22,23 176:2,12 178:1 178:17,21 179:1,9,10 182:20 186:10 186:12 187:13 187:14,20 190:20,23 191:20 194:17 200:15,18 201:1,3,7,9,9 201:12,19 202:3,21 203:17,18 204:2,3 207:11 207:12 209:20 210:24 211:6,9 211:15,24 212:3,4,6,14,22 212:24 213:4,8 213:17,19,22 214:3,3,15,16 214:20,20,24 215:4,7 216:3 218:9 219:1,4,7

219:22 220:10 220:20 221:7,8 221:8,9,11 222:10,16 225:13,14,22 225:23 226:10 226:12,14,15 227:3,10,16,16 227:24 228:6 228:15
career 36:17,20 36:24 37:1,15 37:24 91:4
carolina 1:2
case 10:1 28:5 33:13 34:8,16 56:10 149:5
cases 1:10 77:24 81:17 90:8 121:16 148:6 165:4 200:21,22
categories 78:23 103:3 135:6 158:6 209:12 225:7
category 79:11 122:13 209:17 210:1
cause 147:17
cell 12:8
center 28:19 158:18
centers 50:20 71:6,8 186:22
central 119:1 120:15 195:7 195:20
certain 36:3 71:14 77:11 79:9 91:2,9 98:22 122:6 125:4 128:16 137:21 148:8 163:3 169:20 169:22 171:4 192:19 214:2 222:2
certainly 27:10 177:18 202:5 204:9
certainty 183:3 201:11,19 216:23
certificate 233:1
certification 146:23
certified 2:20
certify 233:5,7 233:12
cfo 15:14,20 26:10,20 27:1,2 28:8,11 32:23 46:16 49:20 50:3 51:12 59:13 66:14 69:2,20 70:18 71:22,23 72:9 72:12 73:14,16 73:17 105:5 116:6 152:15 157:24 161:14
cfos 27:4 71:17 105:19
chair 182:16 193:20
chairman 193:11,16 194:2
challenge 108:6
challenged 108:1
challenges 6:3 107:1 155:14 155:20 156:1,6 156:13,14 157:1 160:15 161:18 163:3 163:14,21 167:4 171:20 203:14 212:2
champva 146:15 150:4 150:11
change 16:15 35:7 62:15 63:11,13 80:13 103:22 104:8 111:16 146:2 197:19 201:23 202:15 222:3 231:3,5,7,9,11 231:13,15,17 231:19,21,23
changed 45:19 202:14 221:22 222:2
changes 59:5 72:7 80:18 127:7 176:18 183:11 202:15 222:2 232:9,12
changing 91:2
characterizati... 217:2 218:12
characterize 61:10 111:12
characterized 170:13
charge 45:22
chart 26:18,21 63:7 78:3 177:13,21
charts 33:5
chat 22:8,16 29:6 34:20 76:5 153:19,22 169:4 172:22 181:16 191:4
checks 168:10 168:20
chicago 123:4
chief 5:12 10:24 28:11

35:10 46:19 48:16 50:3 196:11
choice 212:14
church 39:24 40:3
circumstance 16:17 66:22 83:1
circumstances 15:5
civ.p. 4:12
civil 3:13 14:24
cjla 30:8
claim 13:13,20 145:20
claims 13:17 112:19 127:6 127:16
clarification 129:14 136:16
clarify 122:3 228:22
clarke 26:7,9 34:2,4 129:4
clear 98:13 140:18 174:15 192:3 194:24 194:24
clearer 26:15
clicking 154:21
client 37:4
clients 37:2
clinic 185:24
clinical 147:15 147:15,20,22 160:15 163:16 164:2 185:1
clinicians 147:21
clinics 71:9 186:23
clja 4:23,24 5:1 5:2,3,4,6,10,11 5:14,15 30:1 35:17
closed 118:13
cms 21:23
code 113:17,18 113:18
codified 141:7
collaborating 176:24 177:7
collaboration 73:8 123:12
collect 16:7,11 16:14,15,18 17:2 18:5,9 87:18 88:21 170:1
collected 88:8 118:5
collecting 160:14,19,22 161:5
collection 122:11
collections 77:24 116:9 117:18,21 118:8 122:17
college 35:24 38:13
collins 6:20 41:24 60:10 62:10 63:9 72:3 84:14 106:18 177:8 180:5 181:3,18 182:6 189:1 191:7,21 193:2 194:13 194:16 198:12 202:21 203:3 215:11 216:5 218:21
columbia 2:22 233:2,5,22
column 112:5
combination 227:11
come 53:20 56:14 83:10 116:2 121:15 132:10 178:13 179:6
comes 56:7 58:16 91:11 131:2 133:23 134:1 139:2
coming 56:20 201:14
comments 59:11
commission 233:24
committee 6:23 19:11 107:14 107:15 182:17 183:17
committees 107:5
common 79:12 123:3
communication 10:6 20:11
communicati... 20:1,22
communities 202:22
community 6:6 6:11 21:24 32:21,22,24 71:8 74:2 78:19 84:1,4,8,9 103:17,18 110:13 112:6 112:12,18,22 113:2,5 117:10 117:10 119:10 119:14,15,16 119:22 122:16 126:2,7 131:21 132:3,6,17,21 133:10,16,17 134:5,7 135:13

136:5,9,20 137:4,14 138:10,22 158:18 159:20 159:22 160:2,4 160:8,12 162:4 163:11,16 164:4,5,11 165:11,14,15 165:21,24 166:18 169:10 169:19 170:8 170:19 171:21 173:6,21 179:1 201:9 213:14 214:24 215:6 216:3 225:13 225:14,23 226:10,14 227:3,10
comorbidities 147:2
companies 112:20
comparable 159:23
comparative 138:4
compare 38:2 75:12
compares 26:18
comparison 136:2 138:2
compensate 99:6
compensated 24:20
compensation 100:19
competing 191:19
compiling 25:17
complaints 44:12 54:22 158:18
complete 60:22 61:2 167:18 174:16 207:15
completed 18:13 70:10 198:4 199:12 199:20
completely 8:20 131:23
completion 167:19
complex 174:4
compliance 69:13 78:20 112:6 117:11 118:21,24 119:4,12 120:12,17 122:16 126:2,7 195:10 196:6
component 46:12 139:4,5 148:12
comprehensive 142:10,19 199:19
comprehensi... 167:3
comprise 116:7
concern 155:18 178:10
concerned 93:16
concerns 160:11,15 162:3 179:7 180:4 183:23 183:23 184:8 184:14 192:18
concluded 230:11
conclusion 192:10
condition 147:4 147:16
conditions 14:14 103:10 103:12 140:1 144:10 145:3 145:19 149:7
conducting 136:17,18 195:9 196:5
confidence 143:12
confirm 65:3 228:2
confused 196:1
confusion 191:18
congress 15:3 44:7 54:10,20 58:18 59:3 66:15,22 67:14 68:2 74:16 75:18,21 100:22 101:1 101:10,12,16 102:7,10,14 103:3,21 105:22 106:9 129:16 131:4 144:19 181:7 181:19 182:3 182:15,23 183:14,20,23 184:17 192:13 192:20 194:9 194:14 197:20 197:24 198:11 198:15 200:8 203:3 204:11 208:21 211:8 211:14 218:22 222:5
congressional 43:16 54:11

74:19 104:12 105:1 107:5 180:9 193:24 197:22 198:19 198:20 199:3,6 199:9 200:10
congressman 182:16 183:1
connected 167:4
connecting 163:10
consider 46:22
considerations 130:17 132:1
considered 31:15 57:3 98:21 157:11
consistent 74:8 194:20
consolation 230:5
consolidate 74:4
consolidated 117:2 159:24
consolidating 195:15
constitutionally 102:19
constrained 106:9 204:3
constricted 203:19 211:8
construction 121:18,21 124:3 125:8
consult 27:22
consultant 36:24 37:1 38:14,16,24 39:4
consulted 62:22 63:1
consulting 36:23 72:6
contacts 32:14
contained 108:22 171:1 194:12
contains 135:4
contaminants 14:15
contaminated 19:16
contamination 12:15,22 13:13
content 181:11 181:13
contents 20:10 20:22 154:20 162:18 173:16
continental 197:9
continual 160:7
continue 67:24 130:3 158:13 219:22
continued 104:24 152:4,7 156:12 160:11
continues 174:8
continuing 67:14,21,22,23 68:4 178:16,20
contract 6:12 87:19,24 88:10 92:1 93:24 173:7,14,24 174:4,16 175:10
contracting 174:9,10
contractors 174:11 179:17 179:20
contracts 86:23 87:10 88:1,10 88:20 89:1 91:6 110:19 113:8 175:1 206:23 207:10,16
contribute 76:15
contributed 147:4
contributes 123:7
contributions 122:7,8 128:6
control 54:5,6 105:12 196:4
controls 69:13
conventions 23:9
conversations 21:21 156:3 183:22
coordination 42:12 123:12 179:2
copayment 103:6
copayments 117:23 121:24
copays 16:21 17:11
cor 174:9
correct 15:24 17:9,24 23:12 24:15 25:6 26:6 26:8,13,23 29:4 31:11,12 33:3 36:11,18 38:22 39:2,8 41:10,18 46:6,21 47:18 50:13 51:3,16 51:17,20 52:7 53:18 54:21 64:2,4 65:17,18 65:22 66:2,6 67:16 69:16,23 77:12,14 78:20 78:21,23 80:8 80:14 84:3 86:8 86:9,16 88:3

90:16 93:14 95:2,3 96:8 100:23,24 101:7,8,10,14 101:15 103:4,8 104:1,2 105:7,8 106:7 110:20 112:24 113:13 114:1,6,7 116:24 117:8 117:13,14 118:3 119:21 122:10 126:9 126:13,24 127:18,20 139:6 140:3,22 141:2 150:24 151:1 152:17 152:18 154:21 159:10,12 177:5,10 178:18,19,24 179:5 182:5 186:18,19,19 186:23 187:4 190:16 191:13 194:14,15 195:12,17,18 195:24 196:16 196:17,21,22 199:18 209:14 213:2 215:2,7 217:23 221:17 222:6,11,12,16 227:12,21 228:1,8,12

correcting 164:15

corrections 232:9

corrective 70:11

correctly 52:6 69:15 73:7 92:24 197:17 221:12

correspondence 33:22 42:13 43:17

cost 14:16,17 18:12 26:10 27:5 44:9 47:16 50:16 51:2 56:11 69:12 77:3 87:19,21 88:10,19 98:19 119:21 120:9 121:8,14,20 122:10 125:24 128:11,13,15 129:1,6,11 130:2,16,18,21 130:22,23 134:16,24 135:1,8,10,13 135:16,20 136:2,4,6,17,19 136:19 137:7 137:12,23 138:10,24 139:4,7 140:13 146:5 149:8 150:18 155:16 165:1 180:22 181:1 206:20 222:9,10,15,21 223:9,17,20 224:9,10,12,13 224:15,20 225:13 226:5 226:13,14 227:1,7,9

costing 134:17 136:9 137:3 224:24

costs 25:16 79:15,20 84:10 86:24 89:15 119:5,18 121:12 127:8 134:18,19 135:6,7,7,8 138:21 139:23 143:18 144:8 151:3 223:18 225:1,1,7,8,8 225:24 226:7,9 226:17 227:3 227:14,16,19 228:4

counsel 3:24 8:21 10:2 20:1 20:2,11,19,22 21:11 23:17 24:2 31:9 42:15 233:13,15

count 28:17

country 73:2 117:2,5 120:14 120:21

couple 64:24 115:18 153:16 153:18

coupled 83:3

course 31:15 32:3 51:9 69:6

courses 53:6

court 1:1 9:6 33:7 35:19 66:7 72:21,22 74:14 156:24 233:4

cover 29:17 30:4 149:8

coverage 94:11 95:5 142:10 145:14 147:18 179:8,10

covered 103:10 103:11 139:24 143:18 144:9 146:24

covering 197:14

cpt 113:17

cr 67:12,13,19

create 62:18 68:5 91:16 106:5 191:18 196:12 200:20
created 126:23 141:24 174:7
creates 142:9 224:14
creating 34:15
credentialing 168:9
criteria 102:22 141:13,16 149:3 203:1 212:18,22
critical 156:16 162:23 169:16
criticism 182:24 207:9
criticized 182:14 183:19
criticizes 7:4
cross 42:12
crr 1:24 233:21
crunch 89:12
current 10:21 10:23 15:11,16 15:23 34:24 35:13 44:23 48:1,16 49:22 50:21 54:16 57:18 60:6 65:7 74:8 84:13,15 86:14 101:22 104:21,24 122:8 150:14 155:1 165:9 172:16 175:9 177:7 180:5 181:8 191:16 192:2 197:7 203:7 216:5
currently 11:22 17:23 27:2 41:23 42:2 51:7 60:24 70:22 71:18 73:1 105:5 109:4 120:20 150:15 152:12 157:5 158:24 160:18 184:24 187:9 188:2 195:17 200:24 215:9 215:10
curriculum 5:5
cuts 89:21
cv 1:4 29:24

d

d 8:1 10:16,17 97:3 103:7
d.e. 4:12
dan 34:2,4
daniel 26:7,9 34:10 129:3
data 25:12,15 25:18 27:17 50:20 88:8,21 89:16 99:3 130:21 133:19 134:3,23 135:16 137:17 138:15 140:8 140:14 160:14 160:22 161:9 161:12,19,21 167:17 169:22 202:6,10,16 217:2,14 219:18 223:8 223:17,19 224:14,16,18 224:19
date 8:7 10:18 36:2 63:22 118:12 146:19 169:22 170:10 170:22,22 205:12 233:10
dated 29:18 30:4
dates 170:2
david 3:20 8:5
day 45:23,23 49:2,2 198:21 200:4 232:15
days 15:18 97:8 99:16 100:4 139:21 143:16 144:5 148:14 148:18 198:16
dc 2:13 3:16 11:10,12,14,17 41:16
dcfo 51:5 65:24
dealing 44:19 76:23
debate 205:5 206:5 208:13
debt 204:21
decade 184:19
december 19:19 41:17 45:2 100:5 139:22 143:17 144:6
decide 53:8
decided 36:12
decision 58:10 166:15 191:18
decisions 90:9 104:13 165:5 166:9,10
deck 182:22
declaration 232:1
declare 232:4
decrease 81:5,9 101:16 209:19 210:5 214:14
decreased 80:10 208:20
decreases 214:14

defendant 9:4 24:12
defense 10:2 37:8,12,15,18 37:23 38:1,4 39:14,16,23 40:1
deferred 81:19 83:2 84:12 90:14 207:23 208:5
deficiencies 161:15,23,24 172:8 203:5,20 214:23 216:5
deficiency 65:21 66:3,4,8 70:9 174:18 175:12,18,22 216:7
deficit 204:12 205:6 206:6 208:12
define 70:4
defines 157:12
definition 142:20
definitive 143:11
definitively 151:2
degrees 36:1
delay 110:14 186:6
delays 93:18 161:2 179:23
deliver 136:10
delivered 65:16 73:1 99:9 112:16
delivering 87:14 130:24 137:12 222:10 222:16
delivery 38:8 79:18 110:10 176:2 187:20
demand 80:19 219:16
denials 179:23
denise 1:24 2:19 9:7 233:3 233:21
departed 45:8
departing 81:16
department 3:12,23 5:16 6:21 9:3 10:22 11:16,17 39:12 40:9,17,19,19 41:15 46:10,13 46:24 47:4 48:18 51:24 63:18 68:12,20 69:19 85:1 91:17,19 107:1 116:17 123:6,7 123:13 135:1 150:9 152:15 177:15 202:4 206:19
department's 51:5 65:23
departments 68:3
departure 111:6
departures 81:13
depend 153:9 186:10
depending 54:9 58:17 62:2 98:23 121:16
depends 100:22 104:3,12,24 108:3 109:21 121:19
deploy 157:6
deployed 158:1
deployment 56:1 57:5
deployments 55:15 56:12
deponent 8:13 10:6
deposed 19:16 26:3,5 28:1 41:5
deposition 1:13 2:12 4:6,13,17 8:10,15 10:9 12:9,17 14:20 19:14 20:4,12 20:13 21:3,17 22:4 27:23 28:5 29:10,19 30:17 31:6 34:8 35:4 229:24 230:7 230:11 232:6 232:10
depth 51:15 162:19
deputy 27:1,2 28:8,18 41:6 42:20,24 44:24 45:3,5,11,13,15 51:11,12 86:19
describe 14:10 26:17 35:18 42:9 48:10 58:1 66:7 75:15 118:21 156:24 190:2
described 41:9 67:17,18 157:1
description 5:12 31:5 49:19 49:20 51:15 65:5 69:10 153:12 188:9 188:12,14 189:22 196:3
descriptions 65:4

designated 14:8 21:16 74:14 99:23 100:2 139:10 160:1 190:1
designation 79:23 203:16
designations 23:5 33:13 34:15 74:17 97:3 103:7 144:17 203:21 211:8
desk 178:13 179:6
detail 17:14 46:19 154:11
detailed 15:17 45:16 196:3 224:10
details 77:4
determination 201:4
determinations 147:22 152:21 161:1
determine 51:24 91:10 133:11 134:18 166:12 222:9 222:23 225:1 227:19
determined 19:6 137:3
determines 101:12
determining 133:21
develop 52:14 87:21 129:15 163:19 195:21
developed 14:14 130:7 174:15 180:12
developing 31:16 87:13
development 37:17 58:3 135:17 180:8 202:18
dha 39:11
dhdva 40:5
diagnosis 186:6
dictates 125:6
difference 40:16 41:1 51:22 137:7
different 37:4 39:12,21 40:3 40:24 73:2 78:18 81:4 125:8 132:10 132:14 211:22 226:17
difficult 170:6
difficulties 149:23
difficulty 141:1
digressed 97:1
dipped 157:9
direct 15:23 43:10 51:18 79:17 109:14 112:9 121:8 124:6,13 127:24 129:10 130:24 131:9 131:19,23 132:18,23 133:6,8,13 134:9,20 135:6 135:7 136:3,20 166:5 187:14 190:23 202:21 209:19 214:20 217:5 218:15 225:7,7 226:7 226:12 227:16 227:24
direction 47:15 48:15 50:15 51:1 73:6 105:17 110:18 174:11 195:20
directives 69:19 152:14
directly 31:23 63:1 71:18 72:1 84:5 95:1 139:3 139:6 178:5 179:20 185:21
director 28:2 28:13,15,23 37:22
directorates 50:19
directors 27:4 194:19
disabled 179:11
disagree 142:6 188:11,14 208:10
disclosure 4:10 22:24
discretionary 77:23 78:5,8,11 97:9,16 98:3,13 99:6 100:17 101:6,9,13,21 104:23 112:4 112:12 115:22 116:5 204:20 209:8,11 210:4 210:6
discuss 29:8 130:13 178:16 178:21
discussed 48:5 156:4 201:21 203:22 218:21 228:21
discussions 73:11,12,13,24 74:5 167:11 168:4,4 199:24

200:6 205:7 206:7 208:12
diseases 141:19
disproportion... 218:14
dispute 172:3,5 174:3
disputes 179:8
disruption 179:23
dissolution 61:14
distance 216:24
distinction 78:4
distinguished 15:15
district 1:1,2 2:22 233:2,5,22
divided 135:1,5 225:6
division 1:3 3:13 8:7
divisions 49:7
divulge 19:24
divulging 20:10
dobner 1:24 2:20 233:3,21
doctor 114:3 207:12
doctors 54:24 79:14,18 112:8 185:11
document 1:9 22:13,22 29:11 29:15,20 30:2 30:10,12,22 31:3,21 34:21 35:1 49:14,16 51:14 74:10 75:24 76:2,10 76:13,14,15,16 77:9,16,18 115:16 118:12 120:2,6 135:23 153:24 154:22 158:18 162:12 169:6 170:15 172:10,24 176:6 177:13 181:21,23 189:9,13 190:7 190:8,22 193:9 223:22 224:1,6 225:17,19 226:4
documentation 63:24 148:15 151:2 174:16
documented 148:20
documents 4:18,23 5:10 12:11 23:18,21 29:18,22 30:6 31:14 32:5,12 32:17 38:7 105:10,14 108:23
dod 122:24
doge 84:17,23 85:6,16 86:7,21 87:5,8 90:17,19 91:15 92:17,22 94:8,19 95:1,4 95:21 96:5 205:16 206:14 206:17 208:6
doge's 207:20
doing 37:19 42:11 129:8 229:15
doj 4:20 5:7 20:24
dollar 125:6
dollars 56:23 83:20 165:2
doug 41:24 60:10
douglas 6:20
drafted 180:18
drafting 77:15 180:3
drive 70:13,13
driven 132:8
driver 81:5,8 85:24
due 8:17 16:21 16:22 56:20 155:14
duly 9:12 152:5 233:6
duplication 176:21
duplicative 194:19 196:12
duration 21:5
duties 45:19 46:3 51:15 65:5 73:22 74:7 152:12,19
duty 100:4
dynamic 62:16

e

e 8:1,1 10:16 33:17,19,21 34:10 74:17 179:13
eaches 164:21
earlier 31:8 34:13 35:3 48:5 114:20 152:11 177:6 182:2 185:3 186:15 191:12 193:12 195:15 199:12 200:12 206:21 207:19,21 208:24 209:13 209:18 210:21 212:18 214:22 218:21,22 222:4,8 223:1
early 36:17 38:20 39:18 81:20 83:4

156:19
ease 221:7
eastern 1:2,17 2:9 8:9
echo 230:3
ed 51:10
edits 23:8,10
edmundson 17:18
education 36:3
educational 35:19
edward 51:11
effect 10:1 86:7 102:4 110:4 148:3 158:23
effective 155:16
efficiencies 62:15 85:6,17 91:17 205:24 206:20
efficiency 44:12 85:2
efficiently 65:16
effort 43:23 157:4 195:14 208:6
efforts 5:20 74:3 94:23 95:4 154:4 172:14 172:19 205:17
ehr 55:15
either 18:24 27:3 118:5 172:4 186:16
electronic 43:8 43:22 44:5,13 55:17,24 56:11 57:4 76:23 128:9 156:21
eligibility 99:5 100:6 102:22 103:3 104:4 114:13 139:11 140:6,20 141:24 143:9 144:19 147:24 150:2,6,13 179:9 201:12 203:18 204:3 210:18,23 211:5,9,16,20 211:21 212:17 219:20 220:8,9 220:18 221:5,7 221:11,18,20 221:21,21,24 222:1,3,6
eligible 83:5 97:6 98:4 127:17,19 139:17,23 142:24 144:7 145:10 149:20 211:6 212:4,24 213:3,8,17,22 216:16 217:22
eliminate 72:18 188:16 194:19
eliminated 86:23 174:23 190:22
eliminating 176:20
elimination 188:1
elon 85:1
emphasized 207:20
employ 84:5
employee 24:15 39:6 84:10 86:6 233:13,15
employees 11:22 21:22,24 26:2 87:5 92:14
employer 10:21
employment 36:5,15
empower 194:18
empowerment 122:22
enact 67:21
enacted 80:1,6 80:11 100:22
encompasses 197:8
encounter 134:24
encounters 224:13
ended 37:24 98:17
ends 18:1 230:7
engage 58:12
engagement 178:2
enrolled 139:17
enrolling 161:2
enrollment 97:7 100:6 102:23 160:23 160:24 161:12
ensminger 141:4
ensure 23:11 35:4 52:2,4,12 53:2 58:13 62:16 168:14 194:20 195:1
ensures 66:11
ensuring 42:13 60:5 62:18 66:16 70:10 171:21
entire 45:22 46:9 196:20 232:5
entirely 39:21
entirety 46:10 46:24 77:8

83:24 196:6
entities 52:23 52:23
entitled 154:4 173:6
enumerated 149:7
equal 135:8
equate 221:7
equipments 186:3
equities 46:1
equivalent 47:21 50:18 108:24
eric 17:18
errata 231:1 232:11
esq 3:5,14,22 3:23
essentially 15:8 16:10 18:3 37:22 43:10 46:3 55:23 66:11 72:23 73:6 112:3 121:2 127:13 127:14 190:7 211:22
establish 158:17 159:20
established 18:8 84:24 99:18 102:23 103:19 126:11 190:14
establishment 211:10
estimate 44:9 118:14,15 122:10,11 180:22 181:1,5
estimated 118:7 129:23 228:6
estimates 18:12
evaluate 88:19 167:3
evaluated 69:24 70:13
evaluating 226:11,14
evaluation 37:17 70:14
event 113:10
everybody 64:14
everyone's 83:1
exactly 18:13 96:11 144:16
examination 4:2 9:11,17 152:4,7
examined 9:12 152:5
example 55:4 67:5 119:3 152:16 158:16 159:18 209:18 213:3
except 232:9
exception 55:15 84:1
excess 82:6 105:6
excluded 35:7
excluding 119:22
excuse 30:21 187:3
execute 52:3 70:17 71:17 131:6 132:11
executing 63:14
execution 28:16 48:21 49:2 51:19 52:10,13 52:15 53:16 55:1 58:16 66:18 69:12 70:24 140:4,8 187:9
executive 27:3 28:2,13,15,23
exemptions 103:6
exhibit 4:9,13 4:15,20 5:5,7 5:12,16,19 6:1 6:5,10,14,19 7:4 22:12,14 23:6 29:10,12 29:13,16,21,23 30:3,7,11,13,21 31:17 34:19 49:14 64:24 65:4 76:1,3 97:2 104:21 115:17 125:17 153:20 154:1 162:10,13 169:5,7 172:22 173:1 176:5,7 181:17,22,24 191:3
exhibits 4:6 22:7 29:7
exist 159:8 161:16 162:1 188:2 203:13 203:14
existed 25:20 25:21 26:1
existing 57:4 137:5,13
exists 102:3 210:5
exodus 82:22 83:19
expand 94:11 94:22,23
expanded 5:21 154:6 179:9
expansion 17:18

expect 23:14 33:24 63:9,11 63:12,15
expected 34:5 122:1
expense 118:1
expenses 148:9
experience 43:2 46:9,18 62:20 110:2 205:12
experiencing 161:2 219:9,11
expert 1:13 2:11 4:10 14:8 19:21 20:3,7,16 21:20 24:6 25:4 25:7 129:6 212:22
expertise 20:17 44:17 46:23 74:9 114:10,11 128:24 130:13 144:11 149:15
experts 33:17 150:17
expires 233:24
explain 16:8 36:20 40:15,15 45:1 77:19 88:4 98:2 149:18
explained 78:17
explaining 112:1
explicitly 75:8 94:9
exposed 99:16 142:14
exposure 14:15 141:9 148:12 148:20 207:12
exposures 77:3 98:20 99:2,11 126:1 147:3
extended 123:20
extends 144:11
extent 47:2 143:4 144:11 144:21
external 32:13 94:6 192:19
extra 121:14
extract 135:4
extracts 134:23 224:15

f

f 10:17 67:8 74:17
face 156:12 218:9
facilitate 224:15
facilities 53:9 54:23 70:19,21 71:3,5,7,9 73:4 78:20 79:9,13 79:22 81:16 82:23 93:19 109:14 111:7 112:7,10 117:5 117:12 120:24 121:7,9,19,22 122:17 123:21 124:9,14 127:24 128:2 129:10 130:3 130:19 131:20 132:19 136:11 137:5 159:23 163:18 164:9 164:10 166:5,8 166:12 186:14 187:14 194:21 195:23 196:7 197:15 209:20 217:5 218:15 219:8,11 222:10,16
facility 53:20 70:23 71:1,23 79:20 97:20 109:13,16,17 109:17,19,19 109:21 110:4 110:12 113:3,7 121:11,13,17 123:4,5,6,8 125:11 128:12 133:20,21 134:9,20 136:3 137:13 163:13 163:18 171:22 202:6 216:18 217:1,7,23 218:5 226:1,12
facility's 56:15
facing 135:23
fact 32:12 49:24 96:4 183:16 212:23
factor 131:23 133:21,24 168:13
factors 133:7,8 147:3 227:12
facts 25:10,12 70:16 224:18 225:16
fails 66:22
fair 111:19 214:1 218:11 222:7
fairly 32:6 157:7
fall 49:3,5 59:14 73:4 79:18,21 97:9 100:16 124:7 125:18 150:10 150:13 157:23 172:17 173:13 174:19 175:12
falling 78:8 79:16 112:11

falls 38:10 39:24 40:3 49:6 116:6 117:6 161:20 174:21
familiar 12:14 31:3,24 47:12 75:6,9 76:13 100:9 105:9 114:16 135:3 135:15 141:3 141:20 147:20 162:17 170:17 170:20 176:13 219:17 223:5 224:5
families 38:9
family 13:2,10 89:22 99:5 139:13,20 140:11 141:8 142:1,5,11,24 143:5 144:3,24 145:18,21,22 146:9,12 147:18 148:3 150:3,7,23
family's 13:11
fantastic 64:12
far 83:18 117:9 128:10 150:18
feature 22:8 34:20 76:6
february 1:16 2:8 4:20 5:7 7:3 7:6 8:7 159:17 191:12
fed.r. 4:11
federal 24:9,11 24:14,17 38:14 38:24 39:6,8,13 58:4 67:20 69:13,20 74:24 100:22 101:2 106:1 126:22 152:15 204:21 204:21 205:5 205:24 206:5 208:13
feedback 179:22 180:1 183:13 184:2,9
feel 28:20
feelings 89:18
fell 16:20 43:18 46:1
felt 35:6 90:7 202:8,8
fewer 185:24 186:2
fide 66:17
field 70:19,21 105:19
file 145:20
filed 13:12,17 13:21
fill 190:5 214:4
filled 43:1 62:7 189:17 190:1,6 190:16
final 207:18
finalized 19:5 36:24
finance 26:11 47:16 50:16 51:1 61:16 62:24 71:24 74:1 161:13,21 177:15 201:22 202:2 222:23
finances 61:3 133:12
financial 5:13 10:24 18:14 28:12,21,24 32:20 35:10 46:19 48:17 50:3,5 51:18 57:16,20 59:23 69:12 70:12,18 105:10,20 156:20 157:4,5 157:8,22 161:9 172:18 173:11 173:17 195:9 195:16 196:5 196:11
financially 233:16
financials 70:21
find 56:8 154:20
finding 147:15
findings 171:19 172:13,15
fine 9:22 19:1 80:4 218:7
finish 64:23
finished 37:1
firm 9:1
first 18:4 36:16 38:13 55:6 118:20 154:8 155:8 163:12 171:14 173:19 176:15,15 224:19 233:6
fiscal 66:23 67:3,4,8 69:14 70:8 79:4 101:13 105:21 106:12 111:4 116:23 118:13 173:24
fit 23:11
fits 45:2
five 155:18 197:13 229:6
fixed 104:1 135:6 225:7
flag 53:5
fms 157:6,7
focus 205:6 206:6 208:12
focused 32:20 37:5 45:21

73:14 91:20 195:2 196:15 221:5
folks 71:17 166:12
follow 113:22
following 10:3
follows 9:13 137:22 152:6 227:5
footnote 78:13
ford 1:14 2:12 4:2,6,14,19,23 4:24 5:5,6,10 5:11,14,15 8:14 9:10,20 10:16 10:19 18:20 22:14,18 29:12 29:16,21 30:1,3 30:8,11,13,17 35:17 64:8,23 115:15 152:3 152:11 154:1 162:13 169:7 173:1 176:7 181:22,24 210:17 229:2 229:14 230:3 232:19
foregoing 233:8
forgive 193:22
form 17:11 35:13 60:13 61:20 68:8 82:3 82:15 87:2 89:4 89:24 90:6 92:3 92:7,19 93:21 94:13 106:21 107:21 108:12 109:6 110:7 128:19 134:11 136:13 142:16 143:21 148:23 185:6 187:2,16 188:5 189:19 197:4 199:16 203:10 204:24 205:9,20 206:9 207:2 208:2,15 212:10 214:7 215:14,20 216:11,20 217:9 218:1 220:2,23 221:15 222:18 223:12 226:20
formerly 160:18
forms 13:21 32:13
formulas 103:22
formulated 130:10
formulation 28:10 69:11
forth 233:10
forward 63:10 72:13 74:3 132:4 204:13
foster 191:18
found 83:7 162:20 169:16 170:6 173:20 176:17
foundation 14:1 18:21 61:7 84:19 85:10 89:24 90:6,23 95:15 106:21 109:6 148:23 149:12 184:5 201:16 204:6 204:15 208:15
four 21:7 112:3 158:15
fourth 225:6
fracture 218:5
fragmentation 176:20
frame 19:19 41:17 45:3 86:11 205:18 206:16
frames 159:22
frankly 150:13
freeze 93:12
frequency 32:9
frequently 32:6
frustration 192:3
ft 165:22
fulfill 175:8
full 10:14 23:14 24:14 47:21 50:17 66:22 68:3 70:12 90:9 108:23 114:4 216:17 217:7 217:23
fully 5:22 11:6 50:4 106:19 107:18 108:9 109:3,22 110:5 153:8 154:6 186:16 199:12 218:23
function 72:9 72:12
functions 37:5 62:17,18 65:7 70:18 73:22 74:4 119:1 175:7,8 207:13
fund 74:22 77:3 78:1 98:20 99:2 99:11 117:18 123:11 126:1,6 167:9
funded 74:19 74:23 75:4,7,10 75:13 91:10 120:17,18
funding 15:8 16:4,11,16

32:24 33:1 38:7 44:6,15 51:24 52:17 55:8,22 56:9,13 58:4,20 59:1 67:3,7,24 71:1 73:5 74:16 75:13,16 78:3,4 78:5,9,12,23 79:4 81:5 83:18 84:9 97:9,11,16 98:14,18,21 99:7 100:15,21 101:6,9,13,17 102:3,8,11,19 104:5,8,11,23 106:11 110:20 112:5,12,21 115:21,22 116:1,8 125:7,9 125:14,19 126:11,21 127:3 131:6 133:12 138:22 152:24 164:17 164:22 165:3 165:13,17 166:7 178:5,14 179:17 204:13 209:19 210:6 211:18,20,22 212:1
funds 49:3 52:1 52:21,23 53:2,5 53:24 54:1,3,4 57:6 66:11,15 66:18 70:22,24 71:18 75:20,21 105:6,12,19 106:2 111:21 112:4 116:20 116:20 118:5 118:24 122:17 131:8 132:23 140:5,16 166:6 172:7
further 12:24 13:1 16:9 152:6 229:21 230:1 233:7,12
future 101:21 103:4 104:11 104:12 149:8 156:16 203:19 204:4 228:5,6 228:11,14,15 228:18
fvac 193:21
fy 5:17

g

g 8:1
gain 62:15 145:13 205:23 206:19
gao 5:19,23 6:1 6:4,5,9,10,13 6:14,18 57:19 58:16,22,23 59:16,21 69:21 69:22 152:17 152:20,22 153:2,5,10,13 153:17,21 154:3,9,13 156:4,9 157:12 158:23 159:1 159:11 160:13 161:5,20 162:1 162:9,11,15,20 163:1,9,13,17 166:19,24 167:2,16 169:3 169:5,15,16 170:6 171:8 172:23 173:5,9 173:20 176:4,5 176:9,17 184:23 192:13 192:17 203:2 214:22 215:11 216:6
gao's 155:2 171:19 184:17
gaps 175:10
gather 89:14
gears 127:22
general 3:24 74:22,23 105:20 114:17 114:17 125:9 135:10 184:21 192:12 203:17 212:20 221:13 221:18 222:1
generally 12:18 72:11 108:5 109:24 134:14 138:1 149:1 155:13 160:10 162:2 164:7,19 175:15 184:3,7 185:9,18 186:4 186:5,12 192:18 213:7 218:18 220:16 221:2 223:16 226:23
generate 59:2
gentlemen 42:6
geographic 197:15 213:10 221:8
getting 170:7
give 132:17,18 133:10,11,12 134:1 229:24
given 14:20 33:6,11 57:5 175:24 190:10 213:11
giving 23:22 221:11,18
go 51:13 52:10 63:13 67:11 77:22 80:18 95:11 114:3 115:9 117:16

117:17 124:19 125:7 151:8 154:19 158:6 164:17 170:5 198:24 199:1 202:17 210:11 229:6,10 230:8
goal 72:16 85:16 91:16 92:12,16,22 93:1,3 176:20
goals 60:7 94:9 95:21 194:17 195:8
goes 54:19 83:18 138:21
going 19:15 22:6,10,17,19 28:1 29:5,9 30:19 34:18 35:15,16 58:11 64:18,24 76:5 79:12 96:24 97:4 115:9 124:17,24 125:2 130:3 140:19 143:14 146:6 149:19 151:8 153:16 153:19,22 162:8 172:21 175:3 181:15 197:13 210:11 220:1 227:17 227:20 229:9 230:8
golkow 8:6
good 9:20,23 89:2
gotten 126:15
governance 192:23 203:7
governing 69:20 152:15
government 21:22 24:9,12 24:18 31:10 38:14,24 39:6 58:5 67:20,24 85:1,6,17 90:11 91:3,20 192:12 206:1
governmenty 119:8
grad 36:10
graduate 35:24
graduated 38:21
graduating 36:4,21
graham 3:4 9:1
grandfathers 13:7
grants 117:3 123:20
great 13:7 225:21
greater 13:22 155:13 197:14 218:9
group 3:3 9:1 16:21 27:5 58:8 138:24 140:9 140:13,16 143:10 144:24 150:2,4,12,13
groups 91:24 93:16 127:7
growing 93:7 209:2
grown 173:22 208:19,22 209:4,9,15,17
guarantee 101:21 204:1,9 212:5 213:4,23 219:21 220:9 220:19 228:14
guard 17:19,21
guess 196:1 208:9
guidance 73:5 105:17 152:20 152:22 153:2
guide 174:16 195:22 223:6 224:2
guidelines 147:16,23
guides 32:13
guys 64:5 111:2 115:1 124:13

h

half 182:21
happen 55:14
happens 66:21
happy 30:24 129:19 223:14 223:24
hard 47:10
hardest 214:4
hasty 90:9
hate 127:15
head 56:3 81:22 91:12 120:8,10 195:14
headed 28:10
headquarter 11:16
headquarters 11:18 40:1,23 70:19 120:16
health 6:2,15 6:17 11:1 14:12 14:16,17 16:23 17:19 37:15,18 37:23 38:2,4,8 39:16,23 40:1 43:6,8 44:5 55:17,24 56:11 57:4 65:16 71:8 72:24 73:3 76:24 77:6,7 79:8,18 80:18

85:7,18 86:4 94:11,22,24 97:19,19,22 99:9 100:3 106:12,16 110:10 112:16 116:18 117:22 122:7 123:4 139:23 140:12 141:9 142:1,10 142:19 143:18 144:8,11,15 145:1,5,18 146:14 147:10 150:21,22 153:3,18 154:16 155:2 155:11,13,17 156:7,21 157:16 158:1 161:3 163:4 167:5,11,12 176:10,12 182:20 184:18 186:13 187:20 190:19 194:17 207:13 214:3
hear 192:4
heard 8:20 183:22 192:10
hearing 15:6 96:15 180:14 182:3,7,15 183:2,15 184:13 194:4
hearings 194:9
heather 1:14 2:12 4:2,14,19 5:5 8:13 9:10 10:16 152:3 232:19
held 2:12 8:11
help 23:4 36:6 45:18 52:3 76:14 77:19 87:21 124:11 124:14 144:16 163:2,3 167:4 191:10,13 196:8
helped 76:16 77:2 104:22
helps 51:23 62:20,20
herc 223:5
hereof 232:11
high 5:19 120:6 143:11 154:4 154:13,15 155:3,5,6,17 156:13 157:12 157:16 158:6 159:2,16 160:20 162:23 184:18,22 203:1,21
higher 96:12
highlight 167:21 193:4
highlighted 154:14 170:15 171:9 225:19
hire 162:22 165:1 166:13
hired 113:15
hires 167:20 168:6
hiring 55:22 108:21,21 166:15,18 168:17,19,23
historic 133:17 133:19
historically 136:24
history 35:20 78:4 149:6
hold 47:9
holders 161:21
home 113:7 124:24
honest 229:17 229:24
honorable 6:19
hood 35:24
hospital 139:18 142:24 144:7 149:21 194:18
hospitals 82:23 96:8 128:2 197:1
hour 21:9 64:7 114:23 115:5 210:9
hours 21:8 216:17 217:7 217:13,22 218:5
house 6:24 50:19 107:14 182:16
hr 55:6 164:24 168:10
huh 47:24 124:10 224:4
human 110:22
hundred 11:24 12:2 71:4
hvac 193:21
hypothesize 228:18
hypothetically 53:5

i

icd 113:18,18
idea 204:11
identification 22:14 29:12,16 29:21 30:3,11 30:13 76:3 154:1 162:13 169:7 173:1 176:7 181:22 181:24

identified 23:13 154:13 155:15 162:1 163:10 163:19 166:19 167:16 172:8 174:24 175:5 184:23 203:1 216:7
identify 31:13 86:22 145:20
iii 4:11
illness 147:1,4 147:16
illnesses 103:11 139:24 144:9
imagine 26:14 71:13 217:4,12
immediately 202:8
impact 18:2,10 18:14 61:16 68:15,17 87:13 93:17 110:10 138:11 153:7 176:1 177:20 201:6 202:10 202:13 214:21 219:3
impacted 14:13 89:22 186:14 201:23
impacting 211:20
impacts 67:12 67:19 68:11 87:19 90:10 93:24,24 138:24 173:17 187:20 199:19 200:18 202:7 202:16
implement 153:5,12 158:14 159:9 163:6 167:3 198:12
implementation 65:15 156:19 157:8 160:5
implemented 153:9 158:16
implementing 177:9 179:18 179:21
important 52:9 66:14 97:21 131:12 168:13 168:18
improve 6:16 91:17 94:10 121:21 168:5 176:11 194:5 194:10,17 195:3
improvement 6:4 157:18
improvements 121:18 125:10 206:2
improving 154:16
inadequate 54:23 155:19 155:21
incentive 123:10
include 78:17 79:5 84:10 121:12 135:13 146:23 152:13 156:14 166:18 169:1 185:11 185:16 196:20 225:12 226:9
included 45:24 56:22 84:6 98:21 100:10 117:19,23 119:23 122:19 122:22 123:1 123:22 135:18 147:5 207:17
includes 47:20 48:1 77:20 78:12 103:17 119:17 209:12
including 10:7 29:22 85:7 92:13 129:3 156:20 158:7 163:20 203:4 215:6 224:12
income 118:2
inconsistent 155:19 158:7
incorporated 139:2
increase 18:18 19:3 51:8 53:19 85:6,16 101:16 111:18 127:2,5 127:8 146:2 175:10 177:16 214:16 222:6
increased 50:7 72:14 93:17 95:21 144:23 209:23 216:2
increases 126:15 164:23 214:14
increasing 206:6 210:1
increasingly 205:6 208:11
incumbent 50:11,14
incur 225:24
independently 70:16
index 4:1
indicate 137:7
indicated 77:13 232:10

indicates 194:16 203:16
indirect 33:2 135:7 225:8
individual 26:7 53:7 54:23 83:1 149:6,22
individuals 21:10 33:22 53:8 149:20
influence 211:3
influenced 69:18 152:14
influencing 152:21
inform 130:8 133:17 135:16
informaticists 55:23
information 6:7 25:12 34:9 34:14 43:8 46:7 60:19 83:17 89:15 108:22 133:17 134:2 137:17 140:9 147:1 148:16 150:6 151:3 160:19 161:5 168:11 169:11 176:1 179:14 183:19 216:13 218:18 219:19 220:15 223:9 223:20 224:11 224:20 227:19
informed 174:10 177:24
informs 130:7
infrastructure 121:11 156:17 207:12
initially 53:15 127:11
initiated 93:11
initiative 60:11 60:16 90:15 96:2
initiatives 86:7 90:17,18 91:8,8 91:15 94:18 96:5 156:18 202:21
innovative 123:11
inpatient 224:12
inside 137:13
inspector 192:11
instability 200:20
insurance 16:23 18:9 117:22 118:6 118:17 122:8 147:10
integrated 32:11 138:23 174:6
intelligence 37:8,12 39:14
intend 221:6
intended 20:16 21:20 66:13
intends 66:15
intent 187:5 190:4,15,18 195:18 198:16
interact 57:19 58:5,9
interaction 62:21
interested 58:19 94:7 233:16
internal 38:5 43:12 54:2,12 55:5 69:13 135:20 137:23 181:4
internally 184:10
internet 12:7
introduce 8:21
introduced 95:22
invoices 31:9
involve 59:19 95:5 152:20
involved 25:17 27:16 47:12 59:9 73:20,24 80:21 114:4 176:24 177:7 180:3 194:8
involvement 48:14 211:4
involving 15:7 15:9 200:13,17
irrelevant 131:23
isakson 170:18
issue 164:1,14 164:14,16,20 165:10 167:8
issued 69:19 152:14
issues 20:8 43:22 44:12,16 57:20 71:1 108:5 162:4 163:10 164:9 166:5 167:13 168:10 178:21 179:1 184:22 203:4,21
item 116:11 123:16 126:21 129:23 173:13
items 23:13 125:18
ivc 174:7,7,15 174:19,23

175:5

j

janey 141:3
january 35:11 39:1 40:13 41:13 46:20 86:12
jenna 3:22
jh 37:10
job 1:23 10:23 15:21 31:5 32:5 36:13 38:13 40:16 42:11 44:1 45:12,18 46:3,14 47:20 48:1,16 49:11 50:21 51:4,6 52:11 56:8 59:4 60:2,5 65:7,13 69:9 73:22 74:7 89:11,14 105:4 113:19 152:12 152:19 153:11 159:8 168:2 188:20 196:2
jobs 81:18 188:15
jog 34:14 141:10
joint 122:24 123:4,6,10
july 40:8 41:17 45:2,7 47:6,8
jump 154:20
jumps 36:4
june 10:20 159:19
justice 3:12 9:4

k

keep 93:5 174:10
key 167:19
kind 134:3
kitchen 125:3
klotzbucher 3:14 9:2,3 10:11 13:24 18:19 19:1 60:12 61:6,19 64:16 68:7 82:2 82:14 84:18 85:9,19 87:1 89:3,23 90:5,22 92:2,6,18 93:20 94:12 95:8,12 104:15,17 106:20 107:20 108:11 109:5 110:6 111:9 114:23 115:7 128:18 131:15 134:10 136:12 142:12,15 143:20 148:22 149:11 157:20 184:4 185:5 186:24 187:15 188:4 189:5,18 197:3 199:15 201:15 203:9 204:5,14,23 205:8,19 206:8 207:1 208:1,14 212:9 214:6 215:13,18 216:10,19 217:8,24 220:1 220:11,22 221:14 222:17 223:11 226:19 229:5,14,18
know 12:18,21 13:12,16 26:4 30:24 41:11 56:24 57:1 58:17 60:17 63:15 67:9 80:15 81:1,7,21 81:22,24 82:24 83:8 94:24 96:1 96:3,14 98:2 99:12 114:8,12 114:18 117:1 119:10,19 120:7,9 126:20 130:9,15,20 135:5,12 136:24 137:2 140:8,10 141:12,18,23 141:24 142:3,9 143:4,17 144:18 145:12 146:1,6,8,12,13 146:16,21,22 147:7,9,14 148:2,7,11 149:5,8 150:11 150:14 157:12 165:6 167:7 172:14 177:11 177:14 181:9 183:10,24 185:15 189:2 190:21 193:16 197:21 198:1 227:15
knowledge 13:23 28:4 53:12 68:19 94:16 118:16 130:12 136:2 137:17 138:7 141:21 145:16 149:15 181:8 184:22 201:5 205:12 218:17
knowledgeable 46:23 196:14
known 17:19 37:10,14 67:1 157:5

l

l 3:15 10:16,16 65:20
lack 218:14
lacks 167:17 192:2
landscaping 79:15
lane 3:20 8:5
language 142:8 156:22
large 60:10 196:24 197:8
larger 22:20
largest 79:2 155:10 182:20
laugh 31:1 80:3 128:20
law 17:16 54:17 66:10 69:14 70:8 79:10 104:1 105:11 144:23,23 145:4
lawmakers 91:23
laws 106:1
lawsuit 12:19
layers 194:19
layoffs 81:12
leaders 49:9
leadership 3:3 8:24 45:9 47:15 48:18 50:15 53:11 63:2 71:15 72:11 87:9 163:18 191:16
leading 192:3
learn 19:15,20
leases 125:23
leave 89:18
left 22:19 28:3 37:7,12 47:10 81:17,18,19,21 81:23 82:1,7 83:7
legal 101:20
legally 66:20
legislation 15:7 16:12 98:23 99:14,17,22 100:8,10,13 102:11 103:13
lejeune 1:7 4:21 5:8 8:12 12:15,22 13:13 14:16 19:16 74:15 97:8 98:16 99:4,16 100:4 139:13 139:21 140:6 141:9 142:14 143:15 144:4 144:20 145:21 145:22 147:18 148:13 150:23 210:22 212:19
lens 208:18
letter 4:20 5:7 29:17 30:4
level 48:22,24 70:23 93:1,6 101:17 109:16 109:19 120:6 123:5 135:2 143:11 146:3 167:14 197:1
levels 92:15 93:12 101:22 102:11 104:8 104:12,24 108:24 185:20 186:14 209:1
life 228:6
lifecycle 44:8
likely 54:10 62:4 185:19 217:22
limited 10:7 12:16 178:2 210:23
line 54:5 116:9 119:24 123:16 124:8 125:1,17 126:1 129:22 231:3,5,7,9,11 231:13,15,17 231:19,21,23
lines 195:1
link 154:21
linked 32:12
list 103:10 141:18 145:2,2 145:19 155:3,6 155:17 184:18 207:15,18
listed 33:12,22 74:7
litigation 1:7 4:21 5:8 8:12 12:15 13:14,19 13:23 14:7,24 19:17,22 21:23 23:15 24:6,12 25:5,8,11 33:23 34:1,4,6 74:15 228:7
little 16:8 44:22 64:8 65:1 127:23 169:16 182:21 193:14
live 216:17,24 217:7,13,15,22 218:5
living 158:18
local 112:18 165:4 166:9,15 194:18
located 11:9,22 41:16
location 2:13 39:21 121:3
long 57:13 62:2 102:4 179:10

longer 186:3,6
look 19:7 22:19 31:3 47:10 49:10,11,23 62:15 72:12 74:2 78:2,13 87:20 91:2 104:21 115:23 125:13 129:21 131:22 132:4 137:18 153:16 162:6 164:13 168:12 169:2 176:13 191:3 202:5,11 206:1 209:6 224:5 228:19
looked 76:7 100:9 181:14 206:22 226:5
looking 65:20 97:10,16 98:13 101:23 116:12 122:9,14 125:16 129:18 131:18 132:4 173:19 206:15 206:17
looks 32:10 40:7 54:17 65:12 78:16 118:22 122:5 126:14 162:17 163:9 182:14
loop 55:9
loss 81:10 82:11 84:7 109:2
lost 42:23 114:21
lot 32:9 42:12 43:22 61:3 63:23 80:17 81:3 112:8 200:9 201:20 202:17,24 216:4
lots 80:19
low 165:11
lower 137:13
lunch 115:6 151:6
luncheon 151:11

m

made 5:20 20:14 23:7 45:4 53:14 56:19 59:3 87:15 90:9 153:10 154:4 158:15 159:15 163:1 165:10 165:15,19 166:4,17,22 168:1 176:17 178:10,17,22 179:3 197:19
magnitude 19:4
mail 179:13
mails 33:17,19 33:21 34:10
main 3:6
maintain 93:5 101:17 121:21
maintained 5:21 154:5
maintaining 92:24 121:10 121:13 161:12 219:20 220:8 220:18
major 51:15 65:5 125:10 156:18
majority 72:18 78:7 112:21
make 23:10 52:19 54:24 55:14 56:9 59:5 65:15 73:2 78:24 86:2 89:15 100:15 102:18 140:17 147:14,21 190:24 204:9 206:1
makes 66:10 78:22 112:21 153:5
makeup 112:2
making 58:10 72:8 169:20 172:15 191:18
mammograms 149:9
manage 59:14 70:20 110:19 115:21 187:8
management 10:1 28:22 35:23 37:6,14 39:15 40:2,11 40:21 43:15 45:8,11,23 58:2 70:13,18 72:11 108:17 119:7 156:20 157:4,5 157:8,23 173:12 195:9 195:16 196:5
management's 42:17
manager 174:24 175:6
managerial 25:16 26:10 27:5 47:16 50:16 51:2 69:12 128:13 129:1,6,10 130:1,16,21,22 134:16 135:10 135:19 137:24 140:13 222:9 222:13,21 223:17 224:9

224:13 226:5 226:13 227:17
manages 29:2 113:10,10
managing 139:4,7 154:15
mandatory 77:23 78:5 97:11 98:14,21 99:7 101:6 102:3,8,10,15 102:18 104:23 116:2,8 125:14 125:19 126:21 204:20 209:7 209:11
manner 171:22
manning 189:9 189:13 190:7 190:22
manuals 32:13
march 6:5 39:7 146:18 158:14 169:9 233:24
marginal 137:12
marked 22:11 22:13 29:11,15 29:20 30:2,6,10 30:12,20 34:19 76:1,2 153:20 153:24 162:9 162:12 169:4,6 172:24 176:5,6 181:17,21,23
master's 35:22
matches 106:15
material 201:13
materially 201:13
materials 21:13 21:18 31:14
matter 8:11 55:6,8 61:11,11 104:22 150:17 232:6
matters 42:16 58:21 59:1,1,23 178:6,11,14 179:15
matthew 3:23
mba 36:4
mca 134:16,23 135:12 223:6,8 223:19 224:2 224:10,18,19 224:24 225:5 225:12
mcao 224:14
mcas 135:5
mccf 116:14
mcgarvey 183:6,9
mcilroy 5:1,2 41:6,19,22 45:10 46:4 76:8 78:16
mcilroy's 51:23
mean 18:20 48:23 71:6 83:14,15 89:13 110:11 134:18 137:8 144:17 144:18 148:1 159:4 165:18 196:19 209:3 209:17,24 213:9,18 215:4
meaning 15:21 43:14 64:3 70:3 70:9 74:22 81:12,13 83:16 88:1 140:10 168:23 186:13
means 10:7 15:17 91:18 225:1
meant 69:21 70:17
measure 160:2 170:18 219:15
measurement 170:21 201:9
measurements 6:8 169:18,21 169:24 171:5
measures 169:12
measuring 170:9
mechanics 150:7 200:2
medicaid 15:9 16:4,14,18,20 17:3
medical 25:15 33:2 71:8 77:24 78:18,19,19,20 79:2,5,16,17,22 80:9,22 83:21 84:1,8 93:18 96:24 97:22 98:10 99:15 112:5,5,6,7,12 113:19 114:14 116:5,13,14,17 117:9,10,11,12 117:13,18 118:21,24 119:3,4,12,14 119:16 120:11 120:17 121:7 121:17 122:15 122:15,16,17 122:17,18 124:9 126:1,1,2 126:3,6,6,7,8 129:22 130:19 130:24 131:19 132:7 133:18 138:21 139:12 139:18,19 143:1,1 144:7 145:14 148:9

149:21 163:17 168:15 171:22 186:22,22 194:21 195:22 196:6 207:11 209:4,8,20 212:6 213:5,11 213:23 214:2 215:6 225:24
medicare 15:9 16:4,11,12,14 16:18,20 17:3 75:5,6 103:17 137:22 227:5
meet 20:18,23 138:9 145:14 149:3 163:4 166:13
meeting 21:9 156:16
meetings 21:2,6 21:11
member 143:5 146:10 147:9 147:18 150:7 193:24
members 13:3 13:10 38:9 50:18 89:22 99:5 139:13,20 140:11 141:8 142:1,5,11,24 144:4 145:1,18 145:21,22 146:12 148:4 150:3,23 183:17
memory 34:15 141:10
memos 33:5
mental 94:22 94:24 167:5,11 167:11 214:3
mention 103:7 103:11
mentioned 27:24 203:2
merit 2:21
messaging 10:8
met 20:24 138:13 169:17 221:10
method 128:14 222:14
methodologies 103:24 227:6
methodology 103:16
methods 130:1 130:17 226:17
metric 159:20
metrics 201:20 202:14
military 37:3 38:8
million 116:23 123:15,23 155:12
millions 56:5
mind 112:1 115:19
minor 121:18 121:21 125:8
minute 64:9 115:4 197:1
minutes 139:9 229:6
mission 162:24
misunderstood 228:22
mitigate 167:4
model 130:6,10 130:14 132:9 134:4 203:7
modernization 43:9,22 44:5,14 156:18 157:3 157:23
modernize 7:5
modify 35:7 102:10 103:3 153:1 222:5
moment 33:15 55:4 76:12
money 43:14 53:22 54:7 55:14,19 56:9 56:16,24 57:3 111:2 121:18 123:7,14 124:19 125:1 129:9 131:4,18 132:12,17,18 133:10,11,24 136:9 137:3 138:20 139:1 166:14
monies 105:21
monitor 51:18 52:13 70:23 159:21 160:3 167:19
monitoring 63:14 120:24
month 183:5 191:12 218:22
monthly 52:13 58:15
months 55:12 57:10 65:10 96:22 107:13 108:15 165:9 178:8,13 179:19
moran 193:11 193:16 194:2
morgan 183:6 183:9
morning 9:20 9:21 152:11
move 46:16 52:22 54:1,4,7 54:12 55:14,19
moved 44:23 45:12 54:3

moving 63:10 72:13 74:3 132:4 204:12
multiple 174:6 186:22 196:20
murray 51:11 51:11
musk 85:1
myriad 168:10

n

n 3:6 8:1 72:19
name 8:5 9:2 10:14 150:14
naming 23:8
nation 155:11
nation's 65:17 163:1 182:20
national 134:23 158:17 204:12 223:9,19 224:14,19
nationwide 217:5,6
nature 8:18 74:5 98:24 153:9
nc 3:7
ndes 134:24 135:12 224:3 225:12
near 113:7
nearly 173:23 195:22
necessarily 32:20 44:16 49:3 56:15 58:20 61:10 79:19 85:23 108:17 111:12 121:12 125:22 133:1 138:2 141:22 153:8 164:21 188:8 205:13 209:3 209:17,24 212:5 213:9 219:21
necessity 114:14 145:15 221:9
need 5:21 16:17 28:3 30:23 52:22 53:2 54:11 60:18 66:17 110:23 138:3 142:20 154:5 164:16 165:1,3,13,17 166:23 173:15 182:8 192:14 195:2 198:14 200:8 203:6 205:23 214:17 217:20
needed 6:9,16 35:7,9 42:24 53:17 163:16 164:2 166:12 167:12,14,18 169:12,24 176:11 190:13 194:10 198:11 212:22 213:5
needing 173:14
needs 6:11 155:13,22 156:17 163:4 163:11,18 165:6,22,24 166:2,13,19 167:11 173:7 194:3,5 197:16 197:21 213:11 213:19,24
negative 80:13
neither 233:13 233:15
network 21:24 103:17 112:23 113:2 117:11 119:11 131:21 132:17,21 133:10 134:5,7 136:5,10 137:4 137:15 138:10 160:9 165:11 170:8 214:24 215:7 216:3 225:23 226:15 227:3,10
never 190:6
new 55:17,24 56:9,11,24 57:3 63:6,7 73:22 106:5 126:10 157:6,8 158:15 167:20 168:6 203:6
news 183:16
nomenclature 23:8
nonemergency 78:12
north 1:2 123:4
northwest 11:15
notary 2:21 233:4,21
note 98:19
notes 33:4
notice 2:19 4:13 4:16 12:17 20:4 20:13 21:17 29:10 30:16 199:6
notification 34:7 182:22 197:23 198:15 198:20 199:10 200:9,11
notifications 53:3
notified 20:2,4

notify 65:23
notifying 68:20
november 6:14 19:19 176:10
ns 187:6,21
nuance 17:14
nuances 138:3
number 4:8 29:24 51:14 54:23 72:20 73:4 93:8 96:10 96:11,15 127:4 132:8 139:1 156:18 166:10 166:11 187:5 187:21 189:2 217:5,6,18
numbers 89:12 96:23
nurses 55:22 79:14,18 112:9 185:12,16
nw 3:15

o

o 8:1 10:17
oath 11:3 232:13
object 82:2,14 92:2 95:8 142:12 185:5 187:2,15 188:4 197:3 199:15 201:15 204:5 204:14 205:8 205:19 207:1 217:24 220:2 221:14 222:17 223:11 226:19
objection 13:24 18:21 60:12 61:6,19 68:7 84:18 85:9,20 87:1 89:3,23 90:5,22 92:7,18 93:20 94:12 95:14 104:15 106:20 107:20 108:11 109:5 110:6 111:9 128:18 131:15 134:10 136:12 142:16 143:20 148:22 149:11 157:20 184:4 186:24 189:5 189:18 203:9 204:23 206:8 208:1,14 212:9 214:6 215:13 215:20 216:11 216:19 217:8 220:12,22
objections 4:16 29:14
obligate 105:6 105:20
obligated 52:18 52:20
obligations 52:15 173:24
observation 108:21
observations 108:16
occasion 32:8
occupant 71:10
occur 10:8 23:1 53:15,16 55:10 83:24
occurred 15:12 15:14 42:22 66:1
occurring 200:1 215:10 219:6
occurs 170:23
offer 33:24 34:5 59:10 142:5 232:12
offered 82:20 113:6 143:4 144:12,15
offering 150:21
offers 116:19 141:24
office 3:24 11:12,13,14 12:4 26:11,11 27:7 28:9,12,15 28:22 32:11 37:23 38:2,5,17 39:21 40:8,10 40:21,22 41:21 42:23 43:7,15 45:22 46:2,14 55:9 58:2 59:15 73:19,19,21 88:9 105:17 108:4,16 119:1 120:15 121:6 129:5 138:18 138:20 150:12 161:12,20 174:6 177:20 178:18,23 179:3 182:10 192:11,13 195:7,20 196:12 201:22 202:2 224:14
office's 49:4 219:14
officer 5:13 10:24 28:12 35:10 46:19 48:17 50:3 196:11
officer's 174:9
officers 174:10
offices 27:3,6 28:7,21 48:4,13 49:6,8 71:24 88:22 120:18 129:2 150:5,15 172:19 176:18

official 69:10
officially 15:19 35:12
officials 175:5 175:7
offsets 228:10
ogc 20:2,5
oh 23:1 28:20 38:20 104:16 171:16 194:1
oig 192:12,17 192:21
oit 76:22
okay 16:3 18:23 19:14 22:21 26:24 36:16 41:14 44:21 46:8 64:13,16 73:20 74:6 75:23 97:15 100:1,21 115:7 115:8 119:16 120:11 125:16 127:21 132:13 133:4 141:6 145:9 151:4,7 154:12 171:17 177:22 194:1 210:10 212:12 221:20
old 157:7
om 43:15
omb 57:19 69:21 131:5 152:16
onboarding 167:19 168:5 169:1
once 18:7 20:6 75:21
ones 90:20
ongoing 42:15 105:1 200:6
open 34:18 127:16 159:17 189:8
opened 144:23
operate 196:16
operates 155:10
operation 120:13
operational 48:11,12,15,15 58:24 59:18 62:16 104:9 195:21
operationalize 132:11
operations 28:13,14 47:17 49:4 50:17 51:2 68:1 73:3 192:5 193:1 224:3
operatives 86:22
opine 142:8 171:10 175:24 207:16 211:5
opinion 18:17 88:24 89:8,20 108:20 109:18 175:21 203:17 203:23 210:24 221:11,20,23 228:3,8,9,13
opinions 23:19 23:22 31:16 33:12 89:11 210:22
opportunities 7:1
opportunity 59:10 111:21 207:22
ops 48:11,12
optum 112:20 113:9,15 227:8
order 10:1 18:15 23:11 24:3 60:19 71:12 73:9 129:12 133:6 148:21 165:12 173:16 198:12
ordinary 128:2
org 63:7 177:21
organization 40:20,23 54:5 62:19 73:13 178:1
organization's 61:3
organizational 26:18,21 72:3 176:18 196:4 200:7,19 203:6
organizations 52:18 69:20 152:16 178:3 178:15 179:14
organizistic 200:7
orientation 38:17
original 77:15
originally 20:16
originated 99:12
outcome 137:1 145:24 233:17
outlined 127:9 141:16 143:8 145:3,17 194:24
outlines 75:19
outpatient 71:9 186:23 224:13
output 138:8
outside 22:1 44:17 89:18 112:17 113:3 113:19 114:5,9 114:11 119:18

119:19 149:14 161:6,12,20 172:18 174:19 174:21 226:16 227:5
overall 56:23 58:4 63:13 93:1 111:17 160:2 166:3 184:10 188:23 208:20
overarching 40:23 105:16
overhead 119:7
overlap 176:21
overlapping 196:13
oversaw 43:5 44:4
oversee 48:20 65:2 73:3 128:24 129:3,3 129:5 186:22
overseeing 156:14 171:23
oversees 29:2 58:6
oversight 6:12 6:17 43:11 46:1 47:21 48:2,14 71:13 72:15 73:5 124:6 155:19 173:8 173:12,14,18 174:4,5,17,24 175:10 176:11 176:18 192:24 195:9,16 196:5 203:5
overview 76:18 224:9
own 14:10 71:11 75:15 124:13
owner 71:10

p

p 8:1
pa 3:4
package 139:19 143:2
packages 82:21 207:22
pact 93:9,11 98:22 99:13,18 100:14 125:20 125:20 126:11 126:22 127:9 127:10 179:17 179:18,21 222:3
page 4:2,8 23:1 31:17 35:16,17 69:17 77:1 78:2 98:15 122:14 123:18 125:14 125:16 154:22 160:16 173:19 176:15 182:21 182:22 231:3,5 231:7,9,11,13 231:15,17,19 231:21,23
pages 7:3 23:5 23:13 74:7
paid 24:17,24 25:2 97:22 98:10 99:1,9 119:3,11,14 137:14 226:16 227:4
painting 124:20
panel 19:11
paper 128:9
paragraph 23:5 31:16 33:18 155:9 156:11 157:2 171:15 174:22 176:16 192:8
part 16:19 40:22 46:15 51:4 56:23 57:18 59:4 60:2 60:5 67:5 70:7 72:2 74:13 84:13 85:5,23 87:8,20 89:10 95:4 98:22 101:14 107:4 113:14 114:8 116:1,7 117:24 152:12,19 158:2 159:8 177:23 186:20 188:24 198:17 202:4 204:21 208:5
particular 125:1 126:21 140:9 154:9 161:8,9 165:13 165:20 169:13 173:12 177:20
particularly 85:17 178:4 182:15
parties 8:15,20 10:5,9 22:1 94:7 233:14
partner 13:6
parts 63:20 73:2 76:17 184:8
party 14:23 113:9,15 119:11,13,17 138:9,13 139:4 139:7 227:8
pass 23:1 66:22
passed 17:16 18:1 100:13 114:24 144:19 144:23
passing 67:14
past 25:15 46:16 56:12 68:20 96:22

136:24 145:8 153:18
patience 229:3
patient 118:6 118:17 122:1,7 128:6 156:15 187:13 220:9 220:19
patient's 104:3
patients 185:24
pause 8:19 104:7 124:2 228:23
paused 91:24 96:5
pausing 18:24
pay 106:8 113:19 136:9 137:4 227:7
paying 120:2 137:21
payment 28:14 48:12 103:24 104:24 119:17
payments 16:21 110:19 118:18 122:1
payor 17:12
pays 112:19
penalty 232:1,4
pending 17:23 160:22
people 11:19 71:14 82:7 83:4 123:5 166:11 190:3 211:5
percent 130:7,8 173:23 217:17
perfect 151:5
perform 32:5
performance 160:2 193:1 195:21
performed 63:18 186:17
performing 162:23 195:17
performs 46:4 116:17
period 15:18 45:16,19,20 62:1 68:1 114:21 189:11 199:6
perjury 232:1,5
permanent 27:15 45:4
permanently 15:19,21 45:14 104:1
permitted 66:20
person 96:7 149:17 189:2 218:9
personal 36:13 36:14 89:18,20
personally 157:18 180:12
personnel 190:8
persons 13:16
perspective 32:23 44:15 49:2 63:4 119:22 140:15 152:24 164:20 173:18 202:7 210:4 211:12
phase 4:11
phone 12:8
phrase 190:8
physical 121:3 121:6,11 128:9
physically 11:9 11:11
physician 110:12 146:24 147:2
physicians 81:16,23 82:1 82:22 84:5 96:7 109:2 185:16 188:2
piece 15:7 16:12 99:21 100:8,10 110:22 116:6 131:10,13
piper 5:3,4
place 56:8 233:10
placed 35:12
plaintiff 219:21
plaintiff's 213:10
plaintiffs 3:3 3:22 4:13,16 8:24 25:11,16 27:17 33:8 228:5,14
plan 62:10,23 63:4,5,9 64:1 73:9,23 84:14 85:23 87:9 160:4 163:19 182:12 183:1
planning 60:4 68:6 83:6 161:10
plans 7:5 87:9 174:24 175:9 180:5 188:23 206:23 228:6
play 130:23 132:10 134:1
please 8:18,21 9:14 10:14 15:5 19:23 20:23 26:19 30:24 76:20 88:5 180:7 220:5
pleasure 167:23

plus 179:10
pm 151:9,10 152:2,9 210:12 210:15 229:10 229:13 230:9 230:11
point 27:15 44:9 45:9 88:7 88:16 89:17 91:6 96:9 151:5 169:22 182:6 190:4 191:22 193:3 219:3,6
poised 182:19
policies 60:7 69:19 152:14 155:18 158:7 194:21
policy 28:24 32:13,20,21 91:4 105:10,21 158:17 195:8 195:19 201:4,7 202:14
population 155:14 217:1 217:14
portfolio 37:18 45:21 46:15 58:7
portfolios 43:5 43:20
portion 83:22 123:9
portions 197:9
position 5:12 15:13,16,18,19 15:20 27:13 31:5 36:5,22 40:18 41:16 42:10,24 44:1 45:13,16 47:20 48:1 49:11,19 49:20,22 50:1 50:12 52:11 60:2 69:9 109:3 119:5 161:6 171:24 172:1 173:11 174:24 191:24
positions 36:20 42:6,7 48:8 55:7 61:15,24 62:2,5 83:7 91:3 185:1 189:8,9,10,14 189:16 190:1,3 190:5,5,21 214:13
positive 184:11
possibility 215:8 216:2
possible 62:3 98:23 101:24 186:8 190:3 212:1 213:16
potential 15:6 68:20 167:13 173:17
potentially 74:2 92:13 111:24 113:5 132:3 146:3
powerpoint 33:11
practical 223:6 224:2
practice 131:7 147:15,22 222:21
practices 127:24 132:10 147:21
pre 15:23 30:6
preauthorizat... 164:3
preauthorizat... 114:14
preceded 84:15 99:20
precursor 15:23
predated 99:17
predecisional 63:24
predeliberative 181:4
predominantly 79:7
preliminary 18:16 19:2
prep 21:11,14
preparation 24:24 48:20
prepare 21:3 22:3 23:4 25:4 35:1 59:14 76:14,16,17 104:22 191:11 191:13
prepared 20:12 180:22 181:1,5
preparing 80:21
preponderance 83:9
present 3:21 12:3 21:1 35:11 47:14 53:11 107:16 182:3,5 187:12 216:8 219:6
presentation 181:20
presentations 33:5,10
president's 38:6 43:12 78:14
presumptives 98:22 127:8,12 127:14
pretty 118:15 131:12 196:24 229:16

prevent 65:21 161:1
preventative 142:2 149:9 179:9
prevents 169:20
previous 28:2 126:18 172:1
previously 22:11 30:20 34:19 49:13 61:24 76:1 152:5 153:20 162:9 169:4 181:17
primarily 48:7 74:18,23 120:12
primary 17:12 71:10 129:11 223:2,3
principal 45:10 51:11
principle 135:10
prior 27:22 34:15 35:4 36:16 38:15 146:19 198:3
priorities 155:22 191:19
priority 16:20 127:7 146:3
privy 167:10 219:18
probably 71:11 96:18 131:12 150:16
problem 159:6 160:7 171:13 178:17 183:10 193:6 198:7
problems 203:13
proceed 198:19
proceeding 10:10
process 114:4,8 114:18 128:14 129:9 145:13 145:23 146:9 146:11 168:5,9 168:24 171:23 197:23 211:4
processes 18:7 18:8 60:4 63:12 155:19 158:8 175:6,10
processing 160:23 164:3
produce 23:18 31:4,14
produced 30:5 47:20 49:12 63:22
product 135:2
production 4:18,22 5:9
professional 47:22 50:18 89:19 203:23
professionally 89:9 205:22
program 6:6,11 32:13 37:9,18 44:6,14 49:6,8 71:24 81:20 83:3 87:15 88:20 90:15 104:4 126:15 138:11 140:20 143:6 146:10 146:15 148:4,7 149:10 150:23 159:21 160:4 161:16,23 162:1 163:17 169:10 173:7 173:21,22 174:23 175:6 198:13 208:5 209:2,16 210:18 211:1 215:7 216:3 219:1 224:10 228:16
program's 193:1
programming 37:23 38:2,4
programs 79:9 91:9 93:8 146:15 205:5 206:5
progress 5:20 154:5
progressed 36:21
project 57:5 121:20,20 124:21
projection 123:11
projections 132:3
projects 43:17 125:4,5
promoted 37:21
promoting 61:14
proper 54:4 168:20
properly 109:20 165:12
property 71:11 79:15 124:13
prosthetic 116:18 117:13 122:18 126:3,8
prosthetics 116:15
protected 102:19

provide 28:4,4 31:19 34:8 53:10 55:21,23 67:24 70:22 73:5 79:7,10 105:16 106:12 106:16 147:1 150:5 151:3 155:15 162:24 164:24 165:2 166:14 168:11 172:1 174:10 190:18 198:15 198:20 200:8 217:16
provided 29:23 31:22 33:7 43:10 59:2,9 78:13 98:24 106:6 132:2 134:19 135:13 143:5,7 146:18 147:19 148:16 166:10 183:11 208:21 216:8 216:13 224:11 225:2,13
provider 16:24 113:19 169:23 170:11 213:10 213:13,14
providers 110:16 112:17 112:18 119:19 135:14 137:4 164:6 167:12 168:15 185:12 185:17 190:24 218:14 225:14 226:16 227:5
provides 14:12 148:8 152:22 153:2 155:11 224:10
providing 29:18 37:3 42:15 47:15 50:15 161:19 164:22 221:5
public 2:21 35:23 59:3 64:3 94:5 135:23 207:10 233:4 233:21
publicly 23:23 32:4 63:22 181:6
publish 135:19 135:24
published 105:10
pull 52:14 53:22
pulled 27:17
pulls 135:16
purely 137:8
purpose 97:5
purposes 66:13 66:19
pursuant 2:19 4:11
pursued 35:22
pursuing 60:11 62:11
purview 32:23 42:17 46:2 117:6 124:7 126:17 157:24 173:13 174:20 174:21 175:13 201:22
pushback 91:23 94:4
pushed 54:3
put 22:9,17 29:7 30:19 49:14 115:18 115:20 129:19 129:20 131:8 153:19,23 182:8 223:14 223:22
putting 183:19
puzzle 131:11

q

qualified 98:1
qualify 148:21
qualifying 140:12 148:8 148:19 149:23
quality 87:14 155:16 162:24 168:14,15 175:22 187:13 190:19 191:20 194:18 195:21 220:20 221:10
quantify 228:4
quantity 79:3 217:17 228:10
question 85:13 97:5,12 109:9 109:17 132:13 132:20 143:24 161:22 181:12 211:23 215:22 217:21
questions 19:24 115:19 144:22 180:9,15 225:15 229:2
quick 51:8 191:3 210:8 224:18
quickly 42:22
quo 194:3
quoted 189:1
quotes 183:17 192:21 193:11

r

r 8:1 10:16,17
raised 184:14 192:19

ramp 127:11
rapidly 173:22
rate 113:20 136:4 137:14 137:21 227:1
rates 103:18 113:16 131:20 132:21 134:6 137:22 226:6 226:16 227:4 227:21,23
rather 45:20
read 10:4 50:1 154:11 162:19 170:15 175:3 177:17 183:16 198:17 199:9 232:5,7
reading 43:21 183:8
real 51:8
reality 149:24 201:8
realized 20:7
reallocate 111:21
reallocated 111:15 172:7
really 57:9 195:13
realtime 2:20
reason 11:5 12:8 36:12,13 36:13 82:22 142:6 165:20 190:6 196:23
reasonable 118:15,19 119:7 221:9
reasonably 19:6
reasoning 14:11
reasons 80:17 80:20 81:4 83:12 113:4 127:5
recall 56:4 87:8 90:21 92:12,16 92:23 93:15 95:23 96:15 172:11 207:14
receive 30:16 53:9 66:24 67:2 75:16,21 110:11 113:2 114:5 122:6 128:7,8,12 131:18 139:11 145:1,6,18 146:1,13 168:14 212:14 213:5,19,23 214:16
received 25:14 35:20 36:7,8 113:17 118:9 118:17 122:2 130:11 131:3 140:4 145:6,8 146:20 179:16 179:22 180:1 184:9 226:1
receives 74:16 77:23 212:5 225:22
receiving 93:18 97:19,19 98:5 98:17 145:8 146:4,22 159:22 160:7
recent 95:2 163:1 173:22 180:13
recently 46:11 107:13 176:19
recess 64:19 115:11 151:11 210:13 229:11
recognize 22:22 22:24 30:22 34:21 49:16 162:15 169:9 173:5
recognized 214:23
recollection 17:13 43:24 94:20
recommend 59:6 197:13
recommendat... 85:5 88:5 153:10 186:21
recommendat... 6:3 72:8 94:9 153:4,6,13,17 158:14,15,22 159:3,9,15,17 163:2,5
recommended 158:17 159:19 163:17 167:2 181:2
recommending 60:21 72:7
recommends 188:1
record 8:4,8 10:3,10,15 11:8 43:9 44:5 55:18 55:24 56:11 57:4 64:18,21 76:24 115:9,13 140:18 151:8 152:9 210:11 210:15 229:6 229:10,13 230:8
recorded 1:13 2:11
records 156:21
recruiting 163:15

recruitment 163:20 207:12
reduce 56:15 70:11 72:20 73:9 86:23 92:13 187:5 188:23 202:21 208:6 222:5
reduced 211:19
reducing 187:21 211:18
reduction 56:19 186:21 187:12 206:7 207:20 208:12
reductions 87:19,21 188:19 205:6 206:15,18 211:20 212:2
redundancies 191:17
reference 32:4 32:8
referenced 177:12
referencing 189:3
referral 169:23 170:2,11
referrals 214:24
referred 110:13 113:24 225:14
referring 67:14 213:13
refers 225:5
reflect 175:9
reflected 56:21 137:24
reflects 39:11 42:18 47:19 50:6 60:6
reform 194:3
regard 96:2 199:13 200:24 210:22 216:7
regarding 19:14 24:1 52:14 57:19 62:22 64:1 73:11,12 95:21 160:14 179:15 179:17 183:20 184:2 186:17 192:4
regardless 93:7 96:4
regards 180:21
region 72:24 121:1 196:16
regional 120:24 187:9
regions 196:20 218:13
registered 2:21 233:4
regulation 103:19
regulations 106:1
reimbursement 103:16,22 113:10,16,20 119:18 131:20 132:21 134:6 136:4 137:14 139:23 144:8 148:8 149:22 150:22 226:6 226:15 227:1,4 227:21,23
relate 16:5 21:14 38:3 66:8 153:17 161:9
related 21:22 25:1,10,15 31:10 33:23 34:4 42:15 63:18 79:20 97:7 100:15 111:4 119:5 127:8,23 139:24 141:13 144:8 153:3 156:20 159:16 165:24 172:12 173:13 178:1,5 178:10,14 179:20 180:2,9 197:15 207:13 228:5
relates 1:9 16:6 26:16 55:1 57:23 78:6 103:16 111:1 140:5 146:24 158:23 200:14 204:13 228:10
relating 70:18 212:18
relative 233:13 233:15
relatively 126:10
released 162:16 186:17
relevant 33:6 33:11 34:9 59:22
reliable 167:17
relied 31:15
relies 32:18
remain 101:22 159:17 201:13 203:22 209:9 214:13
remainder 48:13
remained 184:18
remaining 158:3
remains 63:24 102:4 159:14

162:3
remember 17:13 31:22 43:21 56:2 92:22 180:17 181:10 209:21 210:19 215:1
remote 1:13 2:11 3:1 8:10 8:18 12:6
remotely 8:16 8:17 233:6
removed 189:12 190:11
rendered 74:22
renovate 124:21,24 125:2
renovation 125:4
rental 122:21
reorganization 7:2 57:1 63:5 158:2 177:1,8 177:11 180:10 180:23 188:13 188:20,24 197:22 198:2,8 198:10 199:2 199:14,22 200:1,14,15,17 201:1,6 207:21
reorganize 74:1 192:14
reorganized 176:19
reorganizing 200:2
repairing 124:20
repeal 101:2
repeat 85:13 143:24 213:21 215:22 220:5
repeatedly 192:14
rephrase 47:23 122:3 133:14 189:24 198:5
report 6:1,5,10 6:14 25:5 51:5 51:10 59:7,10 59:16 71:15,18 71:22,23 72:1 83:10,16 101:23 134:24 138:17 140:8 154:3,9 156:5,9 156:14 158:5 162:7,15 166:20 167:1 169:3,10,14 171:3 172:9 173:5,10,16 176:9 192:21 223:6 224:2
reported 1:24 163:5,14
reporter 2:20 2:21 9:7 233:1 233:4
reporting 8:18
reports 25:7 42:13 43:16 52:14,14 59:2,5 59:18,20,21 135:15 137:6 138:15 152:20 192:18 196:11 215:12 216:6 219:17
represent 8:22 8:24
representation 218:20
representative 183:6,9
representatives 7:1 174:9
representing 3:3,11 9:4
request 38:6,7 43:13 44:7 56:7 56:17,21 58:4 75:17,19,22 78:15 79:4 80:7 80:12,22 87:22 106:11,13,14 118:23 130:8 153:7 178:10
requested 19:21 26:3 34:8 57:6 58:18 62:4 80:9 106:16 108:23 132:9 190:3
requesting 43:14 133:23 179:8
requests 43:11 43:13 44:4,8 52:1 53:4 58:10 164:4 178:1,3 179:16 208:18
require 54:15 199:3
required 43:17 79:10 145:12 146:9 169:18 169:24 170:1 170:22 171:4 197:23 198:1 199:10
requirement 101:14 114:15 147:7 160:5
requirements 54:10 56:13 114:13,17 145:15 165:7 221:10
requires 10:2 159:24 170:18 170:21 198:18 199:6,9

rescind 102:14
research 37:17 116:6,12,15,18 117:1,13 122:18 126:3,8 224:3
resided 139:21 143:15 144:4 148:13
residence 147:17
residency 97:7 148:20
resident 148:17
resides 26:20
residing 139:12
resignation 81:19 83:3 84:13 90:14 207:23 208:5
resolution 67:15,21,22,23
resolutions 68:5
resolve 71:1 160:22
resolved 158:19
resolving 159:2
resource 28:19 37:5,11 49:1 53:10 61:11 155:22
resources 32:14 54:24 59:19 62:5 63:14 87:14 110:22 129:11,13 131:6,19 132:5 133:6 134:7,8 153:8 167:14 182:8 202:19 208:21 209:7
resourcing 180:16
respond 137:9 144:22
response 87:17 161:4 181:13 221:18
responses 4:15 29:14 42:13 180:4,8,11,12
responsibilities 50:22 51:16 65:6 161:7 168:3 196:13
responsibility 43:19,20 59:13 65:13,20 124:7 124:8 161:11 174:5 195:8 197:14 219:14
responsible 38:5 47:15 50:4 50:14,24 69:11 71:14 179:18
restrict 211:15
restriction 54:17
restructure 174:8 180:5 182:20 198:16 208:6
restructuring 60:22 61:2 62:10,23 63:9 63:19 64:1 73:9 73:11,23 84:14 84:16 181:2 182:4,12 183:1 183:14,20 184:2 186:18 186:20 187:24 188:16 198:13 200:20
result 56:14 88:6 96:1 139:12 147:17 186:3 188:19 202:13 212:2
resulted 83:19
results 70:1,2,4 70:7,14 96:3 127:6
resumé 20:14 31:5 34:24 35:8 35:16 36:3 38:18 39:10 42:18 47:19 50:6 115:21
retain 162:23
retainer 24:2
retaining 163:15
retention 163:21
retire 83:6
retired 81:18
retirees 38:9
retirement 81:20 82:20 83:4,5
retroactively 146:17
return 209:1
revenue 16:7 17:8,10 18:2,11 28:12 48:11 117:21 118:3
revenues 18:18 19:4 74:23
review 22:9 30:16 49:21 59:4,9,10,16,20 59:21 77:8 91:5 91:9 136:7 138:16 160:5 173:9 189:8 199:19 207:7
reviewed 20:13 20:14,15 21:14 23:7 25:7 27:19 31:14 35:4 76:18,22,24

77:1,4,5,6 215:11
reviewing 42:12
reviews 31:21 58:17,19,24 74:10 172:10 193:9
revised 103:12
revolving 15:7
richard 42:3,4
right 10:12 17:1 22:6 26:12 47:17 50:12 60:9,11 61:4 63:22 64:17 84:11 85:8 96:16 106:10 111:2 116:13 122:14 139:14 140:2,6 153:15 165:20 171:11 177:9 179:4 181:11 195:11 195:17,23 196:15 197:20 199:23 228:7 229:1,17 230:6
ring 141:4
risk 5:19 63:17 147:2 154:4,13 154:15 155:3,5 155:6,17 156:13 157:11 157:13,16 158:6 159:2,16 160:20 184:18 184:22 186:16 198:3 200:13 200:16 203:1 203:21
risks 154:15 163:20 175:11
rmr 1:24 233:21
roe 170:18
role 14:6 15:11 15:22,23 26:15 26:16 27:14 29:2 35:12 40:11 41:9 43:3 43:4,6 44:13,22 44:23 45:6,14 45:15 51:23 55:11 57:9,16 57:18,23 59:12 65:7 66:9,14,21 69:2 70:5 71:16 74:9 80:23 86:14,17,20 87:12,18 96:16 96:17 105:4,15 106:4 107:4 114:9 126:18 126:19 130:22 155:1 157:15 159:7 160:18 161:14 165:9 177:3,23 178:8 180:7
roles 26:19 39:6 174:8
roll 165:5
room 3:15 56:9
roughly 206:23
running 53:4 123:8
runs 49:8
rural 113:5 202:22 217:16 218:8,13

s

s 8:1 72:19 187:6,21
safety 156:15
salary 24:17,21 119:3
salisbury 3:7
satisfaction 148:21
save 232:8
saved 111:2
saving 111:3
savings 87:22 87:23,24 88:19 111:12 206:20
saw 23:11
saying 28:11 68:14
says 38:20 50:2 51:4 60:1 66:3 158:11 174:14 223:19 224:8 224:17,23 225:11
scary 7:4
scenario 67:20
schedule 57:5,7 91:4
scheduled 171:21
scheduling 160:14 169:19 171:23
school 36:10
science 36:7
scope 20:8,15 21:15,19 23:14 44:17 49:3 121:19 125:5 149:15 161:6 161:20 168:2 168:12 201:12 203:17 204:2 219:13 221:23
scoped 58:20
screen 22:9,17 22:20 29:7 30:19 33:18,23 47:10 49:15 60:1 65:4 97:1 97:10,17 115:17 118:10 153:23 154:14 159:13 173:3 177:13 183:7

223:14,23
scroll 35:16 76:11,19 116:2 154:7,12 158:5
seamless 62:19
second 4:9 35:17 146:7 154:22 162:21 167:1 180:23
secondary 17:12
secretarial 77:5
secretary 6:20 7:4 41:6,23 42:1,14,16,20 42:24 44:24 45:3,5,8,11,14 45:15 51:12 60:10 62:10 63:9 72:2,10 84:14 86:20 106:18 127:12 177:8 180:4 181:2,18 182:6 189:1 191:7,21 193:2 194:13 194:16 198:12 202:20 203:3 215:11 216:4 218:21
secretary's 41:21 60:6
section 76:22 76:23 77:6 98:14,15,17,18 98:20 116:2 118:22 125:20 125:21 126:22 154:20,21 158:12 159:13 162:20 169:15 170:16 171:10
sections 77:11 225:20
see 33:17 38:11 38:19 40:14 45:6 63:15 64:13 78:3,9 80:10 100:11 101:22 115:22 116:10,14 120:2,5 122:23 126:4 136:19 154:13,17,18 154:23,24 155:8,23,24 156:22 158:9 158:20,21 163:7,22 166:24 167:15 167:24 170:3 171:14,16 174:12 176:1 176:22 177:12 185:24 194:6 194:22 195:4 198:18 201:6 202:15 211:19 223:15 224:1 224:21 225:3,9 225:18
seeing 128:15 142:7 170:14 171:7 202:10
seek 15:8 54:7,8 54:20
seeking 16:3 20:7 114:4 186:12
seem 170:9
seen 63:3,6,17 63:20 76:9,9 83:11,16 96:23 99:3,8 137:6 151:1 154:8,10 164:5 169:13 176:9 179:13 190:12 191:8 200:16 207:15 217:1
senate 107:15
send 182:9
senior 37:1 40:11 41:15 42:8 48:17 49:9 69:10
sense 79:12 100:15 133:9 212:20
sent 86:21
sentence 162:21 175:4 192:1
sentiment 230:3
separate 116:16 124:5 145:23 211:21
separately 116:21
september 42:19 47:11 96:19,20
series 5:19 154:4
served 100:3 143:15 144:4
service 13:11 37:4 38:8 39:9 39:13 113:17 128:16 136:3 177:24 178:3 179:14 195:3 207:11 216:17 217:7,23
services 33:2 37:4 78:18 79:2 79:5,16 80:10 80:22 83:21 94:22,24 96:24 97:23 98:11 112:5 116:19 117:9 122:15 126:1,6 129:22 130:19,24 131:19 132:8

133:18 134:19 137:12,22 139:18 143:1 144:7,12,15 149:21 155:12 209:4,8 210:1 216:8 224:11 225:2
session 4:4 21:11,14 152:1
sessions 24:24
set 174:16 233:10
setting 195:8
several 27:3 29:6 37:2 80:20 127:5 163:2 200:23
severance 207:22
severely 179:11
share 22:7 44:3 75:24 173:3 180:20 183:7
shared 30:20 34:20 49:13 181:5
sharing 115:17 146:7
sharri 17:17
sheet 129:19 231:1 232:11
sheets 32:12
shift 40:8 72:3 127:22
shifted 42:19
shop 37:10,11 73:14,17,18,19
short 53:5 229:7
shortage 165:16
shortages 164:12 218:24 219:3,5,9,12
shorten 94:19
shortfalls 164:12
show 148:17 176:4 209:8 219:18
showing 77:1
shown 177:21
shows 78:3
shred 140:7
shuffle 45:9
side 210:6
sign 24:2
signature 230:10 233:20
signed 232:15
significant 18:10 46:8 70:15,17 81:8 82:11,18,22 127:2 189:11
significantly 63:16 93:16 203:19 221:22
similar 75:14 126:4 161:4
simply 89:14
single 45:21
singularly 58:20 91:20
sit 96:5 201:5 229:23,23
sitting 190:7
situation 114:2
situations 17:12
six 55:12 57:9 65:9 68:23 69:6 86:4 96:22 107:13 108:2 108:15 165:9 178:8,13 179:19
size 188:23 208:7
slide 182:22
slides 33:11
slow 191:17
smith 3:22
solis 3:23
somewhat 28:7
sorry 18:19 47:9 80:1,3 85:12 92:6 93:4 95:11 96:20
97:1 99:10 109:10 117:16 122:11 142:15 159:5,5 162:10 171:12 175:3 183:8 193:5,14 193:22 198:5 199:1 207:11 215:21 230:4
sought 20:3
sound 143:13 144:10 166:16
sounds 38:12 39:5 149:19 169:16 215:9 227:2
source 17:8,10 31:20,23,24 125:8 223:9,17 223:20 224:20 227:18
southern 1:3
space 124:22
span 70:12 168:8 197:7
speak 18:13 60:15 96:10 108:15 109:15 135:4,17 141:15 142:19 144:14 148:5 157:10 164:7 164:11 168:8 172:19 177:19

184:13 185:14 187:18 190:23 192:17 228:17
speaking 8:19 149:2
specialized 113:6 196:15
specialty 185:12,17,23 214:3 218:14
specific 33:19 81:4 99:8,10,21 100:8,10 109:9 120:5 135:3 140:7,16 141:15,16 142:7 144:14 145:3 146:4 156:4,9 160:19 166:17,21,22 172:12,13 173:9 181:12 181:13 183:23 184:14 185:14 190:21 192:17 197:24 198:17 199:8 200:16 217:20
specifically 12:16 37:3,16 73:10,14 109:13 110:3 141:11 157:14 163:11 165:16 165:21 169:21 171:8 178:14 179:12 184:20
specifics 114:18 143:9,10 147:7 148:5 164:10 165:7 172:2 217:17
specified 68:1
specify 145:7
speculative 137:8 148:6
spend 106:5
spending 204:20
spends 150:21
spent 37:19 112:4 194:4
split 99:8
spoke 163:14 163:14
spread 117:1,4 174:5
staff 45:23 47:22 48:2 50:18 71:24,24 79:14 80:19 81:11,24 82:23 83:19 88:9,22 96:7 109:2 111:6 119:2,23 120:13,18 155:21 162:23 163:13,16 164:2,2 166:19 170:1 171:22 190:24 192:4 218:24 219:2 219:12
staffed 106:19 107:18 108:9 109:3,20,22 110:5 218:23
staffing 6:2 92:15 93:1,6,12 93:24 104:5 106:24 107:23 108:1,4,5 110:19,21 156:16 163:3 163:10 164:9 164:14,17,19 164:22 165:7 165:11,16 166:2,4,8,8,21 167:4,13 178:16 185:20 186:10,14 187:9 202:15 203:4 209:1 219:5
stages 156:19
stakeholders 94:6 192:20
stamp 29:24 30:7 69:17
standards 160:1 179:2 195:22
stands 159:1
start 18:6 66:23 67:4
started 9:24 36:23 39:11,13 40:10 47:11 157:9
starting 39:7
starts 98:15
stat 199:8
state 8:22 10:14 35:21 74:17 123:20 139:16 163:11 170:10 183:3 185:18 201:11 209:10 216:23
stated 88:13 144:6 182:18 185:2
statement 6:19 10:3 108:8 110:1 113:23 134:22 147:13 152:24 174:3 181:18 191:6,8 194:12,13 203:3 205:14 208:11 214:11 222:7 226:23
states 1:1 3:11 4:9,15,22 5:9 6:24 69:17

70:15 72:24 142:23 156:11 159:14,14 160:16 162:21 169:10 173:20 176:16 191:15 192:7,22 195:6 196:19,20 197:10 223:8
stats 219:10
status 58:15 102:18 194:3
statute 102:4 102:23 103:19 126:22 140:12 141:23 143:8 144:13,19 145:17 146:16 147:5,8 148:2 148:12 170:21 171:2,9 198:1 198:18 199:8 212:23
statutes 100:22 101:3,6 102:8 211:16
statutorily 169:17 220:19
statutory 6:7 54:9,20 103:8 169:11 211:12 220:8 221:21 222:2
stay 52:20 53:23 105:24 110:23
staying 70:3,8,8
stays 52:4 54:6
steady 209:10
stenographic... 233:9
steps 163:6
stint 38:15
stop 146:6
stopping 151:5
stories 7:5
strategic 60:3
strategies 163:20 167:3
stream 18:2,11 126:11
street 3:6,15
strengthen 6:12 173:7,14
strictly 84:9
structure 27:15 72:4 184:9 191:17 192:2 196:7 200:7 203:6
structured 52:2
subject 150:17
submission 5:17 38:7
submit 112:19 129:16 138:15 138:18
submits 75:17
submitted 75:22 127:6,16
submitting 58:9
subordinate 27:10 50:19 52:17
subpoena 4:17
subsequent 102:11
substance 19:24 180:17
subtotal 116:13
subtotals 135:1
successful 17:6 17:7,15
sufficient 106:11,16 183:19
sufficiently 109:3
sum 135:7
summary 50:2
superior 193:13
supervision 45:23
supervisor 27:14 188:22
supervisory 37:21
support 18:16 23:21 38:8 55:20,22,24 56:13,19 60:2 78:19 79:9 112:6 117:11 118:21,24 119:2,4,12 120:11,17 122:16 126:2,7 163:16 164:3 165:15,22 179:10 190:24 217:2
supported 23:18
supports 65:16 118:22
supposed 120:23 127:11
sure 20:14 26:20 28:9 31:2 47:24 52:19 65:15 86:2 89:15 119:9 140:17 148:15 220:7 229:8
surge 55:23
surprised 14:4
surrounding 105:21 162:4
svac 193:21,21
swap 54:16
swaps 54:2,12 55:5

swear 9:8
sworn 8:17 9:12 152:5 233:6
system 6:17 79:8 112:17 156:7,13 157:4 157:6,7,9 158:2 176:12 182:21 186:13 214:20 219:16,23 227:17
systematically 219:15
systems 18:6 155:11

t

table 76:24 77:2,4,5
tail 168:24
takano 182:16
take 56:8 64:6,9 65:13 130:17 132:16 191:2 191:10 192:9 195:19 210:8 226:6 229:6
taken 64:19 115:11 138:3 151:11 210:13 229:11 232:6 233:9
takes 32:10 148:11 227:2
talk 18:20 65:1 74:14 97:4 99:23 100:2,7 127:23 139:8 139:11 207:19 208:24
talked 31:8 112:8 117:12 186:15 195:14 202:24 207:21 209:12,18 210:21 214:22 216:4 222:4,8
talking 60:16 95:13 109:13 115:16 210:18
task 88:21
tasked 88:19
tasks 167:19 169:1
taxpayer 14:19 74:23
teal 177:17
team 55:9 58:5 105:18
technical 23:7 44:16 174:11 223:6 224:2
technology 43:8
tef 77:3 126:6
tell 11:8,19,21 20:11 21:5 28:6 42:21 55:20 61:13 70:20 72:22 78:7 97:15 100:12 112:11 116:11 117:15 125:17 127:1 130:12 141:6 150:19 165:8 180:11 184:1 193:12
telling 20:21 45:1
temporarily 91:24
temporary 16:1 45:12
tends 120:6
tens 188:1
tenure 39:23
term 28:11 52:15 119:8 179:10
terms 16:6 23:8 48:15 54:16,17 55:7 58:9 72:12 74:1 80:18 83:12 93:23 105:19 108:23 119:8 127:6 132:1 134:2 143:9 145:5 150:6,17 159:2 166:2,15 167:12 168:11 172:2 187:20
200:6 201:22 217:17
territory 196:24
test 28:4 37:17
testified 9:12 15:2,10 30:15 34:13 35:3 46:4 57:8 107:3,13 107:17 114:19 152:5,12 177:6 182:6,7,17 184:16,21,24 194:9 200:12 212:21 222:13
testify 20:6 24:3,15 107:5 107:11 137:19 149:20 182:2 223:1
testifying 17:5 143:3,14 150:20
testimony 4:10 11:3 17:1 19:10 21:15,20 23:15 24:1,21 25:1 27:23 31:11 32:18,19 33:6 33:24 63:8 75:1 97:24 109:1 140:19,23 142:23 185:3 191:11,14

199:5 221:4,6 233:9
text 10:7
thank 9:22 13:11 18:23 19:9 31:1 34:12 41:4 64:12 74:12 90:13 121:23 125:12 127:21 167:22 177:22 194:1 218:7 229:2,4 229:20 230:1,2
thing 35:9
things 54:2 64:24 71:14 124:20 133:19
think 19:13 28:24 33:4,9,14 33:19 34:10,11 45:6 50:6 55:13 57:14 69:21 70:16 72:23 108:2 109:21 124:23 132:15 151:4 157:7 176:3 178:7,12 179:20 180:14 180:23 185:2 199:11 210:7 216:1 228:21 228:23
thinking 198:6
third 113:8,15 119:11,13,17 138:9,13 139:4 139:7 167:15 227:7
thought 13:22 61:16 196:2,3
thousand 71:6 79:13
thousands 92:14 188:2
three 21:4,7 135:6 225:6
tied 156:4,8 207:10
time 1:17 2:9 8:8,9 19:19 24:14 27:13,15 37:19 39:4 41:17 44:10 45:3,9,17 47:14 47:21 50:17 55:13 62:1 64:14 68:1,2 86:11,18 88:8 88:17 89:17 91:6 93:4 96:10 96:14,19 99:20 108:16,23 110:15 127:12 144:20 159:22 165:6 169:22 172:16 177:20 178:7,21 181:8 187:12 189:11 190:4 191:23 198:21 202:8 205:17 206:16 208:20 209:9 213:11 216:8 219:3,6 228:24 229:13,21,23 230:8 233:10
timelines 66:18
timeliness 6:8 160:3,7 169:12 169:18 170:19 221:10
timely 65:24 155:15 160:11 160:23 162:3 162:24 167:18 168:17,19 170:7 171:22 190:19 213:5 213:18,23 215:5 220:10
times 39:22 93:18 94:19 107:24 186:3,6 214:16,23 216:2
tiny 132:14
tip 195:14
tired 229:17 230:4
title 10:23 48:16 51:6 176:14
today 8:13 9:7 11:3,6,9 12:3 12:12 19:15 20:12 21:3 22:7 24:1,15,21 33:9 63:16 65:8 67:8 96:6,11,12 98:9 143:17 145:7 150:19 186:9 188:22 201:5 201:21 202:9 203:13,14,22 210:21 215:11 216:4,13 227:13 228:21 229:2
today's 8:7 22:4 228:17 230:7
toe 157:9
together 50:2 119:20 129:21
told 142:4
tool 222:22,23 223:2
tools 95:22 223:3
tooth 168:24
top 26:20 27:7 48:22,23 54:5 56:3 76:11 81:22 91:12 120:7,10

topics 23:1 33:23 34:5
topping 42:3,4
torts 3:13
total 21:7,8 49:1 51:24 52:21 82:6 86:5 88:7,23 119:21 120:9 125:6 134:24 135:8 173:23 207:6 209:6
totally 22:21
touched 212:18
touches 158:3
towards 124:17 124:20
towson 35:21 35:22 38:16
toxic 77:3 98:20 99:1,11 125:24
tpas 120:3
track 52:19 114:21
tracked 158:19
traffic 179:13
training 28:24 155:21 168:7 168:20
transcript 4:7 232:5 233:8
transfer 53:2 58:12 87:21
transfers 122:24
transformatio... 78:1
transition 40:12 42:21
transitional 200:20
transitioned 39:5,8,15 40:4 40:6 44:21
travel 119:6
treasure 69:21
treasury 69:21 152:16
treat 213:11
treating 146:23
treatment 93:18 128:3 186:7 213:6,24 215:6 226:1
tricare 21:23 37:13 38:3,9 39:15 40:2 75:9 75:10,12
tried 89:17
triwest 21:23 112:20 113:9 113:14 227:8
true 24:9 25:5 30:9 32:23 94:8 95:6 102:8,9 103:13 105:2 128:5 134:14 148:10 185:3 196:9,10 204:22 211:2 211:11 213:1,6 232:8
trump 84:24
trust 75:4
truthful 11:6
try 40:5 55:4 64:7 132:13
trying 28:17 51:22 130:18 138:4 208:9
turned 55:7
two 26:18 28:21 35:16,24 36:1 42:5 43:5 146:19 169:24 180:13 194:4 226:17 227:11
tying 171:8
type 36:15 37:6 114:15 221:8
types 37:4 59:20 161:15 161:19 214:2
typically 53:14 106:15 107:10 123:13 125:21 128:4

u

u.s. 3:12,23 5:16 9:3 37:2,3
uh 47:24 124:10 224:4
ultimately 100:21
umbrella 38:10 40:20,23 41:2,3 41:8
uncertainty 68:5
unchanged 201:13,13
uncle 13:8
unclear 155:21
under 11:3 20:8 26:21 27:2 32:22 36:17 38:3,10 39:11 40:24 41:2,3 43:6 46:14,18 55:5 65:5 66:4 67:12,19 73:22 78:8 79:6,16,19 79:21 81:19,20 84:5,24 91:15 93:8 94:19 97:9 97:10,15 98:2,3 98:17,18 99:6 99:24 110:12 110:18 112:4 112:11 116:6 117:6,7 123:19 124:7 125:18 125:19,24 126:5,5,17,21

127:10 130:24 137:14 138:21 139:18 140:12 141:14 143:1,5 143:19 147:15 148:4 149:9 150:10,13,23 157:23 159:13 160:3 162:20 169:15 171:5 173:13,20 177:15 188:3 210:18 211:1 214:24 215:6 216:6 218:14 219:22 226:14 227:16 228:15 232:1,4,12
undergoing 157:3
undergraduate 36:21
undermine 191:19
underneath 28:8
underscored 192:14
understaffed 185:24
understand 11:2 12:7,10 22:21 36:6 45:18 51:22 52:9 62:9 69:15 72:17 79:2 82:21 84:23 86:3,21 87:20 97:2,6,12 107:7 124:11,14 128:15 129:2,9 129:12 130:2 130:18 131:8 132:5 133:20 135:11 137:10 138:11,24 142:20 144:16 173:15,16 186:15 187:11 188:13 196:8 197:1,17 202:16 205:23 208:10 221:12 222:15 229:19
understanding 17:22 24:5 26:15 32:15 52:6 53:12 60:9 61:13,18,23 62:14 63:21,23 73:7 81:15 85:3 87:5 88:18 90:10 91:22 92:5 99:17 113:1,12 122:6 128:10 130:23 136:23 157:1 163:24 164:8 170:24 174:1 182:11 183:21 188:17,18 198:14 204:19 207:5 214:10 217:14 232:11
understands 72:21
understood 122:12 156:10
underway 126:16 198:3,9 199:23
underwent 205:17
unfilled 189:9 189:10,14 190:13 214:13
unilaterally 54:14
union 91:5
unit 136:2,6
united 1:1 3:11 4:9,15,22 5:9 6:24 72:24 197:9
university 35:21,22 38:17
unmet 219:16
unnecessary 161:2
unobligated 102:14
unretained 24:6
update 18:5 96:21
updated 20:14 35:10 96:23 175:9
upkeep 125:10
upload 22:7,11 29:6,9 76:5 162:8 172:22 181:16
uploaded 22:16 153:22 191:3
uploading 169:3
urban 217:15 218:10
usa 4:23,24 5:1 5:2,3,4,6,10,11 5:14,15 30:1,8 35:17
usc 141:7
usdoj.gov 3:18
use 12:8 28:11 52:15 63:12 67:13 75:19 77:18 105:14 105:19 121:17 121:20 125:1,7 127:13,15 129:12,24 130:2,5,20 131:11 133:16

133:16,19
134:3 135:16
137:5 146:12
147:10 222:22
223:2,4 227:17
227:20
used 66:11,13
125:3 129:3
131:7 134:6,8
140:15
uses 134:17
222:9 224:24
using 66:14,19
98:10 119:8
140:21 223:6
224:2 226:12
usually 137:22
utilize 227:22

v

v 3:14 72:19
187:6,21
va 6:7,11,22 7:4
7:6 20:2,5 21:1
41:7,23 47:13
51:12 60:10
68:5,10,23 69:7
71:6 78:3 79:8
79:8,10,13
81:16 82:23
86:7,22 87:6
90:11 91:21,24
92:13,24 93:1,5
93:19 96:8
97:20 99:21
103:15 105:9
106:19 107:17
109:3,9,15,19
110:3,4,12,15
111:6 112:9,17
112:19,19,19
113:3,7 114:6
117:5 119:23
119:23 120:24
121:8 124:13
128:2,12
129:10 130:3
131:9 132:23
135:19,20
136:3,8,11,19
137:2,5,13,21
145:2 146:19
147:9,11,14,15
148:21 149:8
154:16 155:2
155:10,16,21
156:7,12,17
157:3,15 158:1
158:13,17
159:23 160:12
161:6 163:4,17
164:15 169:11
169:17 170:1,9
170:10,18
171:3,20 173:7
173:14 175:8
182:19 186:13
186:13,22
187:14 192:4
194:3,5,10,21
196:6 197:1,15
202:20 204:19
209:20 212:4
212:15 213:4
213:13,17,22
214:20 215:4
216:6,18,24
217:5,7,23
218:5 219:10
219:15,22
222:8 223:9,20
224:3,9,11,12
224:20 225:23
226:1 227:9,16
227:16 228:4
va's 105:11
106:8 149:3
155:15 169:21
173:23 192:11
192:23 195:22
vacancies
185:11,14,16
185:19
vacant 27:2
62:1,3 185:1
190:11
variable 135:6
225:7
variables
200:23 202:17
variety 91:18
113:3
various 49:9
88:22 158:6
176:17
vas 94:5 170:7
vba 21:24 22:2
verbatim
180:14 233:8
veritext 8:6
vermont 11:15
versions 63:6
versus 75:13
99:6 120:3
133:10 136:3
136:20
veteran 13:6,8
16:19 32:11
91:23 107:6
110:4 113:2,24
114:3 120:3
122:2,22 127:8
128:11,16
138:24 143:5
143:10 174:7
177:24 178:3
179:14 204:2
212:5,23 213:4
213:18,23
215:3 225:22
veteran's 62:20
212:13
veterans 3:23
5:16 6:2,5,10
6:15,21,22,23
10:22,24 11:17

13:3,7 14:13
17:18,19 40:10
40:17,20 41:15
43:6 46:10,13
47:1 52:1 58:6
65:17 77:6,7
86:4 87:15 89:2
89:22 93:8
94:10,11,19
97:6 98:16 99:1
99:4,10,15
100:3,16
107:14,15
110:11 117:22
118:22 127:7
128:3 136:10
139:11,13,17
139:20 140:11
141:12 142:1
142:11 143:14
143:19 144:3
144:24 145:17
145:21,22
148:4 150:22
155:12 159:20
159:21 160:4,9
161:1 162:5
163:1,4 164:4
167:5 168:14
169:10 173:6
175:23 176:10
178:22 179:11
179:24 182:17
186:10 190:19
191:20 192:4
194:18 195:3
203:18 206:18
206:19 207:9
211:1 214:15
216:3,17,24
217:6,12,15,22
218:4,9,10
219:1 222:6
vha 5:12 7:2
11:20,21 14:12
14:18,19 16:5,6
17:2,7 18:2,11
24:8 25:15
26:11 32:11
33:1 35:10 38:3
39:12,18 40:5,7
40:12,18 41:1
46:12,15,16,19
47:1,16 48:2,17
48:21 49:7
50:15 51:1 52:4
52:4,17,23
53:11 57:12,23
58:19,24 59:22
60:6,22 61:17
62:12,16,21,24
63:2,16,18
65:14 66:24
67:7 68:15,18
71:7,10 72:11
74:15,22 75:4
75:13,16,17
76:22 77:19,21
78:6,7,17 79:6
82:5,11 83:13
83:14,16,24
84:5,10 95:22
97:7 98:3,9
100:6,21 101:9
102:22 104:4
104:12 105:5
108:9 109:9,12
109:13,15,20
110:3,18 112:3
113:8,11,16
115:21 116:1,7
116:16 117:7
117:24 118:16
120:16 125:18
125:21 127:24
128:11,14,15
130:19 131:1
131:20,23
132:18 133:5
133:11,12
134:8,20
136:17 138:3
138:12 139:12
139:18 143:1
143:19 145:1
148:11 150:9
150:21 152:13
153:3,17
157:10 158:24
159:4,5,20
160:1,3 161:16
161:18 163:2
164:9,9,10
166:5 167:2,17
168:24 171:22
171:24 172:15
176:17,21
178:1 179:21
180:4,5 183:18
184:17,22,24
186:17 187:11
188:3,21
190:15 191:16
192:15 193:23
195:7,20 199:2
200:24 201:12
204:13 205:5
206:5,15
208:11,19
210:18 211:9
212:6 216:7
218:15,22
219:1 222:10
222:16 226:7
226:11,12,13
227:24 228:10
228:15
vha's 51:19
69:11 70:19
74:18 78:23
122:19 140:5
160:5 162:22
182:4 203:5
vickery 1:24
2:20 9:7 233:3
233:21

video 1:13 2:11 8:10
videographer 3:20 8:3,6 9:6 9:14 64:17,20 115:8,12 151:7 152:8 210:10 210:14 229:9 229:12 230:6
view 10:8
views 174:2
violation 65:24 68:21
violations 65:21 66:4 68:22 69:5 70:4,9
vision 77:5
visn 71:22 72:22 73:6,11 119:2 120:18 133:20 197:7
visns 72:18,20 73:1,9 105:18 105:19 120:16 120:21,22 121:4 186:21 187:6,8,12,22 195:17,19 196:14
visualized 28:7 63:4
vitae 5:5
voice 42:14
volume 134:19 225:2
voluntary 81:20 83:4
volunteer 20:6
vso 178:9 179:5
vsos 179:6 194:5,9

w

wait 93:17 94:19 178:21 186:3,6 198:16 198:21 199:6 214:16,23 216:2
waiting 200:3
waive 127:13
waived 230:10
walk 36:19
wallace 3:4,5 4:3 8:23,23 9:1 9:19,23 10:12 10:13 14:5 19:8 22:10,15 29:5 29:13,17 30:14 60:20 61:12 62:8 64:5,13,22 68:13 75:23 76:4 82:8,19 84:22 85:14 86:1 87:7 89:7 90:3,12 91:14 92:4,11 93:2 94:1,17 95:19 104:20 107:2 108:7,19 109:11 110:17 111:14 114:19 115:1,14 128:21 131:16 134:15 136:21 142:13,22 144:1 149:4,16 151:4 152:10 153:15 154:2 158:4 162:6,14 169:2,8 172:21 173:2 176:3,8 181:15 182:1 184:15 185:10 187:7,23 188:10 189:15 189:23 191:2,5 197:11 199:21 202:1 203:15 204:10,18 205:3,15 206:3 206:13 207:8 208:8,23 210:16 212:16 214:12 215:16 215:23 216:15 217:3,19 218:6 220:6,17 221:3 221:19 222:24 223:13 226:24 229:8 230:2
wallacegraha... 3:9
walls 124:20
want 29:8 64:5 64:9,23 65:1 75:23 80:2 115:1,3 140:17 154:7 190:8 202:15 229:20
wanted 77:18 79:1 93:12 97:2 97:5 127:22 139:8 209:1 227:15 228:2
wants 182:8 222:5
war 77:3 98:20 123:6,13 125:24
ward 3:22
washington 2:13 3:16 11:10 11:12 41:16
wasteful 86:22
watch 183:2,15
watched 184:12
water 1:7 4:21 5:8 8:12 12:15 12:21 13:13 14:15 19:16
way 22:6 25:18 27:16,20 51:21 54:24 63:13 75:5 111:23

142:8 190:9 194:5 227:2
ways 194:10 206:1,19 211:14
we've 59:8 96:6 131:3 201:21 202:24 203:21 215:10 216:4
weaknesses 192:23 201:10 203:4
website 31:19 32:9,10 105:11
websites 32:7
wednesday 1:16 2:8
weeks 194:4
welcome 115:15
went 36:10 37:7,13 64:8 80:10 81:2 86:7
whitney 3:5 8:23
wide 41:7 47:13 68:10 90:11 156:13
william 3:14
william.v.klo... 3:18
wishes 114:3
witness 2:13 8:17 9:8 14:3 18:23 19:2,21 20:3,8 60:15 61:9,22 64:11 68:10 82:5,17 84:21 85:12,22 87:4 89:6 90:2 90:7 91:1 92:9 92:21 93:23 94:15 95:9,17 104:16,19 106:23 107:23 108:14 109:8 110:9 111:11 128:20 134:13 136:15 142:18 143:23 149:1 149:14 157:22 184:7 185:8 187:4,18 188:7 189:7,21 197:6 199:18 201:18 203:12 204:8 204:17 205:2 205:11,22 206:11 207:4 208:4,17 212:12 214:9 215:21 216:12 216:22 217:11 218:3 220:4,14 221:1,17 222:20 226:22 229:16 233:6
word 52:16 67:13 73:15 127:15 146:13 192:9
words 14:10 75:16 180:14
work 11:20 32:3 37:6 39:11 44:1,13,18 53:1 53:2,6,8 54:4 69:24 70:24 77:2 88:7 89:19 110:21,22 117:3 121:16 123:12 135:20 138:23 153:5 153:12 159:8 163:1 188:22 188:22 200:9 200:10
worked 37:2 39:10 40:21 41:14 42:5 43:13,16 46:12 47:3 56:18 75:10 77:2 149:24
workforce 92:13 188:19 188:24 207:20 208:7
working 18:6 37:9,16,22 38:13,16,23 39:17,18,20,24 40:1,3,4,6,16 41:2,2,3 46:5,9 57:12 70:11 72:3,10 86:6 110:2 131:3,5 157:6,17 164:15 177:8 194:4
workload 45:24 133:19 202:6 202:16 224:15
works 52:10
workup 135:21
worth 87:10 206:23
wrapped 165:23
written 50:7 181:19 191:6 191:14 194:13
wwallace 3:9

y

y 165:1
yeah 80:3
year 44:22 53:16 66:22,23 67:3,4,8 79:4 81:6,14 82:9 83:12 101:13 101:17,17 106:12 111:4 116:23 118:13 124:12 173:24

194:3 209:18
210:2
year's 67:2 68:3
115:23
years 39:18
62:6 68:23 69:6
86:5 107:18
108:2,10
146:19 153:18
173:22 190:11
192:11 201:14
218:23
yellow 171:9
yesterday 41:5
51:23 76:7
78:17
yield 169:22
you's 26:19

z

zoom 30:23
80:2

Exhibit 774

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF NORTH CAROLINA

IN RE: CAMP LEJEUNE WATER LITIGATION	)	Case No. 7:23-cv-00897
This Document Relates to: ALL CASES	)	

VIDEOTAPED DEPOSITION
OF
MICHAEL FRYAR
Monday, March 2, 2026
Salisbury, North Carolina

Reported by: Christine A. Taylor, RPR

Job No.: 7897326

On March 2, 2026, commencing at 9:02 a.m., the videotaped deposition of MICHAEL FRYAR was taken pursuant to notice and pursuant to the Federal Rules of Civil Procedure, on behalf of the Plaintiffs at the offices of Wallace & Graham, 525 North Main Street, Salisbury, North Carolina.

* * *

REMOTE APPEARANCES:

Representing the Plaintiffs:

WALLACE & GRAHAM
BY: WHITNEY WALLACE, ESQ.
525 North Main Street
Salisbury, North Carolina 28144
704.633.5244
wwallace@wallacegraham.com
and
WARD AND SMITH, P.A.
BY: JENNA BUTLER, ESQ. (via Zoom)
127 Racine Drive
Wilmington, North Carolina 28403
910.794.4800
jfb@wardandsmith.com

and

BELL LEGAL GROUP
BY: LESLIE LAMACCHIA, ESQ. (via Zoom)
219 Ridge Street
Georgetown, South Carolina 29440
843.438.7480
llamacchia@belllegalgroup.com

Representing the Defendant:

U.S. DEPARTMENT OF JUSTICE
BY: MARCUS O. TUBIN, ESQ.
JOSHUA CARPENITO, ESQ. (Raleigh)
CARSON GARAND, ESQ. (via Zoom)
P.O. Box 340, Ben Franklin Station
Washington, D.C. 20044
202.616.8289
marcus.o.tubin@usdoj.gov
joshua.g.carpenito@usdoj.gov

Also Present:
Rob Patterson, Videographer

C O N T E N T S

	PAGE
EXAMINATION BY MR. TUBIN	8
EXAMINATION BY MS. WALLACE	291
FURTHER EXAMINATION BY MR. TUBIN	334

* * *

E X H I B I T S

EXHIBIT	DESCRIPTION	PAGE
Exhibit 1	2/27/2025 InQuis Cost Analysis for Terry Dyer	62
Exhibit 2	4/8/2025 Rehabilitation Evaluation of Jimmy Carroll Laramore by Deborah Navarro	65
Exhibit 3	4/8/2025 Rehabilitation Evaluation of Terry F. Dyer by Deborah Navarro	69
Exhibit 4	4/8/2025 Rehabilitation Evaluation of Bruce Wayne Hill by Deborah Navarro	75
Exhibit 5	5/8/2025 Rehabilitation Evaluation of Diane Lynn Rothchild by Michael Shahnasarian	82
Exhibit 6	5/8/2025 Rehabilitation Evaluation	90

	of Robert Eugene Welch by Michael Shahnasarian	
Exhibit 7	5/8/2025 Rehabilitation Evaluation of Richard Douglas Sparks by Michael Shahnasarian	91
Exhibit 8	4/8/2025 Redilatation Evaluation of Frank Wayne Mousser by Michael Shahnasarian	96
Exhibit 9	Specific Causation Expert Report for Jimmy Laramore, John P. Sfakianos, M.D.	112
Exhibit 10	4/10/2024 Deposition Transcript Excerpts - Terry F. Dyer	129
Exhibit 11	11/7/2014 Deposition Transcript Excerpts - Paul M. Deutsch, Ph.D.	139
Exhibit 12	Stipulated Rule 30 Deposition Protocol (Case Management Order No. 3)	140
Exhibit 13	3-page Document for 75th or 80th Percentile	161
Exhibit 14	2/6/2025 InQuis Cost Analysis - Bruce Hill	164
Exhibit 15	7/15/2024 Deposition Transcript Excerpts - Jessica Schmit, M.D.	174
Exhibit 16	2/5/2025 InQuis Life Care Plan -	187

	Diane Rothchild	
Exhibit 17	5/3/2024 Deposition Transcript Excerpts - Joel Perlmutter, M.D.	199
Exhibit 18	2/1/2025 InQuis Life Care Plan - Richard Sparks	206
Exhibit 19	2/1/2025 InQuis Life Care Plan - Robert Welch	206
Exhibit 20	1/28/2025 InQuis Letter - Frank Mousser	244
Exhibit 21	11/8/24 Progress Notes MOUSSER VHA 01631-01638	250
Exhibit 22	1/28/25 InQuis Letter - Jacqueline Tukes	257
Exhibit 23	Industrial Commission document, I.C. No. 091464	270
Exhibit 24	NC Industrial Commission document, I.C. No. 13-750945	272
Exhibit 25	NC Industrial Commission document, I.C. No. 13-752573	275
Exhibit 26	NC Industrial Commission document, I.C. No. 19-720549	276
Exhibit 27	NC Industrial Commission document, I.C. No. W99593	278
Exhibit 28	NC Industrial Commission document, I.C. No. X86647	280

Exhbiit 29	NC Industrial Commission document, I.C. No. 20-024801	283
Exhibit 30	Handwritten document "Additional Records"	286
Exhibit 31	Expert Report for Terry Dyer by Haresh Tharwani, M.D.	308
Exhibit 32	1/22/2025 Complete Cystectomy Surgical Coding - Jimmy Laramore	328
Exhibit 33	Home Care Services Table - Richard Sparks	330
Exhibit 34	Michael Fryar - Supplemental Materials Considered List	332
Exhibit 35	Michael Fryar - Supplemental Materials Considered List	332

P R O C E E D I N G S

* * *

THE VIDEOGRAPHER: On record at 9:02 a.m. Today's date is March the 2nd, 2026.

Will all counsel present please introduce themselves and our court reporter will swear in the witness.

MS. WALLACE: Whitney Wallace with Wallace & Graham, for Plaintiff Leadership Group.

MR. TUBIN: Marcus Tubin with the Department of Justice for the United States.

MR. CARPENITO: Good morning. Joshua Carpenito on behalf of the United States.

* * *

MICHAEL FRYAR,

having first been duly sworn, was examined and testified as follows:

* * *

EXAMINATION

BY MR. TUBIN:

Q. Mr. Fryar, is there anything preventing you from thinking clearly today?

A. No.
Q. Anything preventing you from testifying truthfully today?
A. No.
Q. You understand that the oath you just took is the same as you were if you were testifying in a courtroom; correct?
A. Yes.
Q. Okay. I'm going to assume that you understand my question, unless you tell me otherwise; is that fair?
A. Fair.
Q. Okay. If you want a break at any time, just please let me know. Otherwise, as we stated off the record, we'll plan for about once an hour.
A. All right. Appreciate that.
Q. Did you bring any materials with you, sir?
A. Yes. I brought my life care plans, some research materials, the economist report, my invoices, CV, testimony list. I think that about covers it.
Q. What research materials?
A. So they're over here. Some of the

things I cite in the back of the life care plan. They are more life care planning oriented items. And there's actually two treatises from life care plan I brought with me in case I needed them.

Q. Are those all materials that were cited in your report?

A. Yes.

Q. So nothing that we haven't -- hasn't been disclosed to the United States already?

A. Well, I have a methodological statement about costing that's in here. I don't know if you actually have that. But I have that --

Q. Was that part of your report?

A. It wasn't part of my report. It's just part of explaining my methodology for costing.

Q. Is that something you drafted?

A. Yes. I mean, I have it in my office as a reminder to myself.

Q. Okay. We're going to want to make copies of that during a break.

A. Sure.

Q. Okay. Have you formed any opinions in this case that are not stated in your reports?

A. No.
Q. Did you review any docs -- documents before your deposition today to refresh your memory?
A. I did. And I actually saw some new documents. I went back through all my life care plans, of course. I reviewed Mr. -- the Stradler economist reports. I reviewed some reports from Dr. Miller, Ms. Tricia Yount. Of course, since I released my reports, I saw the life care plans from Ms. Navarro, and I'm -- we'll just call him "Dr. S" because I can't say his last name.
Q. Shahnasarian.
A. Yes. And then I saw some amended damage assessments.
Q. Okay. Is that what's listed on the paper, the notes --
A. Yeah, I just wrote them down as other things I saw.
Q. Okay. Did you review all of those materials for the specific purpose of testifying today?
A. Yes. Before my deposition, yes, I did.
Q. Okay.

A. I had seen the life care planning -- life care plans previously.

Q. Right.

A. I just went and reviewed them again.

Q. Now, you're a member of the International Academy of Life Care Planners; correct?

A. Yes.

Q. Members of the International Academy of Life Care Planners have pledged to adhere to all published standards of practice maintained by the organization; correct?

A. Agree. We have to abide by them.

Q. Okay. This includes the Standards of Practice For Life Care Planners; correct?

A. Yes. 4th edition is the most current.

Q. And it also includes a consensus of majority statements published in The Journal of Life Care Planning; correct?

A. Well, I don't know if that's actually -- that's their publication, so I guess you could say it's from the academy. But it's in The Journal of Life Care Planning, yes.

Q. Okay. One of the sources you rely on

in your life care planning practice is the Standards of Practice for Life Care Planners, 4th Edition; correct?

A. That's one of them, yes.

Q. Do you consider this text to be an authority in the field of life care planning?

A. I consider it to be a treatise.

Q. Okay. Do you agree with all the standards of practice and practice competencies listed within that document?

A. Yes. I mean, there's nothing I've ever seen that I specifically disagree with.

Q. Okay. Now, a treating physician has examined their patient; correct?

A. Ask me one more time.

Q. A treating physician has examined their patient; correct?

A. They do examine their patients, yes.

Q. They have often diagnosed their patient; correct?

A. Yes.

Q. They have, in some cases, operated on their patient; correct?

A. Yes.

Q. They often have a long-term

relationship with their patient; correct?

A. Can.

Q. Can. They have authored the patient's medical records; right?

A. Or a PA under their supervision or nurse practitioner, yes.

Q. And they have often been with the patient throughout the patient's disease treatment; correct?

A. Can. I mean, there's exceptions to that, of course.

Q. Would you agree a treating physician knows their patient better than a non-treating physician?

A. I think they have more experience with their patient than a doctor who just did an evaluation, yes. But in life care planning, there's really no distinction drawn between treating versus evaluating, but yes.

Q. A plaintiff's life care planner has greater access than a defendant's life care planner to the plaintiff's treating physicians; would you agree?

A. If the plaintiff's life care planner had a release signed, yes, and the defense

didn't, I agree.

Q. And isn't that easier for the plaintiffs to obtain than the defense?

A. Not necessarily, but often when you're on the defense side, you don't necessarily have access to the plaintiff.

Q. Okay. In your past life care plans for plaintiffs, do you consult with the treating physician?

A. I attempt to, yes. They don't always want to be involved, but yes.

Q. But you always try?

A. Unless I know they're specifically just not going to be involved, yes.

Q. And how would you know that they're specifically not going to be involved? How would you learn that?

A. I was told in these cases that several of the treating doctors from the VA would not be access -- accessible to me. The ones that I did understand would have -- I'd have access potentially to, I wrote letters to.

Q. Who explained to you that you would not have access to them?

MS. WALLACE: Objection to the extent

that that calls for attorney-client privilege.

BY MR. TUBIN:

Q. Who explained that to you?

A. The attorneys on the case, that the veterans physicians would -- the VA physicians wouldn't necessarily respond to anything.

Q. Would you agree a consulting physician should still be a board-certified doctor?

A. Preferably, you're board certified in your discipline, yes.

Q. Would you agree a consulting physician should still be treating patients?

A. That's -- I mean, I speak to a lot of physicians who have had 30 years of training and experience and now they're semi-retired. So I don't necessarily think that has to be the case.

Q. Would you give more weight to an opinion from a consulting physician who is actively treating patients than one who hadn't in, let's say, a decade?

A. You know, and that's a real tricky question to answer because I can't really give greater weight to any physician because I'm not a

physician. So in life care planning, there's a consensus that says I have to methodically manage divergent opinions.

So if I have three neurologists saying three different things, my job is just explain what the impact of those three different opinions are. I can't really say that this doctor should be favored over that doctor. And the only person who can is another physician.

So any life care planner who is nonphysician can't really speak to the credibility of one set of medical facts versus another from a different physician.

Q. So how -- how do you methodically account for divergent opinions?

A. Sure.

Q. What considerations do you look for when you have two physicians that are disagreeing with each other?

A. So, here, you have that. You have the physicians that spoke to the defense life care planners versus physicians I spoke to.

I think that's left to the trier of fact. I mean, you have a life care plan built by other life care planners using the foundation

from other doctors. And I don't take exception that that's what foundation they received, and you have life care plans that I've built, they were from other doc -- from the doctors I consulted with.

I don't take exception with either one. If I had followed what they had -- the defense experts had -- had received, I would probably came up with the same conclusions.

Q. All right.

A. So it's really to the trier of fact because we're not -- if I selected one of those physicians over the other, I'm acting as if I can prescribe medical care. And that's outside of my scope.

Q. Right. So if you have one physician recommending care, who is actively treating patients, and you have a second physician who's recommending care, but hasn't treated patients in over a decade, are you likely to give more weight to the first physician than the second, or maybe you give equal weight to both?

A. It's not my call. I mean, I can't tell you that one should be more highly valued than the other. Life care planning doesn't

address that. They say you can get your foundation from treating or evaluating physicians. It doesn't say they have to be actively treating. So ...

Q. So if you have somebody who's never treated a patient and they're recommending treatment, and you have a doctor that's been treating patients for 50 years and they're recommending treatment, you can't -- you don't distinguish between the two?

A. I don't know if I ever ran into a situation where a doctor has never treated a patient. So ...

Q. Let's say they have treated one patient.

A. There's nothing in the -- there's nothing in our treatises that distinguishes that for us. There's just nothing.

Q. Okay. Thank you. Now, aside from the treatise, what about in your practice? Is there anything that you use to distinguish between a scenario like that?

A. Again, if I did that, I'd be acting outside of my scope. So no.

Q. Okay. As part of the life care

planning process, you should request depositions of the client, family, or treatment team that may be useful; correct?

A. As far as the life care planning process, yes.

Q. Okay. Are you drawing a distinction there?

A. So if -- I learned life care planning from the gentleman who started life care planning. He was my teacher. And then I learned from his first generation student for -- he was my mentor for 23 years. The first gentleman I was talking about, Dr. Deutsch.

Q. Dr. Paul Deutsch; correct?

A. Yes. So I learned from him and then his second kind of lead was Julie Kitchen. That's who I learned from.

What I -- was explained to me was that if the medical care I'm reviewing does not meet 75, 80 percent of the tables in the life care plan, it's not really a life care plan. It's not life care -- a life care plan is not the appropriate title to use because we have certain tables distinguish certain types of care.

In that situation when you're --

like, for example, if you had just you're pricing out just a surgery or you're pricing out -- here, like, a transplant, that is a cost analysis.

So the reason I'm answering it that way is that life care planning says that a consensus is I have to meet with the person, do an assessment. I'm not -- some of these I did not do a life care plan. I just simply spoke to the doctor, this is the foundation I received, and priced out the information as a cost analysis.

So that didn't meet, as I understand it, the 75, 80 percent rule that Dr. Deutsch taught me about when to do a life care plan on a case versus a cost analysis.

Q. Can you explain that 75 to 80 percent rule again?

A. Yeah. So there's certain tables, like there's projected evaluations, therapeutic modalities. If you have a prosthetic, there's a separate table for that. Separate table for surgery. Separate table for DME, attendant care, facility care, transportation, housing, and so forth and so on.

If it's not meeting, you know 75, 80

percent of those tables, it's really not in line with what a life care plan was built to be.

Q. And when you say "meeting" those tables, what does that mean?

A. There's care items that would fall on those tables.

Q. Okay. And where are these tables located?

A. Well, they were originally located in the Guide to Rehab book by Deutsch. I think they're also in some of the treatises that we -- the original tables are probably in the -- only in The Guide to Rehab.

Q. Dr. Deutsch created these tables?

A. Yeah, or he -- yes, he was the originator of the tables. Him and a gentleman named Raffa, and then there was another -- Raffa was an economist. And there was another gentleman in some of the -- in some of the books.

Q. Do you know if the book that they were published in has been peer reviewed?

A. Well, things in that book have been peer reviewed in the journal, I do believe, later on. But those are the first books of life care planning.

Q. Right.

A. There was an amicus brief that he wrote way back when, that was published in the journals. I don't know if that book per se was, but it was the original book.

Q. Okay. Would you agree that the consensus statements published by The Journal of Life Care Planning apply to all life care planners?

A. Yes, absolutely, 100 percent agree with that.

Q. And do you agree with all the consensus statements published by The Journal of Life Care Planners?

A. Yeah. For development of the life care plan, yes.

Q. Okay. So, again, is there a distinction there?

A. So when I do a cost analysis, I'm following life care planning methodology for costing. But there are certain things that I don't necessarily have to follow, like meet with the person, if I'm simply giving you a cost for a surgery.

Q. So for -- so there's a distinction

between a cost analysis table and a life care plan?

A. Yes, that's how I was taught.

Q. Right. And for a cost analysis table, you don't need to meet all the same criteria as you would for a life care plan?

A. The main thing being that I wouldn't necessarily have to meet face to face with a person, see their home, you know, explore what accommodations they need, because they didn't need any. It was more of a projection about what their surgery requirements were, or what their -- you know, interventional requirements were for pain management. That's not necessarily a life care plan.

Q. Right. And what are the minimum requirements you would need to meet for a cost analysis table to be accepted in your field as legitimate?

A. You would need to follow the costing methodology from life care planning.

Q. Even though --

A. And -- I'm sorry. And, also, I would certainly never venture beyond my scope and I've had foundation from a doctor for what I'm saying.

I wouldn't say -- I've seen some cost analyses where folks don't have foundation and they say, well, I'm anticipating these future needs.

I would never do that. So I'd want foundation from a doctor and I'd follow life care planning costing methodology.

Q. The life care planning costing methodology, where is that located?

A. It's in the standards that you spoke about. It's in the consensus statements. It's in our treatises.

Q. Okay. The 4th edition and the consensus statements --

A. Well, there's a 5th edition now, yes.

Q. Okay. I thought you said earlier the 4th edition is the most recent?

A. The 4th edition of the standards -- the book -- I'm sorry, maybe I confused you.

The treatise that I spoke about, I have them both here. The 4th -- there's a 4th and a 5th --

Q. Yeah.

A. -- that I commonly use.

Q. And the 4th is the one you cite in your report; correct?

A. I think I cited as a resource the 4th and the 5th book. The life care planning case management handbook. The standards you're talking about, the 4th edition from the academy, yeah, I cited the 4th, yes.

Q. Okay. Thank you.

Do you consider the consensus statements from Volume 16 of The Journal of Life Care Planning to be a treatise?

A. That's from 2018?

Q. Yes, that's from 2018.

A. The volume threw me off, that's what I'm asking.

Q. Right.

A. Is it a treatise?

I mean -- so I can tell you what it is and then maybe there could be some arguments to say if it's a treatise or not.

It is a -- it was produced by life care planners through multiple rounds of surveys, through what's termed the Delphi study, which is an empirical way to arrive at expert consensus without group pressure.

And from that, we got basically guidelines about what's needed for a valid and

reliable life care plan. So it is a very important piece of literature that is a consensus statement. If you want to refer to a consensus statement as a treatise, a learned document, yes. But it's really more empirical research about what an evidence-based life care plan should include.

Q. Okay. And do you agree with all the consensus and majority statements listed in that 2018 version?

A. I don't take exception. But I don't typically -- the majority, I feel a little bit more as though they're an absolute. But, yes, the consensus statement -- the majority have a little asterisk by them at the very end. But the consensus, yes.

Q. Okay. And one of the consensus statements is that life care planners shall conduct an in-person interview whenever permitted; correct?

A. Right.

Q. And you're saying that that is different in a cost analysis table scenario?

A. Right. It's not a life care plan.

Q. Okay. But for a life care plan, you

shall conduct an in-person interview wherever possible?

A. Yeah. The reason for that is to be onsite so I can see the environment, I can see what accommodation requirements they require, see if a wheelchair is involved, very commonly in a life care plan. So that's the reason why that's in there.

And there actually is a little bit of debate now about should that be onsite or through Zoom. But for a cost analysis, it's standard for that to be based upon the foundation you receive and the costing you completed.

Q. Right. So if an in-person is unavailable, then you should try for a remote interview; correct?

A. Right. Or if it's just traveling issues, yes. I don't have issue with a remote. And I think there's some literature coming out that says remotes can be done.

Q. If you don't interview the plaintiff, you should note this in your report; correct?

A. You should. I mean, I think I noted that in the reports or explained that, because I was asked to simply cost out the material. But I

would certainly explain if I met with a person, the findings.

Q. Right. Because standards of practice for the life care planning says that if access to a source of information is not possible, this should be noted; correct?

A. You're right about that. What I'm saying is if I met with a person, you're going to see it in my report.

Q. Right.

A. You're going to see the information they gave me. If I didn't meet with them, you're not going to see that information.

Q. Now, another of the International Academy -- I'm going call it IARP, I think that will -- is that okay with you?

A. So IARP is the governing group and then the academy -- the International Academy of Life Care Planning is the section. So that's fine.

Q. Okay. So one of the IARP's practice competencies is to ensure appropriate foundation or rationale for each recommendation; correct?

A. Agree.

Q. And another is to identify relevant

research and references in the development of the life care plan. Agree?

A. Relevant research and --

Q. Research -- relevant research and references in the development of a life care plan.

A. I agree.

Q. Okay. And one of The Journal of Life Care Planning's consensus statements is that life care planners shall include a basis for recommendations; correct?

A. Agree.

Q. Another is that life care planners shall identify the sources of their recommendations; correct?

A. Correct.

Q. Now, for every item or service listed in your cost analysis tables, you identify the recommendation source; correct?

A. Yes.

Q. So you are following these standards of practice and consensus statements; correct?

A. Yes, for costing, yes.

Q. Now, omitting the recommendation source for a line item would violate the

standards of practice and practice competencies; correct?

A. If it was done. There was one I wanted -- something I want to clarify on one report where I had left something out, but yes.

Q. What is that that you wanted to clarify?

A. So on Mr. Laramore -- I'm sorry, there's two things I wanted to clarify. Something on Mr. Laramore and then something on Mr. Sparks.

So Mr. Sparks -- Dr. Schwarz said -- and for some reason it just inadvertently got left out of my frequency table. She said in the first two years, with the attendant home care service, it should be 12 hours a week. And I had put -- it was 3 hours a day, but the first 2 years should be every other day. So that part got left out.

So for the first 2 years, it should be 12 hours a week. And I'd be happy to tell the economist that that was -- it's in the questionnaire responses from her, but it got left off of my frequency. So just to clarify that point.

Q. You said that was an inadvertent mistake?

A. It was inadvertent, yeah.

Q. So that's for Sparks?

A. For Sparks, yeah.

Q. What is the issue for Laramore you want to clarify?

A. So Laramore -- so there was a digit off on one of the CPT codes --

Q. Okay.

A. -- for one of the procedures. I caught it after I had sent it to the doctor and then I sent him another version of it with the correct CPT code, the actual coding listed. He signed off on that later. What you got in the report was the first one. So I have the second one he signed.

Q. Is there any difference in the price that resulted from that?

A. No, didn't change any of that. Just changed that there was a code -- like the number was 5 -- the number was 6 instead of 5.

Q. Right.

A. Just explained it was the correct code.

Q. And that the incorrect code didn't refer to, like, a separate procedure that had a different cost that you were relying on?

A. That didn't change any of my costs. It just was the final one he signed.

Q. Okay. A plan that makes medical recommendations without specifying the recommendation source, lacks medical foundation; correct?

MS. WALLACE: Objection.

THE WITNESS: No. You'd need to specify. And I feel like I have done that on every one of these plans.

BY MR. TUBIN:

Q. Yeah, i'm not necessarily talking about anything --

A. Right.

Q. -- in your reports. I'm just saying a plan that makes medical recommendations without specifying the source of that information would lack medical foundation?

A. Right. I attached -- you know, the foundation I received, other than what we just talked about.

Q. And you've previously stated that a

plan lacking appropriate medical foundation may not be accepted into the evidentiary record for an evaluee; correct?

MS. WALLACE: Objection.

THE WITNESS: Without appropriate foundation, yes.

BY MR. TUBIN:

Q. Your statement also notes that a life care plan that is incongruent with accepted standards of practice and consensus statements will likely be challenged and, ultimately, may not be accepted into the evidentiary record; correct?

MS. WALLACE: Objection.

THE WITNESS: Of course, we need to follow the standards in the consensus.

BY MR. TUBIN:

Q. Okay. In your report, you provided the 50th and 75th percentile costs; correct?

A. I did.

Q. This is standard practice in life care planning?

A. So the 80th and 75th are kind of the threshold of ceiling of costs. There's literature that speaks to the 50th as being used

too. That's talked about in this methodology statement that I mentioned earlier.

Q. Why do you choose the 50th?

A. Because there's literature in life care planning that says the 50th should be used.

Q. So do you believe that it's -- there's -- it's more supportable to use the 50th and the 75th than anything else?

A. My methodology statement explains it. But the 80th is difficult to always get because we don't -- our resources don't allow us to get it. We have to be consistent in how we're researching things.

Q. Okay.

A. Secondly, there's a costing summit that was done. And if you look at the numbers between -- people were surveyed at the 50th and 75th, that was the majority of the survey. The 75th was the number 1 percentile that was used, the 80th was number 2, and 50th was number 3. But when you combined the 50th and 75th together, it's the greater majority of the survey.

We have to follow a published policy statement from the AMA about defining usual, customary, and reasonable. You have to give a

range.

So we have literature that says we need to use the 50th. It's in our treatises too, we need to use the 50th. And that literature in the journals was some empirical study of random sampling of bills. Then we have the UCR definition that says we have to use a range.

So I don't take exception if someone uses the 80th. But all my resources won't give me the 80th. So I want to be consistent, so I use the 50th percent.

Q. And you believe that is the better practice; correct?

A. Yes. I mean, current practice in life care planning, I mean, of course this has evolved over time.

Q. Right. But current best practice in life care planning is to use the 50th and 75th percentiles?

A. Yes.

Q. Would you agree that using FAIR Health to assess treatment costs is a generally accepted practice?

A. Yes. It's -- actually, there's a partnership between FAIR Health and the academy.

Q. Okay. And you'd agree it's a reliable method?

A. Yes. They have spoken in our symposiums. I've spoken to them many times through their database manager, yes.

Q. Now, is using Context4 Health to assess treatment costs also a generally accepted practice?

A. Yes.

Q. And would you also agree it's a reliable method?

A. Yes. Also on the academy's web -- their web page about a resource we can use, yes.

Q. Okay. What about the R-A-P-E-L methodology to assess lost earning capacity, is that a generally accepted practice?

A. I don't know that -- I don't follow that methodology. I can't answer for that one.

Q. Okay.

MS. WALLACE: Objection. Will you restate that. I think they call it "RAPEL."

BY MR. TUBIN:

Q. RAPEL --

A. Oh, I'm sorry. You threw me off with

spelling it.

Q. I didn't know if it was an acronym or not. The RAPEL methodology.

A. Okay. I'm sorry. I follow -- I was thinking -- I thought you said R-L-P. Sorry.

Q. No. No. R-A-P-E-L.

A. RAPEL is an accepted methodology, yes.

Q. And you consider it a reliable methodology?

A. Oh, yes. I've been using it my whole career. It is the most relied upon methodology in publication.

Q. And the Earning Capacity Assessment Theory, is that a generally accepted practice?

A. I've seen that out there, but I've -- I don't know a lot about that one.

Q. Okay.

A. I'm not saying it is or is not, but I don't know a lot about it.

There's probably 20 different published methodologies for earning capacity.

Q. Understood.

Did you ever work as a nurse?

A. Yes.

Q. How long?

A. So I worked in the hospital for -- I have to look back at my resume. I think part-time and full-time, probably around four or five years. I was an in-patient rehab nurse, brain injury floor, spinal cord injury, polytrauma.

But then I was also a catastrophic and non-catastrophic nurse case manager pretty much my whole career. I was even doing that before I was a nurse.

I worked on cases where we moved patients all around the country to different centers of excellence for care.

Q. As a nurse, did you ever work with bladder cancer patients?

A. In context to bladder cancer being the primary only diagnosis, no. But in context to a complication from other things, yes.

Q. What does that mean?

A. So spinal cord injury patients get bladder cancer. They get -- they get bladder stones. They have all kinds of bladder problems. It's a consequence of that.

I've had people who have had trauma

to their bladder who have had to have, you know, surgical procedures done that they're causing them, you know, difficulties. The same kind of thing with -- with the kidneys. Polytrauma.

Q. Did you ever work as a nurse with Parkinson's disease patients?

A. Yes. Many times with the deep brain stimulator situation would maybe go a little bit awry. And a lot of times, brain injured folks develop Parkinson's-like syndrome where they do the shuffling gait and the tremor, an element of dementia.

So I've seen it in that population. I've seen them treated it in the hospital. I've actually treated people with cancer in the hospital, but not chemo. I've treated them with rehab, when they were coming through rehab to try to recover from their condition.

Q. What about leukemia patients?

A. I've seen some of that in the hospital. I don't think I've ever treated someone who had it as a primary, but had developed as a secondary. Like as a case manager, I remember some cases where someone developed leukemia while I was managing them for

another issue.

Q. Do you recall the specific type of leukemia?

A. I don't remember the specific type, no.

Q. What about kidney cancer?

A. Maybe just a handful of kidney cancer. I've had some other types of cancer. That's why I'm hesitating -- where folks were found out they have cancer. Like, I was the case manager and we found out they had cancer from a scan, and then they had to divert and have care for their cancer.

So I just don't remember kidney cancer was exactly specifically one of them.

Q. Okay.

A. Oh, thank you. I'm doing too much talking.

Q. Have you ever done a life care plan for bladder cancer before?

A. Outside of the -- being -- the primary diagnosis being spinal cord injury, no.

Q. Have you ever done life care plan for Parkinson's disease?

A. I've taken care of them in the

hospital. And I've taken care of folks who have been diagnosed with Parkinson's-like syndrome. Quasi Parkinson's. They have it -- they have it resulting from a traumatic brain injury.

Q. But have you ever done a life care plan for a Parkinson's disease case?

A. Well, they were having those symptoms from a brain injury. But not -- so, again, it's the -- not as the primary diagnosis, as secondary diagnosis.

Q. So they were diagnosed with Parkinson's disease?

A. Well, they called it Parkinson's-like syndrome.

Q. But there wasn't an actual diagnosis of Parkinson's disease that you recall?

A. Not a full-blown Parkinson's, no.

Q. Have you ever done a life care plan for any form of leukemia before?

A. I think many years ago, my mentor had one and I helped on it. I was not the lead.

Q. Is your mentor Dr. Paul Deutsch?

A. So Deutsch's -- I said first generation student, I also -- was my mentor for many, many years, that was Steve Yuhas. He

retired last year.

Q. Okay.

A. Y-U-H-A-S.

Q. Would you consider Dr. Paul Deutsch a mentor?

A. I mean, he was the one who taught me the whole process, so yes.

And then I went to his -- Dr. Deutsch was retiring when I was coming through. So then I went to his first generation student.

Q. Had you ever done a life care plan for kidney cancer before?

A. Not specifically kidney cancer that I can remember, no. Not as a primary diagnosis, no.

Q. At Carolina Case Management, you were there from 2007 to 2008, give or take.

A. Probably was one more year in there. But, yes, it was -- it was not very long.

Q. Was that solely litigation?

A. No, that was medical case management -- vocational case management.

Q. Did you also do litigation work?

A. I did some kind of -- I just was getting out of life care planning training at

that same time. So I maybe did just a handful of things. I don't remember doing a lot.

Q. What about at Fryar Rehabilitation Services?

A. Yes, I have.

Q. That was -- what percentage was litigation?

A. Well, depending on how you define the word "litigation." A lot of that's workers' comp, long-term disability, medical case management in the worker's comp system, vocational case management in the workers' comp system, Social Security.

I do private hire where I'm more of like a career counselor for someone wanting to figure out what they want to do for a living.

Q. Let me -- let me define it as anything where there was an adversarial nature, there was a plaintiff or a defendant or a claimant and a defendant and you were tasked on one side of creating a life care plan?

A. On a life -- so a lot of Fryar Rehab was case management. So there would be an insurance carrier involved.

Q. Okay.

A. But what you're asking about, Fryar Rehab probably was -- for life care planning, probably -- it's varied through time -- maybe 25 percent of what I did. For vocational rehab, was probably more litigated, was probably 25 percent and then 50 percent was case management.

Q. Now, can you explain to me a little bit more what you mean by case management?

A. So, there, I'm the -- I'm their -- they're my client then. So as a life care planner, they're my -- they're an evaluee, they're not my client.

There's some language in some of the previous treatises that use the word "client." But if you look at current standards, they're referred to as an evaluee. So I'm their advocate as a case manager, I'm not their advocate as the life care planner.

Q. So what are they coming to you for? Why are they coming to you in that --

A. In a case manager?

Q. Yeah.

A. I also did that for the U.S. Department of Labor, in that same role. I skipped that one when I was explaining it.

So I'm coordinating medical care. So with the U.S. Department of Labor, I was coordinating the -- actually, I could approve any medical care other than invasive, like, surgical procedures.

So I'm coordinating the medical care, going to appointments with them, getting them set up for therapy, getting them set up for some procedures, communicating to the insurance company and/or attorneys.

And also with the U.S. Department of Labor, I was helping them return to work. That's also part of the medical case management. I'm seeing if there's a job available to them. So coordinating care and helping them to return to work.

Q. Okay. Now, InQuis Global -- am I saying that correctly?

A. You are.

Q. InQuis Global, 2018 to present; correct?

A. Well, just a slight variation there. In December -- I think it was 22nd, we were acquired by the YA Group. I have a new current CV I can give you. But the YA Group is -- we

became a part of them. The InQuis whole team came over to YA.

Q. That was in December 2025?

A. Of 2025. I think it was December 22nd of 2025.

Q. Okay. So before that, from 2018 to 2025, at InQuis Global, what percentage of your work was litigation in an adversarial nature?

A. Oh, that's 100 percent forensic work.

Q. When you say "forensic work," you mean for plaintiff or defendant in a lawsuit?

A. Yes. Yes. I mean, I kept Fryar Rehab going the whole time too. But, yes, if it was an InQuis referral, it was a forensic evaluation.

Q. And is that also true at the YA Group?

A. Yes.

Q. Okay. Now, have you ever prepared a life care plan outside of litigation?

A. So in the case manager role that was mentioned earlier when I moved people all around the country, I worked for a company called Paradigm. But I -- you're not going to see that listed per se on my resume because I ran that

through Fryar Rehab.

Q. Okay.

A. I was a contractor for them. We would make smaller versions of the life care plan to predict out what care is needed. We had a whole treatment team of folks who helped build those. In-house, we had a doctor we consulted with, the Allied Health therapist.

And that was to guide the whole treatment process for very complicated cases, like persistent vegetative states, quadriplegia, multiple amputations, that type of thing, burns.

Q. So why didn't you list it in the resume?

A. Because it was part of the case management part I did through Fryar Rehab.

Q. Okay.

A. I was a contractor with them. I wasn't an employee.

Q. So were they a separate entity?

A. They were a separate entity that contracted me.

Q. Okay. And how did you -- how do you spell --

A. Paradigm. P-A-R-A-D-I-G-M.

Q. Were there others that contracted you?

A. Well, the U.S. Department of Labor contracted me.

Q. Uh-huh.

A. And I ran that through Fryar Rehab.

Q. Any others you recall?

A. Through the years, there's been a couple of the case management companies who contracted me for short-term reasons.

Q. Okay. But they're in no way a part of Fryar Rehab? That's why you --

A. Yeah. They're not a part of Fryar Rehab. It was, like, basically a contract I had through Fryar Rehab.

Q. Okay. I want to talk about several of your past cases for a minute.

So listed in your past testimony -- and you can bring it up in front of you, if you want.

A. Sure. Okay.

Q. The Goodwin matter, do you see that, where you prepared an assessment for the defense?

A. I recall it. I think he maybe had a spinal cord injury, if I remember correctly.

Q. Okay. Did you consult with the treating physician in that case?
A. No, I didn't have access.
Q. Okay. And you were on the defendant side in that case; correct?
A. As I recall, yes.
Q. Now, what about the Laws matter, L-A-W-S? Did you consult with the treating physician in that matter?
A. I didn't have a release.
Q. And you were on the defendant side, as well; right?
A. Yes.
Q. Now, the DiMonte matter, did you consult with a treating physician in that case?
A. I don't think I had to because it was laid out in the medical records, as I recall, about -- I was asked to do a vocational opinion. And it was laid out in the records that she was not employable.
Q. What about the Henderson matter? Did you consult with a treating physician in that case?
A. I don't think I sent the doctor a letter. But I think it was -- it was also a

vocational matter and it was laid out what the restrictions are. So it wasn't needed.

Q. If I wanted to read your reports in these past cases, where would I look?

A. I'm assuming it's attached to the -- the commission has a database that's attached to my depo. I mean, I'm -- well, actually, I think one of those, the Henderson maybe, I just had notes. I don't know if the notes got it in. But if I had a letter or a report, it would be attached.

Q. So were all of these publicly filed?

A. I mean, they're part of a public record for that case, yes.

Q. So you go to look on the commission's database, you can find your depositions and your reports in these cases?

A. I'm assuming -- I know you can find the depositions. I don't know if you can find the reports. I don't know. I've never done that search, I don't know.

Q. Okay. Between a consulting and a treating physician, would you agree it's preferable to interview the treating physician if you have access?

MS. WALLACE: Objection.

THE WITNESS: I think that you should if you have access. Again, our standards say treating or -- I mean, they use the word "treating" or "evaluating."

So -- or consulting.

So they don't draw a distinction. But, of course, if I have access to it, I'm going to try, yeah.

BY MR. TUBIN:

Q. Which is listed first, treating or consulting?

A. I think treating is listed first. But, I mean, they don't draw a distinction between --

Q. Okay.

A. -- this is preferable versus that.

Q. How do you know they don't draw a distinction?

A. It's not there in the language.

Q. So you don't know one way or another?

A. Well, I think if it would have been important, they would have stated it.

Q. Right. How did you first hear about this case?

A. I think Ms. Wallace called me or her office called me.

Q. And when was that?

A. I have to go back in the memory banks for that. I think it was probably -- let's see, the reports were written in '25. So sometime in maybe '24.

Q. And when you say "Ms. Wallace" you mean --

A. The attorney here, Ms. Whitney Wallace, yes.

Q. Did you receive an assignment?

A. Well, at first they just asked me some questions about my background and there was more than -- there was several attorneys involved that wanted to speak to me. And then eventually we -- I don't -- I don't deal with the retainer situation. I don't deal with that type -- side of the business for InQuis. And, eventually, I was notified -- I was asked to review these cases and prepare life care plans.

Q. Do you recall who the other attorneys were?

MS. WALLACE: Just objection to the extent that any of this line of

questioning calls for confidential communications with counsel.

You may answer.

THE WITNESS: I don't specifically remember. There were several attorneys. And I don't remember all their names.

BY MR. TUBIN:

Q. So, again, just -- maybe I didn't understand you correctly. Were you given an assignment at this time?

A. Not until later was I approved to begin making a life care plan.

Q. Okay. And what was the assignment you were given?

A. To make a life care plan or cost analysis, whatever was appropriate.

Q. And did you have any questions about this assignment?

A. Not per se. I mean, I know how to make a life care plan. So I didn't have any immediate questions.

Q. Did you ask to change the assignment in any way?

MS. WALLACE: Objection to the extent that the question calls for confidential

communications with counsel.

THE WITNESS: I explained at some point that some of these cases wouldn't meet the -- what we were discussing earlier, the 75, 80 percent of what's needed to make a life care plan. So I would be terming them cost analyses.

Like, for example, Mr. Laramore was just simply -- I was asked to -- what was the surgical cost? So that's not a life care plan.

BY MR. TUBIN:

Q. So any of the plaintiffs for which there's just a cost analysis table, they did not meet the 75 to 80 percent to qualify as a life care plan?

A. Not in my finding. Not what all the detail that's needed for a life care plan, no.

Q. Okay.

A. Or all the services are needed for a life care plan.

Q. Did you agree to serve as an expert before reviewing any of the documents?

A. I agreed that I could do a life care plan, yes. I mean, I don't -- I don't think I

had any documents yet. I was going to give an honest, objective life care plan.

So, no, I didn't take exception without seeing the documents. I was going to give my honest opinion.

Q. Have you attended any conferences related to Camp Lejeune?

A. No.

Q. Okay. Now, you do not determine the medical necessity of an item or service in your life care plan; correct?

A. 100 percent agree.

Q. The items and services listed in your cost analysis tables are based on consulting physician recommendations; correct?

A. Be it treating or evaluating, yes.

Q. Right. If their recommendations were to change, that would impact your report; correct?

A. I agree.

Q. If a recommendation is found to be without merit or unjustified, then that recommendation no longer has medical foundation; correct?

A. Depending on who found it without

merit. But -- I mean, if there was a reason why a procedure wasn't going to be done now because of a change of medical status or complication, yes.

Q. Let's say it was objectively found to be unjustified or without merit.

MS. WALLACE: Objection to form.

You may answer.

THE WITNESS: Really difficult for me to answer that about who would be determining that.

I mean, if there was objective medical information from a doctor that countered something in the plan, then, yes.

BY MR. TUBIN:

Q. Okay. You used the Physician's Fee Reference 2024 to assess treatment costs; correct?

A. I did.

Q. And that document's updated annually; correct?

A. Right. I did see that the -- the defense life care planners made mention of that. I didn't quite understand what we were saying,

though.

Let me explain. It is updated every year. They also said that it can't be adjusted to the region, that's not correct. There's a geographical conversion factor in the back, you can adjust it to the geozip.

The fact that this updated every year, not really that relevant because we use billing that's at least a year old, if not more, and the economist updates the numbers. So if anything -- if I had used -- you know, if I turned around and did -- the 2025 just came out. It might increase the number slightly, but it's not increasing dramatically and the economist would make those adjustments anyway.

Q. And the prices, as you said, are a national average; correct?

A. They're a national average, but they -- there's literally a geographical conversion factor in the book that tells me where I can -- it tells me for a region. So I can adjust it to a region.

Q. And where is that published?

A. In the book.

Q. What book?

A. The Physician's Fee Reference.
Q. Okay. I understand.
A. I cited the actual factor -- the geographical factor in my report.
Q. Do you know how current those conversion factors are?
A. I'm assuming they're -- it's as current as the book.
Q. You did not contact local providers to verify your cost estimates; correct?
A. No, I did not. You're talking -- when you're looking at FAIR Health, Context4 Healthcare, and PFR, you're looking at literally thousands and thousands of standard charges.
So I don't -- in my protocol, I don't see that as a necessity to call a single provider when I've already looked at standard charges from thousands and thousands of providers.
Q. The websites you list for medical devices, how did you find those websites?
A. They're standard ones I use.
Q. What makes them standard?
A. I think most of those are listed on the IARP site. My research over the years, there are certain ones that I've -- we -- that are more

prevalent that are used. I've used a lot of those as a nurse case manager when I'm trying to find equipment bids.

Q. How did you decide which to select for your report?

A. Those are just the common ones I use.

Q. So it's just your common practice?

A. Right. And I think some of those -- I have to go back and look, I think some of those are still also on the academy's website.

Q. Are there any that you looked at but did not end up listing in your report?

A. No.

Q. Did anyone send you websites to look at --

A. No.

Q. -- for your report?

Okay. Did you factor baseline aging care into your life care plans?

A. Baseline -- like, meaning what would be needed based upon the normal course of aging --

Q. Correct.

A. -- as opposed to the diagnosis?

Q. Uh-huh.

A. When I asked the doctors the question about what they needed, specifically was for that diagnosis. So that was their answer. And I can't -- you know, it would be outside my scope as a life care planner and a nurse, as a rehab counselor, to try to suggest I know the standard care requirements for aging only, but I specifically asked them for this diagnosis.

Q. Okay. So they didn't give you -- they didn't factor that into their recommendations to you?

A. Again, they were telling me what was needed because of the diagnosis. That was my understanding.

Q. And that does not encompass baseline aging?

A. My understanding that -- specifically told them, I need to know for just this exclusive reason. So no.

Q. Okay. How did you account for non-litigation-related medical needs?

A. Explain what you mean by "non."

Q. Well, say a condition a patient has that is unrelated to their diagnosis but still is going to impact their future care.

A. It's unrelated to their diagnosis still going to impact their -- are you meaning like something they get from the general population? Like, a normal, like, study we get as -- outside -- I'm not quite --

Q. Let's say someone has diabetes or something else.

A. Oh, I see what you're saying. Again, I asked specifically for this diagnosis.

There's times where you'll see where I offset and say what I got was consistent with general population about CBCs or BMPs. So I didn't include it, but I'm asking the doctors for this diagnosis. So -- and that's what, my understanding, I got in response.

(Exhibit 1 marked for identification.)

BY MR. TUBIN:

Q. Okay. This is Exhibit 1.

A. Thank you.

MS. WALLACE: Is this the same?

MR. TUBIN: I believe they're both for Ms. Dyer?

MS. WALLACE: Yes. I mean, are these identical?

MR. TUBIN: Yeah.
MS. WALLACE: You gave me two copies.
MR. TUBIN: I did. I -- normally there's two attorneys. I think I just instinctively --
MS. WALLACE: No problem. Thank you.
THE WITNESS: Are those both front and back? If they're not, I'd rather have one -- that's fine. All right.
MR. TUBIN: Just trying to save paper.
THE WITNESS: I understand.
BY MR. TUBIN:
Q. If you have the exact same and want to look --
A. I have this attachment. I don't know if you meant to give me that.
Q. Yeah. It's the materials considered.
A. Okay. All right.
Q. Do you recognize this document?
A. Yes. This is my cost analysis for Ms. Dyer.
Q. And how do you recognize it as that?
A. I just reviewed it yesterday, and I recall the header and the date.

Q. So now please turn to the cost analysis tables.

A. Okay.

Q. Now, these tables rely on Context4 Health, FAIR Health, or The Physician's Fee Reference Manual for the cost data; correct?

A. Right. I explained that in the introduction.

Q. Right. Now, let's look at the first item. I think it's on page 3.

So you have the unit cost listed here all the way in the right column; correct?

A. Yes.

Q. Now, it does not specify here whether this cost is coming from Context4 Health, FAIR Health or Physician's Fee Reference; correct?

A. No. I explain that it's the highest point of those three databases and the lowest point of those three databases.

Q. Okay.

A. Full range --

Q. Is there --

A. -- all three databases.

Q. Right. Is there any way to know -- let's say the $421, which database that's coming

from?

A. I'd have to go pull the raw data.

Q. Okay. And the same for the $137.21, you need to pull the raw data?

A. Yeah. But what I'm telling you is from those three databases, the lowest point at the 50th percentile to the highest point, the 75th percentile, across all three databases is what is presented there.

MR. TUBIN: Okay. Good time to take a break.

THE WITNESS: Okay.

MR. TUBIN: I'm going to move on to something different after we come back.

THE WITNESS: Okay. All right.

THE VIDEOGRAPHER: Off record at 9:52 a.m.

(Recess taken from 9:52 a.m. until 10:03 a.m.)

THE VIDEOGRAPHER: On record at 10:03 a.m.

MR. TUBIN: Exhibit 2.

(Exhibit 2 marked for identification.)

BY MR. TUBIN:

Q. And these -- this is an excerpt from

Ms. Navarro's rehabilitation evaluation of Mr. Laramore.

A. Okay.

Q. Specifically, the summary and impressions section.

A. Okay.

Q. If you could turn to page 25. And you see the paragraph that starts, "When considering Mr. Laramore's claim" -- it's one, two, three, fourth down.

A. Yes, I do.

Q. "When considering Mr. Laramore's claim for damages he attributes to alleged exposure to contaminated water incidents at MCBCL, his unrelated physical and mental health medical history is important to consider."

Do you agree with that?

A. Yes.

Q. Going up one paragraph, "As indicated above, Mr. Laramore's medical records document several preexisting and unrelated medical problems before his diagnosis of bladder cancer. Again, he sustained a work-related neck injury and was diagnosed with service-related PTSD."

Do you agree with that?

MS. WALLACE: Objection.
You may answer.
THE WITNESS: I did notice that he had some other preexisting problems I think I cite in my report to.
BY MR. TUBIN:
Q. But are you agreeing with these two statements, or no?
MS. WALLACE: Objection.
THE WITNESS: I don't know how I can medically determine the progression of those without a physician. So ...
BY MR. TUBIN:
Q. But do you agree that medical records documented what's in these statements?
A. That he had preexisting problems, yes.
Q. And he sustained a work-related neck injury and was diagnosed with service-related PTSD?
MS. WALLACE: Objection.
THE WITNESS: I do remember the work-related neck issue or spine issue. And I do remember something -- other mental health problems, yes.

BY MR. TUBIN:

Q. Was PTSD among those other mental health problems?

A. Let me look in my report.

Q. Sure.

A. Yes.

Q. And do you recall -- do you have there the year of the diagnosis?

A. I don't. I just have that I saw there was a diagnosis.

Q. Okay.

A. Additional diagnosis other than the cancer diagnosis.

Q. Okay. If we could turn back to Exhibit 2, go to page 26. And third paragraph down.

You see the third sentence, "His bladder cancer is in remission and his treatment consists of monitoring his condition."

Do you agree with that statement?

A. I don't know if I can agree or disagree with that statement because I'm not a physician. I do remember this being something that was discussed in the consult with the doctor I spoke to, that he felt as though signs were

that he was not in remission.

Q. Have you seen any medical records that indicate he's not in remission?

A. No. But that doctor's finding was that he's progressing where he's not in medical -- in remission and would need the procedure.

Q. Do you recall --

A. I distinctly remember him telling me that.

Q. Which doctor?

A. The doctor I spoke to.

Q. Is this Dr. Sfakianos?

A. Yes. Thank you for saying his name, yes.

Q. You can put that document aside.

A. Sure.

MR. TUBIN: Exhibit 3.

(Exhibit 3 marked for identification.)

BY MR. TUBIN:

Q. This is summary impressions from Ms. Navarro's rehabilitation evaluation of Ms. Terry Dyer.

Can I see that one?

A. Yeah. Sure.
Q. I think I gave you -- all good.
A. Okay.
Q. All right. If you could turn to page 48, please.
A. Okay.
Q. And fourth from the bottom, the paragraph that starts, "As for her mental health," do you see that?
A. I do.
Q. "As for her mental health before her bladder cancer diagnosis, medical records indicate Ms. Dyer has had panic attacks since 1999. She was then prescribed Ativan and has since continued to take medication for anxiety."
Do you agree that the records reflect that?
MS. WALLACE: Objection.
You may answer.
THE WITNESS: I do have a history of anxiety --
BY MR. TUBIN:
Q. Since --
A. -- in my report.
Q. Since 1999?

A. I don't know the -- I don't have the date listed. But I do have listed in my preexisting medical history of anxiety. So ...

Q. Do you have any reason to disagree that it was in 1999?

A. No.

Q. Now, back to Exhibit 3, on page 48, the next paragraph down that starts with "Dr. Boldizar."

"Dr. Boldizar, family medicine specialist, testified that obesity is the most likely cause of Ms. Dyer's sleep apnea problems."

Do you agree with that?

MS. WALLACE: Objection.

THE WITNESS: I'm not giving a medical opinion, so I don't agree or disagree.

BY MR. TUBIN:

Q. Have you seen Dr. Boldizar's deposition testimony?

A. No.

Q. Did you ask for it?

A. No, I have not. I didn't know it existed.

Q. It wasn't offered to you?

A. No. It's not in the list of records I reviewed.

MS. WALLACE: Objection.

BY MR. TUBIN:

Q. Okay. And you didn't request it; correct?

A. I couldn't request something I didn't know it existed. So ...

Q. All right. On that note, you were given materials in this case; correct?

A. Yes.

Q. Who gave you the materials in this case?

A. The plaintiff attorneys.

Q. Okay. Did you ask for any additional materials?

MS. WALLACE: Objection.

THE WITNESS: I don't specifically remembering asking for -- I mean, maybe as things kind of came to me, I was, like, there are some more records here missing, yes. I don't specifically remember which ones now.

BY MR. TUBIN:

Q. Okay. Now on that same page, 48, the

last sentence of the second paragraph from the bottom, "Ms. Dyer also testified that she had PTSD related to the 2014 lawsuit verdict."

Do you recall her testimony as to that?

MS. WALLACE: Objection.

THE WITNESS: I did review her testimony. I don't specifically remember that verbatim, but I did review her testimony.

BY MR. TUBIN:

Q. Do you recall her having PTSD related to that prior lawsuit?

A. Now that you say that, I do. Yes, I do have a memory of her talking about that in a deposition.

Q. Now, the next paragraph regarding the life care plan recommendations associated with her 2014 lawsuit, "Ms. Dyer noted she had not undergone several recommendations in the past 10 years, including a psychological evaluation, individual and family counseling, or a weight loss program. She also denied that she has had licensed practical nursing services or formal housekeeping services."

Did you ever review her prior life care plan?

A. Her prior life care plan?

Q. From the 2014 lawsuit.

A. No.

Q. Were you aware it existed?

A. No.

Q. It wasn't offered to you; correct?

A. I have not reviewed it, so no.

Q. Now, on page 49, the first full paragraph, second sentence, "Despite her presenting problems, she describes several avocational pursuits in which she continues to engage, including swimming, gardening, and crafts."

Were you aware of that?

MS. WALLACE: Objection.

THE WITNESS: I was aware she still had activities, but she participated in with -- the issue sometimes was that her other urinary bag would leak and cause her distress.

But, yes, I know she still tried to participate in activities.

BY MR. TUBIN:

Q. How did you learn that she was still engaged in those activities?

A. She explained to me she would try and then she would have an incident and it would make her not want to participate.

Q. Understood.

(Exhibit 4 marked for identification.)

MS. WALLACE: Thank you.

BY MR. TUBIN:

Q. This is Ms. Navarro's rehabilitation evaluation of Bruce Hill, the summary and impressions section.

A. Okay.

Q. If you could turn to page 42.

A. All right.

Q. Third paragraph down that begins "During his April 9, 2024, deposition," I want to look at the last sentence, "I am unaware of any documate" -- sorry. "I am unaware of any documented vocational contraindications for Mr. Hill, who apparently continues to be an active -- active in a clergy capacity in his church and had worked as a lead pastor, earning income from 2013 to 2018."

Do you agree with that statement?
MS. WALLACE: Objection.
THE WITNESS: He did mention that he was able to fill in sometimes part-time, when he had good days. He has good days and bad days.
BY MR. TUBIN:
Q. Are you aware of any documented vocational contraindications for Mr. Hill?
MS. WALLACE: Objection.
THE WITNESS: So ...
MR. TUBIN: What's the objection?
MS. WALLACE: Calls for speculation.
MR. TUBIN: How --
MS. WALLACE: Medical.
BY MR. TUBIN:
Q. Okay.
A. Could you repeat? Sorry.
Q. Are you aware of any documented vocational contraindications for Mr. Hill?
A. So the doctor I consulted with said he should not be working.
Q. Say that again.
A. The doctor I consulted with said he should not be working due to his leukemia.

Q. So the only documented vocational contraindications you have are from the consulting physician; correct?
A. Yes.
Q. Okay. Now, do you know what ECOG stands for?
A. No.
Q. Are you familiar with the ECOG scale?
A. If you could tell me what the abbreviation is, maybe I would.
Q. Yeah. Sure.
A. No.
Q. I don't have it memorized either.
Eastern conference of oncology grading, something along those lines?
A. I mean, there's different grading schemes for cancer. I don't know -- if I refer to it as ECOG, though.
Q. Eastern Cooperative Oncology Group. That's what it stands for.
Does that sound familiar?
A. No, sir. I've seen other staging ones, though.
Q. So if a patient was ECOG status 1, you don't know what that means?

A. Typically, a state they normally rank those from stage 1 to 5. So stage 1 is early.

Q. Okay. And do you have any idea of what ECOG status 1 --

A. No, I don't. I'm just saying if it's in line with typical staging, 1 to 5, 5 is the more severe rating. I don't know for sure. I don't know if I've ever seen ECOG.

Q. Have you seen any records classifying Mr. Hill has ECOG status 1?

MS. WALLACE: Objection. Foundation.

THE WITNESS: I don't recall seeing those at this point in time. Maybe I did when I did those a year ago, but I don't recall that now.

BY MR. TUBIN:

Q. Okay. If you turn to the next page, page 43, and do you see the paragraph that starts, "During my exam"?

A. Yes.

Q. The next sentence, "Additionally, Mr. Hill reported he was independent with his ADLs and had essentially no problems living alone other than loneliness."

Do you agree with that?

MS. WALLACE: Objection.

THE WITNESS: So what he told me was that there are days when he can do his ADLs and there's days when he can't do anything.

So it's really a matter of his fatigue, his symptoms from treatment, you know, et cetera. So there are days he has better days, thank goodness. But there's days when he can't get out of bed.

So I think that's -- from my understanding of what he explained to me, that's partially correct, that there are days he can do his ADLs and days he can't.

BY MR. TUBIN:

Q. Would you agree that he's independent in activities of daily living?

MS. WALLACE: Objection.

THE WITNESS: Upon his -- for his good days, yes. That's what he explained to me.

BY MR. TUBIN:

Q. What about on his bad days?

A. No.

Q. He's incapable of doing his

activities of daily living on those bad days?

A. On those bad days, he says he doesn't attempt to do them. He's incapable of doing them.

Q. If you go to page 44. Do you agree Mr. Hill would have been able to extend his work life beyond 2012 working in environments compatible with his CLL diagnosis?

MS. WALLACE: Objection.

THE WITNESS: First off, I wasn't really giving any kind of earning capacity opinion here. I was looking at it from a life care planning standpoint: Does he need vocational services, including the life care plan.

I've going to defer to what the doctor told me about his capacity to earn, and he said he couldn't -- he shouldn't be employable now. They did not give me a date and time frame of when that would begin.

BY MR. TUBIN:

Q. Okay. Well, middle of this paragraph titled Number 2, do you see a sentence that starts, "After his retirement"?

A. Give me -- number 2?
Q. Yeah. It's like midway through.
A. I see it, yes.
Q. "After his retirement, Mr. Hill demonstrated the capacity to successfully transition to employment applying his transferable skills as a lead pastor two Sundays per month with Galilee" -- G-A-L-I-L-E-E -- "Baptist Church from 2013 to 2018, and he earned wages of $300 per day. Mr. Hill possessed transferable skills that would have enabled him to continue his employment in an office environment with minimal exposure to others."
Do you agree with that last statement?
A. Yes. He does have skills that he could be in office environment. The minimal exposure to others, though, if he was a pastor, I don't -- I mean, he would be exposed to others.
Q. Okay. Now, you see this list towards the bottom of possible employments: Online counselor, reception and information clerk, remote customer service representative.
Do you see those?
A. Yes.

Q. Could Mr. Hill have used his transferable skills in these following occupations in an isolated workspace?

A. "Isolated" by -- meaning he had no contact with others?

Q. Correct.

A. Some of these are not going to have -- be able to do that.

Q. For the ones that you would be able to do it?

A. I think only one here where you legitimately not have to be around others be remote customer service rep.

Q. All right. Thank you. You can put that document aside.

MR. TUBIN: This will be Exhibit 5.

(Exhibit 5 marked for identification.)

BY MR. TUBIN:

Q. Same format, the summary and evaluations from Dr. Shahnasarian's rehabilitation report of Plaintiff Rothchild.

A. Okay.

Q. Now, page 33, last sentence of the second paragraph, "I am unaware of any medical

records addressing Ms. Rothchild's PD condition near the time she left her full-time employment as a special education teacher in 2009."

Are you aware of any medical records that do address her Parkinson's condition at that time?

A. Sorry. I couldn't find the sentence initially when you started reading it. Give me just a second.

Q. Yep.

A. So the consultation I had with Dr. Andruski, if I'm saying that correctly, the neurologist, she said that -- I'm just going to -- this is quoted from her consult.

No, it's not safe for Ms. Rothchild to be working in any competitive employment capacity at present. Would have been medically indicated and appropriate for her to discontinue all competitive employment activities during 2009.

Q. Right. But I'm asking you, are you -- are you aware of any medical records addressing her Parkinson's disease condition near the time she left her full-time employment in 2009?

MS. WALLACE: Objection.
THE WITNESS: Not treatment records, no.
BY MR. TUBIN:
Q. Right, okay. Thank you.
Turn to page 34. Do you recall Ms. Rothchild testifying that she could perform all her job responsibilities, apart from those requiring her to use a keyboard to prepare and update the IEPs required for her students?
A. Yes.
Q. Now, going down towards the bottom of this paragraph, the sentence that starts, "If her employer had been unable to."
A. We're in the large paragraph?
Q. Correct. Bottom quarter --
A. I see it.
Q. All right. "If her employer had been unable to continue to make typing services available to her, other resources could have been solicited, such as assistance from coworkers and/or a student intern."
Do you agree with that statement?
A. That's a bit speculative. I mean, that would be relative to the employer. I mean,

we couldn't just assume that'd be the case.

Q. Okay. Relative to the employer, would that depend on the employer's resources?

A. Yes. And what they're willing to accommodate.

Q. Okay. All right. Turn to the next page, please. All right. Second to the last paragraph.

A. Okay.

Q. Starting with the second sentence, "Before she voluntarily left her PSHS employment, she could have more fully sourced options to continue to work as a special education teacher beyond what she presented to me, including making use of her voice-activated software, persisting in her request for typing accommodations, recruiting a student intern to assist with her typing, and enlisting coworker assistance by negotiating job responsibilities."

Do you agree with that?

MS. WALLACE: Objection.

THE WITNESS: Well, there's medical disagreement about that. And I mean -- to explain, as a vocational rehab counselor, we don't define function.

So Ms. Navarro had consulted with the doctor who said that Ms. Rothchild could participate in employment. I consulted with a doctor who said she needed to stop employment.

So there's a divergent opinion there -- or opinions. And as a vocational rehab counselor, you have to explain the implications of each opinion, not pick one or the other.

So there is a doctor saying that she could have continued to work. There's one saying she could not. So it's not for a vocational rehab person to decide. It's actually in our advisory opinions that we shouldn't do that.

BY MR. TUBIN:

Q. But you have to explain the implications of each; correct?

A. Yes.

Q. Did you explain the implications of the divergent opinion in this report?

A. I didn't have this report when I wrote my report. And, secondly, I'm not giving an earning capacity opinion.

Q. But you said divergent medical opinions. So this is isn't a medical opinion, this is a life care planner's opinion; correct?

A. No, I'm talking about the sentence above. She said she spoke to a physician who included -- that said that she -- that opined that she possessed the capacity to perform alternate employment.

So she's basing it upon this physician's findings. There's an alternate physician I spoke to who said she just stopped working in 2009. What I'm telling you is as a vocational person, we can't tell you which one should be followed because we don't find function. That's well documented in our advisory opinions and our treatises.

So -- but long story short is I'm not giving an earning capacity opinion. I was looking at this from the vantage point of are there vocation services needed in the life care plan?

Q. Now, this neurologist, PD expert, did you consider that in your report or no?

A. I didn't know that he had said this information. I didn't have this when I wrote my

report.

Q. Okay.

A. It looks like she's spoken to him. I wouldn't have information about that.

Q. Well, it would be in Ms. Navarro's report?

A. Right. I didn't get the report until after I wrote mine.

Q. Okay. Understood.

So the last sentence here, "Additionally, if she were interested in maintaining full-time employment with her former employer, Ms. Rothchild had opportunities to leverage her extensive work experience to potentially transition to alternate assignments at her place of employment."

You disagree; correct?

A. I don't agree or disagree. Again, I'm telling you there's conflicting medical foundation. One doctor who says she should not be working and one doctor is saying she can. So it's not for a vocational rehab person to decide.

Q. When you have that situation, but both doctors are -- let's say they were both treating plaintiffs of the -- treating physicians

of the plaintiff.

A. Uh-huh.

Q. Right? Not one doctor on the defendant side and one doctor on the plaintiff side but both on the plaintiff side. How do you account for that divergence?

A. So they're -- you're asking me there are two treating doctors only and they disagreed?

Q. Correct.

A. Same way. So if -- oftentimes, you're having a doctor who's specifying a body part. So I'm -- he's discussing restrictions for the shoulder versus another doctor discussing restrictions for the back. But if you're saying it's the same body part, the same diagnosis --

Q. Uh-huh.

A. -- then you have to explain the implications of both.

Q. Okay. And how do you pick between the two of them for the recommendation?

A. You don't. You say if we based upon Dr. A, the vocational implications of his restrictions would lead to these earning options, these wages; and according to Dr. B, it would lead to this. But that's as far as I can take

it. Otherwise, I am defining function, which is outside my scope.

Q. Understood.

(Exhibit 6 marked for identification.)

BY MR. TUBIN:

Q. This is Dr. Shahnasarian's summaries and impressions for Mr. Welch.

MS. WALLACE: Is this marked as Exhibit 6?

BY MR. TUBIN:

Q. Yes, that's correct.

Okay. The paragraph second from the bottom.

A. I'm on page --

Q. On page 28, I'm sorry.

A. Okay.

Q. "Apart from medical problems Mr. Welch attributes to his MCBCL experiences, his medical history is significant as noted and includes problems with a seizure disorder, bilateral knee problems, and a significant assault incident that caused him injuries in 1985. Mr. Welch's records also document hearing problems and degenerative disc disease. He takes

atenolol for unrelated cardiac problems. Additionally, in March 2024, Mr. Welch testified about a history of chronic headaches. Then the aforementioned medical problems should be considered when assessing his claim for rehabilitation intervention needs secondary to his MCBCL experiences."

Do you agree with that last statement?

A. To the extent that those cause restrictions for him, yes.

Q. Okay.

A. That were medically documented.

Q. All right. You can put that document aside.

(Exhibit 7 marked for identification.)

BY MR. TUBIN:

Q. This is a summary and impressions for Mr. Sparks. Turn to page 49.

A. Okay.

Q. Third paragraph from the bottom.

A. Okay.

Q. "On a positive note, apart from a knee brace, I am unaware of adaptive aids

Mr. Sparks uses."

Do you agree with that statement?

A. Mr. Sparks was having a lot of difficulties when I spoke to him with falls. I do believe he said he uses a cane. You know, he doesn't like to use a cane, but he uses it.

Q. So apart from a cane and a knee brace, are you aware of any other adaptive aids?

MS. WALLACE: Let me just object to the extent that he needs more time to review any of these documents and/or his prior report and being asked about such specific components.

THE WITNESS: I'm going to look at my report --

BY MR. TUBIN:

Q. Sure.

A. -- and see if there's --

Q. Okay.

A. He talked about being very fatigued, having multiple falls within his home, having problems maintaining his balance and ambulating. He spoke to me about all of those things.

Q. But none of those are adaptive aids; right? Those are conditions?

A. Right, those are conditions. I guess my point is that it sounds like he needs some adaptive aids.

Q. Right. But are you unaware, apart from a knee brace and a cane, of any adaptive aids?

A. That he's currently -- that he was using at that point in time? No.

Q. Okay. Thank you.

Back to page 49. Now, the middle of the last paragraph. "Again, personnel records from his former employer indicate Mr. Sparks voluntarily pursued retirement. I am unaware of any medical advisement that he should have left the workplace at that time."

Are you aware of any medical advisement that he, Mr. Sparks, should have left the workplace when he retired?

MS. WALLACE: Objection.

THE WITNESS: So that goes back to who I spoke to in consultation, Dr. Schwarz. He indicated --

BY MR. TUBIN:

Q. A little. I mean, it's more if there's any medical advisement that he should

have left at that time which would have been before Dr. Schwarz.

A. I'm just going to look. I was trying to remember what date she said. So give me just a second.

Q. Yeah. No problem.

A. So she said in 2016. So what was the date you were asking me?

Q. 2017 is when he voluntarily left.

A. So she said -- this is on page 8 of her questionnaire responses that she signed. And the question was: "Is it medically safe and appropriate for Mr. Sparks to attempt to pursue gainful employment with an open labor market given his status of Parkinson's disease?"

Her answer was: "No, it's not medically safe or appropriate for Mr. Sparks to attempt any type of gainful employment/activity now. Mr. Sparks has had to stop working during 2016 due to Parkinson's disease, as such was medically necessary for him."

Q. Are there any treating physician records to that point?

A. None --

MS. WALLACE: Objection.

THE WITNESS: None I've directly reviewed, no.

BY MR. TUBIN:

Q. Would you agree that Mr. Sparks possessed transferable skills that would have allowed him to transition to employment that remained within his capacity?

A. Well, again, I don't determine the functional capacity. He has transferable skills, yes. A lot of those skills are transferred to light to medium type work, if not heavy.

Q. So page 50. The first full paragraph.

A. On page -- okay. It starts with "Based on"?

Q. "Based on," yeah. And then the last -- second to last sentence says, "No healthcare provider recommended work restrictions or an advisement that he change occupations, Mr. Sparks conveyed."

Other than the consulting physician, are you aware of any health care provider who has recommended work restrictions or advice that he change occupations?

A. Not in the records I reviewed.

Q. Okay. All right. You can put that document aside.

Two more here, I think.

A. Okay.

(Exhibit 8 marked for identification.)

BY MR. TUBIN:

Q. Exhibit 8, same thing, summary and impressions, but for Mr. Mousser.

If you look at page 46, and the second to last paragraph and sentence that starts, "Mr. Mousser advised me."

A. 46?

Q. Correct.

A. What did it start with again? I'm sorry, I didn't see it.

Q. "Mr. Mousser advised me he is independent."

A. Let me see -- oh, further down. I thought you said at the beginning of the paragraph.

Q. Gotcha.

A. Yeah, I see it now.

Q. Okay. Great.

"Mr. Mousser advised me he is

independent in activities of daily living. He described recreational activities in which he regularly engages, including riding in a friend's all-terrain vehicle around his friend's ranch and regularly fishing in a fish pond."

Do you have any reason to disagree with these statements?

A. No.

Q. Are those activities you were aware he was engaging in?

A. On Mr. Mousser, I did a cost analysis of the transplant surgery. So I didn't speak to Mr. Mousser.

Q. Okay. If you turn to page 47, second paragraph from the bottom that begins, "Richard Eugene Mercer."

A. Okay.

Q. Were you given Mr. Richard Eugene Mercer's deposition transcript?

A. No.

Q. You didn't ask for it; correct?

A. I didn't know it existed. I'm not giving a vocational opinion. But, no, I didn't see any employer's depositions for him.

Q. And it wasn't offered to you;

correct?

A. I mean, I didn't receive it. So I didn't know to ask for it -- that it existed.

Q. So if you see the third sentence in that paragraph, "Mr. Mercer noted Mr. Mousser did not express medical issues as a reason for his retirement and he responded affirmatively when asked whether Mr. Mousser could perform the physical and mental requirements of his job during his 10-month tenure preceding his resignation."

Assuming that testimony -- assuming that accurately reflects his testimony, is that testimony you would have liked to have reviewed?

MS. WALLACE: Objection.

THE WITNESS: It wouldn't have any bearing on what I did. So ...

BY MR. TUBIN:

Q. Why not?

A. Because I'm not rendering a vocational earning capacity opinion for Mr. Mousser.

Q. Then the next sentence, "Dr. Andrew Rockwood, Mr. Mousser's treating urologist, testified on July 24, 2024, that he did not

advise Mr. Mousser to cease working and that he would have said no, do not stop working if Mr. Mousser had asked him."

Did you review Dr. Andrew Rockwood's deposition testimony?

MS. WALLACE: Objection. Foundation.

THE WITNESS: No.

BY MR. TUBIN:

Q. Was it offered to you?

A. I mean, I didn't receive it in my file, no.

Q. Would you have liked to have received the treating physician's deposition transcript?

A. To the extent that it had information about future care, but not regarding -- it wouldn't be relevant to me because I'm not giving a vocational opinion, what you just read.

Q. But you would need to review it to know if it has any relevance to future care; correct?

A. It's his primary care physician, is that --

Q. It's his treating urologist.

A. Neurologist.

Q. Urologist.

A. Urologist. Relative to what I did was I spoke to a transplant specialist. So that would not be the person who would do that procedure.

Q. How do you know that?

A. That's just not who does the procedure. A transplant surgeon does.

Q. Okay.

A. A urologist treats urological conditions and does procedures, not transplants.

Q. So if he's facing a kidney transplant, you don't think it's useful or helpful to review the deposition transcript of his treating urologist?

A. I'm not saying it's not helpful. But, ultimately, we would go to the transplant surgeon to see if he's a candidate for transplant. That's -- we go to the specialist.

Q. If this was made available to you, would you have reviewed it?

A. Certainly, if they made it available to me. But would it change what the transplant surgeon told me? No. I would anticipate it, but potentially.

Q. Bottom of page 47, the last paragraph

states, "Mr. Mousser has multisystem disabling problems apart from his UTUC, including musculoskeletal problems impairing his neck and lower back functioning, diabetes with neuropathy in his extremities, and cardiac problems that adversely affect his functionality and likely would have required treatment regardless of the UTUC." Do you agree?

MS. WALLACE: Objection.

THE WITNESS: It's a medical decision. I mean, that's certainly a medical finding. I don't know if this person -- if this -- the life care planner is citing something from the doctor or -- but my understanding, this life care planner is not a doctor, he's a psychologist. So that's a medical scope of practice question.

BY MR. TUBIN:

Q. Have you seen any records that reflect these multisystem disabling problems, apart from the UTUC?

A. Let me look.

Q. Yeah.

A. I did make mention that he had some

chronic low back pain, coronary bypass grafting in his history.

Q. Would that adversely affect his functionality?

A. I mean, that's a medical decision. I guess what I was saying earlier, though, is that to say those would likely require treatment, regardless, that's not really for anyone to make a decision other than a doctor.

Q. If you turn to page 48 of Exhibit 8, and the third sentence from the top, there's a conclusion here that "There is insufficient evidence to support a claim that Mr. Mousser's UTUC required him to exit the workplace and to refrain from re-entering it."

Do you agree with that statement?

MS. WALLACE: Objection. Foundation.

THE WITNESS: I didn't give it that type of opinion. So, I mean, I don't have opinion one way or the other about that.

BY MR. TUBIN:

Q. You don't have opinion on that?

A. I wasn't asked to do that. That was not the scope of what I completed for Mr. Mousser.

Q. Okay. Thank you, sir.

MR. TUBIN: I'm at a good breaking point, if you want to take ten.

THE WITNESS: Okay. Sounds great.

THE VIDEOGRAPHER: Off record at 10:45 a.m.

(Recess taken from 10:45 a.m. until 11:01 a.m.)

THE VIDEOGRAPHER: On record at 11:01 a.m.

BY MR. TUBIN:

Q. Mr. Fryar, you completed a Zoom assessment with Mr. Laramore in early 2025; correct?

A. Yes.

Q. Did you have any time constraints for that assessment?

A. Not that I recall.

Q. Where was Mr. Laramore during that assessment?

A. At his home.

Q. Do you know who else was there with him, if anyone?

A. I don't recall anyone else being there. At least they weren't represented on the video.

Q. Do you know how long your assessment took?

A. I don't recall exactly, but I can maybe give you an answer.

An hour. It was approximately an hour.

Q. Okay. Did you take any notes?

A. No.

Q. Did you ask Mr. Laramore whether any of his physicians have recommended bladder removal?

A. Back to your question about notes. They went into my report. So I -- I complete the -- simultaneously in the report. So I didn't take any handwritten notes, if that's what you're asking me.

Q. Did you take typed notes?

A. Like, it's what you see in the report.

Q. So you wrote them directly into the report?

A. Right, I did.

Q. Okay.

A. I'm sorry, could you repeat that?

Q. Yes. Certainly, sir.

Did you ask Mr. Laramore whether his physicians had recommended bladder removal?

A. I did. And at that point in time, they had not.

Q. Okay. Is that in your report?

A. Well, I summarize the medical records in the -- as an enclosure, I do believe.

Q. Right. But a note from the interview mentioning --

A. Oh, specifically, no, not to that. I let the record speak for that.

Q. Did you take a note that he had told you that none of his physicians had recommended bladder removal?

A. I didn't specifically write that in the report. But that's evident in the medical records I reviewed.

Q. Okay. What else did you ask him?

A. We talked about his ADLs, his medication, his -- you know, where he was living. Driving, if he was able to drive. His past vocational history education. Symptoms -- I think I said that.

Q. Dr. David Gabriel Alonzo treats Mr. Laramore for his bladder cancer; correct?

A. Yes.
Q. Was Dr. Alonzo's deposition transcript offered to you?
A. I don't think I have reviewed that to date, no.
Q. Did you request it?
A. No.
Q. Did you know he was deposed?
A. Not until you said that, no.
Q. You did not consult with any of Mr. Laramore's treating physicians; correct?
A. I did not.
Q. You asked Dr. Alonzo for a consult; correct?
A. Yes. I'm pretty sure I sent him a questionnaire.
Q. Right. Is that how you contacted him?
A. Yeah. We send the questionnaire and we try to follow up on it through phone.
Q. You did not hear back from him; correct?
A. I did not.
Q. Did you follow up?
A. My office and I followed up a few

times, yes. We never got a response.
Q. How many times?
A. I know I tried a handful of times. And I -- I know the office did for a couple more times, but we never got a response.
Q. You did that over phone?
A. Uh-huh. Yeah.
Q. You consulted with Mr. John Sfakianos; correct?
A. Yes.
Q. How did you find Dr. Sfakianos?
MS. WALLACE: Objection to the extent that it calls for any communications with counsel.
You may answer.
THE WITNESS: It was my understanding he was a physician that was available for me to consult with from the attorneys.
BY MR. TUBIN:
Q. You got that understanding from the attorneys?
A. Yes.
Q. Okay. You spoke with Dr. Sfakianos over the phone; correct?
A. I don't remember if it was over the

phone or on Zoom now.
Q. Okay. But it was remote?
A. It was remote, yes.
Q. Dr. Sfakianos has never interviewed Mr. Laramore?
A. No. My understanding is he reviewed the medical records.
Q. The consult with Dr. Sfakianos was about surgical intervention; right?
A. Yes.
Q. Dr. Alonzo had already operated on Mr. Laramore; correct?
A. Yes.
Q. Dr. David Spencer is Mr. Laramore's most recent surgeon; correct?
MS. WALLACE: Objection.
BY MR. TUBIN:
Q. Page 5 to 6 might detail that.
A. Yes, urologist.
Q. But you did not try to consult with Dr. Spencer; correct?
A. No, I did not send him a -- any -- a letter, no.
Q. You did not contact him in any way; correct?

A. Well, he's not a surgeon.
Q. Okay.
A. But, no, to answer --
Q. But he performed surgery on Mr. Laramore; right?
A. He did, but he's not the type of surgeon would do this.
Q. Okay. Was his deposition transcript offered to you?
A. I don't recall it being, no.
Q. Did you review it?
A. I would have listed it, if I had. I don't have it listed.
Q. Page 4 of your report indicates that a Dr. Hitt also operated on Mr. Laramore; correct?
A. Dr. -- tell me the name again.
Q. Hitt, H-I-T-T.
A. He did, on his prostate.
Q. You did not try to consult with Dr. Hitt; correct?
A. No, that was on his prostate.
Q. Are you aware he was deposed?
A. No.
Q. His deposition transcript was not

offered to you; correct?
A. I have not reviewed it.
Q. Okay. Your recommendations are contingent on Mr. Laramore having his bladder removed; correct?
A. That was the foundation I received from the surgeon I spoke to.
Q. Dr. Sfakianos indicated it is medically likely Mr. Laramore will require bladder removal in the future due to reoccurrence of bladder cancer for him; correct?
A. That's what he told me, yes.
Q. Do you know how likely? Did he indicate that to you?
A. Well, the question is -- context of more likely than not. So likely meaning greater than -- greater than chance.
Q. Where does it say more likely than not?
A. It doesn't. It says medically likely. So that's understood to be beyond probability of chance.
Q. How do you understand it to be that?
A. That's -- when I ask a doctor that, I'm saying, is it likely this is going to happen

greater than 50 percent.

Q. Is that common practice in life care planning that medically likely means greater than 50 percent?

A. Yes.

Q. Has any physician other than Dr. Sfakianos stated that Mr. Laramore will require bladder removal?

MS. WALLACE: Objection.

THE WITNESS: I haven't seen those depositions. But what I've reviewed, no.

BY MR. TUBIN:

Q. You would have noted it in your cost assessment if they had; correct?

A. Yes.

Q. Did you identify any medical records stating that Mr. Laramore will need to have his bladder removed?

A. Not that I recall.

Q. Did you identify any medical records indicating Mr. Laramore currently has bladder cancer?

A. I think that was an evolving topic matter at the point when I was reviewing records. So not at that point in time, no.

Q. You did not review Dr. Sfakianos's expert report on Mr. Laramore; correct?
A. No, I spoke to him.
(Exhibit 9 marked for identification.)
BY MR. TUBIN:
Q. This is 9, I believe. Do you recognize this document?
A. No, I have not seen this document before.
Q. What does this appear to be to you?
MS. WALLACE: Objection.
THE WITNESS: A report from the surgeon we were just discussing for Mr. Laramore.
BY MR. TUBIN:
Q. Would it have been helpful to review this report?
MS. WALLACE: Objection.
THE WITNESS: I mean, I understood his opinions when he -- what he gave me in consult and he signed those opinions as being valid. So it would certainly be something I would take in to review.
BY MR. TUBIN:

Q. Can you turn to page 7, please. That first full paragraph, the last sentence, could you please read that?

A. The first full paragraph, okay.

Q. It begins, "Given."

A. Yeah, sure. "Given Mr. Laramore's multiple bladder cancer recurrences after the best standard of care therapy available, it is my opinion that he will need continued treatment and possibly require surgical intervention, remove his bladder with the development of a urinary diversion."

Q. So when you asked him whether it was medically likely, you were indicating 50 percent or more; correct?

A. Yes.

Q. Or more than 50 percent? Which one?

A. Greater than 50 percent.

Q. Do you understand "possibly" to mean greater than 50 percent?

A. No, I don't initially understand possibly to mean that. But that's what he told me.

Q. Right. Do you think that this conflicts with what he told you?

A. I have to understand more what he means by "possibly." Does he mean possibly is greater than 50 percent? Then, no.

Q. Okay. So he would have to mean that possibly is more than 50 percent for his opinion to agree with yours -- for this to agree with what he told you?

A. Yes. In order for it being on a life care plan on the table and not labeled -- if it was just possible, we would label it potential.

Q. To you, medically likely is different than possibly?

A. Possibly could mean less than 50 percent, but it could mean something different to him. I don't know his use of that word. You have to clarify it with him.

Certainly, if he says it's possible, then that would be labeled as potential surgery, if it's less than 50 percent, I should say.

Q. Gotcha. And the part you wrote where it's -- read where it says, "It is my opinion that he will need continued treatment and possibly require surgical intervention," do you have any idea what continued treatment Mr. Laramore would select if he were to have a

recurrence of bladder cancer?

A. We didn't discuss that. It was -- we discussed -- that's why it's called a surgical cost analysis. We talked about the surgical requirements.

Q. I believe on page -- you can put that exhibit to side.

A. Okay.

Q. I believe on page 7 of your report --

A. We're still on Mr. Laramore?

Q. Correct.

A. Okay. All right. Okay.

Q. It states, "Dr. Sfakianos indicated Mr. Laramore, postoperatively, would require daily home health services for one month. The specific frequency of such home health services is deferred to Dr. Sfakianos for determination."

That's stated in your report; correct?

A. Yes.

Q. Did Dr. Sfakianos ever give you a frequency?

A. No.

Q. How did Dr. Sfakianos indicate to you that Mr. Laramore would need these services?

A. He said he would need it for a short period of time for that -- I think you just read it, for one month. But he didn't say how frequently during the week.

Q. And why was this not listed in the cost analysis table?

A. It was listed under the notes.

Q. Right. But why is it not in the table as an item?

A. Because I'm not going to determine frequency. That's outside of my scope of practice.

Q. So if something says -- oh, so if a doctor hasn't determined frequency, you can't put it in your cost?

A. I'm not putting it in the table.

Q. And why is that?

A. Because it's outside my scope to determine frequency.

Q. And that's because you're a life care planner and it would be outside a life care planner's scope to determine frequency?

A. Well, I am a life care planner who is also a nurse. So I can administer care, but I cannot prescribe care.

Q. Uh-huh. Do you know what home health services Mr. Laramore would require?

A. Give me just a second.

Q. Yeah.

A. See if he gave us any more details about that. Well, he said to support his instrumental ADL. So that would typically fall to a CNA. Unless -- unless there was some kind of skilled service, it would be a CNA that would be doing that.

Q. That's what Dr. Sfakianos said?

A. Well, he said to support and assist in the performance of instrumental activities of daily living. Meaning cooking, cleaning, you know, shopping, that type of thing, or helping get dressed. That would be a CNA, not a skilled nurse.

Q. Are you assuming that's what he means when he says "postoperatively would require daily home health services for one month"?

A. Yeah. Because he said instrumental ADLs. So if there was -- typically, when a doctor tells you that, that's meaning a CNA. It's not -- he would -- it be a skilled nurse if there was something like wound dressing or

et cetera, intravenous medication.

So based on that, there's indication it would be a CNA. But I'd defer him for clarification on that.

Q. Okay. Now, when you earned your life care planning certificate, Dr. Paul Deutsch was your primary instructor; correct?

A. Him and Ms. Kitchen.

Q. Who?

A. So Ms. Kitchen also was -- Julie Kitchen also was involved on that program. I guess she was like an advisor for the students.

Q. You named Dr. Paul Deutsch in your report; correct?

A. Both of them were, yeah.

Q. And you said he's the founder of modern life care planning?

A. He's considered the father of it, yes.

Q. Okay.

A. Founder, father, whatever term you want to use.

Q. And do you consider him an authority on life care planning?

A. He was the one who originated it,

yes.

Q. He was skilled enough to give you adequate life care planning training; correct?

A. Yes.

Q. And his lessons helped equip you to perform as a competent life care planner?

A. Him and Ms. Kitchen, yes, and his first generation student, Mr. Yuhas.

Q. And you have followed his teachings in your practice; correct?

A. I do my best to honor those, yes.

Q. Okay. Now, you completed a Zoom assessment with Ms. Dyer in November of 2024; correct?

A. Yes.

Q. Where was Ms. Dyer during that assessment?

A. At her home.

Q. Do you know where in her home?

A. I can't specifically recall the room, sorry.

Q. Did you have any time restrictions on this interview?

A. No.

Q. How long did it last?

A. I have to reference my billing again. 1.4 hours.

Q. Okay. Who was present, other than Ms. Dyer, if anyone?

A. I think for moments her husband was present. But he was in and out of the screen.

Q. Was he there -- did he give any answers?

A. He did answer some things about how he put on the urinary bag and how he needed to assist her. But he wasn't there for the whole assessment.

Q. Did you take any notes?

A. It would have run to the report.

Q. Is that the same for all of your reports?

A. That's my -- that's what I do, yes.

Q. Okay. You recommend mental health counseling for Ms. Dyer; correct?

A. Well, technically, I didn't medically recommend that.

Q. It's listed as a recommendation in your tables; correct?

A. It is, but it came from a physician.

Q. Right. Is Ms. Dyer currently

receiving mental health counseling?

A. I don't think -- when I spoke to her, she was not.

Q. Did you ask her if she intends to seek mental health counseling?

A. We did speak about it and she explained that she would consider it, yes.

Q. Is that in your report, that she would consider it?

A. No. I just remember her telling me that she would consider it. I think something came up about, you know, needing support and being able to talk to someone. So from her, actually.

Q. Right. And none of that's in your report, though?

A. Not specifically that -- stated like that, but I do recall her saying that.

Q. Okay. Has anyone besides Dr. Longo recommended mental health counseling for Ms. Dyer?

A. Well, he recommended it and then deferred to a counselor about the frequency, but no.

Q. No one but him has recommended it?

A. That's correct.
MS. WALLACE: Object -- objection.
THE WITNESS: To my knowledge.
BY MR. TUBIN:
Q. Are you aware he is an expert for the plaintiffs in this case?
A. My understanding, yes, he was a retained expert.
Q. Frequency is listed as "to be determined" here; correct?
A. It is.
Q. And it's still in your table; correct?
A. Yes.
Q. How can we quantify costs where the frequency is listed as "to be determined"?
A. At this point in time, you can't include that.
Q. But it's included?
A. I mean, you can't quantify it exactly, no.
Q. Okay.
A. I gave the unit cost and is to be determined by a mental health specialist. I was very clear about that.

Q. You list quetiapine -- Q-U-E-T-I-A-P-I-N-E -- as a recommendation.
A. Where are you at?
Q. It's in the tables. I can pull it up. This is Laramore. It's on page 5 --
A. Okay.
Q. -- of your tables.
A. I am looking at page 5 and I don't know what you were spelling there.
Q. The bottom medication that starts with a Q.
A. On page 5? There's no medication.
MS. WALLACE: Are you on Dyer?
BY MR. TUBIN:
Q. On page 5 of Dyer's tables, not the report, but the tables.
A. Okay. This is Dyer. Can you show me what you're --
Q. Yeah. I have -- Ms. Terry Dyer, cost analysis tables.
A. That's strange, I don't have that in mine.
Q. So turn to Exhibit 1.
A. Exhibit 1.
Q. That's your report.

A. Okay. Something just didn't get printed off. Sorry.

Oh, this is on backwards. Maybe -- I don't know what happened there. Sorry. I was looking at my copy. Give me just a second.

Q. Uh-huh.

A. Okay. Now I see what you're on. Sorry about that.

Q. No, that's fine.

Is Ms. Dyer currently taking this medication?

MS. WALLACE: Objection. Foundation.

THE WITNESS: I don't recall if she was actively taking it at the time I spoke to her.

BY MR. TUBIN:

Q. Are you aware of any treating doctor that has prescribed this medication?

A. Obviously, it's been recommended by this psychiatrist.

Q. Is he a treating physician of Ms. Dyer's?

A. He was an evaluating physician.

Q. So, no, he's not Ms. Dyer's --

A. No.

Q. -- treating physician?
A. Right now I'm remembering, I think I reviewed the report from him.
Q. Uh-huh.
A. So, no, this is from an evaluating physician.
Q. You would have listed here any treating physician that had also recommended --
A. Yes. I mean, that's who I saw as recommending it. I would have listed another doctor if someone else had recommended it.
Q. You list two to three nursing visits per week as a recommendation; correct?
A. Two to three a week, yes, sir.
Q. She is not currently receiving nursing visits; correct?
MS. WALLACE: Objection.
THE WITNESS: No, but her husband is assisting her. And the life care plan is to look at what she would need absent family members.
BY MR. TUBIN:
Q. Did you ask her if she plans to have nursing visits in the future?
MS. WALLACE: Objection to form.

THE WITNESS: She explained to me it would be nice to take some of the burden off her husband, yes.

BY MR. TUBIN:

Q. How would she take some of the burden off her husband?

A. Have nursing visits.

Q. She specifically said that to you?

A. Yes. Well, the concern in life care planning is that something could happen to the husband, so he couldn't do it. So life care planning is very clear on that, that we have to speak to what the value is of the care they're receiving if they're receiving it from family members.

Q. No one else besides Dr. Longo has recommended nursing visits; correct?

MS. WALLACE: Objection.

You may answer.

THE WITNESS: Not to my knowledge.

BY MR. TUBIN:

Q. Ms. Dyer relies on her husband for much of her care; correct?

A. For putting on the urostomy bag, yes.

Q. And that's one of the items in your

tables; correct?

A. Yes.

Q. And there's several entries related to that; correct?

A. There's three, I think, yes.

Q. Okay. Was Ms. Dyer's husband's deposition transcript offered to you?

A. No, I've reviewed Ms. Dyer's. I did not review her --

Q. You've not reviewed her husband's deposition transcript --

A. No.

Q. -- correct?

Page 8 of the tables --

A. Okay.

Q. -- states at the bottom in notes, "Dr. Longo explained during consultation that without the aid of her husband, Ms. Dyer would require physical assistance from a licensed practical nurse or registered nurse to apply her urinary bag/pouch correctly upon the stoma to avoid leakages due to necessary body positioning and the difficulties associated for persons with a larger body habitus"; correct?

A. Correct.

MS. WALLACE: Just to note for the record, it says -- I think you left out the word "necessary."

MR. TUBIN: Oh. Leakages due to necessary body positioning necessary and the difficulties --

THE WITNESS: Yeah, I think there's a double word there, so sorry about that.

BY MR. TUBIN:

Q. Oh, it's fine.

Do you have any reason to believe Ms. Dyer's husband will stop helping her with her urinary bag?

A. Not as we sit here today, but that -- from a life care planning perspective, we don't know. We don't know the answer to that long term. And the husband could have a disability himself, there could be a divorce, there could be the husband could pass away.

I mean, I don't want any of those things to happen to Ms. Dyer. But that's how we view in life care planning is that what he's doing is a service for her. And that service has a value, and this is what it would cost to replace that value.

Q. Did you note any of that in your report?

A. No, that's life care planning fundamentals.

Q. You reviewed Ms. Dyer's deposition; correct?

A. I did.

Q. Now, she testified that she lost her bladder because of Dr. John Lovett's malpractice; correct?

A. I do recall seeing in that in the deposition. I can't tell you precisely, if you could show me the deposition transcript. I can't tell you.

Q. Yeah.

A. Lots of documents in this case.

Q. Yeah, I'm impressed with how well you know them.

A. Well, thank you.

Q. That's made this go a little quicker, to be honest.

(Exhibit 10 marked for identification.)

BY MR. TUBIN:

Q. So I can speed you up.

A. That would be great.
Q. If you turn to page 200.
A. Okay. Okay.
Q. And line 17 to 18, states -- I'll read the prior line as well.
"But you have to remember that Lejeune water caused my cancer. I lost my bladder because of Dr. Lovett."
A. Give me just a second. Let me read.
MS. WALLACE: Are you on line 16? I think that may help.
MR. TUBIN: Yeah, I started on 16, yeah. Thank you.
THE WITNESS: Okay. I see that.
BY MR. TUBIN:
Q. And on line 20, she says, "Because of the malpractice of what he did." Correct?
A. Correct.
Q. Several of your life care planning recommendations are because Ms. Dyer no longer has a bladder; correct?
A. Yes.
Q. Did you ask to review Dr. Lovett's deposition transcript?
A. I don't think that I knew that there

was a transcript, so no.
Q. It wasn't offered to you?
A. It wasn't offered when I reviewed -- prepared the life care plan, no.
Q. Okay. Now, you asked Dr. Rock A. McCarthy, plaintiff's treating urologist, for a consult; correct?
A. On Ms. Dyer?
Q. Yeah.
A. Yes, I'll hand you back your transcript.
Q. Keep that. Yes, I have a copy.
A. I think I documented that in the report.
Q. Uh-huh.
A. Yes, I sent Dr. McCarthy a letter on 1/20/25.
Q. And the letter consisted of a questionnaire; correct?
A. Yes.
Q. You did not hear back; right?
A. I did not.
Q. Did you follow up?
A. We tried several times, me and my staff.

Q. Do you know approximately how many times?
A. I don't know exactly how many.
Q. How did you follow up?
A. That would have been through phone.
Q. Did you ask for Dr. McCarthy's deposition transcript?
A. Not at the time of writing this report, no.
Q. Was it offered to you?
A. Not specifically, no.
Q. Were you aware that he was deposed?
A. No.
Q. How you did you identify Dr. Longo?
A. He was a physician that -- was explained to me was retained, and I had availability to speak to about Ms. Dyer's future care.
Q. Who explained that to you?
A. The attorneys involved in this matter.
Q. Who was he retained by?
A. By -- I don't remember specifically who, but one of the plaintiff attorneys.
Q. Did you speak with Dr. Longo?

A. Yes.
Q. Dr. Longo has never examined Ms. Dyer; correct?
MS. WALLACE: Objection.
THE WITNESS: As I recall, he had looked -- reviewed her records.
BY MR. TUBIN:
Q. But he has never examined her; correct?
A. That's what I recall, yes.
Q. Okay. You based Ms. Dyer's psychiatric treatment recommendations on Dr. Haresh Tharwani's expert report; correct?
A. Yes.
Q. You did not ask Dr. Tharwani for a consultation; correct?
A. No. It was explained pretty clearly in his report.
Q. You did not send Dr. Tharwani a questionnaire; correct?
A. Correct. Because it was clear what he was recommending.
Q. You relied solely on his expert litigation report?
A. On his report, yes.

Q. Okay. You understand that that report is disclosed in the context of litigation?
A. Yes.
Q. Who gave you his expert litigation report?
A. It came from the plaintiff attorneys.
Q. But they did not give you his deposition transcript; correct?
A. Not at this point in time, no.
Q. Did you ask for his deposition transcript?
A. I didn't specifically ask for it, no.
Q. Okay.
A. Often those come, you know, as matters progress and I see depositions later.
Q. Do you know the date of his deposition?
A. I do not.
Q. Just give me a moment to locate the next exhibit.
A. Sure.
Q. Did you review records from Dr. Suzanne Hentz?
A. Still talking about Ms. Dyer?
Q. Yes.

A. Yes, I cited it in my list of medical records reviewed.

Q. Okay. Do you recall Ms. Dyer testifying that Dr. Hentz prescribed her antianxiety medication in 1999?

A. Not specifically. I don't remember that from the transcript.

Q. You did not review medical records from Dr. Andres Joseph Esposito; correct?

A. No, I did not list that.

Q. Do you recall Ms. Dyer testifying she had anxiety and anxiety prescriptions in 1999?

A. I'm not sure on the date. I do remember her saying that she had previous anxiety because I listed it in my report.

Q. If you turn to page 133 of her transcript.

A. 133?

Q. Uh-huh.

A. Okay.

Q. And I'm going to read from lines 8 to 16.

"Suzanne Hentz.

"How do you spell that?

"I think it's H-E-N-T-Z.

"Okay.

"She's got a practice on Oleander, right near Hugh McCrae Park.

"QUESTION: That would have been what year? When did she start giving you Zoloft?

"ANSWER: 1999 to 2000."

A. That's what it says, yes.

Q. Okay. Would you agree her depression is due to the bladder removal?

A. Well --

MS. WALLACE: I'm sorry. Objection, please.

THE WITNESS: Sequela thereof and the life -- and the quality of life problems thereof, yes. As she described it to me. I'm not diagnosing her with depression, but her mental health issues as she explained to me rise from the sequela of losing her bladder.

BY MR. TUBIN:

Q. So if we turn to the next page, 134, lines 3 to 4.

"ANSWER: Depression did not hit me until after I had my bladder removed which was in 2010."

That's what it states; correct?

A. Right.

Q. And she blames Dr. Lovett for her bladder loss; correct?

A. She did earlier in the deposition, yes.

Q. She got PTSD from losing a malpractice case against Dr. Lovett; correct?

MS. WALLACE: Objection. Foundation.

THE WITNESS: I don't remember the reason for the PTSD diagnosis.

BY MR. TUBIN:

Q. Turn to page 242.

A. Okay, I'm there.

Q. Can you read lines 20 to 23.

A. "I'm sorry, I have PTSD because of that. My husband and I both do. We have -- it's very -- we have PTSD because of that trial. We can't -- if we talk about it just -- it we just" -- there's some typos -- "it would just start going."

Q. Do you have any reason to disagree with Ms. Dyer's testimony here?

MS. WALLACE: Objection. Foundation.

THE WITNESS: I mean, that's her

testimony there. I don't have any reason to disagree with her deposition testimony.

BY MR. TUBIN:

Q. Could Ms. Dyer become independent with her stoma if she lost weight?

MS. WALLACE: Objection.

THE WITNESS: If her body habitus changed, then, yes, that could be something that could happen.

BY MR. TUBIN:

Q. Ms. Dyer had a history of anxiety and depression that predated her bladder cancer; correct?

MS. WALLACE: Objection.

THE WITNESS: Yeah, we just -- yes, based on the information we just reviewed, yes.

BY MR. TUBIN:

Q. If you cannot provide a frequency for a cost, then it should not be in your plan; correct?

A. Until it can be qualified, yes. I mean, it should be in the -- it's in the plan, explaining that a doctor's recommended it. But the frequency is not determined. So to the

extent the unit cost is in there, yes.

Q. Are you aware Dr. Paul Deutsch performed a life care plan for Ms. Dyer?

A. I am not.

Q. Is that something you would have liked to have reviewed?

A. Depending on the time span and when -- what it was for. Because in the -- in life care planning, we have to speak to the incident in question.

MS. WALLACE: Rob, will you make sure there's nobody waiting to be let in.

(Exhibit 11 marked for identification.)

BY MR. TUBIN:

Q. These are excerpts from the deposition of Paul Deutsch --

A. Okay.

Q. -- given in Ms. Fryar's 2014 malpractice lawsuit.

Now, you can turn to --

MS. WALLACE: Objection. I'm going to have to ask that -- he's never seen this exhibit before this deposition. It's numerous pages. He won't have context for

this deposition without reading the entirety of the deposition transcript.

So I would object to any line of questioning on this document.

MR. TUBIN: Is that an objection to form or foundation?

MS. WALLACE: It's an objection that he -- I don't know what he's going to be asked to provide testimony on, but he needs the opportunity to review the complete file that was just put in front of him.

MR. TUBIN: All right. I'm not opposed to him having time to review it. But I'm going to ask him questions about it.

And I just want to introduce now, this will be Exhibit 12.

(Exhibit 12 marked for identification.)

MR. TUBIN: This is the stipulated Rule 30 deposition protocol in this case.

If you look at page 5, "Objections will be limited to form and foundation."

If you look at page 7, it's signed by

all four district court judges. Page 9 signed by Mona Lisa Wallace of Wallace & Graham, PA.

MS. WALLACE: Yes. So let me be more clear. I would ask that we stay on the record and he be entitled to review the entire new document that you've put in front of him prior to asking us any questions about the document.

MR. TUBIN: He can review that document.

THE WITNESS: Okay. Okay. It's going to take a few minutes.

MS. WALLACE: It should take a while.

THE WITNESS: Okay. Is this the only document you want me to --

BY MR. TUBIN:

Q. These are excerpts from the deposition. So you won't even have the full deposition to review.

A. It's not the full deposition?

Q. I'd say you want to take five minutes to review. Your counsel is more than welcome to ask you questions after I'm finished on it and to draw out however she feels about the weight of

the document.

But I'll give you five minutes to review it on the record and then I want to ask some questions.

A. There's no way I can review this in five minutes.

MS. WALLACE: Yeah, he would need to -- he needs to be able to review the entirety of the document.

MR. TUBIN: There's nothing that stops me from asking him about this document.

MS. WALLACE: No, there's nothing at all. But he needs the opportunity to review the entirety of the document. If you -- that's --

MR. TUBIN: I'm going to ask him about this document.

MS. WALLACE: Okay. Sure.

MR. TUBIN: If you want to draw that out on your redirect, that not the entire document was put in front of him, that's fine. But I'm going to ask him about this document.

THE WITNESS: But this is not his

whole deposition.

MR. TUBIN: It's not the full deposition transcript.

THE WITNESS: Well, I mean --

MR. TUBIN: There's excerpts of testimony.

If you want to later establish that these excerpts are incorrect or not his true deposition testimony, that's fine. I welcome you to try it.

MS. WALLACE: Are you prohibiting the witness from reviewing the entire document that you've put in front of him?

MR. TUBIN: No. He can review that entire document.

MS. WALLACE: It's going to take him longer than five minutes to do that.

MR. TUBIN: Okay. Then I'm going to ask him about the excerpts I want to ask him about.

MS. WALLACE: He needs the chance to review the whole document and you can ask him anything you want about it.

MR. TUBIN: I don't agree that he needs a chance to review the whole

document.

MS. WALLACE: He does.

MR. TUBIN: Why?

MS. WALLACE: Because you put it in front of him.

MR. TUBIN: What rule says he needs to review the whole document?

MS. WALLACE: It's an entire exhibit.

MR. TUBIN: What rule says he needs to review the entire document before I ask any questions?

MS. WALLACE: Deposition ethics. I mean, he has to have the opportunity to review the whole document.

MR. TUBIN: I don't know where that is under Rule 30 or in the stipulated protocol or what you're referring to.

MS. WALLACE: Well, I've already told you what my position is on this. He needs the opportunity to fully review the document.

MR. TUBIN: Well, the objection is noted. Are you preventing him from answering a question?

MS. WALLACE: Until he reviews the

entire document, yes.

MR. TUBIN: Do you have a basis for that under attorney work product or a court order saying he can't answer the question?

MS. WALLACE: Yes.

MR. TUBIN: Because if you don't -- what's the objection?

MS. WALLACE: He's never seen this deposition transcript before.

MR. TUBIN: Okay.

MS. WALLACE: He's being asked to answer questions about it.

MR. TUBIN: We'll note the objection. It's your responsibility to file a motion to strike if you disagree with the testimony.

MS. WALLACE: Let's go off the record.

MR. TUBIN: I don't -- no, I don't -- why? I want to resume this deposition.

MS. WALLACE: Well, I'd like the opportunity to look at our protocol more specifically to see what -- why you're not allowing the witness to review a document

that you've put in front of him in its entirety.

MR. TUBIN: Okay. Do you want five minutes to look at the protocol? How much time do you need?

MS. WALLACE: I'll take 10 minutes.

MR. TUBIN: Okay.

THE VIDEOGRAPHER: Are we going off record?

MR. TUBIN: For 10 minutes.

THE VIDEOGRAPHER: Okay. Off record at 11:46 a.m.

(Recess taken from 11:46 a.m. until 11:57 a.m.)

THE VIDEOGRAPHER: On record at 11:57 a.m.

MS. WALLACE: Okay. We're back on the record and I was just going to make a brief statement regarding the issue that we were discussing before the break.

I had a moment to look up the Federal Rules of Civil Procedure, specifically Rule 30. It does provide that the witness may inspect any document put in front of the witness.

So, typically, the witness is allowed

to read documents before answering questions. Opposing counsel often requests time to review documents as well. So we would like to at least take you up on the offer that he be permitted to review the document for five minutes.

And then I will have a standing objection to this line of questioning given the document includes deposition transcript, which is 118 pages, on a prior legal matter of which the witness has no expertise or knowledge.

So we'll have a standing objection to any questions that he's asked about the document. And I'll restate that before we get started.

MR. TUBIN: For what it's worth, I'm not going to ask him to interpret any of the testimony or anything. Just kind of confirm this is what the testimony says.

So welcome to take that time to review. I don't think it's necessary to be able to do that. But it's your prerogative.

THE WITNESS: Okay. I'd rather

review it. Okay.

MR. TUBIN: Yeah.

MS. LAMACCHIA: Are we back on the record?

MS. WALLACE: Yes.

Can you hear the witness?

MS. LAMACCHIA: Hi, this is Leslie. Are we back on the record?

MR. TUBIN: Yes.

MS. WALLACE: Yes.

MS. LAMACCHIA: Michael, it's muted. The laptop's muted, so that's why --

MS. WALLACE: Did you hear my objection?

She can't hear anything.

(Discussion off the record.)

MS. WALLACE: Can you hear us, Leslie?

MS. LAMACCHIA: Now we can. Were you back on the record?

MS. WALLACE: I just gave an objection on the record. Did you hear that?

MS. LAMACCHIA: No, we didn't hear anything.

MS. WALLACE: Oh, okay.
THE VIDEOGRAPHER: Is it staying on?
MS. WALLACE: It might have just -- what do you think that was?
THE VIDEOGRAPHER: When you hit the top, it turned red. As long as that blue light is on, that speaker should be working.
MS. WALLACE: For those on Zoom, the witness is taking five minutes to review the deposition transcript.
(Reviewing document.)
MR. TUBIN: We're past five minutes.
THE WITNESS: I'm not through it, but if the five minutes was what I was granted, then, yes, we can go ahead.
MS. WALLACE: Okay. And I'm just going to state the objection one more time, especially because the Zoom participants weren't able to hear me.
So under Rule of Federal Procedure 30, the witness is permitted to inspect the document and courts have sufficiently -- have typically allowed claimants the opportunity to review -- to

review documents, particularly deposition transcripts that are 118 pages on subject matter that the witness has testified that he's unfamiliar with.

And so I will be objecting to form and foundation for each of the questions moving forward on this basis.

BY MR. TUBIN:

Q. Okay. So if you could turn to page 15 of this deposition transcript.

A. Okay.

Q. And can you read lines 14 to 17.

A. On page 15; correct?

Q. Correct.

A. "For example, she went from 212 to 228, which is the wrong direction for what we need in our situation. She could be independent with weight loss. Weight gain is only going to worsen that problem."

Q. And then the next question is: "And what weight or has it been determined, to your knowledge, at what weight she would be independent with her stoma?

"ANSWER: No, no specific weight, but I'm the one who brought up with Dr. Inman, the

question, do you agree that her weight or obesity is what is interfering with her being independent and managing the stoma, and he said, yes, I agree."

Did I read that correctly?

A. You did.

Q. Okay.

MS. WALLACE: Object to the form and foundation.

BY MR. TUBIN:

Q. If you turn to the next excerpt on page 54.

A. Okay.

Q. Can you read from line 22 on page 54 to line 12 on page 55.

MS. WALLACE: Objection to form. And foundation.

THE WITNESS: 22 to -- tell me one more time.

BY MR. TUBIN:

Q. To then 12 on the next page.

A. Okay. "All right" -- this is the question.

"All right. Let's talk about the individual counseling. I'll give you a second to

get there.

"ANSWER: I'm there.

"QUESTION: All right. This individual counseling, who is this proposed to be done by? You don't have the specialty here.

"ANSWER: Well, because I had a psychologist evaluate her, I would follow with that psychologist. But if there's a really good rehabilitation psychologist in the area, someone who knows disability and how it impacts an individual, or mental health counselor who works with a great deal of -- works a great deal with individuals with disability, I would prefer to see it be someone who has experience in working with people whose self-image, sense of body worth and self-worth are being impacted by disability."

Q. Okay. Thank you.

And Ms. Dyer, to your knowledge, has not pursued mental health counseling; correct?

MS. WALLACE: Objection.

THE WITNESS: Not specifically to my knowledge, no.

BY MR. TUBIN:

Q. Okay. Turn to page 80.

A. Okay.

Q. And could you read lines 13 to 21.

MS. WALLACE: Object to form and foundation.

THE WITNESS: "So the question is, you know, where is the anxiety and depression coming from. Well, she had a history of it before. Is it possible that she's going through now has to -- is it possible that what she's going through now has severely exacerbated it. I don't think there's any question that it has, and I'm certainly within my license area to talk about the exacerbation. Is there some preexisting history, absolutely, which makes her more vulnerable to having a severe exacerbation of anxiety and depression."

BY MR. TUBIN:

Q. And you agree with Dr. Deutsch that there's some preexisting anxiety and depression; correct?

MS. WALLACE: Objection.

THE WITNESS: Anxiety is mentioned in her records, yes, preexisting.

BY MR. TUBIN:

Q. Now go to page 88.
A. 88?
Q. Yeah, 88.
A. Okay.
Q. And read lines 9 to 14.
MS. WALLACE: Objection to form and foundation.
THE WITNESS: "Do you stand by that general line of thinking, that if you can't cost something out as to frequency, it needs to be out of your plan?
"Well, that's absolutely true. I mean, PRN is just as needed, so you have no statement as to the actual frequency, so there's no way to include a PRN statement."
BY MR. TUBIN:
Q. Do you agree with that testimony?
MS. WALLACE: Objection.
THE WITNESS: Well, I haven't calculated a total cost for that at all. So -- I don't know what he means by "not being in the plan" or -- supposed to put -- if a doctor said something is medically indicated, I listed that, and I

said the frequency's deferred.

BY MR. TUBIN:

Q. And in that case, you still believe that should be in your plan?

A. Well, there's no cost other than the unit cost. So, obviously, if the doctor says she's needs some, then there's going to be at least one occurrence. How frequently that is, I don't know, and it needs to be deferred to a appropriate mental health specialist. I said that in the plan.

Q. Okay. If you turn to page 97.

A. Okay.

Q. And if you could read -- and you can read it to yourself, you don't have to read it out loud -- lines 11 to 24.

MS. WALLACE: Object to form and foundation.

THE WITNESS: Okay.

BY MR. TUBIN:

Q. So, here, Dr. Deutsch is recommending in-home nursing visits; correct?

A. Yes.

MS. WALLACE: Objection.

THE WITNESS: Well, he's citing

that -- the need for them, yes.
BY MR. TUBIN:
Q. Okay.
A. I don't know if he's specifically recommending them or not.
Q. And Ms. Dyer did not follow that recommendation; correct?
MS. WALLACE: Objection.
THE WITNESS: My understanding is her husband is doing that type of care for her.
BY MR. TUBIN:
Q. So she does not have in-home nursing?
A. Not when I last spoke to her, no.
Q. And her husband was still alive, to your knowledge, at the time of this deposition?
A. Yes, he was alive when I spoke to him. So by virtue, he had to be alive in 2014.
Q. Right. But, yet, skilled nursing was still being recommended?
A. Yes, skilled nursing is being recommended.
Q. Okay.
A. Specifically an LPN.
Q. Okay. You can put this exhibit

aside.

Go to page 4 of your report on Ms. Dyer.

A. Okay.

Q. It's Exhibit 1.

A. I have it right here.

Q. All right. Actually, I want to go to page 4 of the table. I'm sorry.

A. Okay. I'm there.

Q. Fast. So under notes it states, "Dr. Longo explained during consultation that it was medically reasonable for Ms. Dyer to receive services from a licensed professional counselor or psychologist in the future."

"Dr. Longo deferred the determination of counseling frequency and duration to a treating mental health specialist for Ms. Dwyer -- Dyer."

MS. WALLACE: What page are you on, please?

MR. TUBIN: 4.

MS. WALLACE: Thanks.

BY MR. TUBIN:

Q. Do you see where it says that?

A. Well, you skipped a sentence, but

yes.

Q. Right.

A. Yeah.

Q. To your knowledge, does Dr. Longo have any mental health training?

A. That's why he's deferring the situation as far as frequency.

Q. Uh-huh.

A. But he's saying that it's not some -- when I discussed it with him, he said this is something common when people have -- go through removal of their bladder or have some significant change in their quality of life like this, and it's reasonable to have her be evaluated and let that person determine the frequency.

Q. But does his medical training qualify him to make those determinations?

MS. WALLACE: Objection to foundation and form.

THE WITNESS: That happens all the time. Physicians send someone for an evaluation by a psychologist and let them determine the frequency. That's just what happens.

BY MR. TUBIN:

Q. Without a determination of frequency or duration, there's no way to assess the future costs of the treatment; correct?

A. No, not at this time. Not without that being completed.

Q. You list a kidney CAT scan once per year and an ultrasound -- or an ultrasound once per year?

A. Yes.

Q. It's on page 6.

A. I did.

Q. Did you review Dr. Longo's owes deposition?

A. I don't think so, no.

Q. Was it offered to you?

A. Not that I recall.

Q. Okay. Ms. Dyer's bladder was removed in 2010; correct?

You want to check --

A. That's a hard one for me to remember the date.

Q. I think page 4 might have it.

A. Yes, looks like 2010.

Q. Okay. Now, turning back to Table 6.

I know you haven't reviewed his

deposition transcript, so let me represent to you that he testified that after five years, Ms. Dyer could switch to an ultrasound.

A. Okay.

MS. WALLACE: Objection.

BY MR. TUBIN:

Q. Would that change anything here in your Table 6?

A. If he came -- in his deposition, he said that it should be ultrasound, then we can take away the kidney CT scan.

Q. Okay.

A. If he's saying that in lieu of the kidney CT scan.

Q. Right. Okay.

MR. TUBIN: Want to break for lunch?

MS. WALLACE: Sure.

THE WITNESS: Sure.

THE VIDEOGRAPHER: Off record at 12:15 p.m.

(Recess taken from 12:15 p.m. until 1:08 p.m.)

THE VIDEOGRAPHER: On record at 1:08 p.m.

BY MR. TUBIN:

Q. Mr. Fryar, I want to look back at the

three-page document you brought that I think you were talking about using the 75th or 80th percentile. Do you know what I'm referring to?

A. I have a copy, but I could look at your -- well, I have another copy of it.

Q. Yeah, I have some notes on mine.

A. Yeah, that's fine. I'm sorry, lots of files.

Q. It's okay. I have a copy here.

A. I got one. I'm positive I got one here.

MR. TUBIN: I'm going to mark this one.

(Exhibit 13 marked for identification.)

MS. WALLACE: Marked as Exhibit?

MR. TUBIN: 13.

MS. WALLACE: Thank you.

BY MR. TUBIN:

Q. Is any of this information in your original report?

A. No. This is just a methodological statement that I followed for costing, when I have questions about -- it helps me kind of -- is a synthesis of different literature.

Because I'm sure you had questions about costing and it's in here about why my protocol is what I do.

Q. Right. When did you put this together?

A. I've had this together for years. Well, I add to it as new literature comes out, but, yes.

Q. Are you considering this to be a supplement to your expert report?

A. It's an explanation as to why I'm using the 50/75th percentile, and why -- how I'm defining UCR. So to that extent, yes.

Q. And all the materials you're referencing in here were published at the time of your original report; correct?

A. They would have been, yes.

Q. Okay.

A. They're cited in my resources. Like, these articles and books are cited in my resources. This is an explanation of the information in those resources.

Q. But you personally put this together; right?

A. Yes.

Q. And you typed some of the text that's in this document; right?
A. Typed every word in this document.
Q. Okay. You didn't copy and paste certain things?
A. There's quotes.
Q. Quotes. But you also typed a lot of the explanation that's in this document?
A. Yes.
Q. Okay. All right.
A. I mean, I typed it from the -- quoting it from the book, if that's what you're asking.
Q. Is there your own independent -- like, when you say on the last page, for example --
A. Oh, okay. Yeah, sure.
Q. "My standard protocol or method to determine customary charges includes ..."
You wrote that statement?
A. That's a statement, a synopsis of everything else you just read, yes.
Q. Okay. But you typed that statement?
A. Yes. That's explaining why I'm using 50/75th.

Q. Okay.
A. And what -- and the literature above it supports that.
MR. TUBIN: Okay. Well, at this time, the United States is going to object to this as an untimely expert report or untimely supplemental expert report. Just put that on the record.
Okay. This is 13. My copy.
BY MR. TUBIN:
Q. All right. Turn to Mr. Hill.
A. You want this as exhibit -- okay.
Q. You -- on the first page of your report in Mr. Hill -- do you want to take a second?
A. Are you going to hand me an exhibit?
Q. I can introduce it --
A. I didn't know if you were going to hand me one.
Q. Nope, I absolutely can. I just know you brought them. I just figured if you --
A. It's probably quicker for you to hand me that one.
Q. Okay.
(Exhibit 14 marked for

identification.)

THE WITNESS: Thank you.

BY MR. TUBIN:

Q. Do you recognize this document?

A. I do.

Q. What do you recognize it to be?

A. The cost analysis that I did for Mr. Hill.

Q. And at the back of the document, there should have been another attachment. See that, materials considered list?

A. Yes.

Q. Okay. And what do you recognize that as?

A. Looks like a listing of the records I've seen.

Q. Okay.

A. Which are also noted in the report.

Q. Right. So on the first page of the report, it states, the second sentence, "An initial Zoom assessment was completed with Mr. Hill on August 12, 2024." Correct?

A. Yes.

Q. This says "initial." Were there any others after this?

A. No, there was just that one.
Q. Okay. Why do you use the word "initial" for this one, but not the others?
A. I did -- just turn a phrase. I didn't -- yeah. It was the only assessment.
Q. Okay. Where did this take place?
A. Zoom. He was at his home. I was in my office.
Q. And did you have any time restrictions?
A. Not that I recall.
Q. And you recall how long --
A. Well, he was a little fatigued that day. But, I mean, we didn't -- he would have kept going, but he was fatigued. So ...
Q. Do you recall how long your interview lasted, your assessment?
A. An hour, a little bit over an hour.
Q. Would you have liked more time?
A. No. I think I got to the heart of what I needed to know.
Q. Who was present?
A. I think on that one, my nurse researcher was present.
Q. Who is she?

A. I think with him it was Ashley -- Dr. Ashley -- Ashley's last name is very difficult to say, so we say G -- Grzybowicz.

She had helped me go through some of the medical records and if I had a question.

Q. I believe earlier you testified that any notes were made directly into the report?

A. Right. I'm typing as I go.

Q. Okay. Did you ask Mr. Hill if he needs housekeeping services?

A. We talked about that and he explained that he had good days and bad days. And that, you know, on his bad days, he just can't really do anything. So I knew that at that point in time he had not sought them out, but he had family helping him.

Q. Did you record any of that in your report?

A. I'm pretty sure I said that -- yes. Environmental status, he talked about there that he can't tolerate heat. It was hard for him to maintain his yard. He talked about having problems performing ADLs, had to take naps.

And there's a part in here where he told me -- I'm pretty sure I documented, where

his -- yeah, his grandchildren are helping him with his yard. So -- but ADLs, meaning he had problems doing any ADL -- meaning, you know, instrumental or basic ADLs on certain days.

Q. But nowhere does it say he needs housekeeping services?

A. Instrumental ADL is housekeeping services.

Q. Instrumental ADL means housekeeping services?

A. Yes. That's -- I mean, instrumental ADL is like cleaning, cooking, travel, home management. Basic ADLs, like cleaning -- grooming, bathing, you know, hygiene, that type of thing, bathroom.

Q. He told you he's going to need someone for that?

A. He told me he had days when he couldn't do that for himself. Did he say he needed a housekeeper? No. He said he had days when he couldn't do that for himself.

Q. Would you agree he's in a better position than Dr. Dean Felsher to know whether that's true or not?

A. I mean, he was in a position to tell

me what he could do and could not do, yes. Dr. Felsher was saying that he's going to continue to decline.

Q. You think Mr. Hill is more knowledgeable of his own condition and what he can and can't do than Dr. Felsher?

A. He's knowledgeable about what he can and can't do today, that day, that moment. His current status. I can't say he'd be more knowledgeable how the future prognosis would be medically. That's something for a doctor to determine.

Q. You tried to consult with Mr. Hill's treating oncologist, Dr. Jessica Schmit; correct?

A. I did.

Q. What efforts did you make?

A. Phone calls. And my understanding, she wouldn't be available to talk to me.

Q. When did you try to contact her?

A. Well, hold on just a second. Yeah, it would have been phone calls.

Q. When did you make phone calls?

A. I don't remember specifically the date. But at some point, I was told that the VA doctors wouldn't be available for me to consult

with.

Q. As your report states, "It was explained that Dr. Schmit would not be available for consultation with me regarding Mr. Hill's life care plan."

That's what you're referring to; right?

A. Right. I was eventually told that, yes.

Q. Who explained that to you?

A. The plaintiff attorneys.

Q. Did you ask why?

A. Just that they didn't want to be involved in the litigation side of this matter.

Q. Did you explain the importance of speaking with Dr. Schmit?

MS. WALLACE: Objection to the extent it calls for --

THE WITNESS: I didn't speak to her to explain it, so no.

BY MR. TUBIN:

Q. Who is -- what do you mean "her"?

A. I didn't speak to Dr. Schmit.

Q. No. But did you explain the importance of speaking with Dr. Schmit?

A. Well, I had made that clear that I preferred to speak to the treating. But they're not gonna speak to me, there's nothing I can do to make that -- I mean, I can't force them to speak to me.

Q. Would you agree that Dr. Schmit is more familiar with her own patient's treatment than Dr. Felsher is?

MS. WALLACE: Objection.

THE WITNESS: I would -- I would agree that she's had more experience with Mr. Hill, yes.

BY MR. TUBIN:

Q. All the life care planning recommendations are from Dr. Felsher; correct?

A. The medical foundation derives from him, yes.

Q. Dr. Felsher has never examined Mr. Hill; correct?

A. No, it was a -- he had done a review of his records.

Q. Dr. Schmit has examined Mr. Hill many times; correct?

A. I'm sure, yes.

MS. WALLACE: Objection.

BY MR. TUBIN:

Q. You did not incorporate any of her recommendations into your life care plan; correct?

A. Again, she wasn't available for me to speak to her, so no.

Q. Would you have liked to speak to her?

A. It'd be beneficial to speak to her.

Q. You only relied on Dr. Felsher; correct?

A. That's the medical foundation I had available.

Q. Does Dr. Felsher currently treat patients?

A. To my understanding --

MS. WALLACE: Objection.

THE WITNESS: My understanding, he's at Stanford in the Cancer Institute. So I understand he does research as well.

BY MR. TUBIN:

Q. Do you know whether he currently treats patients?

A. Not as we're sitting here today, I don't know if he's currently treating patients, no.

Q. Do you know whether he's board certified in any medical discipline?

A. My understanding, he was the oncologist. I didn't ask about the board certification.

Q. Would it make a difference to you if Dr. Felsher does not treat patients and is not currently board certified?

A. He still has a medical opinion about the oncology needs. He's an oncologist. So there's nothing that says that that foundation can only come from a treating doctor or from a board-certified doctor. So, no, it doesn't change what foundation we can rely upon in the life care plan.

Q. Are you aware he hasn't treated patients in over a decade?

MS. WALLACE: Objection.

THE WITNESS: Not aware of that.

BY MR. TUBIN:

Q. You reviewed Dr. Schmit's deposition; correct?

A. Yes.

Q. And Dr. Schmit gave recommendations regarding Mr. Hill's future treatment in her

deposition; correct?

A. She did.

Q. Did you consider Dr. Schmit's testimony on lifestyle changes?

MS. WALLACE: Object to form and foundation.

You may answer.

THE WITNESS: You got to be a little more specific what you mean by "lifestyle changes."

MR. TUBIN: Sure.

(Exhibit 15 marked for identification.)

BY MR. TUBIN:

Q. This is Exhibit 15. These are excerpts from Jessica Schmit's -- Dr. Schmit's deposition transcript that you testified you reviewed.

If you turn to page 58, and you look at line 6, to -- actually, no, it's -- sorry, page 59.

A. Okay.

Q. You see line 6 to 8?

A. It says, "Have you recommended any lifestyle changes for Mr. Hill?

"No, I don't think so."

Q. So what do you understand lifestyle changes to mean?

MS. WALLACE: Objection.

THE WITNESS: I have no idea. I don't understand what she's meaning.

BY MR. TUBIN:

Q. So you didn't include this testimony in your report?

A. No, I did, actually. I quoted her about what she said about life expectancy.

Q. But this part of her testimony --

A. Well, I mean, I don't know how she's -- her answer was that she didn't include anything about life -- so I don't know -- what would I include it?

Q. Isn't that a diversion opinion from, say, housekeeping services being included?

A. I don't know if that means -- I mean, lifestyle changes. I don't know -- that could mean a lot of different things. That doesn't necessarily mean housekeeping.

Q. What are the different things it could mean?

MS. WALLACE: Objection.

THE WITNESS: Living independently, living in a facility, living with support, sleep schedule. I mean, lifestyle change is a very broad idea.

BY MR. TUBIN:

Q. Right. So one of the things I believe you recommend -- recommendation you adopted for Mr. Hill is housekeeping services; correct?

A. Yes.

Q. Because it's in -- it's one of those independent ADLs; right?

A. Right. It's foundation from the doctor I consulted with.

Q. Would a lifestyle change be no longer being able to do an ADL?

MS. WALLACE: Objection.

THE WITNESS: Not necessarily. I wouldn't -- I would never interpret that to mean that.

BY MR. TUBIN:

Q. Okay.

A. I would have had to have her say -- that would take very -- multiple levels of interpretation to get to, that I would need her

to say that she's not recommending -- like, homemaker or housekeeping services for him. I would not have taken that statement to mean housekeeping services.

Q. So right now, this is too vague for you to understand what she means by lifestyle changes?

A. It's not qualified. Yes. So it's not specific enough for me to understand -- I mean, I don't know how else -- I'd have to interpret that to mean -- housekeeping services, I wouldn't have done that.

Q. What do you -- if a doctor says lifestyle changes to you in the -- in the context of Mr. Hill, what do you take that to mean?

A. I don't think a doctor's ever really ever said that to me in that specific way. And that's a question to ask. But I mean, that's not how we discuss things in the life care planning, counsel. We talk about services -- support services. I don't think I've ever used the term "lifestyle changes."

Q. Okay. Does Mr. Hill currently receive housekeeping services?

A. No.

MS. WALLACE: Objection.

THE WITNESS: I don't think he does. But he has days where he just doesn't do anything for himself.

BY MR. TUBIN:

Q. Has any treating physician recommended housekeeping services from Mr. Hill?

A. Not that I recall seeing at this point in time.

Q. Does Mr. Hill receive landscaping services?

A. He receives landscaping support services from his family, but not hired as -- maybe he pays his grandson some money to do that, I'm not sure. But not a company he's hiring on a regular basis, no.

Q. Has any treating physician recommended he received landscaping services?

A. Not to my knowledge. That wouldn't be something you'd commonly find in a medical record.

Q. Did you ask him if he plans to seek landscaping services?

A. Well, his comment to me was that he he's no longer able to tolerate heat and do it

himself and that his family's helping him now.
So to the extent that's -- again, family's doing something that from a life care planner perspective, we have to quantify what that would cost if the family can no longer do it.
Q. But you didn't ask him that question; correct?
A. Well, he explained the circumstances to me. He couldn't do it himself.
Q. I -- I'm just trying to understand if you asked him that question.
A. If I asked him was he going to seek landscaping services?
Q. Correct.
A. I don't think I specifically worded it that way. I asked what he functionally could do, what he had difficulties doing, and one of them was he could not maintain his yard --
Q. I understand.
A. -- independently.
Q. Does Mr. Hill currently receive attendant care services?
MS. WALLACE: Objection.
THE WITNESS: No. But, again,

there's days when he does -- doesn't leave the bed.

BY MR. TUBIN:

Q. Has any treating physician recommended attendant care services for Mr. Hill?

A. Not a treating physician, no.

Q. Did you ask him if he plans to seek attendant care services?

A. He did say that it would be beneficial to him on bad days to have someone there to help him, yes.

Q. Okay. I'm going to turn to Dr. Felsher's questionnaire. So the rehabilitation -- vocational rehabilitation question here from Dr. Dean Felsher --

A. Yes.

Q. -- dated February 2, 2025.

A. Yes.

Q. You asked Dr. Felsher -- Question Number 3: "Is it medically safe and appropriate for Mr. Hill to attempt to pursue competitive gainful employment within the open labor market, given the current status of his chronic lymphocytic leukemia? If no, at what point after diagnosis during 2004, was he medically unable to

safely perform any type of competitive gainful employment within the open labor market?"

I read that correctly; right?

A. You did.

Q. Okay. Dr. Felsher responded, "Mr. Hill has incurable progressive cancer and is not capable of performing in a job." Correct?

A. Yes.

Q. Did Dr. Felsher explain to you what symptoms are preventing Mr. Hill from performing any job?

A. Not in that answer, but he specifically said he's not able to perform a job.

Q. Not in that answer? Is there anywhere else where he explained the symptoms that are preventing him from performing in a job?

A. Well, he explains that he has -- he's high risk for life-threatening infections. He has progressive fatigue and reduced exercise tolerance.

So -- but did he relate that to work? But, no, he talked about functional things -- other functional issues in other questions.

Q. Right. In other questions, not in response to Question Number 3?

A. Well, the Question Number 3 asked him was he medically safe, and his answer was no.

Q. Right. Did you ask Dr. Felsher what symptoms are preventing Mr. Hill from performing in a job?

A. I didn't ask him. I sent him this questionnaire. He filled it out.

Q. Right.

A. I mean, I asked him through writing, but not in person.

Q. And your report does not mention that after Mr. Hill's retirement, he worked as a lead pastor two Sundays per month with the Galilee Baptist Church from 2013 to 2018, does it?

A. I don't think so. I wasn't -- I didn't know all those details. I know that he sometimes filled in. But it wasn't -- my understanding, it wasn't, like, in a paid role.

Q. Well, so it does not mention he earned wages of $300 a day doing this, does it?

A. It doesn't. But I -- again, I mentioned, I'm not giving earning capacity. I was looking to see does he need vocational rehab services. And per my consult, he wouldn't be appropriate for him.

Q. Besides Dr. Felsher's statements, is there any evidence that Mr. Hill could not use transferable skills to find alternative employment?

A. There's no other --

MS. WALLACE: Objection.

THE WITNESS: There's no other doctor restricting him from work. So if you go under the assumption that he has no restrictions and he can use his transferable skills, then, no.

BY MR. TUBIN:

Q. After your initial questionnaire to Dr. Felsher, you sent follow-up questions; correct?

A. So I first sent -- I think what happened here was my first questionnaire didn't get attached. I first sent another questionnaire.

Q. Right.

A. Then I sent the vocational one, secondary.

Q. Right. Then you sent this vocational one.

Did anyone ask you to send this

second questionnaire?

A. The vocational one? No, I wanted to -- because I didn't address it in the initial one. And I wanted to know should I include vocational rehab, evaluation counseling services and the plans. So that's why I was asking.

Q. You could have put these all on the first questionnaire; correct?

A. It just didn't make it in the first questionnaire.

Q. Let's look at Question Number 1 in this --

A. Vocational one?

Q. Yeah, correct, sir.

You ask: "What specific mental physical and/or environmental restrictions/guidelines does Mr. Hill need to follow due to his diagnosis and its sequela in order to remain safe and avoid injuries complications and other negative consequences?" Correct?

A. I did.

Q. Does Mr. -- does Dr. Felsher provide in his answer any environmental restrictions or guidelines?

MS. WALLACE: Objection.

THE WITNESS: He did not specifically state a guideline. He said he was highly susceptible to life-threatening infections.

BY MR. TUBIN:

Q. But the question was what specific physical, mental, and/or environmental restrictions or guidelines does Mr. Hill need to follow; correct?

A. It was.

Q. So Dr. Felsher did not provide an answer to this question, did he?

MS. WALLACE: Objection.

THE WITNESS: He provided his answer to it, which was he had life-threatening infections.

BY MR. TUBIN:

Q. Would you have liked him to answer what specific physical, mental, and/or environmental restrictions/guidelines Mr. Hill needs to follow?

A. Of course, if he felt comfortable expounding on that, that would be great.

Q. He had a chance to review his answer;

correct?

A. He --

MS. WALLACE: Objection.

THE WITNESS: He composed his answer.

BY MR. TUBIN:

Q. Okay. For Question Number 3, the second question there specifically asks, "If the answer to the first question is no, at what point after diagnosis during 2004, was he medically unable to safely perform any type of competitive gainful employment within the open labor market?"

Dr. Felsher answers no to the first question; correct?

A. Yes.

Q. He does not answer the second question; correct?

A. He does not qualify with a year, no.

Q. Okay.

A. Just so you know, this exhibit doesn't have my other questionnaire in there. I just thought I'd tell you.

Q. I know. This was a report that was produced to us, and then supplementally.

A. Okay. Just making sure you didn't --

Q. Yeah.

A. There's not a missing questionnaire. Okay.

Q. Yeah. No. I just printed it as it was produced to us. I have the supplemental --

A. Okay. Fine. That's great.

MS. WALLACE: Would you like to see it for --

THE WITNESS: No. If he asks me something from that, I'll ask him to hand it to me, if that works.

MR. TUBIN: Yeah. Okay.

Let's move on to Ms. Welch.

(Exhibit 16 marked for identification.)

BY MR. TUBIN:

Q. Handing you what's been marked as Exhibit 16. Do you recognize this document?

A. I do.

Q. What do you recognize it to be?

A. This is my life care plan for Ms. Rothchild.

Q. And you performed a Zoom assessment with Ms. Rothchild; correct?

A. I did.

Q. And where -- do you know where she

was located during that assessment?
A. Her home.
Q. Okay. And did you have any time restrictions?
A. Not that I recall, no.
Q. Do you know -- I'm going to ask you again how long the assessment lasted?
A. 1.4 hours or so.
Q. Okay. And who was present?
A. Her partner was there. I think his last name was -- I noted in the report, I think Mr. Smith.
Q. And you conducted the interview; correct?
A. Yes.
Q. And was anyone else present on your end?
A. No.
Q. And you -- again, your notes were -- would have been taken directly into the report?
A. Yes.
Q. Did you ask Ms. Rothchild if any treating physicians have recommended a deep brain stimulator?
A. I did actually. Yes, I did.

Q. What did she say?
A. She said not at that point in time, they had not.
Q. Is that -- the fact that you asked her that question, is that anywhere in your report?
A. No, it's not.
Q. Okay. Ms. Rothchild is not in the fitness program; correct?
A. Not in a Parkinson's based one, no.
Q. In any kind of fitness program?
A. I think she tried to stay active, but not like going to a gym, no.
Q. Did you ask her if she plans to enroll in a fitness program?
A. Not in specifically in that manner. What -- we talked about her symptoms, her issues in the home. She was going -- she was hopeful that she was doing some therapy, that it would help her. I think -- thinking about fitness for her, would have been difficult at that point in time because she was having all kinds of falls.
Q. She's not seeing a nutritionist; correct?
MS. WALLACE: Objection.

THE WITNESS: Not actively. I don't remember that occurring at the moment I was speaking to her.

BY MR. TUBIN:

Q. You list nutritionist as a recommendation; correct?

A. I don't list -- I mean, it's in the life care plan. It's foundation I received from the doctors I consulted. So, yes, it's in there.

Q. Did you ask Ms. Rothchild if she plans to see a nutritionist?

A. No, I didn't specifically ask that because this is foundation from -- received from the doctor, that -- or what she medically needs.

Q. She's not seeing a urologist; correct?

A. Urologist?

Q. Urologist, U-R-O-L-O-G-I-S-T.

MS. WALLACE: Objection.

THE WITNESS: Not that I recall. But, again, this is foundation I received from the physicians I consulted.

BY MR. TUBIN:

Q. No treating physician has recommended she see a urologist; correct?

MS. WALLACE: Objection.

THE WITNESS: Dr. Pelmutter did not recommend it. The consultant doctor recommended it.

BY MR. TUBIN:

Q. Right. And Dr. Perlmutter is the treating physician?

A. That's correct. I spoke to him at length.

Q. She's not seeing a dermatologist; correct?

MS. WALLACE: Objection.

THE WITNESS: Not actively, but that was due to the risk of a complication.

BY MR. TUBIN:

Q. And no treating physician has recommended she see a dermatologist; correct?

A. No, the consulting doctor did.

Q. Just the consultant?

A. Yes.

Q. She is not receiving housekeeping services; correct?

MS. WALLACE: Objection.

THE WITNESS: Well, she's receiving services that help manage her home from

her partner. So to that extent, yes.
BY MR. TUBIN:
Q. Other than that, no; right?
A. Well, he's helping manage the house. So that'd be housekeeping services. So outside of that, out -- with an outside agency, no.
Q. Right. And did you ask her if she plans to hire an outside agency for housekeeping services?
A. Not specifically. But she's getting support for it. And, again, as I said earlier, we have to consider the value of that in the life care plan, if that person wasn't available to provide it.
Q. She's not receiving attendant home care services?
MS. WALLACE: Objection.
THE WITNESS: She's receiving support services in that regard from her partner.
BY MR. TUBIN:
Q. Did you ask her if she plans to seek attendant home care services from an outside agency?
A. Not in that kind of direct way. Just the fact that she is receiving support to

complete her ADLs.

Q. She's not going to physical therapy; correct?

MS. WALLACE: Objection.

THE WITNESS: She was getting ready to embark into some, I think, occupational therapy. But I don't remember specifically her saying physical therapy.

BY MR. TUBIN:

Q. Did you ask her if she was planning to embark on physical therapy?

A. No. She volunteered that she's getting ready to start occupational therapy given her falls.

Q. What -- to you, what is the difference physical therapy and occupational therapy?

A. Occupational therapy is more focused on the upper extremities and, like, performance of safe ADLs. I think that's what -- she's making her way there. Physical therapy is more whole body and endurance and physical paralysis.

Q. Does Ms. Rothchild have any type of home modifications?

MS. WALLACE: Objection.

THE WITNESS: She couldn't go in her basement. And I have to look to see if she had -- I feel like made some minor changes in her house to accommodate herself, but --

BY MR. TUBIN:

Q. You don't recall?

A. I mean, she was on a -- she couldn't get in her basement. I do remember there were steps for that, of course. And -- but she was still falling in the home, that was the concern.

Q. Did you ask her if she plans on making any home modifications?

A. Not direct in that way. Because I don't know if she would know what those home accommodations would be, without professional input.

So she was concerned that she was falling, no matter what she did. She was having to hold on to walls to move around the house. So that's, obviously, a safety risk.

Q. Has she sought any professional input as to home modifications?

MS. WALLACE: Objection.

THE WITNESS: Has she gotten an

estimate? Not to my knowledge.

BY MR. TUBIN:

Q. Has she consulted with anyone, to your knowledge, on home modification?

A. No, but I spoke to her treating physician about it.

Q. She is not in a Parkinson's disease support group; correct?

MS. WALLACE: Objection.

THE WITNESS: Not at last report, no.

BY MR. TUBIN:

Q. Did you ask her if she plans to join a Parkinson's disease support group?

A. I did not specifically. But, I mean, those are typically free of charge.

Q. Was she driving a car -- able to drive a car around the time of your report?

A. No. Her partner was doing that.

Q. Was she able to?

A. I don't think she felt safe doing it given her body's not responding the way she wants her body to respond when she's trying to drive.

Q. Is there any physician, treating or consulting, that has said it's unsafe for her to drive?

A. I'll have to recall what they each said. Give me just a second.
Q. Sure.
A. So Dr. Andruska said she requires a formal driving evaluation now.
Q. And that's the consulting physician; correct?
A. Right. And then Dr. Perlmutter: "It's likely she will require a future conference of driving evaluation to determine if she continues to be safe to drive."
Q. Okay. If she continues to be safe to drive.
A. Meaning he's questioning is she safe to drive.
Q. Isn't he saying right now she's safe to drive, but we're not certain if in the future she will be?
A. I don't think he's saying that at all. I think his concern was we need someone to figure out is she safe to drive.
Q. He uses the words "continues to be safe"; is that correct?
A. Well, meaning it is -- at some point he's saying she was safe and is she continuing to

be safe now to drive at this point in time.

Q. If a doctor tells you it's hard to predict whether attendant care will be required, would you want more evidence before recommending attendant care?

MS. WALLACE: Objection.

THE WITNESS: If a doctor said it would be difficult to say if more attendant care was required? Meaning over -- as someone ages? Is that what you're asking?

BY MR. TUBIN:

Q. If he says it's hard to predict whether attendant care will be required.

A. I mean, I want him to qualify what he means or she.

Q. Let's say you didn't have a qualification, you just had that.

MS. WALLACE: Objection.

BY MR. TUBIN:

Q. Would you want more information before recommending -- before listing attendant care as a line item or service?

A. Well, I don't think that's at all what he said, if that's what you're asking me.

Q. Just for now, it's a hypothetical.
A. If he said it was difficult -- I want to understand what he needed to know to pinpoint that.
Q. Okay. If a doctor were to tell you it's possible attendant care would be required, would you want more information before recommending attendant care?
MS. WALLACE: Objection.
THE WITNESS: If a doctor said it was possible, I'd want to know what they mean by "possible." Does that mean greater than 50 percent? What other information they needed to make that decision.
BY MR. TUBIN:
Q. And you consulted with Ms. Rothchild's treating physician, Dr. Joel Perlmutter; correct?
A. Yes. Extensively, it was a long call.
Q. How long did it last?
A. I recall it being a long call. I was on the phone with him for an hour.
Q. One hour, you said?
A. Yes. It took me, like, almost an

hour and a half to write up all his responses.

Q. Did you also have a phone consultation with Dr. Andruska?

A. Yes, I was just trying to remember the date. Yes, on 2/3/25.

Q. And you know how long that lasted?

A. 1.4.

Q. Okay.

A. 1.36. I'm rounding up there.

Q. That's fine.

(Exhibit 17 marked for identification.)

BY MR. TUBIN:

Q. Let me have that back. I marked the wrong copy.

This is your excerpts from the deposition you reviewed of Dr. Joel Perlmutter?

A. Okay.

Q. If you could turn to page 57.

A. 57, you said?

Q. Yeah. Yes, sir. If you could read from lines 14 to 24.

A. "And do you think Ms. Rothchild will a require attendant care at any point in the future?

"That's hard to predict. That's possible. A lot of people with Parkinson's do. She has been slowly progressive, but, again, that can change as she gets older and the disease may progress more."

Q. All the way to 24.

A. Oh, I'm sorry.

"I mean she's taking a fair amount of carbidopa/levodopa. This is not a tiny dose. So she could have more trouble. So far she's doing pretty well."

Q. So he's not testifying that she will require attendant care, is he?

A. Well, his deposition was on May 3rd of 2024 and I spoke to him on -- subsequent, in November of '24.

In that period of time, I do know that she was progressively getting worse. So this is what he told me. This is what he confirmed. He did say that in his deposition, but I -- I guess he's of a different opinion now about her status.

Q. Okay. Did Dr. Kristin Andruska review Dr. Perlmutter's questionnaire?

MS. WALLACE: Objection.

THE WITNESS: I don't know if she asked me for that or not. To be honest with you, I can't remember.

BY MR. TUBIN:

Q. Ms. Rothchild has never seen Dr. Andruska for treatment; correct?

A. No.

Q. And Dr. Perlmutter and Dr. Andruska are both neurologists, correct?

A. Yes, both movement disorder.

Q. Both movement disorder specialists; correct?

A. Yes.

Q. Dr. Andruska has no relationship with Ms. Rothchild; correct?

MS. WALLACE: Objection.

THE WITNESS: She's not a treating physician for her, no.

BY MR. TUBIN:

Q. She's never prescribed medication for Ms. Rothchild; correct?

A. That would be what a treating physician is, so no.

Q. So she's never diagnosed Ms. Rothchild?

MS. WALLACE: Objection.

THE WITNESS: Well, I can't say that. I mean, she reviewed the records, if she's told me she has Parkinson's. So I don't -- to that extent.

BY MR. TUBIN:

Q. Dr. Perlmutter has examined Ms. Rothchild; correct?

A. Yes.

Q. And he's been treating Ms. Rothchild since at least 2013; correct?

A. For an extended period of time, yes.

Q. He has prescribed medication for Ms. Rothchild; correct?

A. Yeah.

Q. Who sent the questionnaire to Dr. Perlmutter?

A. I did. Well, my office emailed it to him. I wrote the questionnaire.

Q. Did he reply directly to your office?

A. Oh, I spoke to him and then he told me his answers. I don't know what you mean by "reply."

Q. Did he fill out the questionnaire?

A. Oh, no, no, no. So we had -- I

actually spoke to him on the phone. I remember it was actually a Zoom. Because I remember seeing him. And he told me his answers, and then I sent it back to him for review, which he reviewed, and he initialed every page and every answer. And didn't change anything. So but --

Q. Is -- sorry. Go ahead.

A. So this is the answers he told me about those questions.

Q. Is this the only doctor for which you filled out the questionnaire?

A. No, I think there are other ones who told me things and I wrote it down and then gave it to back to them to review, yes.

Q. How come his is the only one with an option to initial?

A. I think he put that on there. I don't remember if we put that on there. I think he somehow put that on there to initial it.

Q. Okay.

A. I'm not positive on that. I saw that too. It was a little different. I'm not sure where that came in, but ...

Q. And the initialing option was not on the questionnaire sent to Dr. Andruska; correct?

A. No. I really think that maybe that was something he put on himself. I don't remember. When I sent it to him, as -- you know, we sent it to him as a Microsoft Word. So he can change it, if there's something to change.

Q. Right. Did you do the same thing with Dr. Andruska, where she told you the answers on the phone and you wrote them in the questionnaire?

A. Yes -- when I get on the consult with the physicians I ask them, is that how you want this to proceed or do you want me just to -- you answer these questions and you're going to document it and send it back to me? And nine times out of the ten, they want me to send it back what they're telling me.

Q. Okay. Turning you back to Ms. Rothchild.

Your life care plan, in the tables, list which doctor recommends what treatment; correct?

A. Yes.

Q. For many recommendations, Drs. Perlmutter and Andruska agree?

A. I agree.

Q. You're free to count these, if you want, but I'll represent to you that there are 12 recommendations that Dr. Andruska made that Dr. Perlmutter did not. Does that sound accurate?

A. Can you give me just a second?

Q. Yeah.

A. Did he have no opinion about at all? Is that what you're asking me?

Q. Well, there's 12 recommendations where you list her name but not his as a recommending physician.

A. Okay. Because sometimes they have differing frequencies, but they're still recommending the care. So ...

I counted 11. Let me do it one more time.

Q. Sure.

A. All right. You're correct, it's 12.

Q. Okay. So 12 recommendations that Dr. Andruska made that Dr. Perlmutter did not; correct?

A. Yes.

Q. Okay. Thank you.

I want to do a kind of comparison

amongst some of the life care plans for the Parkinson's diseases. So do you have Welch and Sparks in front of you? I can give them to you.

A. Yeah, that would be great, if you can give me the ones you have.

(Exhibit 18 marked for identification.)

MR. TUBIN: This will be 18. This is the life care plan for Sparks.

MS. WALLACE: Thank you.

(Exhibit 19 marked for identification.)

MR. TUBIN: This is Welch.

MS. WALLACE: Thank you. Is this 19?

MR. TUBIN: Yes.

BY MR. TUBIN:

Q. Okay. Try to correlate this here.

So can we turn to the tables for Welch and Sparks.

A. Okay.

Q. And, specifically, I want to look at the power wheelchair.

A. The power wheelchair, is that what you said?

Q. Yes.

A. Okay. In the table?
Q. In the table, yeah.
A. Okay. All right.
Q. And if you go to both of them. So I think it's page 8 for Welch.
A. I have it, and page 8 on the other one too. Same page.
Q. Okay. Great. Makes that easy.
And now looking at Ms. Rothchild's report on page 13 of the tables. So you list power wheelchair as the item; correct?
A. Let me get to hers, just a second.
Q. Yeah. It's on page 13.
A. Okay.
Q. So power wheelchair and the unit cost/vendors is Rollz; correct?
A. Yes.
Q. And $3,490 to $3,999?
A. Yep. Yes.
Q. Now, Rollz motion is Sparks and Welch, is that the same company or provider?
A. Yes, it's the same general power chair.
Q. Okay. You have the same price, right, that 3,490 to 3,999; correct?

A. Yeah. It was actually -- on Sparks and Welch, spoke to the same doctor and she actually said, you know, use that type of wheelchair, just a general power chair.

Q. How come the frequency replacement for Ms. Rothchild is every five years, but for Sparks and Welch, it's one time only?

A. Because their life expectancy wouldn't afford that beyond that.

Q. Okay. So ...

A. That's without -- there was -- Ms. Rothchild had a longer life expectancy.

Q. Ms. Rothchild, do you know how old she is?

A. I don't know how old she is, but I remember that she had a normal -- the doctor said she had a normal -- she was 77. But the doctors had -- when I did the math on it, it would have been -- I was anticipating she would need a replacement. So I said every five.

The other ones would be one time only because by the time it's replaced, their life expectancy would be exceeded.

Q. Mr. Sparks was 71 years old; correct?

A. Right. But you're right, but the

life expectancy --

Q. Right. I understand.

A. -- issue, yeah.

Q. Just confirming his age.

A. It all went to what the life expectancy would have been.

Q. Okay.

A. Based upon the consults.

Q. Understood.

Now, this might get a little complex, try to do it as straight forward as possible. Why does Ms. Rothchild require a lift recliner, but not Mr. Welch or Ms. Sparks -- Mr. Sparks?

A. This is not something he told me that those other two needed. I mean, she was having all kinds of falls. And maybe I -- I don't remember the precisely why that was included, but that was what I got.

Q. Why does Ms. Rothchild require a shower chair, but not Mr. Welch or Mr. Sparks?

A. Rothchild's situation is a little more difficult. So she's going to need more things, more items. You know, Mr. Welch was having -- not as having as much lower mobility problems.

Q. Okay. And --
A. Mr. Sparks probably was somewhere in the middle. So you're kind of looking at a more difficult Parkinson's situation versus moderate and a little bit less severe.
Q. Understood. You can put Welch and Sparks aside for the moment.
A. As it is actively now, is what my point is. Where they're at -- when they wrote the life care plan.
We can put these away, you said?
Q. Not Ms. Rothchild, not done with that.
A. Okay. Okay. Understood.
Q. Now, on page 11 of the life care plan tables for Ms. Rothchild, under notes --
A. Okay.
Q. -- page 11.
A. Under page 11, but tables is that what you're at?
Q. Correct.
A. Okay.
Q. You state that, "Placement of a deep brain stimulator is not currently a likely cost for Ms. Rothchild." Correct?

A. That's the word -- why the word "potential" is there, yes.

Q. It's dependent on a future neurologist evaluation; correct?

A. Yes.

Q. And no doctor is currently recommend she receive a deep brain stimulator; correct?

MS. WALLACE: Objection.

THE WITNESS: Not at this point in time. Dr. Perlmutter wanted her to be seen by a specialist neurologist -- who specialize -- like a neurologist that specializes in putting those -- doing those evaluations and serving as a specializing in putting them in.

BY MR. TUBIN:

Q. And so Dr. Perlmutter himself is not recommending a deep brain stimulator?

MS. WALLACE: Objection.

THE WITNESS: Let me go tell you exactly what he said about that. I know he deferred to those other professionals.

So he said, Ms. Rothchild's potential future final candidacy for a deep brain stimulator device placement would be

determined by the evaluating neurologist and neurosurgeon.

And then he explained the programming, which he would be responsible for helping her have coordination of the programming for it after it's put in. But he's deferring it.

BY MR. TUBIN:

Q. And you reviewed his testimony; correct?

A. I did.

Q. All right. Do you recall him testifying that he doubts she would be considered for a deep brain stimulator because her Parkinson's disease is so mild and she's reasonably well treated?

A. I honestly don't remember that out of memory. But, again, she had kind of went downhill was my understanding. That's kind of what he explained to me when I spoke to him. She was starting to fall, having more and more symptoms.

So -- but if he told -- I mean in consult, he told me she's a potential candidate. That's why it says potential.

Q. Does she have an appointment scheduled for a deep brain stimulator evaluation?

MS. WALLACE: Objection.

THE WITNESS: I don't know currently. And she didn't have it at the time I wrote the life care plan.

BY MR. TUBIN:

Q. Ms. Rothchild is 78 years old; correct?

A. Well, she was 77 when I wrote this. So she would be approaching 78.

Q. Approaching 78, okay.

Would you agree she's at high risk for cognitive decline?

MS. WALLACE: Objection.

THE WITNESS: Based upon my consultations, all the Parkinson's cases were at high risk for such things.

BY MR. TUBIN:

Q. And Mr. Sparks was 71 at the time of your report; correct?

A. Yes.

Q. And you may need to look at the Sparks report for this, that's fine.

But Dr. Schwarz said Mr. Sparks is

not a likely candidate for surgical placement of a deep brain stimulator, given his age and cognitive decline. Is that correct?

A. She did say that, yes.

Q. Okay. The --

MS. WALLACE: Did you read from the report? Sorry.

MR. TUBIN: No, that was my question.

MS. WALLACE: Sorry.

MR. TUBIN: Similar to the report language, though.

BY MR. TUBIN:

Q. The IARP standards say to take age into account in a life care plan; correct?

A. As far as aging and different difficulties that come with compounding aging on disability, yes.

Q. And the Journal of Life Care Planning Consensus statements say to take age into account; correct?

A. The consensus statements?

Q. Yeah.

A. They do mention it at one point, yes.

Q. Did you ask any of the physicians if there are risk factors associated with the deep

brain stimulator procedure?

A. Not specifically. I've looked at some research about it -- I have looked at research about it in the past.

Q. Did you consider any of the risk factors associated with the procedure?

A. That's not for me to decide. That's a surgical decision.

Q. Did you ask any of the physicians if she's at greater risk?

A. Again, that -- that's why he's sending her for review by a specialist.

MR. TUBIN: Okay. This is a good time for a break.

THE WITNESS: Sure.

THE VIDEOGRAPHER: Off record at 2:05 p.m.

(Recess taken from 2:05 p.m. until 2:16 p.m.)

THE VIDEOGRAPHER: On record at 2:16 p.m.

BY MR. TUBIN:

Q. Let's turn to Mr. Sparks.

A. Is that already -- it's already an exhibit. I got it. Okay.

Q. Now, you completed a Zoom assessment

with Mr. Sparks; correct?
A. Yes, on 8/12/24.
Q. Where was Mr. Sparks during that?
A. His home.
Q. How long did that assessment take?
A. Approximately an hour.
Q. And did you have any time restrictions?
A. No.
Q. Who was present?
A. Just me and him.
Q. Okay. And you conducted with the interview obviously?
A. Yes.
Q. And, again, all your notes are taken into your report --
A. Yes.
Q. -- correct? Okay.
In this case, Mr. Sparks, you consulted with his treating physician; correct?
A. Yes.
Q. Dr. Trevor Hawkins; right?
A. Well, I was -- I think that he just responded to my questionnaire, if I recall correctly. I have to refresh.

Yeah, he just responded to my questionnaire.

Q. When you say "he just responded," you mean you didn't speak to him over the phone?

A. I would use the word "consult" meaning I'm speaking directly to you. So terms in life care planning.

I sent him a questionnaire. He responded to it.

Q. Okay.

A. So, yeah, I -- I guess I consulted with him through the questionnaire.

Q. Okay. And you consulted meaning "spoke to" Dr. Heidi Schwarz?

A. Yes, I did.

Q. And Mr. Sparks has never seen Dr. Schwarz for treatment; correct?

A. No.

Q. And both doctors are neurologists; correct?

A. Yes.

Q. And Dr. Schwarz has never examined Mr. Sparks; right?

A. No. I'm not sure if -- I have to look back and -- if Dr. Hawkins is a movement

specialist. I'm not positive on that. But I know Dr. Schwarz is.

Q. And Dr. Schwarz has never prescribed medication to Mr. Sparks; correct?

A. Not to my knowledge.

Q. And Dr. Hawkins has examined Mr. Sparks many times; correct?

MS. WALLACE: Objection.

THE WITNESS: I don't know how you define many times. I remember thinking Mr. Sparks --

BY MR. TUBIN:

Q. Say repeatedly.

A. He's had multiple doctors involved in his care over time. So ...

Q. Okay.

A. But, yes, he's seen him more than once.

Q. And Dr. Hawkins has been treating Mr. Sparks since at least 2018; correct?

A. That sounds correct. But let me just make sure.

Yes.

Q. And Dr. Hawkins has prescribed medication for Mr. Sparks; correct?

A. Well, what date did you say again, 2018?

Q. As of 2018, yeah. At least as of 2018.

A. Oh, I was on -- let me go back to that. I don't want to tell you the wrong date.

Q. Do it this way. Go to page 8 of the report.

A. Uh-huh.

Q. And then the first underlined, bolded date. During a neurology --

A. You're right. You're right. I didn't -- I skipped that page. Sorry.

Q. No problem.

A. 2018.

Q. Okay. Dr. Hawkins has prescribed medication for Mr. Sparks; correct?

A. Yes.

Q. Would you agree Dr. Hawkins is more familiar with the treatment he's given Mr. Sparks than Dr. Schwarz is?

MS. WALLACE: Objection.

THE WITNESS: I could say that, I mean -- Dr. Schwarz has head his records. So she's familiar with what treatment he's

received. So ...

BY MR. TUBIN:

Q. But Dr. Hawkins is the one who's giving the treatment; correct?

A. He's the one who's prescribed it.

Q. Dr. Hawkins is the only treating physician you received handwritten responses from; correct?

A. Yes.

Q. All right. Mr. Sparks is not receiving psychological counseling; correct?

MS. WALLACE: Objection.

THE WITNESS: At the time of my evaluation, he was not.

BY MR. TUBIN:

Q. Has any treating physician recommended psychological counseling?

A. Dr. Hawkins did not mention it in his responses, but he left a lot of questions blank.

Q. Do you recall Mr. Sparks' deposition -- well, let me ask this.

Did you review Mr. Sparks' deposition testimony?

A. Yes.

Q. Do you recall his testimony that

psychiatrists don't -- I just don't have any faith in them?

A. Not specifically. But you asked me about counseling, typically I stand by a psychologists or LPC, licensed professional counselor.

Q. Did you ask Mr. Sparks if he plans to pursue psychological counseling?

A. Not in that specific terminology, no. You know, life care planning, assessment is not -- that's not typically what we ask. We ask about their function, their symptoms, their complaints, their history of problems, their education, you know, their ADL.

We don't ask are you planning on pursuing this, because we're going to the doctors to get that foundation if it's medically necessary. An evaluee could never tell me if something was medically necessary. We have to go to doctors for that.

Q. Mr. Sparks is not in physical therapy; correct?

A. I don't think he was at the time of my evaluation.

Q. Has any treating physician

recommended physical therapy?
MS. WALLACE: Objection.
THE WITNESS: No. Dr. Schwarz did, but not a treating physician.
BY MR. TUBIN:
Q. And Mr. Sparks is not receiving speech therapy; correct?
MS. WALLACE: Objection.
THE WITNESS: He has in the past. But for his vocal issues, as to his -- tone of his -- the loudness of his vocalizations. But not at the moment I was speaking to him, he was not getting it.
BY MR. TUBIN:
Q. Has any treating physician recommended speech therapy for Mr. Sparks?
MS. WALLACE: Objection.
THE WITNESS: I was thinking he had some in the past, but Dr. Schwarz definitely recommended it.
BY MR. TUBIN:
Q. But as you sit here today, you're unaware of any treating physician who's recommended it?

A. Recommending going forward, no.
Q. Mr. Sparks is not in a fitness program; correct?
MS. WALLACE: Objection.
THE WITNESS: In a formal fitness program, no.
BY MR. TUBIN:
Q. Has any treating physician recommended a fitness program?
MS. WALLACE: Objection.
THE WITNESS: No, that was recommended by Dr. Schwarz. But, again, Dr. Hawkins left a lot of things unanswered in his report, in his questionnaire. I don't know if that was one he left unanswered without looking at it.
BY MR. TUBIN:
Q. Aside from his questionnaire, have you seen any medical records where a fitness program has been recommended for Mr. Sparks?
A. I don't remember if the -- if a home exercise program was recommended for him. If you're saying, like, a fitness outside of the home, no, I don't recall that.

Q. Mr. Sparks does not use a lawn care service; correct?

MS. WALLACE: Objection.

THE WITNESS: No. His grandson completed all that for him.

BY MR. TUBIN:

Q. Has any treating physician recommended he hire a lawn care service?

MS. WALLACE: Objection.

THE WITNESS: No, but you're not going to find that typically in a medical record, without asking the physician.

BY MR. TUBIN:

Q. Mr. Sparks does not use a housekeeping service; correct?

MS. WALLACE: Objection.

THE WITNESS: He has someone perform -- providing that for him. His grandson.

BY MR. TUBIN:

Q. But he has not hired somebody to do it currently; correct?

A. No. He has a family member doing it.

Q. Has any treating physician recommended he hire someone for housekeeping

services?

MS. WALLACE: Objection.

THE WITNESS: Not specifically in that -- those terms. We shouldn't -- again, that's a question you have to ask. It's not going to be necessarily in a medical treatment record.

BY MR. TUBIN:

Q. Did you ask any of the physicians that?

A. I asked Dr. Schwarz that. I had that question in Dr. Hawkins' letter, I'm sure.

Q. Did you follow up with Dr. Hawkins to get more responses?

A. No. I mean, often when I get these blanks like this, it indicates to me the doctor didn't have an opinion or didn't feel comfortable answering it.

I mean, obviously, the question was there and he didn't answer them all.

Q. How does he indicate that to you?

A. Well, I mean, he didn't answer.

Q. So you don't follow up with him to see, hey, did you forget to answer this or did you skip this or are there more answers?

A. I don't remember specifically doing that with him. But that's just my experience, when I do follow up, that I don't get any more answers.

But certainly, if he -- if he wants to finish answering, that'd be great. But my experience is that when you have these blanks like this, either they don't have an opinion about it or they don't feel comfortable answering.

Q. Mr. Sparks does not receive attendant home care services; correct?

A. Again, his grandson helps with those types of things. But not from an agency, no.

Q. Has any treating physician recommended attendant home care services?

MS. WALLACE: Objection.

THE WITNESS: Not a treating physician, to my knowledge.

BY MR. TUBIN:

Q. And, lastly, Mr. Sparks does not receive skilled nursing care; correct?

MS. WALLACE: Objection.

THE WITNESS: He does not receive skilled nursing care, no.

BY MR. TUBIN:

Q. No treating physician has recommended skilled nursing care?

MS. WALLACE: Objection.

THE WITNESS: The evaluating physician has recommended it.

BY MR. TUBIN:

Q. I understand. But there's not been a treating physician who's recommended it; correct?

A. Let me look real fast --

Q. Yeah.

A. -- what Dr. Hawkins said.

You're correct.

Q. Now, Mr. Sparks voluntarily retired; correct?

MS. WALLACE: Objection.

THE WITNESS: He retired -- my understanding, he got early medical retirement, to some degree. Some type of -- he described it as -- the words he used with me were -- I was just trying to find the part in my report.

BY MR. TUBIN:

Q. Yeah. Take your time.

A. He accepted a pension in 2017, that's

how he phrased it to me.

Q. He didn't tell you that he voluntarily retired?

A. That's not how he phrased it. He said he accepted a pension. So I don't know if it was early pension. I just know he said he accepted a pension.

Q. Has any health care provider recommended work restrictions for Mr. Sparks?

A. Dr. Schwarz did.

Q. Any treating health care provider?

A. That was a question Dr. Hawkins did not respond to.

Q. Since he left the workplace, Mr. Sparks has not searched for another job; correct?

MS. WALLACE: Objection.

THE WITNESS: I don't know specifically. I don't know specifically he's never searched for another job. But he wasn't working at the time I spoke to him.

BY MR. TUBIN:

Q. Did you ask him if he had searched for another job?

A. Trying to recall if I asked that specific question. He just told me he was retired. And he -- I mean, there was no indication he'd been searching for a job per se.

Q. So you didn't ask him, though, if he searched for other employment; correct?

A. He didn't -- he didn't offer it. And I was -- again, I wasn't doing an earning capacity analysis. And we had a doctor saying that he shouldn't be working.

Q. Did you consider Mr. Sparks' performance reviews before he voluntarily retired?

A. That would be something that goes into earning capacity analysis. That was not the intent of what that section of our report covered.

Q. So you didn't review those records?

A. No. Again, the vocational sections are just looking at our vocational rehab services indicated medically. And based on my consult with the doctor, the answer is no.

Q. Do you know whether he was meeting his employer's performance expectations at the time of his retirement?

MS. WALLACE: Objection.

THE WITNESS: I don't remember those performs reviews, what they specifically entailed.

BY MR. TUBIN:

Q. Your report does not mention Mr. Sparks worked as a police dispatcher from 1996 to 2001; correct?

A. Yeah, I saw that in the other report. I don't think he mentioned that job to me.

Q. Do you know which of his symptoms would have prevented him from performing that job in 2017?

A. Well, based upon what Dr. Schwarz said, he's not medically appropriate to be engaged in any employment. So that would be the reason.

Q. Right. So it's your inquiry is -- doesn't need to go beyond Dr. Schwarz?

A. I'm not giving an earning capacity analysis.

Q. Right. Okay.

A. I -- a life care plan has a component of vocational services. So I'm asking those questions. Does a person need a vocational

evaluation, career counseling, adjustment services, a rehab counselor to work within the job placement?

And so based on the found -- medical foundation I received, the answer would be no. So that's why it's not included in the life care plan.

Q. Understood. Okay. Turn to Mr. Welch.

A. Okay.

Q. I believe you have that one as well.

A. I do.

Q. So, again, you conducted a Zoom assessment with Mr. Welch; correct?

A. Yes, on 8/13/24.

Q. I can see you're anticipating my next question.

How long was the assessment?

A. One hour.

Q. Did you have any time restrictions?

A. No. That's typically how long it takes me to complete the assessment, an hour to an hour and a half.

Q. Okay. Who was present?

A. I think maybe my administrator had

opened up the Zoom call. But it's just me and him, as I recall.

Q. Anyone on the other line besides Mr. Welch?

A. No, I don't remember anyone else being there.

Q. And all the notes you took have been subsumed within your report?

A. Yes.

Q. Is Mr. Welch receiving psychological counseling?

MS. WALLACE: Objection.

THE WITNESS: At the time I did my assessment, the answer would be no.

BY MR. TUBIN:

Q. Has any treating physician recommended psychological counseling?

MS. WALLACE: Objection.

THE WITNESS: Based upon my review of the record, I did not see that specifically mentioned.

BY MR. TUBIN:

Q. Is Mr. Welch receiving physical therapy?

MS. WALLACE: Objection.

THE WITNESS: Not at the time I did my evaluation, no.

BY MR. TUBIN:

Q. Has any treating physician recommended physical therapy?

MS. WALLACE: Objection.

THE WITNESS: The consulting physician did, but not a treating.

BY MR. TUBIN:

Q. Has Mr. Welch ever had an occupational therapy evaluation?

MS. WALLACE: Objection.

THE WITNESS: I'm not 100 percent sure on that one. He was not engaged in occupational therapy at the time I met with him.

BY MR. TUBIN:

Q. Is Mr. Welch receiving speech therapy?

MS. WALLACE: Objection.

THE WITNESS: No, but that was a recommendation received from Dr. Schwarz.

BY MR. TUBIN:

Q. I'm sorry?

A. I said no, but that was a

recommendation received from Dr. Schwarz.

Q. She's a consulting physician; correct?

A. Right. He's not actively receiving it.

Q. Has any treating physician recommended it?

MS. WALLACE: Objection.

THE WITNESS: Not that I recall on the records I've seen.

BY MR. TUBIN:

Q. Is Mr. Welch in a formal fitness program?

MS. WALLACE: Objection.

THE WITNESS: He did tell me he tried to be as active as he could possibly be with walking as much as he could. But if you're meaning, like, going to a fitness center, that was not my understanding.

BY MR. TUBIN:

Q. Has any treating physician recommended he go to a fitness center?

MS. WALLACE: Objection.

THE WITNESS: No. A consulting one has, but not a treating.

BY MR. TUBIN:

Q. Does Mr. Welch receive attended home care services?

MS. WALLACE: Objection.

THE WITNESS: Not actively. He received housekeeping services. And part of the -- what Dr. Schwarz told me is that Mr. Welch has a bit of denial going on about his issues.

BY MR. TUBIN:

Q. What do you mean by that?

A. That he's not accepting, you know, he's falling, he's having more problems than he's actually portraying. You know, he is not really readily admitting that he's having difficulties.

Q. Has any treating physician recommended home care services for Mr. Welch?

MS. WALLACE: Objection.

THE WITNESS: No, not a treating but a consulting.

BY MR. TUBIN:

Q. Does Mr. Welch receive skilled nurse care?

A. Not at the time of my assessment, he did not.

Q. Have any treating physicians recommended skilled nurse care for Mr. Welch?

MS. WALLACE: Objection.

THE WITNESS: No. But to be all -- to be fair, he was in the middle of transitioning to a new doctor. So his previous doctor, I reached out to and she was retiring. So his care was a bit in limbo when I met with him.

BY MR. TUBIN:

Q. Okay. Have any of Mr. Welch's treating physicians recommended lifestyle changes?

MS. WALLACE: Objection.

THE WITNESS: You have to tell me what you mean by lifestyle changes.

BY MR. TUBIN:

Q. What do you understand lifestyle changes to mean?

A. It could be a host of things. A lifestyle change could be abstaining from using alcohol, abstaining from using smoking. It could be being more physically active. It could be a whole host of things. I don't know what you mean by that.

Q. Okay. Let's skip that then.
Go to page 12 of the tables for Mr. Welch.
A. Okay.
Q. And the second sentence reads, "Mr. Welch explained during assessment that a cleaning service currently provides services at his home every other week for a charge of $90 each visit. Given the specific additional out-of-pocket expense that Mr. Welch is paying for the cleaning service and considering the same service was medically determined necessary for him now due to Parkinson's disease by Dr. Schwarz, such was included within the above table."
Did I read that correctly?
A. Yes.
Q. Okay. So he is currently paying for a cleaning service; correct?
A. He is.
Q. Do you have any idea if that is in connection with his Parkinson's disease?
A. She is saying -- Dr. Schwarz is saying it is necessary -- be medically -- medically necessary because of that.

Q. Going forward; right?
A. Right. So the life care plan looks at forward care.
Q. But he's already been paying for this service; correct?
A. He has in the past, but she's saying now it's medically necessary for him to have it.
Q. Do you know if he was paying for it in the past just because he didn't want to do the cleaning or if it was because of his Parkinson's?
MS. WALLACE: Objection.
THE WITNESS: I know that he's had difficulties. I don't know if that -- in his mind, why he was paying for it. But I know he's had physical difficulties.
I guess the important point from life care planning perspective is the doctor said it's medically necessary now due to the Parkinson's.
BY MR. TUBIN:
Q. Uh-huh. You have occupational therapy evaluations listed at three times a year; correct?
It's on page 5.
A. That that's correct, until his

admission to a SNF, per Dr. Schwarz.

Q. He told you during a Zoom assessment that he has no difficulties performing basic activities of daily living or driving; correct?

A. He did say that, but there's also an indication that he's not -- he's in a bit of a denial.

Q. What is that indication?

A. Based upon -- if you look at collectively the medical records. And that was Dr. Schwartz's finding as -- I mean, that was her finding; that he's progressively further down functionally than he wants to put on -- that he wants to admit.

Q. When you say collectively from the medical records, where in the medical records are you determining that he is not representing his restrictions accurately?

MS. WALLACE: Objection.

THE WITNESS: So here, on 10/12/23, he had a follow-up exam with Dr. Neff for Parkinson's disease, endorsed having fatigue with disruptive sleep despite using a continuous CPAP machine, morning stiffness, intermittent memory, the small

handwriting.

Those are all pretty significant symptoms for Parkinson's. So how he perceives that and his function and his quality of life. I mean, I'm glad that he sees optimistically, but those -- what Dr. Schwarz is saying those symptoms start to point to the progression of the disease.

BY MR. TUBIN:

Q. And SNF is a skilled nursing facility; correct?

A. SNF? Skilled nursing facility, the abbreviation, yes.

Q. A number of the line items frequency -- lists frequency as, until placement in an SNF; correct?

A. It does. She gave an idea about when that would happen --

Q. What did she say?

A. -- as I recall.

Give me -- just go -- I'm thinking on his, she said less years of his life. But let me just make sure.

So on page 3 of the questionnaire, as

noted above, attendant care services, medically necessary at present and up to -- Mr. Welch required skilled nursing facility placement during the final -- and the reason that's written that way, "year or years." I mean, one to two years of his life.

Q. We were -- are you getting the one to two years figure from?

A. Well, meaning it could be singular one, or more than one. I mean, it's hard -- it was hard for her to say precisely would it be three years, would it be -- but she's saying the final years of his life, to anticipate a SNF.

Q. Do you know why she didn't write one to three years or one to two years?

A. Her answer to me was that it's terribly difficult to pinpoint exactly to the year the rate of the decline. But she expects it in the final year to years of his life.

Q. And what does "medically expected" mean?

A. Medically expected based on the diagnosis.

Q. Well, she says, is medically expected for Mr. Welch during the final years of his life

during -- due to the Parkinson's.

A. Right.

Q. Do you know what she means by "medically expected"?

A. Well, doctors give medical prognosis. So they're -- you know, Parkinson's has stages. And that's her opinion that it's medically expected in his life, at the end of his life, that this would happen.

Q. Is that like -- can you quantify that as medically expected means it's at least 50 percent likely to happen?

A. No, I don't think that's how that works.

Q. Did you ask Dr. Schwarz how it works?

A. Well, the last question in this questionnaire was -- were all her findings, recommendations, opinions rendered in the life care plan represented to the medical degree of medical certainty greater than 50 percent likelihood. Her answer was yes.

Q. That applies to all of her answers?

A. That would be one of the answers.

Q. Right. But medically expected, just like if we were -- if she had used the word

"possibly," right? Would be less than 50 percent maybe. But she puts that qualification at the end, it doesn't change that.

MS. WALLACE: Objection to form.

THE WITNESS: No. I think she's saying that all of the things she said -- this is what she said.

Yes, all of my findings medi -- all -- yes, all of my medical findings, recommendations and opinions as detailed within the questionnaire reflect a reasonable degree of medical certainty greater than 50 percent likelihood of future occurrence.

BY MR. TUBIN:

Q. Okay. So you take that to then mean "medically expected" means the same thing?

A. Well, sometimes doctors would use the word "expected" as for prognosis.

Q. Okay.

A. The medical prognosis points to the fact this he's going to be in a SNF the last few years of his life.

Q. All right. Let's turn to Mr. Mousser.

A. To Mr. who?
Q. Mousser.
A. Mousser? Okay.
Do I have that one?
Q. I think we're done with the Parkinson's.
(Exhibit 20 marked for identification.)
BY MR. TUBIN:
Q. Handing you Exhibit 20, Mr. Fryar. Do you recognize this document?
A. I do.
Q. What do you recognize it to be?
A. It is a cost analysis. There's an entry letter. It's a cost analysis with there's a medical timeline summary that I completed for Mr. Mousser, and a consult summary that was completed with the transplant physician, Dr. Cooper.
Q. Okay. Now, I think you testified earlier you did not see a need to interview Mr. Mousser; correct?
A. I specifically asked to price out what Dr. Cooper's findings were for his future care relative to if he needed a transplant or

not.

Q. So you did not need to interview Mr. Mousser to do that?

A. No.

Q. Okay. Did you ask to interview Mr. Mousser?

A. Not specifically, no. Not given the request.

Q. Are you aware that the United States expert interviewed Mr. Mousser?

A. I did notice that they did, yes.

Q. Did you try to --

A. But they were doing -- they termed theirs a life care plan and I did not do that.

Q. Did you try to consult with any of Mr. Mousser's treating physicians?

A. No. I was specifically asked to do a cost analysis exclusively based upon what Dr. Cooper's findings were. And I made that clear in the letter.

Q. Right. You didn't ask for any other deposition transcripts; correct?

A. No. Because -- what the nature of the request was.

Q. Did you ask for his wife's deposition

transcript?

A. No. I just explained that I was asked to price out what Dr. Cooper's findings were specifically.

Q. Did you ask for Mr. Richard Mercer's deposition transcript?

A. No.

Q. The recommendations from Dr. Cooper assume that Mr. Mousser will require a kidney transplant; correct?

A. Yes, sir.

Q. So if that assumption is wrong, then the recommendations would become moot; correct?

A. For the kidney transplant, yes.

Q. Turn to page 2.

The third sentence, "In summary, Dr. Cooper explained during our consultation that based upon the current rate of kidney decline occurring for Mr. Mousser, he will likely medically require a kidney transplant in the future, or alternatively he will need to be placed upon dialysis in three to five years."

Did I read that correctly?

A. Yes.

Q. Did you ask Dr. Cooper what he meant

by "likely medically require"?

A. Let me get back to where he signed off. I don't see the consult summary of Dr. Cooper in this one. Let's see.

MS. WALLACE: Tables.

THE WITNESS: There it is, okay. Sorry. I skipped it.

Again, at the very end there, he indicated everything he told me was to the reasonable degree of medical probability, greater than 50 percent.

BY MR. TUBIN:

Q. Understood. Can you identify any records that support Dr. Cooper's rationale that Mr. Mousser's kidney functioning was declining?

MS. WALLACE: Objection.

THE WITNESS: That is a medical question for Dr. Cooper and not for me as a nurse.

BY MR. TUBIN:

Q. No, just if you have identified any records that say that.

MS. WALLACE: Objection.

THE WITNESS: Well, the last indication that I had from a visit in '23

was he was chronic kidney disease stage G3a, which, if my memory serves, that's moderate. Moderate, like, decline.

BY MR. TUBIN:

Q. You turn to page 7 of your report.

A. Okay.

Q. And would you agree your summary details medical records that found Mr. Mousser's kidney disease to be stable; correct?

A. Yes, at one point in time.

Q. This April 18, 2022, treatment note showed excellent and preserved renal function; correct?

A. It did. And then later there was some progression, as I recall.

Q. Then the note later, on July 19, 2022, you see in italics at the bottom, stable CK -- CDK and nonproteinuric kidney disease, which I'm probably butchering --

A. I think those initials are backwards. I think chronic kidney disease, it should be CKD, not DK. Just -- I don't know which way -- if that was me typing that wrong or just quoted that way.

Q. Gotcha.

A. But, yes, I see that. And then you see in '24, where there's a mention that he is progressed to stage G3a.

Q. Uh-huh. So page 8, just going to 2023, Dr. Bucci recommended Mr. Mousser be discharged from the nephrology clinic because his CKD was stable and he had no albuminuria or complications; correct?

A. At that time that point in time, yes.

Q. Okay. So how do you square these divergent opinions with Dr. Cooper?

MS. WALLACE: Objection.

THE WITNESS: Well, specifically, I was asked to -- a divergent opinion applies to a life care plan. This is a cost analysis.

Number 2 -- so I was specifically asked to explain the cost for the care that Dr. Cooper recommended. And it looks like, to me, that he is -- there is some changing happening. And I spoke -- I did speak to a transplant, like, specialist about this. So -- and that was his findings.

BY MR. TUBIN:

Q. There are no records in your summary from 2024; correct?

A. I know it stops at 20 -- looks like the last entry was 20 -- yeah, there is. 6/7/24, the last entry.

Q. What page is that? Okay.

A. Page 8.

Q. So have you requested records after 6/7/2024?

A. Not specifically requested them. Often they'll come in later, after my report is released. But I haven't specifically asked for them yet.

Q. Are you aware of how Mr. Mousser's kidney function was in 2024, before you relied on Dr. Cooper's assessment and issued your report?

A. I'm aware to what it was is documented in the summary that I have here.

Q. As of that date, right, June 7, 2024?

A. Yes.

(Exhibit 21 marked for identification.)

BY MR. TUBIN:

Q. Handed you Exhibit 21. It's hard to see at the bottom, it's kind of cut off, but it's

Bates stamped MOUSSER VHA 01631-01638 -- 0638 that's the range.

MS. WALLACE: I'd like for the witness to have a moment to review the document.

MR. TUBIN: Yeah.

THE WITNESS: Okay.

BY MR. TUBIN:

Q. So if you turn to Bates page 1633, it's kind of cut off at the bottom, but it's page 86.

A. I see it.

Q. Okay.

A. 86, yeah. Okay.

Q. And do you see at the top, the second paragraph starts, "He was last seen"?

A. Yes.

Q. Can you please read that full sentence.

A. "He was last seen on 6/7/24 without change in medications, stable renal function, and encouraged to monitor blood pressures."

Q. Okay. Thank you.

Did you review Dr. Daniel Flood's deposition?

A. Is this regarding Mousser?
Q. Yes.
A. No.
Q. Has Mr. Mousser been examined by a surgeon for a kidney transplant?
MS. WALLACE: Objection.
THE WITNESS: I've consulted with a transplant surgeon, who reviewed his records.
BY MR. TUBIN:
Q. You did. I'm asking if Mr. Mousser has himself been examined by a surgeon for a kidney transplant.
MS. WALLACE: Objection.
THE WITNESS: I'm not sure if he has, since I don't have any documentation that he has.
BY MR. TUBIN:
Q. Okay. Have any treating physicians stated he will need a kidney transplant?
MS. WALLACE: Objection.
THE WITNESS: Not specifically, but they're documenting that he has chronic kidney disease G3a.
BY MR. TUBIN:

Q. Has any treating physicians stated he will need dialysis in three to five years?

MS. WALLACE: Objection.

THE WITNESS: No, a consulting physician indicated that.

BY MR. TUBIN:

Q. On page 2 -- give me a moment.

A. Okay.

Q. Actually, page 7 of the tables.

A. Okay.

Q. And that first sentence that reads, "Necessary antirejection medications were not specified by Dr. Cooper during our consultation."

So you have no medical foundation for antirejection medications; correct?

A. No. He's -- that's saying that -- let me get back to his questionnaire.

He can't tell you exact ones and the dosing until -- that's very individualized, is what he's explaining to me.

So if you look back at his questionnaire -- he medically expected Mr. Mousser remain on immunosuppressive medications throughout his lifespan, should he receive a transplanted kidney in the future.

So he -- that point is that he couldn't tell he it's going to be specifically this medication. That's so individualized and what the person responds to, he couldn't do that and he couldn't tell me the specifics of the medication. So I put there a range of costs of those medications, identified in research.

Q. Where -- so what's the basis for that range?

A. That the research says this is a typical range of what those meds cost.

Q. What are "those meds"?

A. The antirejection meds.

Q. They weren't specified; correct?

A. Antirejection meds.

Q. That's what they're called? There's not, like, a name for a specific kind of -- just antirejection meds?

A. Right. So they're saying these are the anti -- this is a range of charges -- that's the best I can do with that entry, given what he explained to me for those types of meds.

Q. Okay.

A. So it ranged between -- in the current transportation report 2015, 10 to 14

thousand dollars annually for those meds. And then -- then the article also said that transplant admission to 180 days of the charges, a little bit higher, 18,200 to 30,300.

Q. So I'm clear, so neither Mr. Mousser nor any of his treating physicians provided any input into this analysis?

A. Yeah. I've explained that I was specifically asked to describe the charges that Dr. Cooper's recommendations -- the cost of Dr. Coopers recommendations for Mr. Mousser.

Q. Does Mr. Mousser currently receive housekeeping services?

A. It's not documented in the records I've seen.

Q. Does he currently receiving attendant care?

MS. WALLACE: Objection.

THE WITNESS: Not currently, but that was a forecast in the future from Dr. Cooper.

BY MR. TUBIN:

Q. Only Dr. Cooper; correct?

A. Yes. Yes, we have established that, it was only Dr. Cooper.

Q. Right. On page 7 of your report, you discuss Mr. Mousser's treatment with Dr. Rockwood; correct?

A. On page 7 of the report?

Q. Uh-huh.

A. Oh, in the actual timeline, okay. Yeah.

Q. Yeah.

A. With Dr. -- again --

Q. Dr. Rockwood, it's the 4/18/2022 entry.

A. Yes, I do.

Q. You were not offered Dr. Rockwood's deposition; correct?

A. No. If I didn't list it in my -- beginning of this timeline, I have not seen it.

Q. If Mr. Mousser's treating physicians testified that he does not need to make any lifestyle changes, would that change your recommendation for housekeeping?

MS. WALLACE: Objection.

THE WITNESS: Again, this idea of what lifestyle changes means. So I can't say that I understand what that means in that context.

BY MR. TUBIN:

Q. If Mr. Mousser's treating physician testified that his current kidney function has essentially zero impact on his ability to carry out normal day activities, would this change your attendant care recommendations?

MS. WALLACE: Objection.

THE WITNESS: So this was recommendations from Dr. Cooper. And it was forecast to happen into the future, after the kidney transplant, and in the last three years of his life.

BY MR. TUBIN:

Q. Understood.

A. Not talking about current moment.

Q. Right. Okay.

MR. TUBIN: Good time for a break and then we'll do Tukes after.

THE VIDEOGRAPHER: Off record at 3:00 p.m.

(Recess taken from 3:00 p.m. until 3:15 p.m.)

THE VIDEOGRAPHER: On record at 3:15 p.m.

(Exhibit 22 marked for identification.)

BY MR. TUBIN:

Q. This is Exhibit 22. Mr. Frye, you recognize this document?

A. I do.

Q. What do you recognize it to be?

A. It was the cost analysis I did for Ms. Tukes.

Q. You did not interview Ms. Tukes; correct?

A. No, I did not. It is very similar to what we talked about with Mr. Mousser.

Q. You did not ask to interview her; correct?

A. No. But given the nature of the request.

Q. Your cost analysis for Ms. Tukes focuses on kidney transplant and post-transplant care; correct?

A. Yes.

Q. It would be useful, then, to consult with the surgeon who performed her kidney transplant, would it not?

A. If he was available for me to speak to, that the information -- if he had available to me, yes.

Q. It would be useful to consult with the nephrologist responsible for her post-transplant care; correct?

A. Yes, if available.

Q. Did you try to consult with any of Ms. Tukes' treating physicians?

A. No. Again, the request was specifically for me to -- I explained that in the letter -- to utilize the foundation I received from Dr. Cooper. That was the task that was provided to me.

Q. Did you ask for any of the deposition transcripts of the treating physicians?

A. No.

Q. Were you offered any other deposition transcripts?

A. No. Given the nature of the request I was asked to formulate.

Q. Ms. Tukes depends on her husband for much of her care; correct?

A. I do recall reading that in some point in the records, yes.

Q. Were you offered her husband's deposition?

A. I have not reviewed that.

Q. Is Ms. Tukes currently using a home cleaning service?

MS. WALLACE: Objection.

THE WITNESS: I did not see that reported in the medical records I reviewed. But again, as I mentioned earlier, you're not going to typically find that in the records.

BY MR. TUBIN:

Q. Is Ms. Tukes receiving any attendant care?

MS. WALLACE: Objection.

THE WITNESS: It was not documented in the medical records reviewed.

BY MR. TUBIN:

Q. Your report does not mention Mr. Tukes' testimony that he was his wife's caretaker during her dialysis; correct?

A. I didn't see his deposition, so no.

Q. Your report does not mention that Mr. Tukes took classes to learn how to hook up her to the dialysis machine; correct?

A. I've not seen his deposition, but that makes sense. Sometimes family members are taught how to do that.

Q. It does not mention that Mr. Tukes attended classes related to kidney transplant so he could be her caretaker; correct?

A. If that was in deposition, no. I didn't have that information.

Q. Do you have any reason to believe Mr. Tukes will stop serving as Ms. Tukes' caretaker?

MS. WALLACE: Objection.

THE WITNESS: Well, again, I don't have any reason, and I hope that he's able to continue doing that. But from a life care planning perspective, we have to speak to what would happen without a family member. That's very clear in our -- in our guidelines.

BY MR. TUBIN:

Q. And your report does not mention Dr. Jones' testimony that Ms. Tukes has recovered to her pre-transplant status?

A. What -- who was the doctor again?

Q. Dr. Heather Jones.

A. I had records from Dr. Jones mentioned in my timeline.

Q. Uh-huh.

A. You're asking me does it include what now?
Q. Her testimony that Ms. Tukes --
A. Oh, her testimony.
Q. -- recovered to her pre-transplant status?
A. I did not see her testimony. I've seen medical records.
Q. Her testimony was not given to you?
A. No, I've not reviewed that testimony.
Q. You list home cleaning services for Ms. Tukes; correct?
A. I did. I'm just trying to get to that section of the report. Yes.
Q. Ms. Tukes testified that since her cancer diagnosis, her children help her with housekeeping; correct?
A. I honestly don't recall that, but okay.
Q. It's not in your report; correct?
A. I'm not going to argue with you, if it's in there.
Q. Your report does not mention that Ms. Tukes testified that since her April 2024 kidney transplant, she can cook, perform

household chores, and mop, and that going walking, shopping, and fishing are easier for her.

A. Right. So the foundation I received, was that was regarding the last three to four of her life that home cleaning services would be needed, not now.

Q. But your report doesn't mention anything about she can cook, perform household chores, mop, and that going to -- walking, shopping, fishing are easier for her; correct?

A. It does not report that. But again, this is based on what Dr. Cooper's findings were. It is not addressing -- it's not saying she needs it currently. It's saying she's going to need last it the three four years of her life.

Q. You can put Ms. Tukes' report aside.

You have a two-year nursing degree; correct?

A. Correct. And I have a graduate degree in -- a dual master's in another discipline.

Q. And you have a psychology degree; correct?

A. Yes.

Q. You've never been certified as a psychologist?
A. No.
Q. You have no other medical training; correct?
A. Well, we're going to consider nursing medical -- health care training is my nursing training, yes.
Q. What is that additional training?
A. Oh, I thought you said. I do.
Q. I said in addition --
A. In addition to? Beyond -- well, there are medical aspects of the rehab counseling program.
Q. You would consider that medical training?
A. Well, there's medical classes that -- medical aspects of disability you take.
Q. What type of classes?
A. Where you discuss different diagnoses and expected complications, medical -- it's literally called, medical aspects of disability.
Q. You completed a certificate in life care planning; correct?
A. Yes, 2005 or so, I'd have to look at

my CV.

Q. And it was through Kaplan University; correct?

A. Yeah. That was Dr. Deutsch's program at that time.

Q. And Kaplan had no physical location at the time; correct?

A. It was all online, which is what it is right now.

Q. Kaplan University no longer exist; correct?

A. It became IRET. Dr. Deutsch retired. His program went to IRET, which I've taught at IRET.

Q. Now, to the life care planning certificate program, you applied online; correct?

A. That was a long time -- I'm trying to answer your question honestly. I think I did back then. That was a long time ago.

Q. You registered online; correct?

A. To the best of my memory. I mean, it was a long time ago.

Q. And you completed all your study modules online; correct?

A. Yes. But I think there were some

video portion ones, too, and we had constant interaction with the professors.

Q. Were the video portions prerecorded videos?

A. That's what I recall.

Q. Was there any live interaction with professors in realtime, where you could ask questions?

A. Not at that point. Everything had moved to digital.

Q. You never sat for a proctored examination?

A. Yes, I did.

Q. You did?

A. Yes.

Q. When was that?

A. Whenever I got the certification. I had to go to a -- as I recall it, I had to go to, like, a testing center, like I did for my RN license.

Q. You sat for an exam there with a bunch of other life care planning applicants?

A. Well, I think it was -- I might be -- I think it was just me going there is like a proctored center.

Q. Okay. How long was the course from start to finish?

A. It took me about 18 months.

Q. Okay. Have you ever had any of your credentials suspended or revoked?

A. No.

Q. Have you ever been a party to a disciplinary proceeding?

A. No.

Q. What percentage of your current professional time is spent as an expert witness?

A. So as we sit here today, it typically before, it was about 40 percent case management. But I purposefully have brought that down because I'm embarking on doing some career counseling with a -- with a colleague.

So I'm kind of in transition. But right now, case management probably makes up about 20 percent.

Q. And litigation is 80 percent?

A. At the moment, yeah. Until I'm -- it's simply because I'm making a transition.

Q. Once you make the transition, what do you expect to that balance to be?

A. 60/45, 50/50.

Q. And the larger majority being litigation work?
A. Right. I mean --
Q. Right.
A. -- it'd probably likely be 60/40.
Q. What percentage of your expert work is for the North Carolina Industrial Commission?
A. That's really hard to quantify. It used to be a lot. But I would say probably these days, more like 20, 25 percent, if that.
Q. Do you recall a case, Santos Tinajero?
A. I do recall that case.
Q. Do you recall what the Commission said about your opinions in that case?
A. I do. And I recall a lot about that case, actually. That was a case where that gentleman was in a nursing home and was being maltreated, and I had to speak up to kind of save his life.
Q. Do you know what the Commission said about your opinions?
A. I do know what they said. They said they won't object if -- because they felt like I was acting like an advocate. But in reality, I

had an obligation as a nurse to address this because I felt -- I honestly believed he was going to die in the nursing home.

Q. Is that the reason that the Commission gave for why your opinion was deemed unbiased?

MS. WALLACE: Objection.

THE WITNESS: They said it was an objective, is only thing I could come up with. I had that life care plan independently blind peer reviewed. I redacted it.

I mean, this is when this -- you're talking about something that happened like 2009 or '10 when I wrote that plan.

BY MR. TUBIN:

Q. Uh-huh.

A. So 15 years ago.

I had that blind peer reviewed by the lead commissioner -- i ended up being the lead commissioner with the International Commission of Health Care Certification who gives me the credential. He actually wrote me back a letter saying that it was life care plan and he asked to use it in the teaching of other life care

planners.

So I felt strongly that I had met the standards and requirements for the life care plan. And I think there was some misunderstanding about my obligation as a nurse to explain that he was in harm's way.

MR. TUBIN: What number are we on now?

(Exhibit 23 marked for identification.)

BY MR. TUBIN:

Q. When you disagreed with the behavior of an alleged defendant, do you always feel the need to speak up?

A. When I disagree with the alleged behavior?

Q. Yeah.

A. If someone is in harm's way, I'm going to -- I have an obligation to speak up.

Q. That obligation comes from your nursing certificate?

A. Well, those consensus say that I must follow my standards of ethics first. So, yes.

Q. This is Exhibit 23. So if you could turn to page 18.

A. Page 18?
Q. Yeah. The top right corner, the page number in the top right corner.
Actually, let me back up. Look at first page of the document.
A. Sure.
Q. Do you recognize this document?
A. Yes, this is what you're talking about from 2009.
Q. Okay. Have you seen this before?
A. Maybe back then. I haven't seen it in a very long time.
Q. So, yes, now turn to page 18.
A. Okay.
Q. So the Commission starts, at the top of the page in the paragraph, by discussing your background; correct?
A. Yes.
Q. As a life care planner.
Then at the bottom of paragraph 27, it says, "Mr. Fryar cites extensively to literature from the Internet and extracted portions of the medical records and his assessment contains little original work. The life care plan does not contain a comprehensive

summary Mr. Fryar's recommendations and lacks a concise conclusion that explains these recommendations."

That's reasoning that the Commission is giving; correct?

A. You know, I could give you this peer-reviewed life care plan. I don't know why it says that. I don't know why it says the thing about my background because life care planners are either nurses -- 95 percent of life care planners are either nurses or rehab counselors or both.

And the report was extensive. It gave all kinds of medical foundation. I don't quite -- I never understood this opinion and that's why I gave it to my professional body to peer review. And that's the response I got.

Q. Okay. Now, one that's a little more recent, Kari Henderson.

Do you recall that one?

A. Vaguely.

(Exhibit 24 marked for identification.)

THE WITNESS: And just one other point. You know, that was 2009. My life

care plan have been accepted by the Commission numerous times since then. And it was accepted then, they just didn't agree with it.

So -- but I did testify and it was a -- and then subsequently, I've testified on numerous other cases.

BY MR. TUBIN:

Q. So this is from -- do you recognize this document?

A. No.

Q. You see Ms. Henderson's name mentioned at the top under North Carolina Industrial Commission?

A. I do.

Q. You see it was filed September 25, 2025?

A. Yes.

Q. If you turn to page 32.

A. Okay.

Q. And do you recall what the Commission said about your testimony in this case?

A. No. I think this was a vocational case, but that's all I remember.

Q. So paragraph 109 says, "The

Commission assigns little weight to Mr. Fryar's testimony regarding plaintiff's ability to earn wages, as the Commission gives more weight to, among other considerations, plaintiff's proven ability to organize, self-pace, travel, attend events and her receipt of an offer of employment which resulted from her time serving as a volunteer."

Do you recall that?

A. No, I've never seen this review. I have to go back and look at my notes. I thought there was doctors who said she couldn't return to work.

Q. Do you know what it means when -- like, when the Commission says it "assigns a little weight" to your testimony.

What is that?

A. Well, there's --

MS. WALLACE: Objection.

THE WITNESS: I don't specifically know. I mean, maybe they're assigning greater weight to something else.

But as I recall, there were -- there were doctors who said that she shouldn't be working. And we spoke about that

earlier, where I can't override those decisions.

MR. TUBIN: Right.

(Exhibit 25 marked for identification.)

BY MR. TUBIN:

Q. This is 25. Do you recognize this document?

A. No.

Q. See, it says, "Filed: November 5, 2025"?

A. Yes.

Q. If you turn -- do you recognize the name Thomas Clayton?

A. Not specifically, no.

Q. Okay. He was listed in one of your -- I believe, your prior four years of testimony?

A. Okay.

Q. If you turn to page 18, and at the top, paragraph 48.

Do you recall what happened to your opinions in this case?

A. I've never seen this until now.

Q. Tell me if I'm reading this

correctly. "Based upon the preponderance of the evidence in view of the entire record, the Full Commission assigns a little weight to the testimony of opinions of Mr. Fryar based on Mr. Fryar relying on plaintiff's not credible self-reports of pain to Mr. Fryar and Dr. Shrimanker and not taking into consideration the following when formulating his TSA and opinions."

And then it lists the number of information.

A. Well, all I can tell you is that I would not have formulated a TSA without doctor's input. So I don't know what that's mean, not agreeing with Dr. Shrimanker. But it was certainly medical -- medical restrictions I was looking at from a vocational perspective.

Q. Okay.

A. And, you know, there's going to be times when the Commission doesn't agree with me. I gave my honest opinion.

Q. You can put that one aside.

A. Okay.

(Exhibit 26 marked for identification.)

BY MR. TUBIN:

Q. Do you recognize the name Robert Carter?

MS. WALLACE: Can you identify which exhibit number this document is?

MR. TUBIN: This is Exhibit 26.

MS. WALLACE: The one before it was Exhibit 25?

MR. TUBIN: Correct.

THE WITNESS: I don't remember this case at all. But it's been several years ago.

MS. WALLACE: Can you give the witness a moment to review the document?

MR. TUBIN: Uh-huh.

THE WITNESS: Okay.

BY MR. TUBIN:

Q. If you turn to page 12.

A. Okay.

Q. And paragraph 24, the last sentence, "However, Mr. Fryar admitted that he was unable to identify what tasks of plaintiffs's current position could not be performed 'unless I go out and see the job,' which Mr. Fryar did not do in this matter."

A. Right. I mean, yeah -- I mean, I don't think I had an option to go do that.

Q. Then on the next page, and under paragraph 26, the second sentence starts, "The Full Commission notes that both Mr. Fryar's report and testimony indicate that he would have needed to observe the Process Handler I position to determine if it was within the scope of plaintiff's restrictions..." and it continues.

Did I read that correctly?

A. Yes.

Q. Then the last sentence, "Therefore, the Full Commission assigns no weight to Mr. Fryar's report or testimony in this matter."

A. Well, if I didn't get a chance to see it, I didn't get a chance to see it.

Q. Do you know why you didn't go and see it?

A. I don't recall in this case as to why. Maybe I didn't have access to go do it.

MR. TUBIN: I'm marking Exhibit 27.

(Exhibit 27 marked for identification.)

BY MR. TUBIN:

Q. Do you recognize the name Jorge A.

Espinosa?

A. I do. This is from a case back many, many years ago.

Q. If you turn to page 11.

A. Okay.

Q. Top of page 11, it states, "In preparing the life care plan, Mr. Fryar reviewed plaintiff's medical records, met with plaintiff at his current apartment and conducted a comprehensive interview, researched various medical practice guides and other related literature and communicated on several occasions with Dr. Bockenek."

Do you recall who Dr. Bockenek was?

A. He's a spinal cord injury physiatrist.

Q. He was a treating physician in this matter?

A. I don't -- I think so. I don't remember precisely, it was a long time ago.

Q. We go to paragraph 31.

"In those areas where the two life care plans differ on the same issue, the Full Commission gives greater weight to the life care plan prepared by Mr. Fryar, as it is more

consistent with the recommendations of plaintiff's current treating, Dr. Bockenek."

A. So I guess he was treating, I just don't remember.

Q. Okay. And you were hired for the plaintiff in this matter; correct?

A. I'm going off memory, but I think I was, yes.

Q. Okay.

(Exhibit 28 marked for identification.)

BY MR. TUBIN:

Q. This is being marked as Exhibit 28.

Do you recognize the name Anthony Douglas Pryor?

A. I do not at all. That's many years ago as well.

MS. WALLACE: Can you give him a moment to review the document?

MR. TUBIN: Yeah.

THE WITNESS: Okay.

BY MR. TUBIN:

Q. If you could turn to page 7.

A. Okay.

Q. And paragraph 14, I'm going to read

into the record.

"Michael Fryar is a vocational case manager. Mr. Fryar met with plaintiff and completed a vocational assessment on 10 March 2016. A 3 June 2016 letter from Mr. Fryar to plaintiff's attorney reflects Mr. Fryar's conclusion: 'Based upon review of cited medical records, a physician has not released [plaintiff] to return to employment. Thus, [plaintiff] is not appropriate for vocational rehabilitation services to include the consideration of future job placement within the open labor market."

I read that correctly; right?

A. Right. But we have to have a release for someone to return to work.

Q. Right. So is the converse true? And I can elaborate on that if you'd like me to.

A. Please.

Q. If no provider recommends work restrictions, then vocational rehabilitation and future job assessment is appropriate.

MS. WALLACE: Objection.

THE WITNESS: I'd have to go back and look at the context of that. It must have been there was a doctor saying there were

restrictions. The -- saying no one released him to work, I think it must have been that someone said he couldn't work.

BY MR. TUBIN:

Q. Right. So if no provider recommends work restrictions -- let's say, a separate case -- no provider recommends work restrictions, then is a vocational rehabilitation and future job assessment appropriate to perform?

MS. WALLACE: Objection to form.

THE WITNESS: If no doctor is recommending work restrictions -- or no doctor has said this person is not medically qualified to work, meaning a doctor has said they're capable -- medically capable of working outside the restriction, then they're appropriate for service.

But if the reverse is true, where a doctor has said someone's not medically safe to work or assigned a restriction where they couldn't work, then they're not.

MR. TUBIN: Okay. This is the last one.

THE WITNESS: Okay.

(Exhibit 29 marked for identification.)

MR. TUBIN: This is 29. One day I'll be able to keep track of this.

BY MR. TUBIN:

Q. This is Exhibit 29. Do you recognize the name Jeffrey L. Alston?

A. I recognize the name, but I don't remember much about the case.

MS. WALLACE: Can he have a moment to review, please.

MR. TUBIN: Yeah, absolutely.

THE WITNESS: Okay.

BY MR. TUBIN:

Q. If you could turn to page 14.

A. Yes.

Q. Paragraph 40, "Although a CNA employed with a home health care agency could expect to behave -- to be paid anywhere between $11 to $15 per hour depending on experience, Mr. Fryar noted that if a family member had not been available to provide home health aide services for plaintiff, then necessary professional steps from a case management

perspective would have included direct contact with at least two different license home healthcare agencies in the region as referenced in his report."

Did I read that correctly?

A. Yes.

Q. So can you explain a little bit more to me, are you saying that you only need nursing if a family member is unavailable?

MS. WALLACE: Object to form. You can answer.

THE WITNESS: Ask me that one more time.

BY MR. TUBIN:

Q. Are you saying in this, where it says you noted, and then the remaining part of the statement, that you only need nursing if the family member is unavailable?

A. No, I'm not saying that. I'm saying that -- the reverse. That if it hadn't been for the family member, then they would have needed CNA, based on the evidence that was in that case, obviously. And that -- that would be if you got contact with the home health company, you know, to determine those charges, and what I'm saying

there is that the CNA is typically paid in that range based on -- I'm sure I looked at the U.S. Department of Labor to find that range.

Q. Okay. Do you have that document that had your handwritten notes on it? I remember the beginning --

A. I don't have any handwritten notes.

Q. In the beginning of the deposition, you showed me a -- it was on the back of a document.

A. Oh, I'm sorry. I do know what you're talking about. It was just a listing of additional records I saw, just so I would remember.

I jotted them down right before I came, actually. It was on the back of this.

MR. TUBIN: So what I'd like to do is if we can make copies of this and I'm going to enter it as an exhibit and then I think I'm done.

THE WITNESS: Yeah. If you can -- if you can read my handwriting. It was me jotting down the things I've seen after the reports were produced. Yeah.

MR. TUBIN: Yeah. I may ask you on

the record to just explain it, but we can do that real quickly.

THE VIDEOGRAPHER: Go off the record?

MR. TUBIN: Yes.

THE VIDEOGRAPHER: Off record at 3:45 p.m.

(Recess taken from 3:45 p.m. until 3:49 p.m.)

(Exhibit 30 marked for identification.)

THE VIDEOGRAPHER: On record at 3:49 p.m.

BY MR. TUBIN:

Q. I marked for the record Exhibit 30, which are your handwritten notes on some additional materials; correct?

A. Yes.

Q. So can you explain again what this is?

A. This is just a note to myself about additional records I had reviewed since I released the reports.

Q. Okay. Are all of these records, records that were disclosed in your materials considered list?

A. I'm not positive on that. I think

some of these came after my report was released.

Q. Do you know, because --

A. Most of these came after my report was released.

Q. Because we received a supplemental materials considered list.

A. I'm not positive on that. I'd have to compare it.

Q. Okay.

A. But definitely, all of this was things I saw after I released the reports -- that that we've talked about today.

Q. And can you just read this for us?

A. So I know it's difficult to read, so apologize for that.

Yount, as meaning the economist, I read her -- saw her reports for Dyer, Mousser, Tukes, Laramore.

Brood, the economist, I saw -- PD means Parkinson's cases. Welch, Rothchild, and Sparks.

For Miller, I think the ones -- I didn't write it there, but I think I saw his reports for the -- more of the cancer cases. The -- and then, of course, I saw -- we've talked

about it today, I saw the life care planner expert's opinion of Navarro and then we'll just say Dr. S for their reports. I listed them. For Dr. S was Welch, Rothchild, Sparks, Mousser, and Tukes. And the Navarro was Hill, Dyer, and Laramore.

And that says underneath it, she's a CRC and he was a CRC in psychologist, that's what that language is there. And then I saw Staller's reports, all -- for all the cases.

And then there were second, third, and fourth amended track plaintiff damage assessments that I saw.

Q. Okay. And so the last thing I just want some clarity on before I end my questioning.

There's a standard for when you have divergent opinions; correct?

A. Yes.

Q. You have to square them -- you have to methodologically square divergent opinions?

A. In the context of life care plan, yes.

Q. Now, in the context of a cost analysis, that doesn't apply?

A. No. Cost analysis is looking at --

we're using the cost methodology for life care planning. And, of course, I'm not gonna go outside my scope and recommend something I can't recommend as a nurse or rehab counselor. But it's not a life care plan.

Q. So what happens when you get diverging opinions in a cost analysis table? What do you do?

A. If you do -- I mean, those opinions would need to be considered, but it's just -- specifically, a life care plan -- the divergent opinions about life care planning methodology from a -- what goes into arriving at your opinions.

Q. Right. So I guess where I'm a little confused is in a cost analysis table, if you have divergent opinions on one of the items, how do you decide which one to choose?

A. I don't.

Q. You include both of them?

A. So here, the cost analyses opinions, I was asked to -- for Tukes and Mousser to rely upon Dr. Cooper. So that was part of that -- I wasn't asked to look at anything else. And that one I did not prepare a life care plan.

For Hill and Dyer, I mean, I didn't have divergent opinions at the time I wrote the reports. I don't take exception with the other experts relying on the foundation they received. I don't take exception with that.

This is what I had available when I wrote the reports. Certainly, they relied upon other opinions.

Q. So for Dr. Cooper, for example, let's say some of the treating physicians don't agree with his analysis. How do you account for that in your cost analysis tables?

A. Again, the task presented to me was to explain the cost for Dr. Cooper, based on his recommendations, that's it. That's what I was asked to do exclusively. So I --

Q. So you don't even look at the others?

A. I mean, that's not what it was asking me to do.

Q. Okay. All right. Are there things you can recommend as a nurse in a cost analysis that you can't recommend as a nurse in a life care plan?

MS. WALLACE: Objection.

THE WITNESS: I mean, you still have

to stay within your scope of practice.

BY MR. TUBIN:

Q. But that applies across both?

A. I mean, it applies to everything that we do. I mean, anytime I'm out of my scope of practice, you're certainly going to ask me about that.

MR. TUBIN: Right. Okay. Pass the witness.

MS. WALLACE: Thank you. I'd like to take a break and go off the record.

MR. TUBIN: Yeah.

THE VIDEOGRAPHER: Off record at 3:54 p.m.

(Recess taken from 3:54 p.m. until 4:41 p.m.)

THE VIDEOGRAPHER: On record at 4:41 p.m.

EXAMINATION

BY MS. WALLACE:

Q. Mr. Fryar, I have some questions for you. I wanted to start with you -- there was an exhibit marked as Exhibit 13.

And during your testimony, you testified -- you were asked questions about materials that were in your briefcase that you

brought with you today; is that right?

A. My reference sources, yes.

Q. All right. And I want you to clarify for the record, did you intend for this document to be a supplement to your expert reports?

What is the purpose for why you brought this with you today?

A. It's an easy reference. It has information in it from -- easier to show you sometimes.

There's two thick books here I have. The life Care Planning Case Management Handbook, and there's -- multiple articles from the journal. It's an easy reference for me to go to about dates and information that's quoted in those resources, stop from flipping through the pages. So it's a reference source I keep on my desk.

Q. Are any of your reports incomplete without this these notes in this document that you were asked to provide?

A. No, it's just a reference source about why I'm using the 75th percentile for costing.

Q. Did you end up referencing or needing

to reference these notes in any way during the questions today?

A. No, not directly. But sometimes it's easier to reference that and try to flip to the book.

Q. But you weren't asked any questions that even required you to look at this -- these notes today?

A. No. What I had, I could pull from memory the questions that are asked.

Q. All of these notes that are on Exhibit 13, are those notes contained within the resources that you've stated in all of your reports?

A. Yes. Those notes came from those resources, yes, and they are listed in my reports.

Q. So is it your testimony that everything in these notes is already referenced?

A. In my report and the resource list, yes.

Q. Okay. Thank you.

And you don't need to supplement your reports in any way to add anything additional from Exhibit 13?

A. No. I didn't mean to be confusing about that. That's a reference source for me to -- so I don't waste time trying to flip through the books.

Q. And you were asked to produce it, based on the fact that it was in your briefcase; you didn't intend to bring it to be produced to add to a report today?

A. That's right.

Q. Okay. As a life care planner, are you required to usual, customary, and reasonable market rates when you're performing your analyses?

A. Yes, that's a policy statement by the American Medical Association. It's actually outlined in that treatise I was holding up in the earlier version of it.

Q. Is it appropriate for a life care planner to include discounted rates such as noninsurance discount, cash pay amounts, or insurance fee schedule rates?

A. No, we have to use standard rates. We can't -- specifically the consensus says we can't use discounted rates.

Q. That's part of your discipline and

training as a life care planner?

A. Yes, that's in the consensus statements, that's taught to us from day one -- or early on in our training.

Q. You were asked a number of questions today regarding the services that you have identified for future care in your charts. And I wanted to clarify that if you have a medical service listed in one of your charts for any of the plaintiffs, the source of that information has come from a either a treating and/or consulting doctor, and that doctor has confirmed in writing that all of the opinions that support that testimony are reasonably likely to occur 50 percent or greater. Is that true?

MR. TUBIN: Objection to form.

THE WITNESS: Yes, 50 percent greater probability. Yes, that's true for every one of my consults.

BY MS. WALLACE:

Q. So for every chart that is contained within one of your reports, that is supported -- each of those medical services have been -- there is a either treating and/or consulting doctor that has provided evidence that that service is

reasonably likely to occur 50 percent or greater?

MR. TUBIN: Objection to form.

THE WITNESS: Yeah. Yes.

BY MS. WALLACE:

Q. You were asked a number of questions about whether you had reviewed medical records from a treating doctor that had quantified support or articulated support for a number of support services, such as housekeeping, home health attendant care, skilled nursing visits.

Do you remember that testimony?

A. Yes.

Q. Is that -- are those types of support services typically articulated and identified in treating medical records?

A. No.

Q. Can you tell me why?

A. Often doctors, when they're treating patients, are looking at what's needed at the immediate time, and not necessarily forecasting the future. That's why we have to complete consults.

Q. And so if, as a life care planner, you are looking for more information about whether a certain plaintiff, such as a

Parkinson's plaintiff, is going to require support services in the future, what do you usually have to do to elicit that type of information from a medical doctor?

A. Make a phone call, have a consultation, or write a questionnaire to that doctor, asking him to respond he or she to respond.

Q. And so in your practice, just because those types of services are not articulated in current or past medical records, that does not mean that the doctor does not believe them to be necessary for that particular plaintiff?

MR. TUBIN: Objection to form.

THE WITNESS: Not necessarily does not mean that, no. Certainly that's why we ask them.

BY MS. WALLACE:

Q. Typically, if you want that type of information as a life care planner, you have to ask for it?

MR. TUBIN: Objection form.

BY MS. WALLACE:

Q. Do you agree?

A. Yes. Majority of time, yes. It's

very rare for it to be in the record for long-term needs.

Q. The methodology that life care planners use in order to determine costs in a life care report, are you taught -- tell us what you're taught regarding which sources are appropriate to draw from in order to quantify costs.

A. Databases. You can make phone calls to clinics and get information directly from the clinic. You can do research online with vendors that are offering DME. Make phone calls to agencies. Look at literature that pinpoints some costs when it's difficult to know a precise rate.

Q. So there are a variety of different sources, including surveying physicians within the geographical area that can be used?

A. Yeah, via databases or via telephone, yes.

Q. And typically, is it important for the sources of your information to be contained within either your report or your file?

A. Yes.

Q. Regarding making phone calls to providers, have you done that on occasion?

A. Yes, I have. I mean, I did it here. I called the agencies for home health care to determine that or mainly here for home health care.

Q. And that's within accepted methodological practices for life care planners?

A. Yes. I mean, that's the only way I actually get that information. It's not -- you're got not going to find that in a database. You might find some survey stats, but you're not going to find specific information that you need.

Q. And if there is a not a provider for an individual plaintiff that is recommending the care needed in the life care plan, what do you do in that situation?

A. There's -- can you repeat the first part.

Q. What if there's not a provider for the care that a life care planner is providing the cost analysis for?

A. So there, we have to ask for evaluations, sometimes IMEs are completed. If there's not someone providing the care -- that happens often where someone's seeing, you know, a primary care physician, they have a spinal cord

injury, we really need to see a spinal cord specialist, and there's an IME that's done and then I consult with the IME doctor.

Q. In life care planning practice methodology, how many providers or resources do you typically try to contact or review in order to get a range of costs?

A. So the early tenets of life care planning spoke about getting three sources. What the consensus statement says is more than one.

Q. You were asked a number of questions regarding whether you had access to a treating physician in the case to support certain future medical services that were needed.

Do you recall that testimony?

A. Yes.

Q. Did you have the opportunity to also review the defense life care planners' reports in this case?

A. I did.

Q. And did you observe that they issued opinions in this case without access to treating physicians?

A. Yes.

Q. And in your opinion, did that

disqualify their methodology, that they didn't have access to a treating physician?

A. No.

Q. And so in a situation like that, it's appropriate to consult with consulting physicians as well?

A. Yes.

Q. And so from that perspective, both you, as the plaintiff expert, and our defense experts, have as needed relied upon consulting physicians to support services identified in your life care plans?

MS. WALLACE: Objection to form.

THE WITNESS: Correct.

BY MS. WALLACE:

Q. Is that true?

A. Yes, that's true.

Q. There are certain plaintiffs that you have sections in your report, such as Hill, Rothchild, and Sparks, where you've identified vocational rehabilitation findings from the -- based upon surveys that you received or conversations that you had with either treating or consulting physicians.

A. There's information about what the

treating physician said about future work for those -- for those individuals, yes -- or excuse me, treating or evaluating.

Q. Yes. And so for an evaluating or treating physician who has opined to you that the plaintiff is disabled and incapable of further employment, what -- from a vocational expert standpoint, what do you do with that knowledge?

A. There's nothing more you can do, if there's not -- at that point in time, that was all the information I had. And there's -- you have to have a release from a physician for -- to pursue employment.

So like I said earlier, we have advisory opinions from the people who give our board certification for rehab counseling that say, I can't opine about function.

So if a doctor has said that someone can't work and that's all I had and there's no one saying the opposite, then there's nothing I can recommend as far as vocational rehab services. Or if I was taking it a step further with an earning capacity analysis, there's no -- you can't apply transferability in that situation because the doctor hasn't released the person to

pursue employment.

Q. You cannot do a transferable skills analysis, if they've been deemed permanently and totally disabled?

A. Right. Because we lean on the doctors to tell us about function. In that situation would be they can't work.

Q. So in that circumstance, some of your reports state that you would defer the total loss wages calculation to an economist.

Is that your typical practice in that situation?

A. Yes.

Q. And the economist -- what does the economist do as a result of that medical determination, if you know?

A. They typically look at tax records and provide a present value calculation on the loss.

Q. And you testified earlier that you've reviewed the economist reports for the plaintiffs that you reviewed?

A. Yes.

Q. And is that what was done, to your knowledge about --

A. Yes. Yes.
Q. You were asked questions specific to plaintiff Jimmy Laramore.
Do you recall that?
A. Yes.
Q. Do you recall the line of questioning regarding Dr. Sfakianos' opinion as to the likelihood of future bladder removal procedure?
A. Yes.
Q. Do you recall -- why don't you pull up. I just want to clarify for the record.
Do you have Jimmy Laramore's report there?
A. I'm sure I did.
Q. It should be --
A. I'm still looking. I don't see it in this exhibit. I must have skipped it. Let me try again.
Q. That can't be the only one we didn't mark.
A. I don't see it in my stack.
MS. WALLACE: Do you have it? Did we mark Jimmy Laramore's?
MR. TUBIN: I think he relied on his op key.

BY MS. WALLACE:

Q. I don't mind you pulling out your copy.

A. I can pull my copy out.

Q. Thank you?

A. Okay. I have it.

Q. Thank you.

You were asked some questions about Dr. Sfakianos potentially indicating in that -- the language that it was possible -- he would possibly require surgical intervention to remove his bladder with the development of urinary diversion.

Do you remember that line of questioning?

A. Yes.

Q. Can you pull your questionnaire with Dr. Sfakianos and let us know if the opinion about needing a future bladder removal was rendered to a reasonable degree of medical probability and that based on your reliance materials?

A. It was -- he signed off on that on 1/23/25, and he's indicated that there was a bullet that he agreed that it was correct in what

he told me; that all his medical findings and conclusions for Mr. Laramore were rendered to a reasonable degree of medical probability, greater than 50 percent medical probability.

Q. Does your report -- also on the survey that you sent to Dr. Sfakianos, does it also indicate at the bottom that should a listed recommendation require change or modification, that you are to be contacted?

MR. TUBIN: Objection to form.

THE WITNESS: Yes, it does. All of them, I say that.

BY MS. WALLACE:

Q. And have you received any subsequent communication from Dr. Sfakianos altering in any way his medical opinion in that regard?

A. No.

Q. And did he sign the physician statement stating, I have reviewed the 1/22/2025 consultation summary letter, and then later the letter is valid and accurately reflects my medical findings and conclusions for Jimmy Laramore?

A. Yes, as he conveyed to me. That was dated -- that's what I was mentioning, it was

dated 1/23/2025. I spoke to him on 1/22/2025.

Q. So as we sit here today, you're unaware of Dr. Sfakianos changing his opinion regarding the likelihood of Mr. Laramore's future bladder removal procedures as you've identified in your report?

A. I'm not aware of that, no.

Q. When you reviewed the expert report for Jimmy Laramore prepared by the defense, did you also see that they quantified bladder removal?

MR. TUBIN: Objection. Form.

THE WITNESS: Yes, they did.

Ms. Navarro did.

BY MS. WALLACE:

Q. You were asked some questions regarding Terry Dyer, a bladder cancer plaintiff.

Do you recall that?

A. Yes, I do.

Q. And in your materials considered, one of the materials that you reviewed was the expert report of Haresh Tharwani; is that true?

A. Yes.

MS. WALLACE: Can I have an exhibit sticker, please.

(Exhibit 31 marked for identification.)

BY MS. WALLACE:

Q. Mr. Fryar, I have handed you what's been labeled Exhibit 31 for this deposition. And it is the expert report for Terry Dyer by Haresh Tharwani.

Do you see that?

A. I do, yes, ma'am.

Q. Will you turn to the section that describes the required psychotherapy for Ms. Dyer.

THE VIDEOGRAPHER: I don't mean to interrupt you, but your mic --

MS. WALLACE: Yes. Can you hear me at all.

THE VIDEOGRAPHER: Well, it sounds like you're in the closet.

MS. WALLACE: Would you like for me to repeat that question.

THE VIDEOGRAPHER: I can hear you, it just sounds different.

MS. WALLACE: How's that?

THE WITNESS: Maybe you could point me to the page you're speaking of?

BY MS. WALLACE:

Q. Certainly. Page 10, top of the page.

A. Okay.

Q. Do you recall being asked questions about the frequency of psychotherapy in Ms. Dyer's case?

A. I was. I do remember that, yes.

Q. And can you read aloud in this paragraph on the top of page 10, what Dr. Tharwani indicated was the recommendation for psychotherapy to include the frequency required?

A. Sure. This is under Section a. Psychotherapy. Page 10.

"Ms. Dyer will require consistent follow-up care to monitor the progression of her symptoms, identify potential side effects, and medications and to begin a course of supportive psychotherapy. I have recommended to Ms. Dyer that she immediately begin seeing a trained psychiatrist for at least one hour every month. It is likely such support will be needed for the rest of her life along with medications. Supportive psychotherapy focuses on reducing the symptoms of psychological conditions by listening to, encouraging, and teaching the patient healthy

coping strategies when faced with outside triggers. Supportive psychotherapy is often used in settings where the patient is faced with external stressors outside their control, like cancer."

Q. Do you see an indication by Dr. Tharwani of what the frequency is indicated for psychotherapy for Ms. Dyer in that paragraph?

A. One hour every month.

Q. And when does that start and end?

A. Immediately.

Q. When does it end?

A. Through life.

Q. Can we take a look back at Ms. Dyer's expert report, which has been previously marked as, I believe, Exhibit 1?

A. Okay.

Q. And if you could turn to your charts where you quantify psychotherapy.

A. Okay.

Q. And that falls on -- is it page 4?

A. Yes, of the tables.

Q. Is -- do you have reflected in your current report the duration identified by Dr. Tharwani as it relates to psychotherapy for

Ms. Dyer?

A. No.

Q. Do you have sufficient medical support in order for that frequency to be recommended?

MR. TUBIN: Objection form.

THE WITNESS: Yes. To add the item in, yes.

BY MS. WALLACE:

Q. In your opinion, would -- based upon the paragraph that you just read, based upon your methodology and guidelines, should you add the duration in for Ms. Dyer's report?

MR. TUBIN: Objection. Form.

THE WITNESS: Yes. You would have to indicate there that you were referring to a psychiatrist as well. But yes, and you could indicate his report noted one time a month for life.

BY MS. WALLACE:

Q. And based upon your unit costs, that would be either a 45-minute session or 60-minute session, which would range from $133.64 to $226 per hour?

MR. TUBIN: Objection. Form.

BY MS. WALLACE:

Q. I'm sorry, per session.

A. Per session, the lower end being the 45-minute session.

Q. And so based upon the -- what we've just reviewed from Dr. Tharwani's report and the life care plan table on 4, under therapies, do you intend to make an update to this report?

A. I certainly can, yes. We could list that foundation from that psychiatrist there.

Q. You were asked a number of questions about whether or not it is appropriate to put a service in your life care plan, if the treating or evaluating doctor hasn't provided you support for the frequency of that service.

Do you recall that testimony?

A. Yes.

Q. I want to clarify. Are you required and encouraged to include a service, regardless of if you have the frequency identified in a life care plan, if it is supported by the 50 percent more likely than not support?

MR. TUBIN: Objection to form.

THE WITNESS: Yes, you have to include the unit cost. Here, Dr. Longo

was saying an evaluation of at least one treatment session needs to happen and that he was deferring the frequency.

So I would have to include that and to defer the frequency. But now we have a frequency for psychotherapy that you can include from a psychiatrist.

BY MS. WALLACE:

Q. My question is more general.

So, in general, if you don't have the frequency, but you do have support that it's more likely than not a medical service that will be needed in the future, are you required to include that information in your charts for unit cost?

MR. TUBIN: Objection. Form.

THE WITNESS: Yes, that's my understanding. In 20 years of doing life care planning, yes, that's my understanding.

BY MS. WALLACE:

Q. So it shouldn't be excluded from the chart, just because you weren't able to seek clarification on the frequency?

MR. TUBIN: Objection. Form.

THE WITNESS: Right. That would be

excluding medical care and foundation I received, that wouldn't be appropriate.

BY MS. WALLACE:

Q. And sometimes there can be testimony that where the court can make a finding or determination regarding the frequency based upon the cumulative record before the court.

Is that your understanding?

MR. TUBIN: Objection. Form. Foundation.

THE WITNESS: I have seen that happen, yes.

BY MS. WALLACE:

Q. And so in my general line of questioning, it shouldn't be excluded from a chart just because you don't have the frequency at that time?

MR. TUBIN: Objection. Form.

THE WITNESS: A life care plan's a dynamic document. We're getting more information. As we get it, we update the plan. So yes, we need to document what foundation we received and update it as we get additional information.

BY MS. WALLACE:

Q. You were asked some questions regarding Mrs. Dyer's weight.

Do you recall that testimony?

A. I do.

Q. When you are doing a life care plan and you have a recommendation from a treating or reviewing physician -- or what's the --

A. The term evaluating or consulting physician is used.

Q. Thank you.

And you have an opinion from a treating or evaluating physician that certain -- that certain care is needed for the plaintiff at that time, in a situation where Mrs. Dyer is continues to have -- to be overweight weight at the time that she was evaluated, are you required as a life care planner to take the plaintiff as she is now rather than the potential that she may lose weight in the future?

MR. TUBIN: Objection to form.

THE WITNESS: Yes, as she is now, and as the foundation I received explained to me, yes. The medical foundation, that is.

BY MS. WALLACE:

Q. You were asked some questions

regarding Ms. Dyer's prior medical malpractice lawsuit.

Do you recall those questions?

A. I do.

Q. And you were previously limited to any information that you reviewed in Ms. Dyer's deposition regarding that issue.

Do you recall that?

MR. TUBIN: Objection form.

THE WITNESS: Yes.

BY MS. WALLACE:

Q. Do you have any knowledge as -- let me ask you this: Your evaluation -- if you look at Mrs. Dyer report, which is Exhibit 1, in your opening paragraph on page -- I think it's on page 29 -- is that right?

A. Are you asking me to open paragraph to the tables?

Q. Yes. Let me look.

A. It's on page 2 of the tables.

Q. Thank you.

I was talking about where it says that your life care plan process for Ms. Dyer was performed secondary and exclusively related to her bladder cancer diagnosis.

A. Oh. That would have been in the questionnaire that Dr. Longo reviewed and signed. That's towards the back of the report, but it says that in the intro to the -- in the life care planning questionnaire responses for Dr. Longo.

Q. Yes.

A. That it was -- I'll just read the paragraph.

Based upon your medical expertise -- this is me telling -- asking him this -- reviewing medical records and past clinical experiences, please provide responses for the following questions with direct consideration of the medical and rehabilitative services which will be required to accomplish the goals of the life care planning process for Ms. Terry Dyer, secondary and exclusively to the bladder cancer diagnosis.

Q. So all of the opinions in the charts for Mrs. Dyer, is it your understanding that all of those services are secondary and exclusively related to her bladder cancer diagnosis?

A. Yes.

MR. TUBIN: Objection. Form.

THE WITNESS: That's what I asked for

him to respond regarding.

BY MS. WALLACE:

Q. And do you recall reading in her deposition testimony on page 39, that Ms. Dyer stated, "The only lawsuit that I've ever filed was against Dr. Lovett for malpractice and now that happened because I would have never had the bladder cancer had it not been for Camp Lejeune"?

MR. TUBIN: Objection. Form.

BY MS. WALLACE:

Q. Do you recall also reading that testimony in her --

A. Yes.

Q. So is it your understanding that the your life care plan is the secondary and exclusive to her bladder cancer diagnosis, regardless of what prior life care plan that may have been performed in 2014 by Dr. Deutsch?

MR. TUBIN: Objection to form.

THE WITNESS: Yes. I mean that's specifically what I asked for Dr. Longo to base his findings upon.

BY MS. WALLACE:

Q. Thank you.

You were asked some questions

regarding the Mr. Mousser's chronic kidney disease do. You recall that line of questioning?

A. I do.

Q. And you were asked to read a number of excerpts regarding -- that stated that the chronic kidney disease was stable at Stage 3a.

Do you recall being asked?

A. Yes.

Q. Can you -- based upon your nursing background, do you understand chronic kidney disease to be a chronic and progressive disease by nature?

MR. TUBIN: Objection to form.

THE WITNESS: I -- speaking as a nurse, yes. I mean, that's nature, chronic kidney disease.

BY MS. WALLACE:

Q. And so "chronic" meaning what in that context, if you know?

A. Meaning it's been that way for long-term and there's reason -- reasons to believe that it could progress.

Q. And if it is stable, does that recur -- does that refer to the current staging of the disease, if you know?

A. That's my understanding reading that record. They were saying that it was staged in a 3a, which is -- to the best of my memory, is listed up to the moderate level of disease and that it's stable at that stage at that point in time.

Q. And being stable at that stage at that point in time, based on your understanding, does not mean that it may not progress and get worse in the future?

MR. TUBIN: Objection to form.

THE WITNESS: Certainly does not mean that. And that's why we consult with specialists that explain to us the medical prognosis expected.

BY MS. WALLACE:

Q. And the specialist in this case that you relied upon, did hold that opinion?

MR. TUBIN: Objection form.

THE WITNESS: That it would progress, yes, that he would need eventually a transplant, yes.

BY MS. WALLACE:

Q. You were asked a number of opinions -- a number of questions about prior

opinions and awards before the North Carolina Industrial Commission in workers' compensation cases.

Do you recall that?

MR. TUBIN: Objection. Form.

THE WITNESS: I do.

BY MS. WALLACE:

Q. Do you recall if most of the expert opinions that you were giving in those reports actually had to do with your expertise as a vocational rehabilitation expert?

A. I think all of them did, except for one.

Q. And would you agree with me that you have been -- how long have you been an expert before the North Carolina Industrial Commission, in either a life care planning or a vocational rehabilitation expert capacity?

A. I think I did my first deposition before them in 2006, 2007.

Q. So almost 20 years?

A. 20 years. I've about probably been deposed upwards of 175 times at some point during my career, maybe more at this point.

Q. Have there been many expert opinions

where the Commission has found your opinion to be the prevailing opinion when they weighed the evidence in the case?

MR. TUBIN: Objection. Form.

THE WITNESS: Absolutely. I just got one a couple of days ago where they did that and actually asked me to take over the case and help the person return to work.

BY MS. WALLACE:

Q. And same question regarding life care planning. Have there been many cases where the industrial commission, a specific deputy commissioner or the full commission panel, has taken your expert opinion and it was the credible one giving greater weight in the case?

MR. TUBIN: Objection. Form.

THE WITNESS: Yeah. And one of those was actually in the ones that were handed to me, Espinosa.

But, yes, I've given opinions in life care plans about attendant care costs throughout my career.

BY MS. WALLACE:

Q. Have you ever been disqualified by

the industrial commission as a life care planner or vocational expert?

A. No. There's been times, obviously, where they didn't agree with my opinion that I arrived at. But they've never -- I've never been excluded in that way.

Q. The methodology that you follow as a life care planner in workers' compensation, is it the same as the methodology you apply in civil cases?

A. Yes. Often attorneys need to know certain things that won't be covered by, say, it's a little different because attorneys need to know what won't be covered by Medicare because it's Medicare set aside. But the things that won't be covered we do follow the same life care planning methodology.

Q. You have to sometimes be more specific?

A. If needed. I mean, there's times where it's -- includes everything. There's times when attorneys ask me about specific support services.

Q. And you mentioned there the one case that counsel brought up first that you mentioned

was the life care plan related, was it Santos --

A. Yes. I think that was his first name. The last name Tarajara.

Q. Tinajero? T-I-N-A-J-E-R-O?

A. You may be correct on that, I don't remember how I exactly said it.

Q. I'm sorry. We talked over each other. I'm sorry.

Do you -- and you mentioned that you had reviewed this opinion and you actually sought peer review of your report to ensure the reliability of your report?

A. Right.

MR. TUBIN: Objection. Form.

THE WITNESS: So I was a very -- I was a new life care planner when I wrote that life care plan. I don't know if I actually saw what was presented to me the day. It's been a long time ago.

I mean, we're talking, you know, 20 years ago, something along that neighborhood. But yes, I gave it to the International Conventional of Healthcare Certification, which is the group that certifies me as a life care planner, and

asked them to peer review it, blind peer review it. I redacted what I had to redact.

And then they responded with the fact that it was a -- met all the standards of life care planning, that it was a wonderful example of a life care for someone with spinal cord injury. And, actually asked me to allow them to use it to teach other life care planners. And --

BY MS. WALLACE:

Q. Tell me again how does the international committee of health relate to your field help me understand that?

A. International Commission on Healthcare Certification. They are the governing body who grants and manages the CLCP, which is my -- the accredited credential for life care planning, certified life care planning. They've been around since the beginning of life care planning as a certifying body.

Q. So this sentence that is in the opinion and award of Commissioner Linda Cheatam, where she states, "It is unclear from the record whether Mr. Fryar's level of experience in

preparing life care plans is adequate to prepare an assessment for this catastrophic situation," are you telling me that the governing body of CLCP disagrees with Deputy Commissioner Cheatam on that issue?

MR. TUBIN: Objection. Form.

THE WITNESS: They certified me as a life care planner. As I mentioned earlier, most life care planners either are nurses or rehab counselors or both.

I think there's some -- there was some misinformation about my background, maybe, the way it's portrayed in -- was in the deposition, I was -- maybe I wasn't asked the right questions.

But no, I was -- I'm -- I was certified by my commission at that point in time, peer reviewed by them, and that life care plan was found to be valid and reliable by my professional body.

Certainly gave me pause to hear that as a new life care planner. So I wanted input from my professional committee, which I got.

BY MS. WALLACE:

Q. If Ms. Cheatam stated in her opinion and award that you "cited extensively to literature from the internet and extracted portions of the medical records and his assessment contains little original work," did the peer-reviewed analysis that you received back from -- ICHCC --

A. ICHCC, yes, you're correct.

Q. -- did they agree with that analysis on behalf of Ms. Cheatam?

A. No. They said it was an excellent representation of the literature I have to reference for life care planning and foundation after reference. I think maybe it was a misunderstanding about what -- how a life care plan is produced.

Q. And you testified that you have never actually been disqualified as an expert in life care planning.

MR. TUBIN: Objection form.

THE WITNESS: No, I've never had a Daubert challenge. I testified there, they just didn't agree with the findings.

But I will say that that gentleman did get out of the nursing home and went

on to live a very happy life, which was important to me and it's good to hear.

BY MS. WALLACE:

Q. Are there any other -- you testified that there was a -- for Mr. Laramore, there was a one-digit CPT code that was misstated in the questionnaire signed by Dr. Sfakianos.

Do you recall that testimony?

A. Yes.

MS. WALLACE: May I have an exhibit sticker, please.

(Exhibit 32 marked for identification.)

MS. WALLACE: Thank you.

BY MS. WALLACE:

Q. I've marked as Exhibit 32. Do you recognize this document?

A. Yes.

Q. What is this?

A. So this was -- let me just make sure. There was an earlier one, I think it's dated 1/22, it was signed by the physician. And the -- one of the were -- was -- there's a digit off. I think it was the bottom code, but I have to go back and compare.

The 51595, I think I had a 596 there. I caught it after I had sent it to the doctor. And so I sent him back a corrected one the same day, but he had already signed the first one.

So there's two versions of it and I think the first version is what we went on our report versus which was the confirmed one with the correction.

Q. Is there any substantive change to your report based on this one-digit CPT mistype?

A. No. I still use the correct CPT for the costing. I just wanted to confirm that that was a typo and that that was the correct coding that he had recommended.

Q. So if we have a perfect record, then, for this plaintiff, we would substitute Exhibit 32 for the -- for the questionnaire that's identical to it in every way except for the one-digit difference in that CPT code?

A. Correct.

MR. TUBIN: Objection. Form.

BY MS. WALLACE:

Q. Okay. You also testified on direct that in one of the tables for Mr. Sparks, you noted when you were preparing for deposition,

that your chart lists 21 hours weekly, and there was a modification to 12.

Could you explain that again, please?

A. So the consultant doctor had indicated the first two years, that the -- it's three hours every other day. So that would have been -- specifically noted that would be 12 hours a week. So for the first two years, it would be 12 hours a week, and thereafter, it would go up to 21. That was inadvertently left out of that column.

(Exhibit 33 marked for identification.)

BY MS. WALLACE:

Q. I'm handing you what's been marked as Exhibit 33. And can you please take a pen and mark how that should actually be properly reflected on the report, please.

MS. WALLACE: And Counsel, if you want to look over his shoulder or just watch him or I'll pass to it to you.

MR. TUBIN: Just see it after he's done, yeah.

BY MS. WALLACE:

Q. Okay.

A. So this says first two years, 12 hours weekly. Again, I apologize for the handwriting.

Q. And would you -- do you mark anything out, it all stays as is?

A. You can draw a line that separate the two so that's not confusing for the economist.

Q. Will you go ahead and do that.

A. Yeah. Sure.

Like that.

Q. Thank you.

MR. TUBIN: We'll have it in the record. Madam Court Reporter will take it.

BY MS. WALLACE:

Q. Mr. Fryar, you were asked questions about some handwritten notes that you had on the back of one of your pieces of paper in your briefcase that were reminders to yourself on some of the documents that you reviewed.

A. Yes, after I released the reports, yes.

Q. And those included economist reports and -- is that right?

A. Multiple economists, yes. Ms. Yount,

Mr. Brood, Mr. Miller, and Mr. Staller.

Q. It also -- do you recall providing supplemental materials considered list that included those materials to the defendant in this case?

A. I don't specifically remember that, but I know there were some supplemental materials provided.

(Exhibits 34 and 35 marked for identification.)

BY MS. WALLACE:

Q. Mr. Fryar, I'm handing what's been previously marked as Exhibits 34 and 35.

Do you represent -- do you recognize those materials that were also additionally reviewed by you in this matter?

MR. TUBIN: Counsel, which is which is?

MS. WALLACE: The February -- I should backwards. It's -- 34 is the February 24, 2026, production.

MR. TUBIN: Okay.

MS. WALLACE: And 35 is the January 28 production -- of 2025.

THE WITNESS: The February 24, yes, I

recognize that.

BY MS. WALLACE:

Q. Do you -- do you recognize Exhibit 35 as well?

A. Some of that I can't really -- the way the exhibit is written, because it just says there's VA records. I don't recall all of these depositions.

Q. If they are listed in your supplemental materials considered, is it your understanding that you would have had them available to you to review?

A. Yes. That they were -- that they were provided and listed there, yes.

Q. Have you continued to supplement materials considered in this matter as needed?

A. Yes.

Q. Are there -- are there any other changes that we have not mentioned today that you may need to make to your expert reports or charts for the plaintiff?

A. Not at this time. I mean, of course, additional records come to me, I review them; if there's something new, I'll certainly -- someone know. But as we sit here today, no.

MS. WALLACE: Thank you. I don't have any further questions.

MR. TUBIN: A couple of little quick questions.

FURTHER EXAMINATION

BY MR. TUBIN:

Q. Can you pull up Exhibit 13. That's the three-page document that you summarized the --

A. The --

Q. The three-page document you brought with you to the deposition.

A. Oh, sure. I can find that again.

Q. You know what --

A. I know what -- you're talking about the one that talked about methodology.

Q. Yeah, Exhibit 13.

A. Yes.

Q. Do you intend to bring this three-page document to trial with you?

A. Not necessarily. It's a reference list for me.

Q. Do you intend to rely on that document at trial?

A. I mean, to the extent it's a

reference list. Most of it I have to put to memory because I've written it. So I don't necessarily have to bring that with me. It's just easy reference.

Q. Again, I'm asking, do you have intention to bring it with you to trial?

A. If I'm allowed to bring reference materials, yes.

MR. TUBIN: Okay. I've got nothing further.

MS. WALLACE: Nothing further.

THE WITNESS: Okay.

THE VIDEOGRAPHER: This concludes the deposition. Off record at 5:31 p.m.

* * *

(Deposition concluded at 5:31 p.m.)

* * *

(Signature reserved.)

* * *

DEPOSITION ERRATA SHEET

Our Assignment No: 7897326

Case Caption: In Re: Camp Lejeune Water Litigation

DECLARATION UNDER PENALTY OF PERJURY

I declare under penalty of perjury that I have read the entire transcript of my deposition taken in the captioned matter or the same has been read to me, and the same is true and accurate, save and except for changes and/or corrections, if any, as indicated by me on the DEPOSITION ERRATA SHEET hereof, with the understanding that I offer these changes as if still under oath.

Sign on the _____ day of _____, 20 __.

_____

MICHAEL FRYAR

DEPOSITION ERRATA SHEET

Page No. _____ Line No. _____ Change to: _____

_____

Reason for Change: _____

Page No. _____ Line No. _____ Change to: _____

_____

Reason for Change: _____

Page No. _____ Line No. _____ Change to: _____

_____

Reason for Change: _____

Page No. _____ Line No. _____ Change to: _____

_____

Reason for Change: _____

Page No. _____ Line No. _____ Change to: _____

_____

Reason for Change: _____

Page No. _____ Line No. _____ Change to: _____

_____

Reason for Change: _____

SIGNATURE: _____ DATE:_____

MICHAEL FRYAR

CERTIFICATE OF REPORTER

I, Christine A. Taylor, Registered Professional Reporter and Notary Public for the State of North Carolina at Large, do hereby certify:

That the foregoing deposition was taken before me on the date and at the time and location stated in this transcript; that the deponent was duly sworn to testify to the truth, the whole truth and nothing but the truth; that the testimony of the deponent and all objections made at the time of the examination were recorded stenographically by me and were thereafter transcribed; that the foregoing deposition as typed is a true, accurate and complete record of the testimony of the deponent and of all objections made at the time of the examination to the best of my ability.

I further certify that I am neither related to nor counsel for any party to the cause pending or interested in the events thereof.

Witness my hand, this 16th of March, 2026.

_____

Christine A. Taylor,
Registered Professional Reporter
Notary Public 19960530077
State of North Carolina

&

& 2:5 3:4 8:10 141:2

0

00897 1:4
01631-01638 6:11 251:1
0638 251:1
091464 6:15

1

1 4:12 35:19 62:16,19 77:24 78:2,2,4,6,10 123:23,24 157:5 184:11 310:16 316:14
1.36. 199:9
1.4 120:2 188:8
1.4. 199:7
1/20/25 131:17
1/22 328:22
1/22/2025 7:7 306:19 307:1
1/23/2025 307:1
1/23/25 305:24
1/28/2025 6:8
1/28/25 6:12
10 5:12 73:20 98:10 129:22 146:6,10 254:25 269:15 281:4 309:2,9 309:13
10/12/23 239:20
100 23:10 47:9 56:12 233:13
109 273:25
10:03 65:18,20
10:45 103:6,7
11 5:14 139:13 155:16 205:16 210:15,18,19 279:4,6 283:21
11/7/2014 5:14
11/8/24 6:10
112 5:9
118 147:10 150:2
11:01 103:7,9
11:46 146:12 146:13
11:57 146:13 146:15
12 5:16 31:16 31:21 140:18 140:19 151:15 151:21 165:22 205:2,10,19,20 237:2 277:18 330:2,7,9 331:2
127 3:10
129 5:12
12:15 160:20 160:21
13 5:19 153:1 161:14,17 164:9 207:10 207:13 291:22 293:12,25 334:7,17
13-750945 6:17
13-752573 6:19
133 135:16,18
133.64 311:23
134 136:21
137.21 65:3
139 5:14
14 5:21 150:12 154:5 164:25 199:22 254:25 280:25 283:16
140 5:16
15 5:23 150:10 150:13 174:12 174:15 269:18 283:21
16 5:25 26:8 130:10,12 135:22 187:13 187:17
161 5:19
1633 251:9
164 5:21
16th 338:13
17 6:2 130:4 150:12 199:11
174 5:23
175 321:23
18 6:4 130:4 206:6,8 248:11 267:3 270:25 271:1,13 275:20
18,200 255:4
180 255:3
187 5:25
19 6:6 206:11 206:14 248:16
19-720549 6:21
1985 90:24
199 6:2
1996 230:8
19960530077 338:18
1999 70:14,25 71:5 135:5,12 136:6
1:08 160:21,23

2

2 1:14 2:1 4:14 31:17,20 35:20 65:21,22 68:15 80:24 81:1 180:17 246:15 249:17 253:7 316:20
2/1/2025 6:4,6
2/27/2025 4:12

2/3/25 199:5
2/5/2025 5:25
2/6/2025 5:21
20 6:8 38:21 130:16 137:15 244:7,10 250:3 250:4 267:19 268:10 313:17 321:21,22 324:21 336:18
20-024801 7:2
200 130:2
2000 136:6
2001 230:8
2004 180:25 186:9
20044 3:21
2005 264:25
2006 321:20
2007 43:17 321:20
2008 43:17
2009 83:3,20,25 87:12 269:15 271:9 272:25
2010 136:25 159:18,23
2012 80:7
2013 75:25 81:9 182:14 202:11
2014 73:3,19 74:4 139:19 156:18 318:18
2015 254:25
2016 94:7,20 281:5,5
2017 94:9 227:25 230:13
2018 26:10,11 27:10 46:20 47:6 75:25 81:9 182:14 218:20 219:2,3 219:4,15
202.616.8289 3:21
2022 248:11,17
2023 249:5
2024 57:18 75:18 91:2 98:25 119:13 165:22 200:15 250:2,15,19 262:24
2025 47:3,4,5,7 58:12 103:12 180:17 273:17 275:11 332:24
2026 1:14 2:1 8:5 332:21 338:13
206 6:4,6
21 6:10 153:1 250:21,24 330:1,10
212 150:15
21572 338:16
219 3:14
22 6:12 151:14 151:18 257:24 258:2
226 311:23
228 150:16
22nd 46:23 47:5
23 6:14 20:12 137:15 247:25 270:9,24
24 6:16 53:7 98:25 155:16 199:22 200:6 200:16 249:2 272:22 277:20 332:21,25
242 137:13
244 6:8
25 6:18 45:4,5 53:6 66:7 268:10 273:16 275:4,7 277:8
250 6:10
257 6:12
26 6:20 68:15 276:24 277:6 278:4
27 6:22 271:20 278:21,22
270 6:14
272 6:16
275 6:18
276 6:20
278 6:22
28 6:24 90:16 280:10,13 332:24
280 6:24
28144 3:6
283 7:1
28403 3:10
286 7:3
29 7:1 283:2,4 283:7 316:16
291 4:4
29440 3:15
2:05 215:17,18
2:16 215:18,20
2nd 8:4

3

3 4:17 5:18,19 31:17 35:20 64:10 69:18,19 71:7 136:22 180:20 181:25 182:1 186:6 240:25 281:5
3,490 207:18,25
3,999 207:18,25
30 5:16 7:3 16:16 140:22 144:16 146:22 149:22 286:8 286:13

30,300 255:4
300 81:10 182:20
308 7:5
31 7:5 279:21 308:1,5
32 7:7 273:19 328:12,16 329:17
328 7:7
33 7:9 82:24 330:12,16
330 7:9
332 7:11,13
334 4:5
34 7:11 84:6 332:9,13,20
340 3:20
35 7:13 332:9 332:13,23 333:3
39 318:4
3:00 257:20,21
3:15 257:21,23
3:45 286:6,7
3:49 286:7,11
3:54 291:14,15
3a 319:6 320:3
3rd 200:14

4

4 4:19 75:7 109:14 136:22 157:2,8,21 159:22 310:21 312:7
4/10/2024 5:12
4/18/2022 256:10
4/8/2025 4:14 4:17,19 5:6
40 267:13 283:18
42 75:15
421 64:25
43 78:18
44 80:5
45 311:22 312:4
46 96:10,13
47 97:14 100:25
48 70:5 71:7 72:25 102:10 275:21
49 74:10 91:20 93:10
4:41 291:15,17
4th 12:16 13:2 25:12,16,17,20 25:20,24 26:1 26:4,5

5

5 4:22 32:22,22 78:2,6,6 82:16 82:17 108:18 123:5,8,12,15 140:23 238:24 275:10
5/3/2024 6:2
5/8/2025 4:22 4:25 5:3
50 19:8 45:6 95:12 111:1,4 113:14,17,18 113:20 114:3,5 114:14,19 198:13 242:12 242:20 243:1 243:13 247:11 295:15,17 296:1 306:4 312:21
50/50 267:25
50/75th 162:12 163:25
50th 34:19,25 35:3,5,7,17,20 35:21 36:3,4 36:11,18 65:7
51595 329:1
525 2:6 3:5
54 151:12,14
55 151:15
57 199:19,20
58 174:19
59 174:21
596 329:1
5:31 335:14,16
5th 25:14,21 26:2

6

6 4:25 32:22 90:4,10 108:18 159:10,24 160:8 174:20 174:23
6/7/2024 250:9
6/7/24 250:4 251:20
60 311:22
60/40 268:5
60/45 267:25
62 4:12
65 4:14
69 4:17

7

7 5:3 91:16 113:1 115:9 140:25 248:5 250:19 253:9 256:1,4 280:23
7/15/2024 5:23
704.633.5244 3:6
71 208:24 213:20
75 4:19 20:20 21:13,16,25 55:5,15
75th 5:19 34:19 34:23 35:8,18 35:19,21 36:18 65:8 161:2

292:23
77 208:17 213:10
78 213:8,11,12
7897326 1:25 336:3
7:23 1:4

8

8 4:3 5:6 94:10 96:5,8 102:10 127:14 135:21 174:23 207:5,6 219:7 249:4 250:7
8/12/24 216:2
8/13/24 231:15
80 20:20 21:13 21:16,25 55:5 55:15 152:24 267:20
80th 5:19 34:23 35:10,20 36:9 36:10 161:2
82 4:22
843.438.7480 3:15
86 251:11,14
88 154:1,2,3

9

9 5:9 75:18 112:4,7 141:1 154:5
90 4:25 237:8
91 5:3
910.794.4800 3:11
95 272:10
96 5:6
97 155:12
9:02 2:1 8:4
9:52 65:17,18

a

a.m. 2:1 8:4 65:17,18,18,20 103:6,7,7,9 146:12,13,13 146:15
abbreviation 77:10 240:14
abide 12:13
ability 257:4 274:2,5 338:11
able 76:4 80:6 82:8,9 105:21 121:13 142:8 147:23 149:20 176:16 178:25 181:13 195:16 195:19 261:11 283:5 313:22
above 66:20 87:5 164:2 237:14 241:1
absent 125:20
absolute 27:13
absolutely 23:10 153:14 154:12 164:20 283:13 322:5
abstaining 236:21,22
academy 12:6,9 12:23 26:4 29:15,18,18 36:25
academy's 37:12 60:10
accepted 24:18 34:2,9,12 36:23 37:7,16 38:7,15 227:25 228:5,7 273:1 273:3 299:5
accepting 235:12
access 14:21 15:6,20,21,24 29:4 50:3 51:25 52:3,8 278:20 300:12 300:22 301:2
accessible 15:20
accommodate 85:5 194:4
accommodati... 28:5
accommodati... 24:10 85:16 194:16
accomplish 317:15
account 17:15 61:20 89:6 214:14,20 290:11
accredited 325:18
accurate 205:5 336:12 338:9
accurately 98:13 239:18 306:21
acquired 46:24
acronym 38:2
acting 18:13 19:23 268:25
activated 85:15
active 75:23,23 189:12 234:16 236:23
actively 16:21 18:17 19:4 124:14 190:1 191:13 210:8 234:4 235:5
activities 74:19 74:24 75:2 79:17 80:1 83:19 97:1,2,9 117:13 239:4

257:5
activity 94:18
actual 32:14 42:15 59:3 154:14 256:6
actually 10:3 10:12 11:5 12:22 28:9 36:24 40:15 46:3 51:7 86:15 121:14 157:7 174:20 175:10 188:25 203:1,2 208:1 208:3 235:14 253:9 268:17 269:23 271:4 285:16 294:15 299:8 321:10 322:7,19 324:10,18 325:9 327:18 330:17
adaptive 91:25 92:8,24 93:3,5
add 162:7 293:24 294:8 311:7,12
addition 264:11,12
additional 7:3 68:12 72:15 237:9 264:9 285:13 286:15 286:20 293:24 314:24 333:23
additionally 78:21 88:11 91:2 332:15
address 19:1 83:5 184:3 269:1
addressing 83:1,23 263:14
adequate 119:3 326:1
adhere 12:10
adjust 58:6,22
adjusted 58:3
adjustment 231:1
adjustments 58:15
adl 117:7 168:3 168:7,9,12 176:16 221:14
adls 78:23 79:4 79:14 105:19 117:22 167:23 168:2,4,13 176:12 193:1 193:20
administer 116:24
administrator 231:25
admission 239:1 255:3
admit 239:14
admitted 277:21
admitting 235:15
adopted 176:8
adversarial 44:18 47:8
adversely 101:6 102:3
advice 95:23
advise 99:1
advised 96:12 96:17,25
advisement 93:14,17,25 95:19
advisor 118:12
advisory 86:15 87:15 302:15
advocate 45:16 45:17 268:25
affect 101:6 102:3
affirmatively 98:7
afford 208:9
aforementionn... 91:4
age 209:4 214:2 214:13,19
agencies 284:3 298:13 299:2
agency 192:6,8 192:23 226:14 283:19
ages 197:10
aging 60:18,22 61:7,16 214:15 214:16
ago 42:20 78:14 265:19 265:22 269:18 277:12 279:3 279:20 280:17 322:6 324:19 324:21
agree 12:13 13:8 14:12,23 15:1 16:8,13 23:6,10,12 27:8 29:24 30:2,7,12 36:21 37:1,10 51:23 55:22 56:12,20 66:17 66:25 67:14 68:20,21 70:16 71:13,16 76:1 78:25 79:16 80:5 81:14 84:23 85:20 88:18 91:8 92:2 95:4 101:8 102:16 114:6,6 136:8 143:24 151:1,4

153:19 154:18 168:22 171:6 171:11 204:24 204:25 213:13 219:19 248:7 273:4 276:20 290:10 297:24 321:14 323:4 327:9,23
agreed 55:24 305:25
agreeing 67:7 276:15
ahead 149:16 203:7 331:8
aid 127:18
aide 283:23
aids 91:25 92:8 92:24 93:3,6
albuminuria 249:7
alcohol 236:22
alive 156:15,17 156:18
alleged 66:13 270:13,15
allied 48:8
allow 35:11 325:9
allowed 95:6 146:25 149:24 335:7
allowing 145:25
alonzo 105:24 106:13 108:11
alonzo's 106:2
aloud 309:8
alston 283:8
altering 306:15
alternate 87:8 87:10 88:15
alternative 183:3
alternatively 246:21
ama 35:24
ambulating 92:22
amended 11:14 288:12
american 294:15
amicus 23:2
amount 200:8
amounts 294:20
amputations 48:12
analyses 25:1 55:7 289:21 294:13
analysis 4:12 5:21 21:3,11 21:15 23:19 24:1,4,18 27:23 28:11 30:18 54:16 55:14 56:14 63:21 64:2 97:11 115:4 116:6 123:20 165:7 229:9,15 230:21 244:14 244:15 245:18 249:16 255:7 258:6,16 288:24,25 289:7,16 290:11,12,21 299:20 302:23 303:3 327:6,9
andres 135:9
andrew 98:23 99:4
andruska 196:4 199:3 200:23 201:6,8 201:14 203:25 204:7,24 205:3 205:21
andruski 83:12
annually 57:21 255:1
answer 16:24 37:18 54:3 57:8,10 61:3 67:2 70:19 94:16 104:4 107:15 109:3 120:9 126:19 128:16 136:6 136:23 145:4 145:13 150:24 152:2,6 174:7 175:14 181:12 181:14 182:2 184:24 185:13 185:15,19,25 186:4,8,15 203:6 204:13 225:20,22,24 229:22 231:5 232:14 241:16 242:21 265:18 284:11
answering 21:4 144:24 147:1 225:18 226:6 226:10
answers 120:8 186:12 202:22 203:3,8 204:7 225:25 226:4 242:22,23
anthony 280:14
anti 254:20
antianxiety 135:5
anticipate 100:23 241:13
anticipating 25:3 208:19 231:16
antirejection 253:12,15

254:13,15,18
anxiety 70:15 70:21 71:3 135:12,12,14 138:11 153:5 153:16,20,23
anytime 291:5
anyway 58:15
apart 84:8 90:18 91:24 92:7 93:4 101:2,22
apartment 279:9
apnea 71:12
apologize 287:15 331:2
apparently 75:22
appear 112:11
appearances 3:1
applicants 266:22
applied 265:16
applies 242:22 249:15 291:3,4
apply 23:8 127:20 288:24 302:24 323:9
applying 81:6
appointment 213:1
appointments 46:7
appreciate 9:17
approaching 213:11,12
appropriate 20:23 29:22 34:1,5 54:16 83:18 94:13,17 155:10 180:20 182:25 230:15 281:10,21 282:9,17 294:18 298:7 301:5 312:12 314:2
approve 46:3
approved 54:11
approximately 104:5 132:1 216:6
april 75:18 248:11 262:24
area 152:9 153:12 298:17
areas 279:22
argue 262:21
arguments 26:17
arrive 26:22
arrived 323:5
arriving 289:13
article 255:2
articles 162:20 292:13
articulated 296:8,14 297:10
ashley 167:1,2
ashley's 167:2
aside 19:19 69:16 82:15 91:15 96:2 157:1 210:7 223:19 263:17 276:22 323:15
asked 28:25 50:18 53:13,20 55:9 61:1,8 62:9 92:12 98:8 99:3 102:23 106:13 113:13 131:5 140:9 145:12 147:14 179:12 179:13,17 180:19 182:1,9 189:4 201:2 221:3 225:11 229:1 244:23 245:17 246:3 249:14,18 250:12 255:9 259:18 269:24 289:22,24 290:16 291:24 292:21 293:6 293:10 294:5 295:5 296:5 300:11 304:2 305:8 307:16 309:4 312:11 315:1,25 317:25 318:21 318:25 319:4,7 320:24 322:7 325:1,9 326:15 331:16
asking 26:13 45:1 62:13 72:19 83:21 89:7 94:8 104:16 141:8 142:11 163:13 184:6 197:11 197:25 205:9 224:12 230:24 252:11 262:1 290:18 297:7 316:17 317:10 335:5
asks 186:7 187:8
aspects 264:13 264:18,22
assault 90:23
assess 36:22 37:7,15 57:18 159:2

assessing 91:5
assessment 21:7 38:14 49:23 103:12 103:16,19 104:1 111:14 119:13,17 120:12 165:21 166:5,17 187:22 188:1,7 215:25 216:5 221:10 231:14 231:18,22 232:14 235:24 237:6 239:2 250:16 271:24 281:4,21 282:9 326:2 327:5
assessments 11:15 288:13
assigned 282:21
assigning 274:21
assignment 53:12 54:10,13 54:18,22 336:3
assignments 88:15
assigns 274:1 274:15 276:3 278:13
assist 85:17 117:12 120:11
assistance 84:21 85:18 127:19
assisting 125:19
associated 73:18 127:23 214:25 215:6
association 294:15
assume 9:9 85:1 246:9
assuming 51:5 51:18 59:7 98:12,12 117:18
assumption 183:9 246:12
asterisk 27:15
atenolol 91:1
ativan 70:14
attached 33:22 51:5,6,11 183:18
attachment 63:16 165:10
attacks 70:13
attempt 15:10 80:3 94:13,18 180:21
attend 274:5
attendant 21:22 31:15 179:23 180:5,8 192:15,22 197:3,5,9,14,22 198:6,8 199:24 200:13 226:11 226:16 241:1 255:16 257:6 260:10 296:10 322:22
attended 56:6 235:2 261:2
attorney 16:1 53:10 145:3 281:6
attorneys 16:5 46:10 53:15,22 54:5 63:4 72:14 107:18 107:21 132:20 132:24 134:6 170:11 323:11 323:13,22
attributes 66:13 90:19
august 165:22
authored 14:3
authority 13:6 118:23
availability 132:17
available 46:14 84:20 100:19 100:21 107:17 113:8 169:18 169:25 170:3 172:5,12 192:13 258:23 258:24 259:4 283:23 290:6 333:12
average 58:17 58:18
avocational 74:13
avoid 127:22 184:19
award 325:23 327:2
awards 321:1
aware 74:6,16 74:18 76:8,19 83:4,22 92:8 93:16 95:22 97:9 109:23 122:5 124:17 132:12 139:2 173:16,19 245:9 250:14 250:17 307:7
awry 40:9

b

b 4:10 89:24
back 10:1 11:6 23:3 39:3 53:4 58:5 60:9 63:8 65:14 68:14 71:7 89:14 93:10,20 101:4

102:1 104:12
106:21 131:10
131:21 146:16
148:3,8,20
159:24 160:25
165:9 199:14
203:4,14
204:14,16,17
217:25 219:5
247:2 253:17
253:21 265:19
269:23 271:4
271:11 274:11
279:2 281:23
285:9,16
310:14 317:3
327:6 328:25
329:3 331:18

background 53:14 271:17 272:9 319:10 326:12

backwards 124:3 248:20 332:20

bad 76:6 79:23 80:1,2 167:12 167:13 180:10

bag 74:21 120:10 126:24 127:21 128:13

balance 92:22 267:24

banks 53:4

baptist 81:9 182:14

base 318:22

based 27:6 28:12 56:14 60:21 89:21 95:15,16 118:2 133:11 138:16 189:10 209:8 213:16 229:21 230:14 231:4 232:19 239:9 241:22 245:18 246:18 263:13 276:1,4 281:7 284:22 285:2 290:14 294:6 301:22 305:21 311:10,11,21 312:5 314:6 317:9 319:9 320:8 329:10

baseline 60:18 60:20 61:15

basement 194:2,9

basic 168:4,13 239:3

basically 26:24 49:14

basing 87:9

basis 30:10 145:2 150:7 178:16 254:8

bates 251:1,9

bathing 168:14

bathroom 168:15

bearing 98:17

bed 79:10 180:2

beginning 96:20 256:16 285:6,8 325:20

begins 75:17 97:15 113:5

behalf 2:4 8:16 327:10

behave 283:20

behavior 270:12,16

believe 22:23 35:6 36:12 62:22 92:5 105:7 112:7 115:6,9 128:11 155:3 167:6 176:7 231:11 261:6 275:17 297:12 310:16 319:22

believed 269:2

bell 3:13

belllegalgrou... 3:16

ben 3:20

beneficial 172:8 180:10

best 36:17 113:8 119:11 254:21 265:21 320:3 338:11

better 14:13 36:12 79:9 168:22

beyond 24:24 80:7 85:14 110:21 208:9 230:19 264:12

bids 60:3

bilateral 90:22

billing 58:9 120:1

bills 36:6

bit 27:12 28:9 40:8 45:8 84:24 166:18 210:5 235:8 236:8 239:6 255:4 284:7

bladder 39:16 39:17,22,22,23 40:1 41:20 66:22 68:18 70:12 104:10 105:2,14,25 110:4,10,11 111:8,18,21 113:7,11 115:1 129:9 130:8,21

136:9,19,24 137:4 138:12 158:12 159:17 304:8 305:12 305:19 307:5 307:10,17 316:25 317:17 317:22 318:8 318:16
blames 137:3
blank 220:19
blanks 225:16 226:7
blind 269:11,19 325:1
blood 251:22
blown 42:17
blue 149:6
bmps 62:12
board 16:9,11 173:1,4,8,13 302:16
bockenek 279:13,14 280:2
body 89:11,15 127:22,24 128:5 138:7 152:15 193:22 195:22 272:16 325:17,21 326:3,20
body's 195:21
bolded 219:10
boldizar 71:9 71:10
boldizar's 71:19
book 22:10,20 22:22 23:4,5 25:18 26:2 58:20,24,25 59:8 163:12 293:5
books 22:19,24 162:20 292:11 294:4
bottom 70:7 73:2 81:21 84:12,16 90:14 91:22 97:15 100:25 123:10 127:16 248:17 250:25 251:10 271:20 306:7 328:24
box 3:20
brace 91:25 92:8 93:5
brain 39:6 40:7 40:9 42:4,8 188:23 210:24 211:7,18,24 212:14 213:2 214:2 215:1
break 9:13 10:22 65:11 146:19 160:16 215:14 257:17 291:11
breaking 103:2
brief 23:2 146:18
briefcase 291:25 294:6 331:19
bring 9:18 49:19 294:7 334:19 335:3,6 335:7
broad 176:4
brood 287:19 332:1
brought 9:20 10:4 150:25 161:1 164:21 267:14 292:1,7 323:25 334:11
bruce 4:20 5:22 75:12
bucci 249:5
build 48:6
built 17:24 18:3 22:2
bullet 305:25
bunch 266:22
burden 126:2,5
burns 48:12
business 53:19
butchering 248:19
butler 3:9
bypass 102:1

c

c 4:1 8:1
calculated 154:21
calculation 303:10,18
call 11:11 18:23 29:15 37:21 59:16 198:20,22 232:1 297:5
called 42:13 47:23 53:1,2 115:3 254:16 264:22 299:2
calls 16:1 54:1 54:25 76:13 107:13 169:17 169:21,22 170:18 298:9 298:12,24
camp 1:4 56:7 318:8 336:4
cancer 39:16 39:17,22 40:15 41:6,8,8,10,11 41:13,15,20 43:12,13 66:22 68:13,18 70:12 77:17 105:25 110:11 111:22

113:7 115:1
130:7 138:12
172:18 181:6
262:16 287:24
307:17 310:5
316:25 317:17
317:22 318:8
318:16
candidacy
211:24
candidate
100:17 212:24
214:1
cane 92:5,6,7
93:5
capable 181:7
282:15,16
capacity 37:15
38:14,22 75:23
80:11,17 81:5
83:17 86:25
87:7,18 95:7,9
98:21 182:22
229:9,15
230:20 302:23
321:18
caption 336:4
captioned
336:10
car 195:16,17
carbidopa
200:9
cardiac 91:1
101:5
care 5:25 6:4,6
7:9 9:20 10:1,2
10:3 11:6,10
12:1,2,6,10,15
12:20,24 13:1
13:2,6 14:17
14:20,21,24
15:7 17:1,10
17:22,24,25
18:3,14,17,19
18:25 19:25
20:4,8,9,19,21
20:21,22,22,24
21:5,8,14,22,23
22:2,5,24 23:8
23:8,14,16,20
24:1,6,15,21
25:5,7 26:2,9
26:20 27:1,6
27:18,24,25
28:7 29:4,19
30:2,5,9,10,13
31:15 34:9,22
35:5 36:15,18
39:14 41:12,19
41:23,25 42:1
42:5,18 43:11
43:25 44:21
45:2,10,18
46:1,4,6,15
47:20 48:4,5
53:21 54:12,15
54:20 55:6,11
55:16,18,21,24
56:2,11 57:24
60:19,19 61:5
61:7,25 73:18
74:2,3 80:13
80:15 87:3,20
95:22 99:15,19
99:21 101:13
101:15 111:2
113:8 114:9
116:20,21,23
116:24,25
118:6,17,24
119:3,6 125:19
126:9,11,13,23
128:15,22
129:3 130:19
131:4 132:18
139:3,9 156:10
170:5 171:14
172:3 173:15
177:19 179:3
179:23 180:5,8
187:20 190:8
192:13,16,22
197:3,5,9,14,23
198:6,8 199:24
200:13 204:19
205:15 206:1,9
210:10,15
213:6 214:14
214:18 217:7
218:15 221:10
224:1,8 226:12
226:16,22,25
227:3 228:8,11
230:23 231:6
235:3,17,23
236:2,8 238:2
238:3,17 241:1
242:19 244:25
245:14 249:15
249:18 255:17
257:6 258:18
259:3,20
260:11 261:13
264:7,24
265:15 266:22
269:10,22,24
269:25 270:3
271:19,25
272:7,9,10
273:1 279:7,23
279:24 283:19
288:1,21 289:1
289:5,11,12,25
290:23 292:12
294:10,18
295:1,7 296:10
296:23 297:20
298:3,5 299:2
299:4,6,14,14
299:19,19,23
299:25 300:4,8
300:18 301:12
309:15 312:7
312:13,21
313:18 314:1
314:19 315:5

315:13,17
316:23 317:4
317:16 318:15
318:17 321:17
322:11,22,22
323:1,8,16
324:1,16,17,25
325:6,7,10,18
325:19,20
326:1,8,9,19,22
327:13,15,19
career 38:12
39:10 44:15
231:1 267:15
321:24 322:23
caretaker
260:18 261:3,8
carolina 1:1,15
2:7 3:6,10,15
43:16 268:7
273:13 321:1
321:16 338:3
338:19
carpenito 3:19
8:15,16
carrier 44:24
carroll 4:15
carry 257:4
carson 3:20
carter 277:3
case 1:4 5:17
10:4,25 16:5
16:18 21:15
26:2 39:9
40:23 41:10
42:6 43:16,21
43:22 44:10,12
44:23 45:6,8
45:17,21 46:13
47:21 48:15
49:9 50:2,5,15
50:23 51:14
52:25 60:2
72:10,13 85:1
122:6 129:16
137:8 140:22
155:3 216:19
267:13,18
268:11,13,15
268:17,17
273:22,24
275:23 277:11
278:19 279:2
281:2 282:7
283:10,25
284:22 292:12
300:13,19,22
309:6 320:17
322:3,8,16
323:24 332:5
336:4
cases 1:6 13:22
15:18 39:12
40:24 48:10
49:17 51:4,17
53:20 55:3
213:17 273:7
287:20,24
288:10 321:3
322:12 323:10
cash 294:20
cat 159:6
catastrophic
39:8,9 326:2
caught 32:12
329:2
causation 5:9
cause 71:12
74:21 91:10
338:12
caused 90:23
130:7
causing 40:2
cbcs 62:12
cdk 248:18
cease 99:1
ceiling 34:24
center 234:19
234:22 266:19
266:25
centers 39:14
certain 20:23
20:24 21:18
23:21 59:25
163:5 168:4
196:17 296:25
300:13 301:18
315:12,13
323:12
certainly 24:24
29:1 100:21
101:11 104:25
112:23 114:17
153:12 226:5
276:16 290:7
291:6 297:16
309:2 312:9
320:12 326:21
333:24
certainty
242:20 243:12
certificate
118:6 264:23
265:16 270:21
338:1
certification
173:5 266:17
269:22 302:16
324:24 325:16
certified 16:9
16:11 173:2,8
173:13 264:1
325:19 326:7
326:17
certifies 324:25
certify 338:4,12
certifying
325:21
cetera 79:8
118:1
chair 207:23
208:4 209:20
challenge
327:22
challenged
34:11

chance 110:17 110:22 143:21 143:25 185:25 278:15,16
change 32:20 33:4 54:22 56:18 57:3 95:19,24 100:22 158:13 160:7 173:14 176:3,15 200:4 203:6 204:5,5 236:21 243:3 251:21 256:19 257:5 306:8 329:9 337:3,5 337:6,8,9,11,12 337:14,15,17 337:18,20
changed 32:21 138:8
changes 174:4 174:10,25 175:3,20 177:7 177:14,22 194:4 236:13 236:16,19 256:19,23 333:19 336:12 336:15
changing 249:21 307:3
charge 195:15 237:8
charges 59:14 59:17 163:19 254:20 255:3,9 284:25
chart 295:21 313:22 314:16 330:1
charts 295:7,9 310:18 313:14 317:19 333:20
cheatam 325:23 326:4 327:1,10
check 159:19
chemo 40:16
children 262:16
choose 35:3 289:18
chores 263:1,10
christine 1:23 338:2,17
chronic 91:3 102:1 180:23 248:1,21 252:23 319:1,6 319:10,11,16 319:18
church 75:24 81:9 182:14
circumstance 303:8
circumstances 179:9
cite 10:1 25:24 67:5
cited 10:6 26:1 26:5 59:3 135:1 162:19 162:20 281:7 327:2
cites 271:21
citing 101:14 155:25
civil 2:4 146:21 323:9
ck 248:18
ckd 248:21 249:7
claim 66:9,13 91:5 102:13
claimant 44:20
claimants 149:25
clarification 118:4 313:23
clarify 31:4,7,9 31:24 32:7 114:16 292:3 295:8 304:11 312:18
clarity 288:15
classes 260:21 261:2 264:17 264:19
classifying 78:9
clayton 275:14
clcp 325:17 326:4
cleaning 117:14 168:12 168:13 237:7 237:11,19 238:10 260:2 262:11 263:6
clear 122:25 126:12 133:21 141:5 171:1 245:20 255:5 261:15
clearly 8:25 133:17
clergy 75:23
clerk 81:22
client 16:1 20:2 45:10,12,14
clinic 249:6 298:11
clinical 317:11
clinics 298:10
cll 80:8
closet 308:18
cna 117:8,9,16 117:23 118:3 283:18 284:22 285:1
code 32:14,21 32:25 33:1 328:6,24 329:19

codes 32:9
coding 7:8 32:14 329:13
cognitive 213:14 214:3
colleague 267:16
collectively 239:10,15
column 64:12 330:11
combined 35:21
come 65:14 134:14 173:12 203:15 208:5 214:16 250:11 269:9 295:11 333:23
comes 162:7 270:20
comfortable 185:23 225:17 226:9
coming 28:19 40:17 43:9 45:19,20 64:15 64:25 153:6
commencing 2:1
comment 178:24
commission 6:14,16,18,20 6:22,24 7:1 51:6 268:7,14 268:21 269:5 269:21 271:15 272:4 273:2,14 273:21 274:1,3 274:15 276:3 276:20 278:5 278:13 279:24 321:2,16 322:1 322:13,14 323:1 325:15 326:17
commission's 51:15
commissioner 269:20,21 322:14 325:23 326:4
committee 325:13 326:23
common 60:6,7 111:2 158:11
commonly 25:23 28:6 178:20
communicated 279:12
communicating 46:9
communication 306:15
communicati... 54:2 55:1 107:13
comp 44:10,11 44:12
companies 49:9
company 46:10 47:23 178:15 207:21 284:24
compare 287:8 328:25
comparison 205:25
compatible 80:8
compensation 321:2 323:8
competencies 13:9 29:22 31:1
competent 119:6
competitive 83:16,19 180:21 181:1 186:10
complaints 221:13
complete 7:7 104:13 140:11 193:1 231:22 296:21 338:9
completed 28:13 102:24 103:11 119:12 159:5 165:21 215:25 224:5 244:16,18 264:23 265:23 281:4 299:22
complex 209:10
complicated 48:10
complication 39:19 57:3 191:14
complications 184:20 249:8 264:21
component 230:23
components 92:13
composed 186:4
compounding 214:16
comprehensive 271:25 279:10
concern 126:9 194:11 196:20
concerned 194:18
concise 272:2
concluded 335:16
concludes 335:13

conclusion 102:12 272:2 281:7
conclusions 18:9 306:2,22
condition 40:18 61:23 68:19 83:1,5,23 169:5
conditions 92:25 93:1 100:10 309:24
conduct 27:19 28:1
conducted 188:13 216:12 231:13 279:9
conference 77:14 196:9
conferences 56:6
confidential 54:1,25
confirm 147:20 329:12
confirmed 200:20 295:12 329:7
confirming 209:4
conflicting 88:19
conflicts 113:25
confused 25:18 289:16
confusing 294:1 331:7
connection 237:22
consensus 12:18 17:2 21:6 23:7,13 25:10,13 26:7 26:22 27:2,3,9 27:14,16,17 30:9,22 34:10 34:16 214:19 214:21 270:22 294:23 295:2 300:10
consequence 39:24
consequences 184:20
consider 13:5,7 26:7 38:9 43:4 66:16 87:23 118:23 121:7,9 121:11 174:3 192:12 215:5 229:11 264:6 264:15
consideration 276:7 281:11 317:13
considerations 17:17 274:4
considered 7:12,14 63:18 91:5 118:18 165:11 212:13 286:24 287:6 289:10 307:20 332:3 333:10 333:16
considering 66:9,12 162:9 237:11
consisted 131:18
consistent 35:12 36:10 62:11 280:1 309:14
consists 68:19
constant 266:1
constraints 103:15
consult 15:8 50:1,8,15,22 68:24 83:14 106:10,13 107:18 108:8 108:20 109:20 112:22 131:7 169:13,25 182:24 204:10 212:24 217:5 229:21 244:17 245:15 247:3 258:20 259:1,5 300:3 301:5 320:13
consultant 191:3,19 330:4
consultation 83:11 93:21 127:17 133:16 157:11 170:4 199:3 246:17 253:13 297:6 306:20
consultations 213:17
consulted 18:5 48:7 76:21,24 86:1,3 107:8 176:14 190:9 190:22 195:3 198:16 216:20 217:11,13 252:7
consulting 16:8 16:13,20 51:22 52:6,12 56:14 77:3 95:21 191:18 195:24 196:6 233:7 234:2,24 235:20 253:4 295:12,24 301:5,10,24 315:8
consults 209:8 295:19 296:22

contact 59:9 82:5 108:24 169:19 284:1 284:24 300:6
contacted 106:17 306:9
contain 271:25
contained 293:12 295:21 298:21
contains 271:24 327:5
contaminated 66:14
context 39:17 39:18 110:15 134:2 139:25 177:14 256:25 281:24 288:21 288:23 319:19
context4 37:6 59:12 64:4,15
contingent 110:4
continue 81:12 84:19 85:13 169:3 261:12
continued 70:15 86:12 113:9 114:22 114:24 333:15
continues 74:13 75:22 196:11,12,22 278:9 315:15
continuing 196:25
continuous 239:24
contract 49:14
contracted 48:22 49:1,4 49:10
contractor 48:3 48:18
contraindicat... 75:21 76:9,20 77:2
control 310:4
conventional 324:23
conversations 301:23
converse 281:16
conversion 58:5,20 59:6
conveyed 95:20 306:24
cook 262:25 263:9
cooking 117:14 168:12
cooper 244:19 246:8,17,25 247:4,18 249:11,19 253:13 255:21 255:23,25 257:9 259:10 289:23 290:9 290:14
cooper's 244:24 245:19 246:3 247:14 250:16 255:10 263:13
cooperative 77:19
coopers 255:11
coordinating 46:1,3,6,15
coordination 212:5
copies 10:22 63:2 285:18
coping 310:1
copy 124:5 131:12 161:4,5 161:9 163:4 164:9 199:15 305:3,4
cord 39:6,21 41:22 49:25 279:15 299:25 300:1 325:8
corner 271:2,3
coronary 102:1
correct 9:7 12:7,12,15,20 13:3,14,17,20 13:23 14:1,9 20:3,14 25:25 27:20 28:16,22 29:6,23 30:11 30:15,16,19,22 31:2 32:14,24 33:9 34:3,13 34:19 36:13 46:21 50:5 56:11,15,19,24 57:19,22 58:4 58:17 59:10 60:23 64:6,12 64:16 72:6,10 74:8 77:3 79:13 82:6 84:16 86:19 87:3 88:17 89:9 90:12 96:14 97:21 98:1 99:20 103:13 105:25 106:11,14,22 107:9,24 108:12,15,21 108:25 109:16 109:21 110:1,5 110:11 111:14 112:2 113:15 115:11,19 118:7,14 119:3 119:10,14 120:19,23 122:1,10,13 125:13,16

126:17,23
127:1,4,13,24
127:25 129:6
129:10 130:17
130:18,21
131:7,19 133:3
133:9,13,16,20
133:21 134:8
135:9 137:1,4
137:8 138:13
138:21 150:13
150:14 152:19
153:21 155:22
156:7 159:3,18
162:16 165:22
169:14 171:15
171:19,23
172:4,10
173:22 174:1
176:9 179:8,15
181:7 183:15
184:8,14,21
185:10 186:1
186:13,16
187:23 188:14
189:9,24 190:6
190:16,25
191:8,11,17,22
193:3 195:8
196:7,23
198:18 201:6,9
201:12,15,21
202:8,11,14
203:25 204:21
205:19,22
207:11,16,25
208:24 210:21
210:25 211:4,7
212:10 213:9
213:21 214:3
214:14,20
216:1,18,20
217:17,20
218:4,7,20,21
218:25 219:17
220:4,8,11
221:22 222:7
223:3 224:2,15
224:22 226:12
226:22 227:9
227:13,15
228:16 229:6
230:8 231:14
234:3 237:19
238:5,23,25
239:4 240:12
240:17 244:22
245:22 246:10
246:13 248:9
248:13 249:8
250:2 253:15
254:14 255:23
256:3,14 258:9
258:13,18
259:3,20
260:18,22
261:3 262:12
262:17,20
263:11,19,20
263:24 264:5
264:24 265:3,7
265:11,16,20
265:24 271:17
272:5 277:9
280:6 286:15
288:17 301:14
305:25 324:5
327:8 329:11
329:13,20
corrected 329:3
correction 329:8
corrections 336:13
correctly 46:18
49:25 54:9
83:12 127:21
151:5 181:3
216:25 237:16
246:23 276:1
278:10 281:13
284:5
correlate 206:17
cost 4:12 5:21
21:3,10,15
23:19,23 24:1
24:4,17 25:1
27:23 28:11,25
30:18 33:3
54:15 55:7,10
55:14 56:14
59:10 63:21
64:1,6,11,15
97:11 111:13
115:4 116:6,15
122:23 123:19
128:24 138:20
139:1 154:10
154:21 155:5,6
165:7 179:5
207:16 210:24
244:14,15
245:18 249:16
249:18 254:11
255:10 258:6
258:16 288:23
288:25 289:1,7
289:16,21
290:12,14,21
299:20 312:25
313:14
costing 10:11
10:17 23:21
24:20 25:6,7
28:13 30:23
35:15 161:23
162:2 292:24
329:12
costs 33:4
34:19,24 36:22
37:7 57:18
122:15 159:3
254:6 298:4,8
298:14 300:7
311:21 322:22

counsel 8:6 54:2 55:1 107:14 141:23 147:2 177:20 323:25 330:19 332:17 338:12
counseling 73:22 120:19 121:1,5,20 151:25 152:4 152:19 157:16 184:5 220:11 220:17 221:4,8 231:1 232:11 232:17 264:13 267:15 302:16
counselor 44:15 61:6 81:22 85:24 86:8 121:23 152:11 157:13 221:6 231:2 289:4
counselors 272:11 326:10
count 205:1
counted 205:16
countered 57:14
country 39:13 47:23
couple 49:9 107:4 322:6 334:3
course 11:7,9 14:11 34:15 36:15 52:8 60:21 185:23 194:10 267:1 287:25 289:2 309:17 333:22
court 1:1 8:7 141:1 145:4 314:5,7 331:13
courtroom 9:7
courts 149:23
covered 229:17 323:12,14,16
covers 9:23
coworker 85:18
coworkers 84:21
cpap 239:24
cpt 32:9,14 328:6 329:10 329:11,19
crafts 74:15
crc 288:8,8
created 22:14
creating 44:21
credential 269:23 325:18
credentials 267:5
credibility 17:12
credible 276:5 322:15
criteria 24:6
ct 160:11,14
cumulative 314:7
current 12:17 36:14,17 45:15 46:24 59:5,8 169:9 180:23 246:18 254:25 257:3,15 267:10 277:22 279:9 280:2 297:11 310:24 319:24
currently 93:7 111:21 120:25 124:10 125:15 172:13,21,24 173:8 177:23 179:22 210:24 211:6 213:4 224:22 237:7 237:18 255:12 255:16,19 260:1 263:15
customary 35:25 163:19 294:11
customer 81:23 82:13
cut 250:25 251:10
cv 1:4 9:22 46:25 265:1
cystectomy 7:7

d

d 8:1 48:25
d.c. 3:21
daily 79:17 80:1 97:1 115:15 117:14 117:19 239:4
damage 11:15 288:12
damages 66:13
daniel 251:24
data 64:6 65:2 65:4
database 37:5 51:6,16 64:25 299:9
databases 64:18,19,23 65:6,8 298:9 298:18
date 8:4 63:25 71:2 80:20 94:4,8 106:5 134:16 135:13 159:21 169:24 199:5 219:1,6 219:11 250:19 337:22 338:5
dated 180:17 306:25 307:1

328:21
dates 292:15
daubert 327:22
david 105:24 108:14
day 31:17,18 81:10 166:14 169:8 182:20 257:5 283:4 295:3 324:19 329:4 330:6 336:17
days 76:5,5,6 79:3,4,8,9,10 79:14,14,20,23 80:1,2 167:12 167:12,13 168:4,18,20 178:3 180:1,10 255:3 268:10 322:6
deal 53:17,18 152:12,12
dean 168:23 180:15
debate 28:10
deborah 4:15 4:18,20
decade 16:22 18:20 173:17
december 46:23 47:3,5
decide 60:4 86:14 88:22
215:7 289:18
decision 101:11 102:5,9 198:14 215:8
decisions 275:2
declaration 336:7
declare 336:8
decline 169:3 213:14 214:3 241:18 246:18 248:3
declining 247:15
deemed 269:5 303:3
deep 40:7 188:23 210:23 211:7,18,24 212:14 213:2 214:2,25
defendant 3:17 44:19,20 47:11 50:4,11 89:4 270:13 332:4
defendant's 14:21
defense 14:25 15:3,5 17:21 18:8 49:23 57:24 300:18 301:9 307:9
defer 80:16 118:3 303:9
313:5
deferred 115:17 121:23 155:1,9 157:15 211:22
deferring 158:6 212:7 313:3
define 44:8,17 85:25 218:10
defining 35:24 90:1 162:13
definitely 222:21 287:10
definition 36:7
degenerative 90:25
degree 227:19 242:19 243:12 247:10 263:18 263:21,23 305:20 306:3
delphi 26:21
dementia 40:12
demonstrated 81:5
denial 235:8 239:7
denied 73:23
department 3:18 8:13 45:24 46:2,11 49:3 285:3
depend 85:3
dependent 211:3
depending 44:8 56:25 139:7 283:21
depends 259:19
depo 51:7
deponent 338:6 338:7,10
deposed 106:8 109:23 132:12 321:23
deposition 1:11 2:2 5:12,14,16 5:23 6:2 11:3 11:23 71:20 73:16 75:18 97:19 99:5,13 100:13 106:2 109:8,25 127:7 127:11 129:5 129:12,13 130:24 132:7 134:8,10,17 137:5 138:2 139:17,24 140:1,2,22 141:19,20,21 143:1,3,9 144:12 145:10 145:21 147:9 149:11 150:1 150:10 156:16 159:13 160:1,9

173:21 174:1 174:17 199:17 200:14,20 220:21,22 245:22,25 246:6 251:25 256:14 259:12 259:15,24 260:19,23 261:4 285:8 308:5 316:7 318:4 321:19 326:14 329:25 334:12 335:14 335:16 336:1,9 336:14 337:1 338:5,9
depositions 20:1 51:16,19 97:24 111:11 134:15 333:8
depression 136:8,16,23 138:12 153:6 153:17,20
deputy 322:13 326:4
derives 171:16
dermatologist 191:10,17
describe 255:9
described 97:2 136:15 227:20
describes 74:12 308:11
description 4:11
desk 292:18
despite 74:11 239:23
detail 55:18 108:18
detailed 243:10
details 117:5 182:16 248:8
determination 115:17 157:15 159:1 303:16 314:6
determinations 158:17
determine 56:9 67:11 95:8 116:10,19,22 158:15,23 163:19 169:12 196:10 278:8 284:25 298:4 299:3
determined 116:14 122:10 122:16,24 138:25 150:21 212:1 237:12
determining 57:11 239:17
deutsch 5:15 20:13,14 21:13 22:10,14 42:22 43:4,8 118:6 118:13 139:2 139:17 153:19 155:21 265:12 318:18
deutsch's 42:23 265:4
develop 40:10
developed 40:23,25
development 23:15 30:1,5 113:11 305:12
device 211:25
devices 59:20
diabetes 62:6 101:4
diagnosed 13:19 42:2,11 66:24 67:19 201:24
diagnoses 264:20
diagnosing 136:16
diagnosis 39:18 41:22 42:9,10 42:15 43:14 60:24 61:3,8 61:13,24 62:1 62:9,14 66:22 68:8,10,12,13 70:12 80:8 89:15 137:11 180:25 184:18 186:9 241:23 262:16 316:25 317:18,22 318:16
dialysis 246:22 253:2 260:18 260:22
diane 4:23 6:1
die 269:3
differ 279:23
difference 32:18 173:6 193:16 329:19
different 17:5,6 17:13 27:23 33:3 38:21 39:13 65:14 77:16 114:11 114:14 161:25 175:21,23 200:21 203:22 214:15 264:20 284:2 298:15 308:22 323:13
differing 205:14
difficult 35:10 57:9 167:3 189:21 197:8 198:2 209:22

210:4 241:17 287:14 298:14
difficulties 40:3 92:4 127:23 128:6 179:18 214:16 235:15 238:13,15 239:3
digit 32:8 328:6 328:23 329:10 329:19
digital 266:10
dimonte 50:14
direct 192:24 194:14 284:1 317:13 329:23
direction 150:16
directly 95:1 104:20 167:7 188:20 202:20 217:6 293:3 298:10
disability 44:10 128:17 152:10 152:13,16 214:17 264:18 264:22
disabled 302:6 303:4
disabling 101:1 101:21
disagree 13:12 68:22 71:4,17 88:17,18 97:6 137:22 138:2 145:16 270:15
disagreed 89:8 270:12
disagreeing 17:18
disagreement 85:23
disagrees 326:4
disc 90:25
discharged 249:6
disciplinary 267:8
discipline 16:12 173:2 263:22 294:25
disclosed 10:9 134:2 286:23
discontinue 83:18
discount 294:20
discounted 294:19,24
discuss 115:2 177:19 256:2 264:20
discussed 68:24 115:3 158:10
discussing 55:4 89:12,13 112:14 146:19 271:16
discussion 148:16
disease 14:8 40:6 41:24 42:6,12,16 83:23 90:25 94:15,20 195:7 195:13 200:4 212:15 237:13 237:22 239:22 240:9 248:1,9 248:18,21 252:24 319:2,6 319:11,11,16 319:25 320:4
diseases 206:2
disorder 90:21 201:10,11
dispatcher 230:7
disqualified 322:25 327:18
disqualify 301:1
disruptive 239:23
distinction 14:18 20:6 23:18,25 52:7 52:14,19
distinctly 69:9
distinguish 19:10,21 20:24
distinguishes 19:17
distress 74:22
district 1:1,1 141:1
divergence 89:6
divergent 17:3 17:15 86:6,22 87:1 249:11,14 288:17,20 289:11,17 290:2
diverging 289:7
diversion 113:12 175:17 305:13
divert 41:12
divorce 128:18
dk 248:22
dme 21:22 298:12
doc 18:4
docs 11:2
doctor 14:16 16:10 17:8,8 19:7,12 21:9 24:25 25:5 32:12 48:7 50:24 57:13 68:24 69:11,12 76:21,24 80:17 86:2,4,11

88:20,21 89:3
89:4,11,13
101:14,16
102:9 110:24
116:14 117:23
124:17 125:11
154:24 155:6
169:11 173:12
173:13 176:14
177:13 183:7
190:14 191:3
191:18 197:2,7
198:5,10
203:10 204:20
208:2,16 211:6
225:16 229:9
229:22 236:6,7
238:17 261:21
281:25 282:11
282:13,15,20
295:12,12,24
296:7 297:4,7
297:12 300:3
302:18,25
312:14 329:2
330:4

doctor's 69:4
138:24 177:16
276:13

doctors 15:19
18:1,4 61:1
62:13 88:24
89:8 169:25
190:9 208:17
217:19 218:14
221:16,20
242:5 243:18
274:12,24
296:18 303:6

documate
75:20

document 1:5
5:19 6:14,16
6:18,20,22,24
7:1,3 13:10
27:4 63:20
66:20 69:16
82:15 90:24
91:14 96:2
112:8,9 140:4
141:7,9,11,16
142:1,9,12,15
142:18,22,24
143:12,15,22
144:1,7,10,14
144:21 145:1
145:25 146:23
147:6,9,15
149:12,23
161:1 163:2,3
163:8 165:4,9
187:17 204:14
244:11 251:5
258:3 271:5,7
273:10 275:8
277:5,14
280:19 285:4
285:10 292:4
292:20 314:20
314:22 328:17
334:8,11,20,24

document's
57:21

documentation
252:16

documented
67:15 75:21
76:8,19 77:1
87:15 91:13
131:13 167:25
250:18 255:14
260:13

documenting
252:23

documents
11:2,6 55:23
56:1,4 92:11
129:16 147:1,3
150:1 331:20

doing 39:10
41:17 44:2
79:25 80:3
117:10 128:23
156:10 168:3
179:3,18
182:20 189:19
195:18,20
200:10 211:13
224:23 226:1
229:8 245:13
261:12 267:15
313:17 315:5

dollars 255:1

dose 200:9

dosing 253:19

double 128:8

doubts 212:13

douglas 5:4
280:15

downhill
212:19

dr 11:9,12
20:13,14 21:13
22:14 31:12
42:22 43:4,8
69:13 71:9,10
71:19 82:21
83:12 89:22,24
90:7 93:22
94:2 98:23
99:4 105:24
106:2,13
107:11,23
108:4,8,11,14
108:21 109:15
109:17,21
110:8 111:7
112:1 115:13
115:17,21,24
117:11 118:6
118:13 121:19
126:16 127:17
129:9 130:8,23
131:5,16 132:6
132:14,25
133:2,13,15,19

134:23 135:4,9
137:3,8 139:2
150:25 153:19
155:21 157:11
157:15 158:4
159:12 167:2
168:23 169:2,6
169:14 170:3
170:16,23,25
171:6,8,15,18
171:22 172:9
172:13 173:7
173:21,24
174:3,16
180:13,15,19
181:5,9 182:3
183:1,14
184:23 185:12
186:12 191:2,6
196:4,8 198:17
199:3,17
200:23,24
201:6,8,8,14
202:7,17
203:25 204:7
205:3,4,21,21
211:10,17
213:25 216:22
217:14,17,22
217:25 218:2,3
218:6,19,24
219:16,19,21
219:24 220:3,6
220:18 222:3
222:20 223:12
223:13 225:11
225:12,13
227:12 228:10
228:12 230:14
230:19 233:22
234:1 235:7
237:14,23
239:1,11,21
240:7 242:15
244:19,24
245:19 246:3,8
246:17,25
247:4,14,18
249:5,11,19
250:16 251:24
253:13 255:10
255:11,21,23
255:25 256:3,9
256:10,13
257:9 259:10
261:19,22,23
263:13 265:4
265:12 276:7
276:15 279:13
279:14 280:2
288:3,4 289:23
290:9,14 304:7
305:9,18 306:6
306:15 307:3
309:10 310:7
310:25 312:6
312:25 317:2,5
318:6,18,21
328:7
drafted 10:18
dramatically 58:14
draw 52:7,14 52:18 141:25 142:20 298:7 331:6
drawing 20:6
drawn 14:18
dressed 117:16
dressing 117:25
drive 3:10 105:21 195:17 195:22,25 196:11,13,15 196:17,21 197:1
driving 105:21 195:16 196:5 196:10 239:4
drs 204:24
dual 263:21
due 76:25 94:20 110:10 127:22 128:4 136:9 184:18 191:14 237:13 238:18 242:1
duly 8:19 338:6
duration 157:16 159:2 310:24 311:13
dwyer 157:18
dyer 4:13,18 5:13 7:5 62:23 63:22 69:24 70:13 73:2,19 119:13,16 120:4,19,25 121:21 123:13 123:17,19 124:10 126:22 127:18 128:21 130:20 131:8 133:3 134:24 135:3,11 138:4 138:11 139:3 152:18 156:6 157:3,12,18 160:2 287:17 288:5 290:1 307:17 308:6 308:12 309:14 309:18 310:8 311:1 315:14 316:14,23 317:16,20 318:4
dyer's 71:12 123:15 124:22 124:24 127:6,8 128:12 129:5 132:17 133:11 137:23 159:17 309:6 310:14 311:13 315:2

316:1,6
dynamic 314:20

e

e 4:1,10 8:1,1 37:14 38:6 81:8,8 123:2,2 135:25 324:4
earlier 25:15 35:2 47:22 55:5 102:6 137:5 167:6 192:11 244:21 260:7 275:1 294:17 302:14 303:20 326:9 328:21
early 78:2 103:12 227:18 228:6 295:4 300:8
earn 80:17 274:2
earned 81:9 118:5 182:20
earning 37:15 38:14,22 75:24 80:11 86:25 87:18 89:23 98:21 182:22 229:8,15 230:20 302:23
easier 15:2 263:2,11 292:9 293:4
eastern 1:1 77:14,19
easy 207:8 292:8,14 335:4
ecog 77:5,8,18 77:24 78:4,8 78:10
economist 9:21 11:8 22:18 31:22 58:10,14 287:16,19 303:10,14,15 303:21 331:7 331:23
economists 331:25
edition 12:16 13:3 25:12,14 25:16,17 26:4
education 83:3 85:13 105:22 221:14
effects 309:16
efforts 169:16
either 18:6 77:13 226:8 272:10,11 295:11,24 298:22 301:23 311:22 321:17 326:9
elaborate 281:17
element 40:11
elicit 297:3
emailed 202:18
embark 193:6 193:11
embarking 267:15
empirical 26:22 27:5 36:5
employable 50:20 80:19
employed 283:19
employee 48:19
employer 84:14 84:18,25 85:2 88:13 93:12
employer's 85:3 97:24 229:24
employment 81:6,12 83:2 83:16,19,24 85:11 86:3,5 87:8 88:12,16 94:14,18 95:6 180:22 181:2 183:4 186:11 229:6 230:16 274:6 281:9 302:7,13 303:1
employments 81:21
enabled 81:11
enclosure 105:7
encompass 61:15
encouraged 251:22 312:19
encouraging 309:25
ended 269:20
endorsed 239:22
endurance 193:22
engage 74:14
engaged 75:2 230:16 233:14
engages 97:3
engaging 97:10
enlisting 85:18
enroll 189:15
ensure 29:22 324:11
entailed 230:4
enter 285:19
entering 102:15
entire 141:7 142:21 143:12 143:15 144:8 144:10 145:1 276:2 336:9

entirety 140:2 142:9,15 146:2
entitled 141:6
entity 48:20,21
entries 127:3
entry 244:15 250:4,5 254:21 256:11
environment 28:4 81:13,17
environmental 167:20 184:16 184:24 185:8 185:21
environments 80:7
equal 18:22
equip 119:5
equipment 60:3
errata 336:1,14 337:1
especially 149:19
espinosa 279:1 322:20
esposito 135:9
esq 3:5,9,14,19 3:19,20
essentially 78:23 257:4
establish 143:7
established 255:24
estimate 195:1
estimates 59:10
et 79:8 118:1
ethics 144:12 270:23
eugene 5:1 97:16,18
evaluate 152:7
evaluated 158:14 315:16
evaluating 14:19 19:2 52:5 56:16 124:23 125:5 212:1 227:5 302:3,4 312:14 315:8,12
evaluation 4:14 4:17,19,22,25 5:3,6 14:17 47:15 66:1 69:23 73:21 75:12 158:22 184:5 196:5,10 211:4 213:2 220:14 221:24 231:1 233:2,11 313:1 316:13
evaluations 21:19 82:21 211:14 238:22 299:22
evaluee 34:3 45:11,16 221:18
events 274:6 338:13
eventually 53:16,19 170:8 320:21
evidence 27:6 102:13 183:2 197:4 276:2 284:22 295:25 322:3
evident 105:16
evidentiary 34:2,12
evolved 36:16
evolving 111:23
exacerbated 153:10
exacerbation 153:13,16
exact 63:14 253:18
exactly 41:15 104:3 122:21 132:3 211:21 241:17 324:6
exam 78:19 239:21 266:21
examination 4:3,4,5 8:22 266:12 291:18 334:5 338:8,10
examine 13:18
examined 8:19 13:14,16 133:2 133:8 171:18 171:22 202:7 217:22 218:6 252:4,12
example 21:1 55:8 150:15 163:16 290:9 325:7
exceeded 208:23
excellence 39:14
excellent 248:12 327:11
except 321:12 329:18 336:12
exception 18:1 18:6 27:11 36:8 56:3 290:3,5
exceptions 14:10
excerpt 65:25 151:11
excerpts 5:13 5:15,24 6:3 139:16 141:18 143:5,8,19 174:16 199:16 319:5

excluded 313:21 314:15 323:6
excluding 314:1
exclusive 61:18 318:16
exclusively 245:18 290:16 316:24 317:17 317:21
excuse 302:2
exercise 181:19 223:23
exhbiit 7:1
exhibit 4:11,12 4:14,17,19,22 4:25 5:3,6,9,12 5:14,16,19,21 5:23,25 6:2,4,6 6:8,10,12,14,16 6:18,20,22,24 7:3,5,7,9,11,13 62:16,19 65:21 65:22 68:15 69:18,19 71:7 75:7 82:16,17 90:4,10 91:16 96:5,8 102:10 112:4 115:7 123:23,24 129:22 134:20 139:13,24 140:18,19 144:8 156:25 157:5 161:14 161:16 164:12 164:16,25 174:12,15 186:19 187:13 187:17 199:11 206:6,11 215:24 244:7 244:10 250:21 250:24 257:24 258:2 270:9,24 272:22 275:4 276:24 277:5,6 277:8 278:21 278:22 280:10 280:13 283:2,7 285:19 286:8 286:13 291:22 291:22 293:12 293:25 304:17 307:24 308:1,5 310:16 316:14 328:10,12,16 329:17 330:12 330:16 333:3,6 334:7,17
exhibits 332:9 332:13
exist 265:10
existed 71:24 72:8 74:6 97:22 98:3
exit 102:14
expect 267:24 283:20
expectancy 175:11 208:8 208:12,23 209:1,6
expectations 229:24
expected 241:20,22,24 242:4,8,11,24 243:17,19 253:22 264:21 320:15
expects 241:18
expense 237:10
experience 14:15 16:17 88:14 152:14 171:11 226:2,7 283:21 325:25
experiences 90:19 91:7 317:12
expert 5:9 7:5 26:22 55:22 87:22 112:2 122:5,8 133:13 133:23 134:4 162:10 164:6,7 245:10 267:11 268:6 292:5 301:9 302:7 307:8,21 308:6 310:15 321:8 321:11,15,18 321:25 322:15 323:2 327:18 333:20
expert's 288:2
expertise 147:12 317:9 321:10
experts 18:8 290:4 301:10
explain 17:6 21:16 29:1 45:7 58:2 61:22 64:17 85:24 86:8,18 86:21 89:17 170:15,20,24 181:9 249:18 270:6 284:7 286:1,17 290:14 320:14 330:3
explained 15:23 16:4 20:18 28:24 32:24 55:2 64:7 75:3 79:12,20 121:7 126:1 127:17 132:16,19 133:17 136:18 157:11 167:11

170:3,10 179:9 181:15 212:3 212:20 237:6 246:2,17 254:22 255:8 259:8 315:22
explaining 10:16 45:25 138:24 163:24 253:20
explains 35:9 181:17 272:2
explanation 162:11,21 163:8
explore 24:9
exposed 81:19
exposure 66:14 81:13,18
expounding 185:24
express 98:6
extend 80:6
extended 202:12
extensive 88:14 272:13
extensively 198:19 271:21 327:2
extent 15:25 53:25 54:24 91:10 92:10 99:14 107:12 139:1 162:13 170:17 179:2 192:1 202:5 334:25
external 310:4
extracted 271:22 327:3
extremities 101:5 193:19

f

f 4:18 5:13
face 24:8,8
faced 310:1,3
facility 21:23 176:2 240:12 240:13 241:3
facing 100:11
fact 17:24 18:11 58:7 189:4 192:25 243:22 294:6 325:4
factor 58:5,20 59:3,4 60:18 61:10
factors 59:6 214:25 215:6
facts 17:12
fair 9:11,12 36:21,25 59:12 64:5,15 200:8 236:5
faith 221:2
fall 22:5 117:7 212:21
falling 194:11 194:19 235:13
falls 92:4,21 189:22 193:14 209:16 310:21
familiar 77:8 77:21 171:7 219:20,25
family 20:2 71:10 73:22 125:21 126:14 167:16 178:13 179:5 224:23 260:24 261:15 283:22 284:9 284:18,21
family's 179:1 179:3
far 20:4 89:25 158:7 200:10 214:15 302:21
fast 157:10 227:10
father 118:18 118:21
fatigue 79:7 181:19 239:23
fatigued 92:20 166:13,15
favored 17:8
february 180:17 332:19 332:21,25
federal 2:4 146:20 149:21
fee 57:17 59:1 64:5,16 294:21
feel 27:12 33:12 194:3 225:17 226:9 270:13
feels 141:25
felsher 168:23 169:2,6 171:8 171:15,18 172:9,13 173:7 180:15,19 181:5,9 182:3 183:14 184:23 185:12 186:12
felsher's 180:13 183:1
felt 68:25 185:23 195:20 268:24 269:2 270:2
field 13:6 24:18 325:14
figure 44:16 196:21 241:8
figured 164:21
file 99:11 140:11 145:15 298:22

filed 51:12 273:16 275:10 318:5
files 161:8
fill 76:4 202:24
filled 182:7,17 203:11
final 33:5 211:24 241:4 241:13,19,25
find 51:16,18 51:19 59:20 60:3 83:7 87:14 107:11 178:20 183:3 224:11 227:22 260:8 285:3 299:9,10,11 334:13
finding 55:17 69:4 101:12 239:11,12 314:5
findings 29:2 87:10 242:17 243:8,9 244:24 245:19 246:3 249:24 263:13 301:21 306:1 306:22 318:22 327:23
fine 29:20 63:9 124:9 128:10 142:23 143:9 161:7 187:5 199:10 213:24
finish 226:6 267:2
finished 141:24
first 8:19 18:21 20:11,12 22:24 31:15,17,20 32:16 42:23 43:10 52:11,13 52:24 53:13 64:9 74:10 80:10 95:12 113:2,4 119:8 164:13 165:19 183:16,17,18 184:8,9 186:8 186:12 219:10 253:11 270:23 271:5 299:16 321:19 323:25 324:2 329:4,6 330:5,8 331:1
fish 97:5
fishing 97:5 263:2,11
fitness 189:9,11 189:15,20 223:2,5,9,20,24 234:12,18,22
five 39:5 141:22 142:2,6 143:17 146:3 147:6 149:10 149:13,15 160:2 208:6,20 246:22 253:2
flip 293:4 294:3
flipping 292:16
flood's 251:24
floor 39:6
focused 193:18
focuses 258:17 309:23
folks 25:2 40:9 41:9 42:1 48:6
follow 23:22 24:20 25:5 34:16 35:23 37:17 38:4 106:20,24 131:23 132:4 152:7 156:6 183:14 184:18 185:10,22 225:13,23 226:3 239:21 270:23 309:15 323:7,16
followed 18:7 87:14 106:25 119:9 161:23
following 23:20 30:21 82:2 276:8 317:13
follows 8:20
force 171:4
forecast 255:20 257:10
forecasting 296:20
foregoing 338:5,9
forensic 47:9 47:10,14
forget 225:24
form 42:19 57:7 125:25 140:6,24 150:5 151:8,16 153:2 154:6 155:17 158:19 174:5 243:4 282:10 284:10 295:16 296:2 297:14 297:22 301:13 306:10 307:12 311:6,14,25 312:23 313:15 313:24 314:9 314:18 315:20 316:9 317:24 318:9,19 319:13 320:11 320:19 321:5 322:4,17 324:14 326:6 327:20 329:21
formal 73:24 196:5 223:5 234:12

format 82:20
formed 10:24
former 88:12 93:12
formulate 259:18
formulated 276:13
formulating 276:8
forth 21:24
forward 150:7 209:11 223:1 238:1,3
found 41:10,11 56:21,25 57:5 231:4 248:8 322:1 326:19
foundation 17:25 18:2 19:2 21:9 24:25 25:2,5 28:12 29:22 33:8,21,23 34:1,6 56:23 78:11 88:20 99:6 102:17 110:6 124:12 137:9,24 140:6 140:24 150:6 151:9,17 153:3 154:7 155:18 158:18 171:16 172:11 173:11 173:14 174:6 176:13 190:8 190:13,21 221:17 231:5 253:14 259:9 263:4 272:14 290:4 312:10 314:1,10,23 315:22,23 327:13
founder 118:16 118:21
four 39:4 141:1 263:5,16 275:17
fourth 66:10 70:7 288:12
frame 80:20
frank 5:7 6:8
franklin 3:20
free 195:15 205:1
frequencies 205:14
frequency 31:14,24 115:16,22 116:11,14,19 116:22 121:23 122:9,16 138:19,25 154:10,14 157:16 158:7 158:15,23 159:1 208:5 240:16,16 309:5,11 310:7 311:4 312:15 312:20 313:3,5 313:6,11,23 314:6,16
frequency's 155:1
frequently 116:4 155:8
friend's 97:3,4
front 49:19 63:7 140:11 141:8 142:22 143:13 144:5 146:1,23 206:3
fryar 1:13 2:2 7:11,13 8:18 8:24 44:3,22 45:1 47:12 48:1,16 49:6 49:12,13,15 103:11 160:25 244:10 271:21 276:4,5,6 277:21,24 279:7,25 281:2 281:3,5 283:22 291:20 308:4 331:16 332:12 336:23 337:23
fryar's 139:19 272:1 274:1 278:5,14 281:6 325:25
frye 258:2
full 39:4 42:17 64:21 74:10 83:2,24 88:12 95:12 113:2,4 141:19,21 143:2 251:18 276:2 278:5,13 279:23 322:14
fully 85:12 144:20
function 85:25 87:15 90:1 221:12 240:4 248:12 250:15 251:21 257:3 302:17 303:6
functional 95:9 181:22,23
functionality 101:6 102:4
functionally 179:17 239:13
functioning 101:4 247:15
fundamentals 129:4
further 4:5 96:19 239:12 302:6,22 334:2 334:5 335:10 335:11 338:12

future 25:3 61:25 99:15,19 110:10 125:24 132:17 157:14 159:2 169:10 173:25 196:9 196:17 199:25 211:3,24 243:14 244:24 246:21 253:25 255:20 257:10 281:11,21 282:8 295:7 296:21 297:2 300:13 302:1 304:8 305:19 307:4 313:13 315:19 320:10

g

g 8:1 48:25 81:8 167:3 190:18
g3a 248:2 249:3 252:24
gabriel 105:24
gain 150:18
gainful 94:14 94:18 180:22 181:1 186:11
gait 40:11
galilee 81:8 182:13
garand 3:20
gardening 74:14
general 62:3,12 154:9 207:22 208:4 313:9,10 314:14
generally 36:22 37:7,16 38:15
generation 20:11 42:24 43:10 119:8
gentleman 20:9 20:12 22:16,19 268:18 327:24
geographical 58:5,19 59:4 298:17
georgetown 3:15
geozip 58:6
getting 43:25 46:7,8 192:10 193:5,13 200:18 222:13 241:7 300:9 314:20
give 16:19,24 18:20,22 35:25 36:9 43:17 46:25 56:1,5 61:9 63:17 80:19 81:1 83:8 94:4 102:18 104:4 115:21 117:3 119:2 120:7 124:5 130:9 134:7,19 142:2 151:25 196:2 205:6 206:3,5 240:22 242:5 253:7 272:6 277:13 280:18 302:15
given 54:9,14 72:10 94:15 97:18 113:5,6 139:19 147:9 180:23 193:13 195:21 214:2 219:20 237:9 245:7 254:21 258:14 259:17 262:9 322:21
gives 269:22 274:3 279:24
giving 23:23 71:15 80:11 86:24 87:18 97:23 99:16 136:5 182:22 220:4 230:20 272:5 321:9 322:16
glad 240:5
global 46:17,20 47:7
go 40:8 51:15 53:4 60:9 65:2 68:15 80:5 100:16,18 129:20 145:18 149:16 154:1 157:2,7 158:11 167:4,8 183:8 194:1 203:7 207:4 211:20 219:5,7 221:19 230:19 234:22 237:2 240:22 266:18,18 274:11 277:23 278:2,17,20 279:21 281:23 286:3 289:2 291:11 292:14 328:24 330:9 331:8
goals 317:15
goes 93:20 229:14 289:13
going 9:9 10:21 15:14,16 29:8 29:11,13,15 46:7 47:13,24 52:9 56:1,4 57:2 61:25 62:2 65:13 66:19 80:16 82:7 83:13 84:12 92:14

94:3 110:25 116:10 135:21 137:21 139:22 140:8,15 141:13 142:17 142:23 143:16 143:18 146:8 146:17 147:18 149:18 150:18 153:8,9 155:7 161:12 164:5 164:16,18 166:15 168:16 169:2 179:13 180:12 188:6 189:13,18 193:2 204:13 209:22 221:16 223:1 224:11 225:6 234:18 235:8 238:1 243:22 249:4 254:2 260:7 262:21 263:1 263:10,15 264:6 266:24 269:3 270:19 276:19 280:7 280:25 285:19 291:6 297:1 299:9,11
gonna 171:3 289:2
good 8:15 65:10 70:2 76:5,5 79:20 103:2 152:8 167:12 215:13 257:17 328:2
goodness 79:9
goodwin 49:22
gotcha 96:22 114:20 248:25
gotten 194:25
governing 29:17 325:16 326:3
grading 77:15 77:16
graduate 263:20
grafting 102:1
graham 2:6 3:4 8:10 141:3
grandchildren 168:1
grandson 178:14 224:4 224:19 226:13
granted 149:16
grants 325:17
great 96:24 103:4 130:1 152:12,12 185:24 187:5 206:4 207:8 226:6
greater 14:21 16:25 35:22 110:16,17 111:1,3 113:18 113:20 114:3 198:12 215:10 242:20 243:13 247:11 274:22 279:24 295:15 295:17 296:1 306:3 322:16
grooming 168:14
group 3:13 8:11 26:23 29:17 46:24,25 47:17 77:19 195:8,13 324:24
grzybowicz 167:3
guess 12:22 93:1 102:6 118:12 200:21 217:11 238:16 280:3 289:15
guide 22:10,13 48:9
guideline 185:3
guidelines 26:25 184:17 184:25 185:9 185:21 261:16 311:12
guides 279:11
gym 189:13

h

h 4:10 43:3 109:18 135:25
habitus 127:24 138:7
half 199:1 231:23
hand 131:10 164:16,19,22 187:9 338:13
handbook 26:3 292:12
handed 250:24 308:4 322:19
handful 41:7 44:1 107:3
handing 187:16 244:10 330:15 332:12
handler 278:7
handwriting 240:1 285:22 331:3
handwritten 7:3 104:15 220:7 285:5,7 286:14 331:17
happen 110:25 126:10 128:21 138:9 240:19 242:9,12

257:10 261:14 313:2 314:12
happened 124:4 183:17 269:14 275:22 318:7
happening 249:21
happens 158:20,24 289:6 299:24
happy 31:21 328:1
hard 159:20 167:21 197:2 197:13 200:1 241:10,11 250:24 268:8
haresh 7:6 133:13 307:22 308:6
harm's 270:6 270:18
hawkins 216:22 217:25 218:6,19,24 219:16,19 220:3,6,18 223:13 225:12 225:13 227:12 228:12
head 219:24
headaches 91:3
header 63:25
health 36:22,25 37:6 48:8 59:12 64:5,5 64:15,16 66:15 67:25 68:3 70:9,11 95:22 115:15,16 117:1,20 120:18 121:1,5 121:20 122:24 136:17 152:11 152:19 155:10 157:17 158:5 228:8,11 264:7 269:22 283:19 283:23 284:24 296:10 299:2,3 325:13
healthcare 59:13 95:18 284:3 324:23 325:16
healthy 309:25
hear 52:24 106:21 131:21 148:6,13,15,17 148:22,24 149:20 308:15 308:21 326:21 328:2
hearing 90:24
heart 166:20
heat 167:21 178:25
heather 261:22
heavy 95:11
heidi 217:14
help 130:11 180:11 189:20 191:25 262:16 322:8 325:14
helped 42:21 48:6 119:5 167:4
helpful 100:13 100:15 112:17
helping 46:12 46:15 117:15 128:12 167:16 168:1 179:1 192:4 212:5
helps 161:24 226:13
henderson 50:21 51:8 272:19
henderson's 273:12
hentz 134:23 135:4,23
hereof 336:14
hesitating 41:9
hey 225:24
hi 148:7
high 181:18 213:13,18
higher 255:4
highest 64:17 65:7
highly 18:24 185:3
hill 4:20 5:22 75:12,22 76:9 76:20 78:10,22 80:6 81:4,10 82:1 164:11,14 165:8,22 167:9 169:4 171:12 171:19,22 174:25 176:8 177:15,23 178:7,10 179:22 180:5 180:21 181:6 181:10 182:4 183:2 184:17 185:9,21 288:5 290:1 301:19
hill's 169:13 170:4 173:25 182:12
hire 44:14 192:8 224:8,25
hired 178:13 224:21 280:5
hiring 178:15
history 66:16 70:20 71:3 90:20 91:3 102:2 105:22

138:11 153:7 153:14 221:13
hit 136:23 149:5
hitt 109:15,18 109:21
hold 169:20 194:20 320:18
holding 294:16
home 7:9 24:9 31:15 92:21 103:20 115:15 115:16 117:1 117:20 119:18 119:19 155:22 156:13 166:7 168:12 188:2 189:18 191:25 192:15,22 193:24 194:11 194:13,15,23 195:4 216:4 223:22,25 226:12,16 235:2,17 237:8 260:1 262:11 263:6 268:18 269:3 283:19 283:23 284:2 284:24 296:9 299:2,3 327:25
homemaker 177:2
honest 56:2,5 129:21 201:2 276:21
honestly 212:17 262:18 265:18 269:2
honor 119:11
hook 260:21
hope 261:11
hopeful 189:18
hospital 39:2 40:14,16,21 42:1
host 236:20,24
hour 9:16 104:5,6 166:18 166:18 198:23 198:24 199:1 216:6 231:19 231:22,23 283:21 309:20 310:9 311:24
hours 31:16,17 31:21 120:2 188:8 330:1,6 330:7,9 331:2
house 48:7 192:4 194:4,20
household 263:1,9
housekeeper 168:20
housekeeping 73:25 167:10 168:6,7,9 175:18,22 176:8 177:2,4 177:11,24 178:7 191:21 192:5,8 224:15 224:25 235:6 255:13 256:20 262:17 296:9
housing 21:23
how's 308:23
hugh 136:3
huh 49:5 60:25 89:2,16 107:7 117:1 124:6 125:4 131:15 135:19 158:8 219:9 238:21 249:4 256:5 261:25 269:17 277:15
husband 120:5 125:18 126:3,6 126:11,22 127:18 128:12 128:17,19 137:17 156:10 156:15 259:19
husband's 127:6,10 259:23
hygiene 168:14
hypothetical 198:1

i

i.c. 6:14,17,19 6:21,23,25 7:2
iarp 29:15,17 59:24 214:13
iarp's 29:21
ichcc 327:7,8
idea 78:3 114:24 175:5 176:4 237:21 240:18 256:22
identical 62:25 329:18
identification 62:17 65:23 69:20 75:8 82:18 90:5 91:17 96:6 112:5 129:23 139:14 140:20 161:15 165:1 174:13 187:14 199:12 206:7 206:12 244:8 250:22 257:25 270:10 272:23 275:5 276:25 278:23 280:11 283:3 286:9 308:2 328:13 330:13 332:10
identified 247:21 254:7

295:7 296:14 301:11,20 307:5 310:24 312:20
identify 29:25 30:14,18 111:16,20 132:14 247:13 277:4,22 309:16
ieps 84:10
image 152:15
ime 300:2,3
imes 299:22
immediate 54:21 296:20
immediately 309:19 310:11
immunosupp... 253:23
impact 17:6 56:18 61:25 62:2 257:4
impacted 152:16
impacts 152:10
impairing 101:3
implications 86:9,19,21 89:18,22
importance 170:15,25
important 27:2 52:23 66:16 238:16 298:20 328:2
impressed 129:17
impressions 66:5 69:22 75:13 90:8 91:19 96:9
inadvertent 32:1,3
inadvertently 31:13 330:10
incapable 79:25 80:3 302:6
incident 75:4 90:23 139:10
incidents 66:14
include 27:7 30:10 62:13 122:18 154:15 175:8,14,16 184:4 262:1 281:11 289:20 294:19 309:11 312:19,25 313:4,7,13
included 87:6 122:19 175:18 209:17 231:6 237:14 284:1 331:23 332:4
includes 12:14 12:18 90:21 147:9 163:19 323:21
including 73:21 74:14 80:14 85:14 97:3 101:2 298:16
income 75:25
incomplete 292:19
incongruent 34:9
incorporate 172:2
incorrect 33:1 143:8
increase 58:13
increasing 58:14
incurable 181:6
independent 78:22 79:16 96:18 97:1 138:4 150:17 150:23 151:2 163:14 176:12
independently 176:1 179:21 269:11
indicate 69:3 70:13 93:12 110:14 115:24 225:21 278:6 306:7 311:16 311:18
indicated 66:19 83:18 93:22 110:8 115:13 154:25 229:21 247:9 253:5 305:24 309:10 310:7 330:5 336:13
indicates 109:14 225:16
indicating 111:21 113:14 305:9
indication 118:2 229:4 239:6,8 247:25 310:6
individual 73:22 151:25 152:4,11 299:13
individualized 253:19 254:3
individuals 152:13 302:2
industrial 6:14 6:16,18,20,22 6:24 7:1 268:7 273:14 321:2 321:16 322:13 323:1

infections 181:18 185:5 185:17
information 21:10 29:5,11 29:13 33:20 57:13 81:22 87:25 88:4 99:14 138:16 161:20 162:22 197:21 198:7 198:13 258:24 261:5 276:11 292:9,15 295:10 296:24 297:4,20 298:10,21 299:8,11 301:25 302:11 313:14 314:21 314:24 316:6
initial 165:21 165:24 166:3 183:13 184:3 203:16,19
initialed 203:5
initialing 203:24
initially 83:8 113:21
initials 248:20
injured 40:9
injuries 90:23 184:19
injury 39:6,6 39:21 41:22 42:4,8 49:25 66:23 67:19 279:15 300:1 325:8
inman 150:25
input 194:17 194:22 255:7 276:14 326:23
inquiry 230:18
inquis 4:12 5:21,25 6:4,6,8 6:12 46:17,20 47:1,7,14 53:19
inspect 146:23 149:22
instinctively 63:5
institute 172:18
instructor 118:7
instrumental 117:7,13,21 168:4,7,9,11
insufficient 102:12
insurance 44:24 46:9 294:21
intend 292:4 294:7 312:8 334:19,23
intends 121:4
intent 229:16
intention 335:6
interaction 266:2,6
interested 88:11 338:13
interfering 151:2
intermittent 239:25
intern 84:22 85:17
international 12:6,9 29:14 29:18 269:21 324:23 325:13 325:15
internet 271:22 327:3
interpret 147:18 176:19 177:11
interpretation 176:25
interrupt 308:14
intervention 91:6 108:9 113:10 114:23 305:11
interventional 24:13
interview 27:19 28:1,16,21 51:24 105:8 119:23 166:16 188:13 216:13 244:21 245:2,5 258:8,12 279:10
interviewed 108:4 245:10
intravenous 118:1
intro 317:4
introduce 8:7 140:17 164:17
introduction 64:8
invasive 46:4
invoices 9:22
involved 15:11 15:14,16 28:6 44:24 53:15 118:11 132:20 170:14 218:14
iret 265:12,13 265:14
isolated 82:3,4
issue 28:18 32:6 41:1 67:23,23 74:20 146:18 209:3 279:23 316:7 326:5

issued 250:16 300:21
issues 28:18 98:6 136:17 181:23 189:17 222:10 235:9
it'd 172:8 268:5
italics 248:17
item 30:17,25 56:10 64:10 116:9 197:23 207:11 311:7
items 10:2 22:5 56:13 126:25 209:23 240:15 289:17

j

j 324:4
jacqueline 6:12
january 332:24
jeffrey 283:8
jenna 3:9
jessica 5:24 169:14 174:16
jfb 3:11
jimmy 4:15 5:10 7:8 304:3 304:12,23 306:22 307:9
job 1:25 17:5 46:14 84:8 85:19 98:9 181:7,11,13,16 182:5 228:15 228:20,25 229:4 230:10 230:12 231:3 277:24 281:12 281:21 282:9
joel 6:3 198:17 199:17
john 5:10 107:8 129:9
join 195:12
jones 261:19,22 261:23
jorge 278:25
joseph 135:9
joshua 3:19 8:15
joshua.g.carp... 3:22
jotted 285:15
jotting 285:23
journal 12:19 12:24 22:23 23:7,13 26:8 30:8 214:18 292:14
journals 23:4 36:5
judges 141:1
julie 20:16 118:10
july 98:25 248:16
june 250:19 281:5
justice 3:18 8:13

k

kaplan 265:2,6 265:10
kari 272:19
keep 131:12 283:5 292:17
kept 47:12 166:15
key 304:25
keyboard 84:9
kidney 41:6,7 41:14 43:12,13 100:11 159:6 160:11,14 246:9,14,18,20 247:15 248:1,9 248:18,21 250:15 252:5 252:13,20,24 253:25 257:3 257:11 258:17 258:21 261:2 262:25 319:1,6 319:10,16
kidneys 40:4
kind 20:16 34:23 40:3 43:24 72:20 80:11 117:8 147:19 161:24 189:11 192:24 205:25 210:3 212:18,19 250:25 251:10 254:17 267:17 268:19
kinds 39:23 189:22 209:16 272:14
kitchen 20:16 118:8,10,11 119:7
knee 90:22 91:25 92:7 93:5
knew 130:25 167:14
know 9:14 10:12 12:21 15:13,15 16:23 19:11 21:25 22:20 23:4 24:9,13 33:22 37:17 38:2,17 38:20 40:1,3 51:9,18,19,20 51:21 52:18,21 54:19 58:11 59:5 61:4,6,18 63:16 64:24 67:10 68:21 71:1,23 72:8 74:23 77:5,17

77:25 78:7,8 79:8 87:24 92:5 97:22 98:3 99:19 100:5 101:12 103:21 104:1 105:20 106:8 107:3,4 110:13 114:15 117:1 117:15 119:19 121:12 123:9 124:4 128:16 128:16 129:18 132:1,3 134:14 134:16 140:8 144:15 153:5 154:22 155:9 156:4 159:25 161:3 164:18 164:20 166:21 167:13 168:3 168:14,23 172:21,24 173:1 175:13 175:15,19,20 177:10 182:16 182:16 184:4 186:19,22 187:25 188:6 194:15,15 198:3,11 199:6 200:17 201:1 202:22 204:3 208:3,13,15 209:23 211:21 213:4 218:2,9 221:10,14 223:15 228:5,6 228:18,19 229:23 230:11 235:12,14 236:24 238:8 238:12,13,15 241:14 242:3,6 248:22 250:3 268:21,23 272:6,7,8,25 274:14,21 276:14,19 278:17 284:24 285:11 287:2 287:14 298:14 299:24 303:16 305:18 319:19 319:25 323:11 323:14 324:17 324:20 332:7 333:25 334:14 334:15

knowledge 122:3 126:20 147:12 150:22 152:18,22 156:16 158:4 178:19 195:1,4 218:5 226:19 302:8 303:25 316:12

knowledgeable 169:5,7,10

knows 14:13 152:10

kristin 200:23

l

l 37:14 38:5,6 50:8 81:8,8 190:18 283:8

label 114:10

labeled 114:9 114:18 308:5

labor 45:24 46:2,12 49:3 94:14 180:22 181:2 186:11 281:12 285:3

lack 33:21

lacking 34:1

lacks 33:8 272:1

laid 50:17,19 51:1

lamacchia 3:14 148:3,7,11,19 148:24

landscaping 178:10,12,18 178:23 179:14

language 45:13 52:20 214:11 288:9 305:10

laptop's 148:12

laramore 4:15 5:10 7:8 31:8 31:10 32:6,8 55:8 66:2 103:12,18 104:9 105:1,25 108:5,12 109:5 109:15 110:4,9 111:7,17,21 112:2,15 114:25 115:10 115:14,25 117:2 123:5 287:18 288:6 304:3 306:2,23 307:9 328:5

laramore's 66:9,12,20 106:11 108:14 113:6 304:12 304:23 307:4

large 84:15 338:3

larger 127:24 268:1

lasted 166:17 188:7 199:6

lastly 226:21

lawn 224:1,8

laws 50:7

lawsuit 47:11 73:3,13,19 74:4 139:20

316:2 318:5
lead 20:16 42:21 75:24 81:7 89:23,25 182:12 269:20 269:20
leadership 8:10
leak 74:21
leakages 127:22 128:4
lean 303:5
learn 15:17 75:1 260:21
learned 20:8,10 20:15,17 27:4
leave 180:1
left 17:23 31:5 31:14,19,23 83:2,24 85:11 93:14,17 94:1 94:9 128:2 220:19 223:13 223:16 228:14 330:10
legal 3:13 147:11
legitimate 24:19
legitimately 82:12
lejeune 1:4 56:7 130:7 318:8 336:4
length 191:9
leslie 3:14 148:7,18
lessons 119:5
letter 6:8,12 50:25 51:10 108:23 131:16 131:18 225:12 244:15 245:20 259:9 269:23 281:5 306:20 306:21
letters 15:22
leukemia 40:19 40:25 41:3 42:19 76:25 180:24
level 320:4 325:25
levels 176:24
leverage 88:14
levodopa 200:9
license 153:12 266:20 284:2
licensed 73:24 127:19 157:13 221:5
lieu 160:13
life 5:25 6:4,6 9:20 10:1,2,3 11:6,10 12:1,2 12:6,10,15,20 12:24 13:1,2,6 14:17,20,21,24 15:7 17:1,10 17:21,24,25 18:3,25 19:25 20:4,8,9,20,21 20:22,22 21:5 21:8,14 22:2 22:24 23:8,8 23:14,15,20 24:1,6,14,21 25:5,7 26:2,8 26:19 27:1,6 27:18,24,25 28:7 29:4,19 30:2,5,8,9,13 34:8,21 35:4 36:15,18 41:19 41:23 42:5,18 43:11,25 44:21 44:22 45:2,10 45:18 47:20 48:4 53:21 54:12,15,20 55:6,10,15,18 55:21,24 56:2 56:11 57:24 60:19 61:5 73:18 74:1,3 80:7,13,15 87:3,20 101:13 101:15 111:2 114:8 116:20 116:21,23 118:5,17,24 119:3,6 125:19 126:9,11 128:15,22 129:3 130:19 131:4 136:14 136:14 139:3,9 158:13 170:5 171:14 172:3 173:15 175:11 175:15 177:19 179:3 181:18 185:4,16 187:20 190:8 192:12 204:19 206:1,9 208:8 208:12,22 209:1,5 210:10 210:15 213:6 214:14,18 217:7 221:10 230:23 231:6 238:2,16 240:5 240:23 241:6 241:13,19,25 242:8,8,18 243:23 245:14 249:15 257:12 261:12 263:6 263:16 264:23 265:15 266:22 268:20 269:10 269:24,25 270:3 271:19 271:25 272:7,9 272:10,25

279:7,22,24
288:1,21 289:1
289:5,11,12,25
290:22 292:12
294:10,18
295:1 296:23
297:20 298:3,5
299:6,14,19
300:4,8,18
301:12 309:22
310:13 311:19
312:7,13,20
313:17 314:19
315:5,17
316:23 317:4
317:16 318:15
318:17 321:17
322:11,21
323:1,8,16
324:1,16,17,25
325:6,7,10,18
325:19,20
326:1,8,9,19,22
327:13,15,18
328:1
lifespan 253:24
lifestyle 174:4,9
174:25 175:2
175:20 176:3
176:15 177:6
177:14,22
236:12,16,18
236:21 256:19
256:23
lift 209:12
light 95:11
149:7
liked 98:14
99:12 139:6
166:19 172:7
185:19
likelihood
242:21 243:13
304:8 307:4
likely 18:20
34:11 71:12
101:6 102:7
110:9,13,16,16
110:18,21,25
111:3 113:14
114:11 196:9
210:24 214:1
242:12 246:19
247:1 268:5
295:14 296:1
309:21 312:22
313:12
limbo 236:9
limited 140:24
316:5
linda 325:23
line 22:1 30:25
53:25 78:6
130:4,5,10,16
140:3 147:8
151:14,15
154:9 174:20
174:23 197:23
232:3 240:15
304:6 305:14
314:14 319:2
331:6 337:3,6
337:9,12,15,18
lines 77:15
135:21 136:22
137:15 150:12
153:1 154:5
155:16 199:22
lisa 141:2
list 7:12,14
9:22 48:13
59:19 72:1
81:20 123:1
125:12 135:1
135:10 159:6
165:11 190:5,7
204:20 205:11
207:10 256:15
262:11 286:24
287:6 293:20
312:9 332:3
334:22 335:1
listed 11:16
13:10 27:9
30:17 32:14
47:25 49:18
52:11,13 56:13
59:23 64:11
71:2,2 109:12
109:13 116:5,7
120:22 122:9
122:16 125:7
125:10 135:15
154:25 238:22
275:16 288:3
293:16 295:9
306:7 320:4
333:9,14
listening
309:24
listing 60:12
165:15 197:22
285:12
lists 240:16
276:10 330:1
literally 58:19
59:13 264:22
literature 27:2
28:19 34:25
35:4 36:2,4
161:25 162:7
164:2 271:22
279:12 298:13
327:3,12
litigated 45:5
litigation 1:4
43:20,23 44:7
44:9 47:8,20
61:21 133:24
134:2,4 170:14
267:20 268:2
336:5
little 27:12,15
28:9 40:8 45:7
93:24 129:20
166:13,18

174:8 203:22 209:10,21 210:5 255:4 271:24 272:18 274:1,16 276:3 284:7 289:15 323:13 327:5 334:3
live 266:6 328:1
living 44:16 78:23 79:17 80:1 97:1 105:20 117:14 176:1,2,2 239:4
llamacchia 3:16
local 59:9
locate 134:19
located 22:8,9 25:8 188:1
location 265:6 338:6
loneliness 78:24
long 13:25 39:1 43:19 44:10 87:17 104:1 119:25 128:16 149:6 166:12 166:16 188:7 198:19,21,22 199:6 216:5 231:18,21 265:17,19,22 267:1 271:12 279:20 298:2 319:21 321:15 324:19
longer 56:23 130:20 143:17 176:15 178:25 179:5 208:12 265:10
longo 121:19 126:16 127:17 132:14,25 133:2 157:11 157:15 158:4 312:25 317:2,5 318:21
longo's 159:12
look 17:17 35:16 39:3 45:15 51:4,15 60:9,14 63:15 64:9 68:4 75:19 92:14 94:3 96:10 101:23 125:20 140:23,25 145:23 146:4 146:20 160:25 161:4 174:19 184:11 194:2 206:21 213:23 217:25 227:10 239:9 253:21 264:25 271:4 274:11 281:24 289:24 290:17 293:7 298:13 303:17 310:14 316:13,19 330:20
looked 59:17 60:11 133:6 215:2,3 285:2
looking 59:12 59:13 80:12 87:19 123:8 124:5 182:23 207:9 210:3 223:16 229:20 276:17 288:25 296:19,24 304:16
looks 88:3 159:23 165:15 238:2 249:19 250:3
lose 315:19
losing 136:19 137:7
loss 73:23 137:4 150:18 303:9,19
lost 37:15 129:8 130:7 138:5
lot 16:15 38:17 38:20 40:9 44:2,9,22 60:1 92:3 95:10 163:7 175:21 200:2 220:19 223:13 268:9 268:16
lots 129:16 161:7
loud 155:16
loudness 222:11
lovett 130:8 137:3,8 318:6
lovett's 129:9 130:23
low 102:1
lower 101:4 209:24 312:3
lowest 64:18 65:6
lpc 221:5
lpn 156:24
lunch 160:16
lymphocytic 180:24
lynn 4:23

m

m 5:15 48:25
m.d. 5:11,24 6:3 7:6

ma'am 308:9
machine 239:24 260:22
madam 331:13
made 57:24 100:19,21 129:20 167:7 171:1 194:3 205:3,21 245:19 338:8 338:10
main 2:6 3:5 24:7
maintain 167:22 179:19
maintained 12:11
maintaining 88:12 92:22
majority 12:19 27:9,12,14 35:18,22 268:1 297:25
make 10:21 48:4 54:15,20 55:6 58:15 75:4 84:19 101:25 102:8 139:11 146:17 158:17 169:16 169:22 171:4 173:6 184:9 198:14 218:22 240:24 256:18 267:23 285:18 297:5 298:9,12 312:8 314:5 328:20 333:20
makes 33:6,19 59:22 153:15 207:8 260:24 267:18
making 54:12 85:14 186:24 193:21 194:13 267:22 298:24
malpractice 129:9 130:17 137:8 139:20 316:1 318:6
maltreated 268:19
manage 17:2 191:25 192:4
management 5:17 24:14 26:3 43:16,22 43:22 44:11,12 44:23 45:6,8 46:13 48:16 49:9 168:13 267:13,18 283:25 292:12
manager 37:5 39:9 40:24 41:11 45:17,21 47:21 60:2 281:3
manages 325:17
managing 40:25 151:3
manner 189:16
manual 64:6
march 1:14 2:1 8:4 91:2 281:5 338:13
marcus 3:19 8:12
marcus.o.tubin 3:22
mark 161:12 304:20,23 330:17 331:4
marked 62:16 65:22 69:19 75:7 82:17 90:4,9 91:16 96:5 112:4 129:22 139:13 140:19 161:14 161:16 164:25 174:12 187:13 187:16 199:11 199:14 206:6 206:11 244:7 250:21 257:24 270:9 272:22 275:4 276:24 278:22 280:10 280:13 283:2 286:8,13 291:22 308:1 310:15 328:12 328:16 330:12 330:15 332:9 332:13
market 94:14 180:22 181:2 186:11 281:12 294:12
marking 278:21
master's 263:21
material 28:25
materials 7:12 7:14 9:18,21 9:24 10:5 11:21 63:18 72:10,12,16 162:14 165:11 286:15,23 287:6 291:25 305:22 307:20 307:21 332:3,4 332:7,15 333:10,16 335:8
math 208:18
matter 49:22 50:7,9,14,21 51:1 79:6 111:24 132:21 147:11 150:3 170:14 194:19

277:25 278:14
279:18 280:6
332:16 333:16
336:10
matters 134:15
mcbcl 66:15
90:19 91:7
mccarthy 131:6
131:16
mccarthy's
132:6
mccrae 136:3
mean 10:19
13:11 14:10
16:15 17:24
18:23 22:4
26:16 28:23
36:14,15 39:20
43:6 45:8
47:11,12 51:7
51:13 52:4,14
53:9 54:19
55:25 57:1,12
61:22 62:24
72:19 77:16
81:19 84:24,25
85:23 93:24
98:2 99:10
101:11 102:5
102:19 112:20
113:19,22
114:2,4,13,14
122:20 125:9
128:20 137:25
138:23 143:4
144:13 154:13
163:11 166:14
168:11,25
170:22 171:4
174:9 175:3,13
175:19,21,22
175:24 176:3
176:20 177:3
177:10,11,15
177:18 182:9
190:7 194:8
195:14 197:15
198:11,12
200:8 202:3,22
209:15 212:23
217:4 219:24
225:15,19,22
229:3 235:11
236:16,19,24
239:11 240:5
241:5,10,21
243:16 265:21
268:3 269:13
274:21 276:14
278:1,1 289:9
290:1,18,25
291:4,5 294:1
297:12,16
299:1,7 308:13
318:20 319:15
320:9,12
323:20 324:20
333:22 334:25
meaning 60:20
62:2 82:4
110:16 117:14
117:23 168:2,3
175:6 196:14
196:24 197:9
217:6,13
234:18 241:9
282:14 287:16
319:18,20
means 77:25
111:3 114:2
117:18 154:22
168:9 175:19
177:6 197:16
242:3,11
243:17 256:23
256:24 274:14
287:20
meant 63:17
246:25
medi 243:8
medical 14:4
17:12 18:14
20:19 33:6,8
33:19,21 34:1
43:21 44:10
46:1,4,6,13
50:17 56:10,23
57:3,13 59:19
61:21 66:16,20
66:21 67:14
69:2,6 70:12
71:3,16 76:15
82:25 83:4,22
85:22 87:1,2
88:19 90:18,20
91:4 93:14,16
93:25 98:6
101:10,12,17
102:5 105:6,16
108:7 111:16
111:20 135:1,8
158:16 167:5
171:16 172:11
173:2,9 178:20
223:20 224:11
225:7 227:18
231:4 239:10
239:16,16
242:5,19,20
243:9,12,21
244:16 247:10
247:17 248:8
253:14 260:5
260:14 262:8
264:4,7,13,15
264:17,18,21
264:22 271:23
272:14 276:16
276:16 279:8
279:11 281:7
294:15 295:8
295:23 296:6
296:15 297:4
297:11 300:14
303:15 305:20
306:1,3,4,16,22

311:3 313:12
314:1 315:23
316:1 317:9,11
317:14 320:14
327:4
medically
67:11 83:17
91:13 94:12,17
94:21 110:9,20
111:3 113:14
114:11 120:20
154:25 157:12
169:11 180:20
180:25 182:2
186:9 190:14
221:17,19
229:21 230:15
237:12,24,25
238:7,18 241:1
241:20,22,24
242:4,7,11,24
243:17 246:20
247:1 253:22
282:14,16,20
medicare
323:14,15
medication
70:15 105:20
118:1 123:10
123:12 124:11
124:18 135:5
201:20 202:13
218:4,25
219:17 254:3,6
medications
251:21 253:12
253:15,24
254:7 309:17
309:22
medicine 71:10
medium 95:11
meds 254:11,12
254:13,15,18
254:22 255:1
meet 20:20
21:6,12 23:22
24:5,8,17
29:12 55:4,15
meeting 21:25
22:3 229:23
member 12:5
224:23 261:15
283:22 284:9
284:18,21
members 12:9
125:21 126:15
260:24
memorized
77:13
memory 11:4
53:4 73:15
212:18 239:25
248:2 265:21
280:7 293:10
320:3 335:2
mental 66:15
67:25 68:2
70:8,11 98:9
120:18 121:1,5
121:20 122:24
136:17 152:11
152:19 155:10
157:17 158:5
184:15 185:8
185:20
mention 57:24
76:3 101:25
182:11,19
214:23 220:18
230:6 249:2
260:16,20
261:1,18
262:23 263:8
mentioned 35:2
47:22 153:23
182:22 230:10
232:21 260:6
261:24 273:13
323:24,25
324:9 326:8
333:19
mentioning
105:9 306:25
mentor 20:12
42:20,22,24
43:5
mercer 97:16
98:5
mercer's 97:19
246:5
merit 56:22
57:1,6
met 29:1,8
233:15 236:9
270:2 279:8
281:3 325:5
method 37:2,11
163:18
methodically
17:2,14
methodologi...
10:10 161:22
299:6
methodologi...
288:20
methodologies
38:22
methodology
10:16 23:20
24:21 25:6,8
35:1,9 37:15
37:18 38:3,7
38:10,12 289:1
289:12 298:3
300:5 301:1
311:12 323:7,9
323:17 334:16
mic 308:14
michael 1:13
2:2 4:23 5:1,4
5:7 7:11,13
8:18 148:11
281:2 336:23
337:23
microsoft
204:4

middle 80:23 93:10 210:3 236:5
midway 81:2
mild 212:15
miller 11:9 287:22 332:1
mind 238:14 305:2
mine 88:8 123:22 161:6
minimal 81:13 81:17
minimum 24:16
minor 194:3
minute 49:17 311:22,22 312:4
minutes 141:13 141:22 142:2,6 143:17 146:4,6 146:10 147:6 149:10,13,15
misinformation 326:12
missing 72:21 187:1
misstated 328:6
mistake 32:2
mistype 329:10
misunderstan... 270:5 327:15
mobility 209:24
modalities 21:20
moderate 210:4 248:3,3 320:4
modern 118:17
modification 195:4 306:8 330:2
modifications 193:24 194:13 194:23
modules 265:24
moment 134:19 146:20 169:8 190:2 210:7 222:12 251:4 253:7 257:15 267:21 277:14 280:19 283:11
moments 120:5
mona 141:2
monday 1:14
money 178:14
monitor 251:22 309:15
monitoring 68:19
month 81:8 98:10 115:15 116:3 117:20 182:13 309:20 310:9 311:19
months 267:3
moot 246:13
mop 263:1,10
morning 8:15 239:24
motion 145:15 207:20
mousser 5:7 6:9,11 96:9,12 96:17,25 97:11 97:13 98:5,8 98:22 99:1,3 101:1 102:25 243:25 244:2,3 244:17,22 245:3,6,10 246:9,19 249:5 251:1 252:1,4 252:11 253:23 255:5,11,12 258:11 287:17 288:4 289:22
mousser's 98:24 102:13 245:16 247:15 248:8 250:14 256:2,17 257:2 319:1
move 65:13 187:12 194:20
moved 39:12 47:22 266:10
movement 201:10,11 217:25
moving 150:7
multiple 26:20 48:12 92:21 113:7 176:24 218:14 292:13 331:25
multisystem 101:1,21
musculoskele... 101:3
muted 148:11 148:12

n

n 4:1,1 8:1 123:2 135:25 324:4
name 11:12 69:14 109:17 167:2 188:11 205:11 254:17 273:12 275:14 277:2 278:25 280:14 283:8,9 324:3,3
named 22:17 118:13
names 54:6
naps 167:23
national 58:17 58:18

nature 44:18 47:8 245:23 258:14 259:17 319:12,15
navarro 4:16 4:18,21 11:11 86:1 288:2,5 307:14
navarro's 66:1 69:23 75:11 88:5
nc 6:16,18,20 6:22,24 7:1
near 83:2,23 136:3
necessarily 15:4,5 16:7,18 23:22 24:8,14 33:15 175:22 176:18 225:6 296:20 297:15 334:21 335:3
necessary 94:21 127:22 128:3,5,5 147:22 221:18 221:19 237:12 237:24,25 238:7,18 241:2 253:12 283:24 297:13
necessity 56:10 59:16
neck 66:23 67:18,23 101:3
need 24:5,10,11 24:17,20 33:11 34:15 36:3,4 61:18 65:4 69:6 80:14 99:18 111:17 113:9 114:22 115:25 116:1 125:20 142:7 146:5 150:17 156:1 168:16 176:25 182:23 184:17 185:9 196:20 208:19 209:22 213:23 230:19,25 244:21 245:2 246:21 252:20 253:2 256:18 263:15 270:14 284:8,17 289:10 293:23 299:11 300:1 314:22 320:21 323:11,13 333:20
needed 10:4 26:25 48:5 51:2 55:6,18 55:20 60:21 61:2,13 86:4 87:20 120:10 154:13 166:21 168:20 198:3 198:14 209:15 244:25 263:7 278:7 284:21 296:19 299:14 300:14 301:10 309:21 313:13 315:13 323:20 333:16
needing 121:12 292:25 305:19
needs 25:3 61:21 91:6 92:10 93:2 140:10 142:8 142:14 143:21 143:25 144:6,9 144:19 154:11 155:7,9 167:10 168:5 173:10 185:22 190:14 263:14 298:2 313:2
neff 239:21
negative 184:20
negotiating 85:19
neighborhood 324:22
neither 255:5 338:12
nephrologist 259:2
nephrology 249:6
neurologist 83:13 87:22 99:24 211:4,11 211:12 212:1
neurologists 17:4 201:9 217:19
neurology 219:11
neuropathy 101:4
neurosurgeon 212:2
never 19:5,12 24:24 25:4 51:20 107:1,5 108:4 133:2,8 139:23 145:9 171:18 176:19 201:5,20,24 217:16,22 218:3 221:18 228:20 264:1 266:11 272:15 274:10 275:24 318:7 323:5,5 327:17,21
new 11:5 46:24 141:7 162:7 236:6 324:16

326:22 333:24
nice 126:2
nine 204:14
non 14:13 39:9 61:21,22
noninsurance 294:20
nonphysician 17:11
nonproteinuric 248:18
nope 164:20
normal 60:21 62:4 208:16,17 257:5
normally 63:3 78:1
north 1:1,15 2:6,6 3:5,6,10 268:7 273:13 321:1,16 338:3 338:19
notary 338:3 338:18
note 28:22 72:9 91:24 105:8,12 128:1 129:1 145:14 248:11 248:16 286:19
noted 28:23 29:6 73:19 90:20 98:5 111:13 144:23 165:18 188:11 241:1 283:22 284:16 311:18 329:25 330:7
notes 6:10 11:17 34:8 51:9,9 104:7 104:12,15,17 116:7 120:13 127:16 157:10 161:6 167:7 188:19 210:16 216:15 232:7 274:11 278:5 285:5,7 286:14 292:20 293:1,8 293:11,12,15 293:19 331:17
notice 2:3 67:3 245:11
notified 53:20
november 119:13 200:16 275:10
number 32:21 32:22 35:19,20 35:20 58:13 80:24 81:1 180:20 181:25 182:1 184:11 186:6 240:15 249:17 270:7 271:3 276:10 277:5 295:5 296:5,8 300:11 312:11 319:4 320:24,25
numbers 35:16 58:10
numerous 139:25 273:2,7
nurse 14:6 38:24 39:5,9 39:11,15 40:5 60:2 61:5 116:24 117:17 117:24 127:20 127:20 166:23 235:22 236:2 247:19 269:1 270:5 289:4 290:21,22 319:15
nurses 272:10 272:11 326:10
nursing 73:24 125:12,16,24 126:7,17 155:22 156:13 156:19,21 226:22,25 227:3 240:11 240:13 241:3 263:18 264:6,7 268:18 269:3 270:21 284:8 284:17 296:10 319:9 327:25
nutritionist 189:23 190:5 190:11

o

o 3:19 4:1 8:1 190:18,18 324:4
oath 9:5 336:16
obesity 71:11 151:1
object 92:9 122:2 140:3 151:8 153:2 155:17 164:5 174:5 268:24 284:10
objecting 150:5
objection 15:25 33:10 34:4,14 37:20 52:1 53:24 54:24 57:7 67:1,9,21 70:18 71:14 72:3,17 73:6 74:17 76:2,10 76:12 78:11 79:1,18 80:9 84:1 85:21 93:19 94:25 98:15 99:6 101:9 102:17 107:12 108:16 111:9 112:12

112:19 122:2
124:12 125:17
125:25 126:18
133:4 136:11
137:9,24 138:6
138:14 139:22
140:5,7 144:22
145:8,14 147:8
147:13 148:14
148:22 149:18
151:16 152:20
153:22 154:6
154:19 155:24
156:8 158:18
160:5 170:17
171:9,25
172:16 173:18
175:4,25
176:17 178:1
179:24 183:6
185:1,14 186:3
189:25 190:19
191:1,12,23
192:17 193:4
193:25 194:24
195:9 197:6,19
198:9 200:25
201:16 202:1
211:8,19 213:3
213:15 218:8
219:22 220:12
222:2,8,18
223:4,10 224:3
224:9,16 225:2
226:17,23
227:4,16
228:17 230:1
232:12,18,25
233:6,12,20
234:8,14,23
235:4,18 236:3
236:14 238:11
239:19 243:4
247:16,23
249:12 252:6
252:14,21
253:3 255:18
256:21 257:7
260:3,12 261:9
269:7 274:19
281:22 282:10
290:24 295:16
296:2 297:14
297:22 301:13
306:10 307:12
311:6,14,25
312:23 313:15
313:24 314:9
314:18 315:20
316:9 317:24
318:9,19
319:13 320:11
320:19 321:5
322:4,17
324:14 326:6
327:20 329:21
objections
140:23 338:7
338:10
objective 56:2
57:12 269:9
objectively
57:5
obligation
269:1 270:5,19
270:20
observe 278:7
300:21
obtain 15:3
obviously
124:19 155:6
194:21 216:13
225:19 284:23
323:3
occasion
298:25
occasions
279:12
occupational
193:6,13,16,18
233:11,15
238:21
occupations
82:3 95:19,24
occur 295:14
296:1
occurrence
155:8 243:14
occurring
190:2 246:19
offer 147:5
229:7 274:6
336:15
offered 71:25
74:8 97:25
99:9 106:3
109:9 110:1
127:7 131:2,3
132:10 159:15
256:13 259:15
259:23
offering 298:12
office 10:19
53:2 81:12,17
106:25 107:4
166:8 202:18
202:20
offices 2:5
offset 62:11
oftentimes
89:10
oh 37:25 38:11
41:17 47:9
62:8 96:19
105:10 116:13
124:3 128:4,10
149:1 163:17
200:7 202:21
202:25 219:5
256:6 262:4
264:10 285:11
317:1 334:13
okay 9:9,13
10:21,24 11:16
11:20,25 12:14
12:25 13:8,13

15:7 19:19,25 20:6 22:7 23:6 23:17 25:12,15 26:6 27:8,17 27:25 29:16,21 30:8 32:10 33:6 34:18 35:14 37:1,14 37:19 38:4,18 41:16 43:2 44:25 46:17 47:6,19 48:2 48:17,23 49:11 49:16,21 50:1 50:4 51:22 52:16 54:13 55:19 56:9 57:17 59:2 60:18 61:9,20 62:19 63:19 64:3,20 65:3 65:10,12,15 66:3,6 68:11 68:14 70:3,6 72:5,15,25 75:14 76:17 77:5 78:3,17 80:23 81:20 82:23 84:5 85:2,6,9 88:2,9 89:19 90:13,17 91:12,21,23 92:19 93:9 95:14 96:1,4 96:24 97:14,17 100:8 103:1,4 104:7,23 105:5 105:18 107:23 108:2 109:2,8 110:3 113:4 114:4 115:8,12 115:12 118:5 118:20 119:12 120:3,18 121:19 122:22 123:6,17 124:1 124:7 127:6,15 130:3,3,14 131:5 133:11 134:1,13 135:3 135:20 136:1,8 137:14 139:18 141:12,12,15 142:19 143:18 145:11 146:3,7 146:11,16 147:25 148:1 149:1,17 150:9 150:11 151:7 151:13,22 152:17,24,25 154:4 155:12 155:13,19 156:3,23,25 157:4,9 159:17 159:24 160:4 160:12,15 161:9 162:18 163:4,10,17,23 164:1,4,9,12,24 165:13,17 166:2,6 167:9 174:22 176:22 177:23 180:12 181:5 186:6,18 186:24 187:2,5 187:11 188:3,9 189:8 196:12 198:5 199:8,18 200:23 203:20 204:17 205:13 205:20,24 206:17,20 207:1,3,8,14,24 208:10 209:7 210:1,14,14,17 210:22 213:12 214:5 215:13 215:24 216:12 216:18 217:10 217:13 218:16 219:16 230:22 231:8,10,24 236:11 237:1,4 237:18 243:16 243:20 244:3 244:20 245:5 247:6 248:6 249:10 250:6 251:7,13,14,23 252:19 253:8 253:10 254:23 256:6 257:16 262:19 267:1,4 271:10,14 272:18 273:20 275:16,19 276:18,23 277:16,19 279:5 280:5,9 280:21,24 282:24 283:1 283:14 285:4 286:22 287:9 288:14 290:20 291:8 293:22 294:10 305:6 309:3 310:17 310:20 329:23 330:25 332:22 335:9,12

old 58:9 208:13 208:15,24 213:8

older 200:4

oleander 136:2

omitting 30:24

once 9:15 159:6 159:7 218:18 267:23

oncologist 169:14 173:4 173:10

oncology 77:14 77:19 173:10

ones 15:20 59:21,25 60:6 72:23 77:23 82:9 203:12 206:5 208:21 253:18 266:1 287:22 322:19
online 81:21 265:8,16,20,24 298:11
onsite 28:4,10
op 304:25
open 94:14 180:22 181:2 186:11 281:12 316:17
opened 232:1
opening 316:15
operated 13:22 108:11 109:15
opine 302:17
opined 87:6 302:5
opinion 16:20 50:18 56:5 71:16 80:12 86:6,9,22,25 87:2,3,18 97:23 98:21 99:17 102:19 102:20,22 113:9 114:5,21 173:9 175:17 200:21 205:8 225:17 226:8 242:7 249:14 269:5 272:15 276:21 288:2 300:25 304:7 305:18 306:16 307:3 311:10 315:11 320:18 322:1,2,15 323:4 324:10 325:23 327:1
opinions 10:24 17:3,7,15 86:7 86:15 87:2,16 112:21,22 242:18 243:10 249:11 268:15 268:22 275:23 276:4,9 288:17 288:20 289:7,9 289:12,14,17 289:21 290:2,8 295:13 300:22 302:15 317:19 320:25 321:1,9 321:25 322:21
opportunities 88:13
opportunity 140:10 142:14 144:13,20 145:23 149:25 300:17
opposed 60:24 140:14
opposing 147:2
opposite 302:20
optimistically 240:6
option 203:16 203:24 278:2
options 85:12 89:23
order 5:17 114:8 145:4 184:19 298:4,7 300:6 311:4
organization 12:12
organize 274:5
oriented 10:2
original 22:12 23:5 161:21 162:16 271:24 327:5
originally 22:9
originated 118:25
originator 22:16
outlined 294:16
outside 18:14 19:24 41:21 47:20 61:4 62:5 90:2 116:11,18,21 192:5,6,8,22 223:24 282:16 289:3 310:1,4
override 275:1
overweight 315:15
owes 159:12
own 163:14 169:5 171:7

p

p 5:10 8:1 37:14 38:5,6 48:25 123:2
p.a. 3:9
p.m. 160:20,21 160:21,23 215:17,18,18 215:20 257:20 257:21,21,23 286:6,7,7,11 291:14,15,15 291:17 335:14 335:16
p.o. 3:20
pa 14:5 141:3
pace 274:5
page 4:2,11 5:19 37:13 64:10 66:7 68:15 70:5 71:7 72:25 74:10 75:15 78:17,18 80:5

82:24 84:6 85:7 90:15,16 91:20 93:10 94:10 95:12,14 96:10 97:14 100:25 102:10 108:18 109:14 113:1 115:6,9 123:5,8,12,15 127:14 130:2 135:16 136:21 137:13 140:23 140:25 141:1 150:10,13 151:12,14,15 151:21 152:24 154:1 155:12 157:2,8,19 159:10,22 161:1 163:15 164:13 165:19 174:19,21 199:19 203:5 207:5,6,7,10,13 210:15,18,19 219:7,13 237:2 238:24 240:25 246:15 248:5 249:4 250:6,7 251:9,11 253:7 253:9 256:1,4 270:25 271:1,2 271:5,13,16 273:19 275:20 277:18 278:3 279:4,6 280:23 283:16 308:25 309:2,2,9,13 310:21 316:15 316:16,20 318:4 334:8,11 334:20 337:3,6 337:9,12,15,18

pages 139:25 147:10 150:2 292:17

paid 182:18 283:20 285:1

pain 24:14 102:1 276:6

panel 322:14

panic 70:13

paper 11:17 63:11 331:18

paradigm 47:24 48:25

paragraph 66:8,19 68:15 70:8 71:8 73:1 73:17 74:11 75:17 78:18 80:23 82:25 84:13,15 85:8 90:13 91:22 93:11 95:13 96:11,21 97:15 98:5 100:25 113:2,4 251:16 271:16,20 273:25 275:21 277:20 278:4 279:21 280:25 283:18 309:9 310:8 311:11 316:15,17 317:8

paralysis 193:22

park 136:3

parkinson's 40:6,10 41:24 42:2,3,6,12,13 42:16,17 83:5 83:23 94:15,20 189:10 195:7 195:13 200:2 202:4 206:2 210:4 212:15 213:17 237:13 237:22 238:10 238:19 239:22 240:3 242:1,6 244:6 287:20 297:1

part 10:14,15 10:16 19:25 31:18 39:4 46:13 47:1 48:15,16 49:11 49:13 51:13 76:4 89:12,15 114:20 167:24 175:12 227:22 235:6 284:16 289:23 294:25 299:17

partially 79:13

participants 149:20

participate 74:24 75:5 86:3

participated 74:19

particular 297:13

particularly 150:1

partner 188:10 192:1,19 195:18

partnership 36:25

party 267:7 338:12

pass 128:19 291:8 330:21

past 15:7 49:17 49:18 51:4 73:20 105:21 149:13 215:4 222:9,20 238:6 238:9 297:11 317:11

paste 163:4

pastor 75:24 81:7,18 182:13
patient 13:14 13:17,20,23 14:1,8,13,16 19:6,13,15 39:5 61:23 77:24 309:25 310:3
patient's 14:4,8 171:7
patients 13:18 16:14,21 18:18 18:19 19:8 39:13,16,21 40:6,19 172:14 172:22,24 173:7,17 296:19
patterson 3:25
paul 5:15 20:14 42:22 43:4 118:6,13 139:2 139:17
pause 326:21
pay 294:20
paying 237:10 237:18 238:4,8 238:14
pays 178:14
pd 83:1 87:22 287:19
peer 22:21,23 269:11,19 272:7,17 324:11 325:1,1 326:18 327:6
pelmutter 191:2
pen 330:16
penalty 336:7,8
pending 338:13
pension 227:25 228:5,6,7
people 35:17 39:25 40:15 47:22 152:15 158:11 200:2 302:15
perceives 240:4
percent 20:20 21:13,16 22:1 23:10 36:11 45:4,6,6 47:9 55:5,15 56:12 111:1,4 113:14 113:17,18,20 114:3,5,14,19 198:13 233:13 242:12,20 243:1,13 247:11 267:13 267:19,20 268:10 272:10 295:15,17 296:1 306:4 312:21
percentage 44:6 47:7 267:10 268:6
percentile 5:20 34:19 35:19 65:7,8 161:3 162:12 292:23
percentiles 36:19
perfect 329:15
perform 84:7 87:7 98:8 119:6 181:1,13 186:10 224:18 262:25 263:9 282:9
performance 117:13 193:19 229:12,24
performed 109:4 139:3 187:22 258:21 277:23 316:24 318:18
performing 167:23 181:7 181:10,16 182:4 230:12 239:3 294:12
performs 230:3
period 116:2 200:17 202:12
perjury 336:7,8
perlmutter 6:3 191:6 196:8 198:18 199:17 201:8 202:7,17 204:24 205:4 205:21 211:10 211:17
perlmutter's 200:24
permanently 303:3
permitted 27:20 147:5 149:22
persistent 48:11
persisting 85:15
person 17:9 21:6 23:23 24:9 27:19 28:1,14 29:1,8 86:14 87:13 88:22 100:3 101:13 158:15 182:10 192:13 230:25 254:4 282:13 302:25 322:8
personally 162:23
personnel 93:11

persons 127:23
perspective 128:15 179:4 238:17 261:13 276:17 284:1 301:8
pfr 59:13
ph.d. 5:15
phone 106:20 107:6,24 108:1 132:5 169:17 169:21,22 198:23 199:2 203:1 204:8 217:4 297:5 298:9,12,24
phrase 166:4
phrased 228:1 228:4
physiatrist 279:16
physical 66:15 98:9 127:19 184:16 185:8 185:20 193:2,8 193:11,16,21 193:22 221:21 222:1 232:23 233:5 238:15 265:6
physically 236:23
physician 13:13,16 14:12 14:14 15:9 16:9,14,20,25 17:1,9,13 18:16,18,21 50:2,9,15,22 51:23,24 56:15 67:12 68:23 77:3 87:5,11 94:22 95:21 99:21 107:17 111:6 120:24 124:21,23 125:1,6,8 132:15 178:6 178:17 180:4,6 190:24 191:7 191:16 195:6 195:23 196:6 198:17 201:18 201:23 205:12 216:20 220:7 220:16 221:25 222:4,16,24 223:8 224:7,12 224:24 226:15 226:19 227:2,6 227:9 232:16 233:4,8 234:2 234:6,21 235:16 244:18 253:5 257:2 279:17 281:8 299:25 300:13 301:2 302:1,5 302:12 306:18 315:7,9,12 328:22
physician's 57:17 59:1 64:5,16 87:10 99:13
physicians 14:22 16:6,6 16:16 17:18,21 17:22 18:13 19:3 88:25 104:10 105:2 105:13 106:11 158:21 188:23 190:22 204:11 214:24 215:9 225:9 236:1,12 245:16 252:19 253:1 255:6 256:17 259:6 259:13 290:10 298:16 300:23 301:5,11,24
pick 86:9 89:19
piece 27:2
pieces 331:18
pinpoint 198:3 241:17
pinpoints 298:13
place 88:16 166:6
placed 246:22
placement 210:23 211:25 214:1 231:3 240:16 241:3 281:12
plaintiff 8:10 15:6 28:21 44:19 47:11 72:14 82:22 89:1,4,5 132:24 134:6 170:11 279:8 280:6 281:3,8 281:9 283:24 288:12 296:25 297:1,13 299:13 301:9 302:6 304:3 307:17 315:13 315:17 329:16 333:21
plaintiff's 14:20,22,24 131:6 274:2,4 276:5 278:9 279:8 280:2 281:6
plaintiffs 2:5 3:3 15:3,8 55:13 88:25 122:6 295:10 301:18 303:21

plaintiffs's 277:22
plan 5:25 6:4,6 9:15 10:1,4 17:24 20:21,21 20:22 21:8,14 22:2 23:16 24:2,6,15 27:1 27:6,24,25 28:7 30:2,6 33:6,19 34:1,9 41:19,23 42:6 42:18 43:11 44:21 47:20 48:4 54:12,15 54:20 55:6,11 55:16,18,21,25 56:2,11 57:14 73:18 74:2,3 80:15 87:21 114:9 125:19 131:4 138:20 138:23 139:3 154:11,23 155:4,11 170:5 172:3 173:15 187:20 190:8 192:13 204:19 206:9 210:10 210:15 213:6 214:14 230:23 231:7 238:2 242:19 245:14 249:15 269:10 269:15,24 270:4 271:25 272:7 273:1 279:7,25 288:21 289:5 289:11,25 290:23 299:14 312:7,13,21 314:22 315:5 316:23 318:15 318:17 324:1 324:17 326:19 327:16
plan's 314:19
planner 14:20 14:22,24 17:10 45:11,18 61:5 101:13,16 116:21,23 119:6 179:4 271:19 288:1 294:10,19 295:1 296:23 297:20 299:19 315:17 323:1,8 324:16,25 326:8,22
planner's 87:3 116:22
planners 12:6 12:10,15 13:2 17:22,25 23:9 23:14 26:20 27:18 30:10,13 57:24 270:1 272:9,11 298:4 299:6 300:18 325:10 326:9
planning 10:2 12:1,20,24 13:1,6 14:17 17:1 18:25 20:1,4,8,10 21:5 22:25 23:8,20 24:21 25:6,7 26:2,9 29:4,19 34:22 35:5 36:15,18 43:25 45:2 80:13 111:3 118:6,17,24 119:3 126:10 126:12 128:15 128:22 129:3 130:19 139:9 171:14 177:19 193:10 214:18 217:7 221:10 221:15 238:17 261:13 264:24 265:15 266:22 289:2,12 292:12 300:4,9 313:18 317:5 317:16 321:17 322:12 323:17 325:6,19,19,21 327:13,19
planning's 30:9
plans 9:20 11:7 11:10 12:2 15:7 18:3 33:13 53:21 60:19 125:23 178:22 180:7 184:6 189:14 190:11 192:8 192:21 194:12 195:12 206:1 221:7 279:23 301:12 322:22 326:1
please 8:6 9:14 64:1 70:5 85:7 113:1,3 136:12 157:20 251:18 281:18 283:12 307:25 317:12 328:11 330:3 330:16,18
pledged 12:10
pocket 237:10
point 31:25 55:3 64:18,19 65:6,7 78:13 87:19 93:2,8 94:23 103:3 105:3 111:24 111:25 122:17 134:9 167:14 169:24 178:9 180:24 186:8

189:2,21 196:24 197:1 199:24 210:9 211:9 214:23 238:16 240:8 248:10 249:9 254:1 259:22 266:9 272:25 302:10 308:24 320:5,8 321:23 321:24 326:17
points 243:21
police 230:7
policy 35:23 294:14
polytrauma 39:7 40:4
pond 97:5
population 40:13 62:4,12
portion 266:1
portions 266:3 271:23 327:4
portrayed 326:13
portraying 235:14
position 144:19 168:23,25 277:23 278:7
positioning 127:22 128:5
positive 91:24 161:10 203:21 218:1 286:25 287:7
possessed 81:10 87:7 95:5
possible 28:2 29:5 81:21 114:10,17 153:7,9 198:6 198:11,12 200:2 209:11 305:10
possibly 113:10 113:19,22 114:2,2,5,12,13 114:23 234:16 243:1 305:11
post 258:17 259:3
postoperatively 115:14 117:19
potential 114:10,18 211:2,23 212:24,25 309:16 315:18
potentially 15:22 88:15 100:24 305:9
pouch 127:21
power 206:22 206:23 207:11 207:15,22 208:4
practical 73:24 127:20
practice 12:11 12:15 13:1,2,9 13:9 19:20 29:3,21 30:22 31:1,1 34:10 34:21 36:13,14 36:17,23 37:8 37:16 38:15 60:7 101:18 111:2 116:12 119:10 136:2 279:11 291:1,6 297:9 300:4 303:11
practices 299:6
practitioner 14:6
pre 261:20 262:5
preceding 98:10
precise 298:14
precisely 129:12 209:17 241:11 279:20
predated 138:12
predict 48:5 197:3,13 200:1
preexisting 66:21 67:4,16 71:3 153:14,20 153:24
prefer 152:13
preferable 51:24 52:17
preferably 16:11
preferred 171:2
prepare 53:21 84:9 289:25 326:1
prepared 47:19 49:23 131:4 279:25 307:9
preparing 279:7 326:1 329:25
preponderance 276:1
prerecorded 266:3
prerogative 147:24
prescribe 18:14 116:25
prescribed 70:14 124:18 135:4 201:20 202:13 218:3 218:24 219:16 220:5
prescriptions 135:12

present 3:24 8:6 46:20 83:17 120:3,6 166:22,24 188:9,16 216:10 231:24 241:2 303:18
presented 65:9 85:14 290:13 324:18
presenting 74:12
preserved 248:12
pressure 26:23
pressures 251:22
pretty 39:9 106:15 133:17 167:19,25 200:11 240:2
prevailing 322:2
prevalent 60:1
prevented 230:12
preventing 8:25 9:2 144:23 181:10 181:16 182:4
previous 45:14 135:14 236:7
previously 12:2 33:25 310:15 316:5 332:13
price 32:18 207:24 244:23 246:3
priced 21:10
prices 58:16
pricing 21:1,2
primary 39:18 40:22 41:22 42:9 43:14 99:21 118:7 299:25
printed 124:2 187:3
prior 73:13 74:1,3 92:12 130:5 141:8 147:10 275:17 316:1 318:17 320:25
private 44:14
privilege 16:2
prn 154:13,15
probability 110:22 247:10 295:18 305:21 306:3,4
probably 18:9 22:12 38:21 39:4 43:18 45:2,3,5,5 53:5 164:22 210:2 248:19 267:18 268:5,9 321:22
problem 63:6 94:6 150:19 219:14
problems 39:23 66:22 67:4,16 67:25 68:3 71:12 74:12 78:23 90:18,21 90:22,25 91:1 91:4 92:22 101:2,3,5,21 136:14 167:23 168:3 209:25 221:13 235:13
procedure 2:4 33:2 57:2 69:7 100:4,7 146:21 149:21 215:1,6 304:8
procedures 32:11 40:2 46:5,9 100:10 307:5
proceed 204:12
proceeding 267:8
process 20:1,5 43:7 48:10 278:7 316:23 317:16
proctored 266:11,25
produce 294:5
produced 26:19 186:23 187:4 285:24 294:7 327:16
product 145:3
production 332:21,24
professional 157:13 194:16 194:22 221:5 267:11 272:16 283:25 326:20 326:23 338:3 338:18
professionals 211:22
professors 266:2,7
prognosis 169:10 242:5 243:19,21 320:15
program 73:23 118:11 189:9 189:11,15 223:3,6,9,21,23 234:13 264:14 265:4,13,16
programming 212:4,6
progress 6:10 134:15 200:5 319:22 320:9 320:20

progressed 249:3
progressing 69:5
progression 67:11 240:8 248:15 309:15
progressive 181:6,19 200:3 319:11
progressively 200:18 239:12
prohibiting 143:11
projected 21:19
projection 24:11
properly 330:17
proposed 152:4
prostate 109:19 109:22
prosthetic 21:20
protocol 5:17 59:15 140:22 144:17 145:23 146:4 162:3 163:18
proven 274:4
provide 138:19 140:9 146:22 184:23 185:12 192:14 283:23 292:21 303:18 317:12
provided 34:18 185:15 255:6 259:11 295:25 312:14 332:8 333:14
provider 59:16 95:18,22 207:21 228:8 228:11 281:19 282:5,7 299:12 299:18
providers 59:9 59:18 298:25 300:5
provides 237:7
providing 224:18 299:19 299:23 332:2
pryor 280:15
pshs 85:11
psychiatric 133:12
psychiatrist 124:20 309:20 311:17 312:10 313:7
psychiatrists 221:1
psychological 73:21 220:11 220:17 221:8 232:10,17 309:24
psychologist 101:17 152:7,8 152:9 157:14 158:22 264:2 288:8
psychologists 221:5
psychology 263:23
psychotherapy 308:11 309:5 309:11,13,18 309:23 310:2,8 310:19,25 313:6
ptsd 66:24 67:20 68:2 73:3,12 137:7 137:11,16,18
public 51:13 338:3,18
publication 12:22 38:13
publicly 51:12
published 12:11,19 22:21 23:3,7,13 35:23 38:22 58:23 162:15
pull 65:2,4 123:4 293:9 304:10 305:4 305:17 334:7
pulling 305:2
purpose 11:21 292:6
purposefully 267:14
pursuant 2:3,3
pursue 94:13 180:21 221:8 302:13 303:1
pursued 93:13 152:19
pursuing 221:16
pursuits 74:13
put 31:17 69:16 82:14 91:14 96:1 115:6 116:14 120:10 140:11 141:7 142:22 143:13 144:4 146:1,23 154:24 156:25 162:4,23 164:8 184:7 203:17 203:18,19 204:2 210:6,11 212:6 239:13 254:6 263:17 276:22 312:12 335:1
puts 243:2
putting 116:16 126:24 211:13

211:15

q

quadriplegia 48:11
qualification 197:18 243:2
qualified 138:22 177:8 282:14
qualify 55:15 158:16 186:17 197:15
quality 136:14 158:13 240:5
quantified 296:7 307:10
quantify 122:15,20 179:4 242:10 268:8 298:7 310:19
quarter 84:16
quasi 42:3
question 9:10 16:24 54:25 61:1 94:12 101:18 104:12 110:15 136:4 139:10 144:24 145:5 150:20 151:1,23 152:3 153:4,11 167:5 177:18 179:7 179:12 180:15 180:19 181:25 182:1 184:11 185:7,13 186:6 186:7,8,13,16 189:5 214:8 225:5,12,19 228:12 229:2 231:17 242:16 247:18 265:18 308:20 313:9 322:11
questioning 54:1 140:4 147:8 196:14 288:15 304:6 305:15 314:15 319:2
questionnaire 31:23 94:11 106:16,19 131:19 133:20 180:13 182:7 183:13,17,19 184:1,8,10 186:20 187:1 200:24 202:16 202:19,24 203:11,25 204:9 216:24 217:2,8,12 223:15,19 240:25 242:17 243:11 253:17 253:22 297:6 305:17 317:2,5 328:7 329:17
questions 53:14 54:17,21 140:15 141:9 141:24 142:4 144:11 145:13 147:2,14 150:6 161:24 162:1 181:23,24 183:14 203:9 204:13 220:19 230:25 266:8 291:20,24 293:2,6,10 295:5 296:5 300:11 304:2 305:8 307:16 309:4 312:11 315:1,25 316:3 317:13 318:25 320:25 326:15 331:16 334:2,4
quetiapine 123:1
quick 334:3
quicker 129:20 164:22
quickly 286:2
quite 57:25 62:5 272:15
quoted 83:14 175:10 248:23 292:15
quotes 163:6,7
quoting 163:12

r

r 8:1 37:14 38:5 38:6 48:25 190:18 324:4
racine 3:10
raffa 22:17,17
raleigh 3:19
ran 19:11 47:25 49:6
ranch 97:4
random 36:5
range 36:1,7 64:21 251:2 254:6,9,11,20 285:2,3 300:7 311:23
ranged 254:24
rank 78:1
rapel 37:22,24 38:3,7
rare 298:1
rate 241:18 246:18 298:14
rates 294:12,19 294:21,22,24
rather 63:8 147:25 315:18
rating 78:7
rationale 29:23 247:14

raw 65:2,4
reached 236:7
read 51:3 99:17 113:3 114:21 116:2 130:5,9 135:21 137:15 147:1 150:12 151:5,14 153:1 154:5 155:14 155:15,15 163:22 181:3 199:21 214:6 237:16 246:23 251:18 278:10 280:25 281:13 284:5 285:22 287:13,14,17 309:8 311:11 317:7 319:4 336:9,11
readily 235:15
reading 83:8 140:1 259:21 275:25 318:3 318:11 320:1
reads 237:5 253:11
ready 193:5,13
real 16:23 227:10 286:2
reality 268:25
really 14:18 16:24 17:7,11 18:11 20:21 22:1 27:5 57:9 58:8 79:6 80:11 102:8 152:8 167:13 177:16 204:1 235:14 268:8 300:1 333:5
realtime 266:7
reason 21:4 28:3,7 31:13 57:1 61:19 71:4 97:6 98:6 128:11 137:11 137:22 138:1 230:17 241:4 261:6,11 269:4 319:21 337:5,8 337:11,14,17 337:20
reasonable 35:25 157:12 158:14 243:12 247:10 294:11 305:20 306:3
reasonably 212:16 295:14 296:1
reasoning 272:4
reasons 49:10 319:21
recall 41:2 42:16 49:7,24 50:6,17 53:22 63:25 68:7 69:8 73:4,12 78:12,15 84:6 103:17,23 104:3 109:10 111:19 119:20 121:18 124:13 129:11 133:5 133:10 135:3 135:11 159:16 166:11,12,16 178:8 188:5 190:20 194:7 196:1 198:22 212:12 216:24 220:20,25 223:25 229:1 232:2 234:9 240:21 248:15 259:21 262:18 266:5,18 268:11,13,14 268:16 272:20 273:21 274:9 274:23 275:22 278:19 279:14 300:15 304:4,6 304:10 307:18 309:4 312:16 315:3 316:3,8 318:3,11 319:2 319:7 321:4,8 328:8 332:2 333:7
receipt 274:6
receive 28:12 53:12 98:2 99:10 157:12 177:24 178:10 179:22 211:7 226:11,22,24 235:2,22 253:25 255:12
received 18:2,8 21:9 33:23 99:12 110:6 178:18 190:8 190:13,21 220:1,7 231:5 233:22 234:1 235:6 259:9 263:4 287:5 290:4 301:22 306:14 314:2 314:23 315:22 327:6
receives 178:12
receiving 121:1 125:15 126:14 126:14 191:21 191:24 192:15 192:18,25 220:11 222:6 232:10,23 233:18 234:4 255:16 260:10
recent 25:16 108:15 272:19

reception 81:22
recess 65:18
103:7 146:13
160:21 215:18
257:21 286:7
291:15
recliner 209:12
recognize
63:20,23 112:8
165:4,6,13
187:17,19
244:11,13
258:3,5 271:7
273:9 275:7,13
277:2 278:25
280:14 283:7,9
328:17 332:14
333:1,3
recommend
120:18,21
176:7 191:3
211:6 289:3,4
290:21,22
302:21
recommendat...
29:23 30:19,24
33:8 56:21,23
89:20 120:22
123:2 125:13
156:7 176:7
190:6 233:22
234:1 256:20
306:8 309:10
315:6
recommendat...
30:11,15 33:7
33:19 56:15,17
61:11 73:18,20
110:3 130:20
133:12 171:15
172:3 173:24
204:23 205:3
205:10,20
242:18 243:10
246:8,13
255:10,11
257:6,9 272:1
272:3 280:1
290:15
recommended
95:18,23
104:10 105:2
105:13 121:20
121:22,25
124:19 125:8
125:11 126:17
138:24 156:20
156:22 174:24
178:7,18 180:5
188:23 190:24
191:4,17
220:17 222:1
222:17,21,25
223:9,12,21,23
224:8,25
226:16 227:2,6
227:9 228:9
232:17 233:5
234:7,22
235:17 236:2
236:12 249:5
249:19 309:18
311:5 329:14
recommending
18:17,19 19:6
19:9 125:10
133:22 155:21
156:5 177:1
197:4,22 198:8
205:12,15
211:18 223:1
282:12 299:13
recommends
204:20 281:19
282:5,7
record 8:3 9:15
34:2,12 51:14
65:16,19 103:5
103:8 105:11
128:2 141:6
142:3 145:19
146:9,11,14,17
148:4,8,16,20
148:22 160:19
160:22 164:8
167:17 178:21
215:16,19
224:12 225:7
232:20 257:19
257:22 276:2
281:1 286:1,3
286:5,10,13
291:11,13,16
292:4 298:1
304:11 314:7
320:2 325:24
329:15 331:13
335:14 338:9
recorded 338:8
records 7:4
14:4 50:17,19
66:20 67:14
69:2 70:12,16
72:1,21 78:9
83:1,4,22 84:2
90:24 93:11
94:23 95:25
101:20 105:6
105:17 108:7
111:16,20,24
133:6 134:22
135:2,8 153:24
165:15 167:5
171:21 202:3
219:24 223:20
229:18 234:10
239:10,16,16
247:14,22
248:8 250:1,8
252:9 255:14
259:22 260:5,8
260:14 261:23
262:8 271:23
279:8 281:8
285:13 286:20
286:22,23

296:6,15 297:11 303:17 317:11 327:4 333:7,23
recover 40:18
recovered 261:19 262:5
recreational 97:2
recruiting 85:17
recur 319:24
recurrence 115:1
recurrences 113:7
red 149:6
redact 325:3
redacted 269:12 325:2
redilatation 5:6
redirect 142:21
reduced 181:19
reducing 309:23
refer 27:3 33:2 77:17 319:24
reference 57:18 59:1 64:6,16 120:1 292:2,8 292:14,17,22 293:1,4 294:2 327:13,14 334:21 335:1,4 335:7
referenced 284:3 293:19
references 30:1 30:5
referencing 162:15 292:25
referral 47:14
referred 45:16
referring 144:17 161:3 170:6 311:16
reflect 70:16 101:21 243:11
reflected 310:23 330:18
reflects 98:13 281:6 306:21
refrain 102:15
refresh 11:3 216:25
regard 192:19 306:16
regarding 73:17 99:15 146:18 170:4 173:25 252:1 263:5 274:2 295:6 298:6,24 300:12 304:7 307:4,17 314:6 315:2 316:1,7 318:1 319:1,5 322:11
regardless 101:7 102:8 312:19 318:17
region 58:4,21 58:22 284:3
registered 127:20 265:20 338:2,18
regular 178:16
regularly 97:3 97:5
rehab 22:10,13 39:5 40:17,17 44:22 45:2,4 47:13 48:1,16 49:6,12,14,15 61:5 85:24 86:8,14 88:22 182:23 184:5 229:20 231:2 264:13 272:11 289:4 302:16 302:21 326:10
rehabilitation 4:14,17,19,22 4:25 5:3 44:3 66:1 69:23 75:11 82:22 91:6 152:9 180:14,14 281:10,20 282:8 301:21 321:11,18
rehabilitative 317:14
relate 181:21 325:13
related 56:7 61:21 66:23,24 67:18,19,23 73:3,12 127:3 261:2 279:11 316:24 317:22 324:1 338:12
relates 1:5 310:25
relationship 14:1 201:14
relative 84:25 85:2 100:1 244:25
release 14:25 50:10 281:14 302:12
released 11:10 250:12 281:8 282:2 286:21 287:1,4,11 302:25 331:21
relevance 99:19
relevant 29:25 30:3,4 58:8 99:16
reliability 324:12

reliable 27:1 37:2,11 38:9 326:20
reliance 305:21
relied 38:12 133:23 172:9 250:15 290:7 301:10 304:24 320:18
relies 126:22
rely 12:25 64:4 173:14 289:22 334:23
relying 33:3 276:5 290:4
remain 184:19 253:23
remained 95:7
remaining 284:16
remember 40:24 41:4,14 43:14 44:2 49:25 54:5,6 67:22,24 68:23 69:9 72:22 73:8 94:4 107:25 121:10 130:6 132:23 135:6,14 137:10 159:20 169:23 190:2 193:7 194:9 199:4 201:3 203:1,2,18 204:3 208:16 209:17 212:17 218:10 223:22 226:1 230:2 232:5 273:24 277:10 279:20 280:4 283:10 285:5,14 296:11 305:14 309:7 324:6 332:6
remembering 72:19 125:2
reminder 10:20
reminders 331:19
remission 68:18 69:1,3,6
remote 3:1 28:15,18 81:23 82:13 108:2,3
remotes 28:20
removal 104:11 105:2,14 110:10 111:8 136:9 158:12 304:8 305:19 307:5,11
remove 113:10 305:11
removed 110:5 111:18 136:24 159:17
renal 248:12 251:21
rendered 242:18 305:20 306:2
rendering 98:20
reoccurrence 110:10
rep 82:13
repeat 76:18 104:24 299:16 308:20
repeatedly 218:13
replace 128:25
replaced 208:22
replacement 208:5,20
reply 202:20,23
report 5:9 7:5 9:21 10:6,14 10:15 25:25 28:22 29:9 31:5 32:16 34:18 51:10 56:18 59:4 60:5,12,17 67:5 68:4 70:24 82:22 86:22,23,24 87:23 88:1,6,7 92:12,15 104:13,14,19 104:21 105:5 105:16 109:14 112:2,13,18 115:9,18 118:14 120:14 121:8,16 123:16,25 125:3 129:2 131:14 132:9 133:13,18,24 133:25 134:2,5 135:15 157:2 161:21 162:10 162:16 164:6,7 164:14 165:18 165:20 167:7 167:18 170:2 175:9 182:11 186:22 188:11 188:20 189:6 195:10,17 207:10 213:21 213:24 214:7 214:10 216:16 219:8 223:14 227:22 229:16 230:6,9 232:8 248:5 250:11 250:16 254:25 256:1,4 260:16 260:20 261:18 262:14,20,23 263:8,12,17

272:13 278:6 278:14 284:4 287:1,3 293:20 294:8 298:5,22 301:19 304:12 306:5 307:6,8 307:22 308:6 310:15,24 311:13,18 312:6,8 316:14 317:3 324:11 324:12 329:7 329:10 330:18
reported 1:23 78:22 260:5
reporter 8:8 331:13 338:1,3 338:18
reports 10:25 11:8,8,10 28:24 33:18 51:3,17,20 53:6 120:16 276:6 285:24 286:21 287:11 287:17,24 288:3,10 290:3 290:7 292:5,19 293:14,17,24 295:22 300:18 303:9,21 321:9 331:21,23 333:20
represent 160:1 205:2 332:14
representation 327:12
representative 81:23
represented 103:24 242:19
representing 3:3,17 239:17
request 20:1 72:5,7 85:16 106:6 245:8,24 258:15 259:7 259:17
requested 250:8,10
requests 147:3
require 28:5 102:7 110:9 111:8 113:10 114:23 115:14 117:2,19 127:19 196:9 199:24 200:13 209:12,19 246:9,20 247:1 297:1 305:11 306:8 309:14
required 84:10 101:7 102:14 197:3,9,14 198:6 241:3 293:7 294:11 308:11 309:11 312:18 313:13 315:16 317:15
requirements 24:12,13,17 28:5 61:7 98:9 115:5 270:3
requires 196:4
requiring 84:9
research 9:21 9:24 27:5 30:1 30:3,4,4 59:24 172:19 215:3,4 254:7,10 298:11
researched 279:10
researcher 166:24
researching 35:13
reserved 335:18
resignation 98:11
resource 26:1 37:13 293:20
resources 35:11 36:9 84:20 85:3 162:19,21,22 292:16 293:13 293:16 300:5
respond 16:7 195:22 228:13 297:7,8 318:1
responded 98:7 181:5 216:24 217:1,3,9 325:4
responding 195:21
responds 254:4
response 62:15 107:1,5 181:25 272:17
responses 31:23 94:11 199:1 220:7,19 225:14 317:5 317:12
responsibilities 84:8 85:19
responsibility 145:15
responsible 212:4 259:2
rest 309:22
restate 37:21 147:15
restricting 183:8
restriction 282:17,21
restrictions 51:2 89:12,14 89:23 91:11

95:18,23
119:22 166:10
183:10 184:17
184:24 185:9
185:21 188:4
216:8 228:9
231:20 239:18
276:16 278:9
281:20 282:1,6
282:7,12
result 303:15
resulted 32:19
274:7
resulting 42:4
resume 39:3
47:25 48:14
145:21
retained 122:8
132:16,22
retainer 53:17
retired 16:17
43:1 93:18
227:14,17
228:3 229:3,13
265:12
retirement
80:25 81:4
93:13 98:7
182:12 227:19
229:25
retiring 43:9
236:8
return 46:12,15
274:12 281:9
281:15 322:8
reverse 282:19
284:20
review 11:2,20
53:20 73:7,9
74:1 92:11
99:4,18 100:13
109:11 112:1
112:17,24
127:9 130:23
134:22 135:8
140:10,14
141:6,10,20,23
142:3,5,8,15
143:14,22,25
144:7,10,14,20
145:25 147:3,6
147:22 148:1
149:10,25
150:1 159:12
171:20 185:25
200:24 203:4
203:14 215:12
220:22 229:18
232:19 251:4
251:24 272:17
274:10 277:14
280:19 281:7
283:12 300:6
300:18 324:11
325:1,2 333:12
333:23
reviewed 11:7
11:8 12:4
22:21,23 63:24
72:2 74:9 95:2
95:25 98:14
100:20 105:17
106:4 108:6
110:2 111:11
125:3 127:8,10
129:5 131:3
133:6 135:2
138:16 139:6
159:25 173:21
174:18 199:17
202:3 203:5
212:9 252:8
259:25 260:6
260:14 262:10
269:11,19
272:7 279:7
286:20 296:6
303:21,22
306:19 307:8
307:21 312:6
316:6 317:2
324:10 326:18
327:6 331:20
332:16
reviewing
20:19 55:23
111:24 143:12
149:12 315:7
317:11
reviews 144:25
229:12 230:3
revoked 267:5
richard 5:4 6:5
7:9 97:15,18
246:5
ridge 3:14
riding 97:3
right 9:17 12:3
14:4 18:10,16
23:1 24:4,16
26:14 27:21,24
28:14,17 29:3
29:7,10 32:23
33:17,22 36:17
50:12 52:24
56:17 57:23
60:8 63:9,19
64:7,9,12,24
65:15 70:4
72:9 75:16
82:14 83:21
84:5,18 85:6,7
88:7 89:3
91:14 92:25
93:1,4 96:1
104:22 105:8
106:17 108:9
109:5 113:24
115:12 116:8
120:25 121:15
125:2 131:21
136:3 137:2
140:13 151:22
151:24 152:3
156:19 157:6,7

158:2 160:15
162:4,24 163:2
163:10 164:11
165:19 167:8
170:7,8 176:6
176:12,13
177:5 181:3,24
182:3,8 183:20
183:23 191:6
192:3,7 196:8
196:16 204:6
205:19 207:3
207:25 208:25
208:25 209:2
212:12 216:22
217:23 219:12
219:12 220:10
230:18,22
234:4 238:1,2
242:2,24 243:1
243:24 245:21
250:19 254:19
256:1 257:16
263:4 265:9
267:18 268:3,4
271:2,3 275:3
278:1 281:13
281:14,16
282:5 285:15
289:15 290:20
291:8 292:1,3
294:9 303:5
313:25 316:16
324:13 326:15
331:24
rise 136:18
risk 181:18
191:14 194:21
213:13,18
214:25 215:5
215:10
rn 266:19
rob 3:25
139:11
robert 5:1 6:7
277:2
rock 131:5
rockwood
98:24 256:3,10
rockwood's
99:4 256:13
role 45:24
47:21 182:18
rollz 207:16,20
room 119:20
rothchild 4:23
6:1 82:22
83:15 84:7
86:2 88:13
187:21,23
188:22 189:8
190:10 193:23
199:23 201:5
201:15,21,25
202:8,10,14
204:18 208:6
208:12,13
209:12,19
210:12,16,25
213:8 287:20
288:4 301:20
rothchild's
83:1 198:17
207:9 209:21
211:23
rounding 199:9
rounds 26:20
rpr 1:23
rule 5:16 21:13
21:17 140:22
144:6,9,16
146:22 149:21
rules 2:4
146:21
run 120:14

s

s 4:1,10 8:1
11:12 43:3
50:8 190:18
288:3,4
safe 83:15
94:12,17
180:20 182:2
184:19 193:20
195:20 196:11
196:12,14,16
196:21,23,25
197:1 282:21
safely 181:1
186:10
safety 194:21
salisbury 1:15
2:6 3:6
sampling 36:6
santos 268:11
324:1
sat 266:11,21
save 63:10
268:19 336:12
saw 11:5,10,14
11:19 68:9
125:9 203:21
230:9 285:13
287:11,17,19
287:23,25
288:1,9,13
324:18
saying 17:5
24:25 27:22
29:8 33:18
38:19 46:18
57:25 62:8
69:14 78:5
83:12 86:11,13
88:21 89:14
100:15 102:6
110:25 121:18
135:14 145:4
158:9 160:13
169:2 193:8
196:16,19,25
223:24 229:9
237:23,24
238:6 240:7

241:12 243:6 253:16 254:19 263:14,15 269:24 281:25 282:1 284:8,15 284:19,19,25 302:20 313:1 320:2
says 17:2 21:5 28:20 29:4 35:5 36:2,7 80:2 88:20 95:17 110:20 114:17,21 116:13 117:19 128:2 130:16 136:7 144:6,9 147:20 155:6 157:24 165:24 173:11 174:24 177:13 197:13 212:25 241:24 254:10 271:21 272:8,8 273:25 274:15 275:10 284:15 288:7 294:23 300:10 316:22 317:4 331:1 333:6
scale 77:8
scan 41:12 159:6 160:11 160:14
scenario 19:22 27:23
schedule 176:3 294:21
scheduled 213:2
schemes 77:17
schmit 5:24 169:14 170:3 170:16,23,25 171:6,22 173:24
schmit's 173:21 174:3,16,16
schwartz's 239:11
schwarz 31:12 93:22 94:2 213:25 217:14 217:17,22 218:2,3 219:21 219:24 222:3 222:20 223:12 225:11 228:10 230:14,19 233:22 234:1 235:7 237:14 237:23 239:1 240:7 242:15
scope 18:15 19:24 24:24 61:4 90:2 101:17 102:24 116:11,18,22
278:8 289:3 291:1,5
screen 120:6
se 23:4 47:25 54:19 229:4
search 51:21
searched 228:15,20,24 229:6
searching 229:4
second 18:18 18:21 20:16 32:16 73:1 74:11 82:25 83:9 85:7,10 90:13 94:5 95:17 96:11 97:14 117:3 124:5 130:9 151:25 164:15 165:20 169:20 184:1 186:7,15 196:2 205:6 207:12 237:5 251:15 278:4 288:11
secondary 40:23 42:9 91:6 183:22 316:24 317:17 317:21 318:15
secondly 35:15 86:24
section 29:19 66:5 75:13 229:16 262:14 308:10 309:12
sections 229:19 301:19
security 44:13
see 24:9 28:4,4 28:5 29:9,11 29:13 47:24 49:22 53:5 57:23 59:16 62:8,10 66:8 68:17 69:25 70:9 78:18 80:24 81:3,20 81:24 84:17 92:18 96:16,19 96:23 97:24 98:4 100:17 104:18 117:5 124:7 130:14 134:15 145:24 152:14 157:24 165:10 174:23 182:23 187:6 190:11,25 191:17 194:2 225:24 231:16 232:20 244:21 247:3,4 248:17 249:1,2 250:25 251:12,15 260:4,19 262:7

273:12,16
275:10 277:24
278:15,16,17
300:1 304:16
304:21 307:10
308:8 310:6
330:22
seeing 46:14
56:4 78:12
129:11 178:8
189:23 190:15
191:10 203:3
299:24 309:19
seek 121:5
178:22 179:13
180:7 192:21
313:22
seen 12:1 13:12
25:1 38:16
40:13,14,20
69:2 71:19
77:22 78:8,9
101:20 111:10
112:9 139:23
145:9 165:16
201:5 211:11
217:16 218:17
223:20 234:10
251:16,20
255:15 256:16
260:23 262:8
271:10,11
274:10 275:24
285:23 314:11
sees 240:6
seizure 90:21
select 60:4
114:25
selected 18:12
self 152:15,16
274:5 276:6
semi 16:17
send 60:14
106:19 108:22
133:19 158:21
183:25 204:14
204:15
sending 215:12
sense 152:15
260:24
sent 32:12,13
50:24 106:15
131:16 182:6
183:14,16,18
183:21,23
202:16 203:4
203:25 204:3,4
217:8 306:6
329:2,3
sentence 68:17
73:1 74:11
75:19 78:21
80:24 82:24
83:7 84:13
85:10 87:4
88:10 95:17
96:11 98:4,23
102:11 113:2
157:25 165:20
237:5 246:16
251:19 253:11
277:20 278:4
278:12 325:22
separate 21:21
21:21,22 33:2
48:20,21 282:6
331:6
september
273:16
sequela 136:13
136:18 184:18
serve 55:22
serves 248:2
service 30:17
31:16 56:10
66:24 67:19
81:23 82:13
117:9 128:23
128:23 197:23
224:2,8,15
237:7,11,12,19
238:5 260:2
282:18 295:9
295:25 312:13
312:15,19
313:12
services 7:9
44:4 55:20
56:13 73:24,25
80:14 84:19
87:20 115:15
115:16,25
117:2,20
157:13 167:10
168:6,8,10
175:18 176:8
177:2,4,11,20
177:21,24
178:7,11,13,18
178:23 179:14
179:23 180:5,8
182:24 184:5
191:22,25
192:5,9,16,19
192:22 225:1
226:12,16
229:20 230:24
231:2 235:3,6
235:17 237:7
241:1 255:13
262:11 263:6
281:11 283:24
295:6,23 296:9
296:14 297:2
297:10 300:14
301:11 302:22
317:14,21
323:23
serving 211:14
261:7 274:7
session 311:22
311:23 312:2,3
312:4 313:2
set 17:12 46:7,8
323:15

settings 310:3
several 15:19 49:16 53:15 54:5 66:21 73:20 74:12 127:3 130:19 131:24 277:11 279:12
severe 78:7 153:16 210:5
severely 153:10
sfakianos 5:10 69:13 107:9,11 107:23 108:4,8 110:8 111:7 115:13,17,21 115:24 117:11 304:7 305:9,18 306:6,15 307:3 328:7
sfakianos's 112:1
shahnasarian 4:24 5:2,5,8 11:13
shahnasarian's 82:21 90:7
sheet 336:1,14 337:1
shopping 117:15 263:2 263:11
short 49:10 87:17 116:1
shoulder 89:13 330:20
show 123:17 129:13 292:9
showed 248:12 285:9
shower 209:20
shrimanker 276:7,15
shuffling 40:11
side 15:5 44:21 50:5,11 53:18 89:4,5,5 115:7 170:14 309:16
sign 306:18 336:17
signature 335:18 337:22 338:16
signed 14:25 32:15,17 33:5 94:11 112:22 140:25 141:2 247:2 305:23 317:2 328:7,22 329:4
significant 90:20,22 158:12 240:2
signs 68:25
similar 214:10 258:10
simply 21:8 23:23 28:25 55:9 267:22
simultaneously 104:14
single 59:16
singular 241:9
sir 9:19 77:22 103:1 104:25 125:14 184:14 199:21 246:11
sit 128:14 222:23 267:12 307:2 333:25
site 59:24
sitting 172:23
situation 19:12 20:25 40:8 53:18 88:23 150:17 158:7 209:21 210:4 299:15 301:4 302:24 303:7 303:12 315:14 326:2
skilled 117:9,16 117:24 119:2 156:19,21 226:22,25 227:3 235:22 236:2 240:11 240:13 241:3 296:10
skills 81:7,11 81:16 82:2 95:5,9,10 183:3,11 303:2
skip 225:25 237:1
skipped 45:25 157:25 219:13 247:7 304:17
sleep 71:12 176:3 239:23
slight 46:22
slightly 58:13
slowly 200:3
small 239:25
smaller 48:4
smith 3:9 188:12
smoking 236:22
snf 239:1 240:11,13,17 241:13 243:22
social 44:13
software 85:15
solely 43:20 133:23
solicited 84:21
somebody 19:5 224:21
someone's 282:20 299:24
sorry 24:23 25:18 31:8 37:25 38:4,5 75:20 76:18 83:7 90:16

96:16 104:24
119:21 124:2,4
124:8 128:8
136:11 137:16
157:8 161:7
174:20 200:7
203:7 214:7,9
219:13 233:24
247:7 285:11
312:2 324:7,8
sought 167:15
194:22 324:10
sound 77:21
205:4
sounds 93:2
103:4 218:21
308:17,22
source 29:5
30:19,25 33:8
33:20 292:17
292:22 294:2
295:10
sourced 85:12
sources 12:25
30:14 292:2
298:6,16,21
300:9
south 3:15
span 139:7
sparks 5:4 6:5
7:10 31:11,12
32:4,5 91:20
92:1,3 93:12
93:17 94:13,17
94:19 95:4,20
206:3,9,19
207:20 208:1,7
208:24 209:13
209:13,20
210:2,7 213:20
213:24,25
215:22 216:1,3
216:19 217:16
217:23 218:4,7
218:11,20,25
219:17,20
220:10,20,22
221:7,21 222:6
222:17 223:2
223:21 224:1
224:14 226:11
226:21 227:14
228:9,15
229:11 230:7
287:21 288:4
301:20 329:24
speak 16:15
17:11 53:16
97:12 105:11
121:6 126:13
132:17,25
139:9 170:19
170:23 171:2,3
171:5 172:6,7
172:8 217:4
249:22 258:23
261:14 268:19
270:14,19
speaker 149:7
speaking
170:16,25
190:3 217:6
222:13 308:25
319:14
speaks 34:25
special 83:3
85:13
specialist 71:11
100:2,18
122:24 155:10
157:17 211:11
215:12 218:1
249:22 300:2
320:17
specialists
201:11 320:14
specialize
211:12
specializes
211:13
specializing
211:15
specialty 152:5
specific 5:9
11:21 41:2,4
92:13 115:16
150:24 174:9
177:9,17
184:15 185:7
185:20 221:9
229:2 237:9
254:17 299:11
304:2 322:13
323:19,22
specifically
13:12 15:13,16
41:15 43:13
54:4 61:2,8,17
62:9 66:4
72:18,22 73:8
105:10,15
119:20 121:17
126:8 132:11
132:23 134:12
135:6 145:24
146:21 152:21
156:4,24
169:23 179:16
181:13 185:2
186:7 189:16
190:12 192:10
193:8 195:14
206:21 215:2
221:3 225:3
226:1 228:19
228:19 230:3
232:21 244:23
245:7,17 246:4
249:13,17
250:10,12
252:22 254:2
255:9 259:8
274:20 275:15
289:11 294:23
318:21 330:7
332:6

specifics 254:5
specified 253:13 254:14
specify 33:12 64:14
specifying 33:7 33:20 89:11
speculation 76:13
speculative 84:24
speech 222:7 222:17 233:18
speed 129:25
spell 48:24 135:24
spelling 38:1 123:9
spencer 108:14 108:21
spent 267:11
spinal 39:6,21 41:22 49:25 279:15 299:25 300:1 325:8
spine 67:23
spoke 17:21,22 21:8 25:9,19 68:25 69:12 87:5,11 92:4 92:23 93:21 100:2 107:23 110:7 112:3 121:2 124:14 156:14,17 191:8 195:5 200:15 202:21 203:1 208:2 212:20 217:14 228:21 249:21 274:25 300:9 307:1
spoken 37:3,4 88:3
square 249:10 288:19,20
stable 248:9,17 249:7 251:21 319:6,23 320:5 320:7
stack 304:21
staff 131:25
stage 78:2,2 248:1 249:3 319:6 320:5,7
staged 320:2
stages 242:6
staging 77:22 78:6 319:24
staller 332:1
staller's 288:9
stamped 251:1
stand 154:8 221:4
standard 28:11 34:21 59:14,17 59:21,22 61:6 113:8 163:18 288:16 294:22
standards 12:11,14 13:2 13:9 25:9,17 26:3 29:3 30:21 31:1 34:10,16 45:15 52:3 214:13 270:3,23 325:5
standing 147:7 147:13
standpoint 80:13 302:8
stands 77:6,20
stanford 172:18
start 96:15 136:5 137:21 193:13 240:7 267:2 291:21 310:10
started 20:9 83:8 130:12 147:16
starting 85:10 212:21
starts 66:8 70:8 71:8 78:19 80:25 84:13 95:14 96:12 123:10 251:16 271:15 278:4
state 78:1 149:18 185:3 210:23 303:9 338:3,19
stated 9:15 10:25 33:25 52:23 111:7 115:18 121:17 252:20 253:1 293:13 318:5 319:5 327:1 338:6
statement 10:11 27:3,4 27:14 34:8 35:2,9,24 68:20,22 76:1 81:15 84:23 91:9 92:2 102:16 146:18 154:14,16 161:23 163:20 163:21,23 177:3 284:17 294:14 300:10 306:19
statements 12:19 23:7,13 25:10,13 26:8 27:9,18 30:9 30:22 34:10 67:8,15 97:7 183:1 214:19 214:21 295:3
states 1:1 8:14 8:16 10:9

48:11 101:1 115:13 127:16 130:4 137:1 157:10 164:5 165:20 170:2 245:9 279:6 325:24
stating 111:17 306:19
station 3:20
stats 299:10
status 57:3 77:24 78:4,10 94:15 167:20 169:9 180:23 200:22 261:20 262:6
stay 141:5 189:12 291:1
staying 149:2
stays 331:5
stenographic... 338:8
step 302:22
steps 194:10 283:25
steve 42:25
sticker 307:25 328:11
stiffness 239:25
stimulator 40:8 188:24 210:24 211:7,18,25 212:14 213:2 214:2 215:1
stipulated 5:16 140:21 144:16
stoma 127:21 138:5 150:23 151:3
stones 39:23
stop 86:4 94:19 99:2 128:12 261:7 292:16
stopped 87:11
stops 142:11 250:3
story 87:17
stradler 11:7
straight 209:11
strange 123:21
strategies 310:1
street 2:6 3:5 3:14
stressors 310:4
strike 145:16
strongly 270:2
student 20:11 42:24 43:10 84:22 85:17 119:8
students 84:10 118:12
study 26:21 36:5 62:4 265:23
subject 150:2
subsequent 200:15 306:14
subsequently 273:6
substantive 329:9
substitute 329:16
subsumed 232:8
successfully 81:5
sufficient 311:3
sufficiently 149:24
suggest 61:6
summaries 90:7
summarize 105:6
summarized 334:8
summary 66:4 69:22 75:12 82:20 91:19 96:8 244:16,17 246:16 247:3 248:7 250:1,18 272:1 306:20
summit 35:15
sundays 81:7 182:13
supervision 14:5
supplement 162:10 292:5 293:23 333:15
supplemental 7:11,13 164:7 187:4 287:5 332:3,7 333:10
supplementally 186:23
support 102:13 117:6,12 121:12 176:2 177:20 178:12 192:11,18,25 195:8,13 247:14 295:13 296:8,8,9,13 297:2 300:13 301:11 309:21 311:4 312:14 312:22 313:11 323:22
supportable 35:7
supported 295:22 312:21
supportive 309:17,23 310:2
supports 164:3
supposed 154:23

sure 10:23 17:16 49:21 68:5 69:17 70:1 77:11 78:7 92:17 106:15 113:6 134:21 135:13 139:11 142:19 160:17,18 162:1 163:17 167:19,25 171:24 174:11 178:15 186:24 196:3 203:22 205:18 215:15 217:24 218:22 225:12 233:14 240:24 252:15 271:6 285:2 304:14 309:12 328:20 331:9 334:13
surgeon 100:7 100:17,23 108:15 109:1,7 110:7 112:14 252:5,8,12 258:21
surgery 21:2,22 23:24 24:12 97:12 109:4 114:18
surgical 7:8 40:2 46:4 55:10 108:9 113:10 114:23 115:3,4 214:1 215:8 305:11
survey 35:18 35:22 299:10 306:6
surveyed 35:17
surveying 298:16
surveys 26:20 301:22
susceptible 185:4
suspended 267:5
sustained 66:23 67:18
suzanne 134:23 135:23
swear 8:8
swimming 74:14
switch 160:3
sworn 8:19 338:6
symposiums 37:4
symptoms 42:7 79:7 105:22 181:10,15 182:4 189:17 212:22 221:12 230:11 240:3,7 309:16,24
syndrome 40:10 42:2,14
synopsis 163:21
synthesis 161:25
system 44:11 44:13

t

t 4:1,1,10 109:18,18 123:2 135:25 190:18 324:4
table 7:9 21:21 21:21,22 24:1 24:5,18 27:23 31:14 55:14 114:9 116:6,9 116:16 122:12 157:8 159:24 160:8 207:1,2 237:15 289:7 289:16 312:7
tables 20:20,24 21:18 22:1,4,6 22:7,12,14,16 30:18 56:14 64:2,4 120:23 123:4,7,15,16 123:20 127:1 127:14 204:19 206:18 207:10 210:16,19 237:2 247:5 253:9 290:12 310:22 316:18 316:20 329:24
take 18:1,6 27:11 36:8 43:17 56:3 65:10 70:15 89:25 103:3 104:7,15,17 105:12 112:24 120:13 126:2,5 141:13,14,22 143:16 146:6 147:4,21 160:11 164:14 166:6 167:23 176:24 177:15 214:13,19 216:5 227:24 243:16 264:18 290:3,5 291:11 310:14 315:17 322:7 330:16 331:13
taken 2:3 41:25 42:1 65:18 103:7 146:13 160:21 177:3 188:20 215:18 216:15 257:21 286:7 291:15 322:15 336:10

338:5
takes 90:25 231:22
talk 49:16 121:13 137:19 151:24 153:13 169:18 177:20
talked 33:24 35:1 92:20 105:19 115:4 167:11,20,22 181:22 189:17 258:11 287:12 287:25 324:7 334:16
talking 20:13 26:4 33:15 41:18 59:11 73:15 87:4 134:24 161:2 257:15 269:14 271:8 285:12 316:22 324:20 334:15
tarajara 324:3
task 259:10 290:13
tasked 44:20
tasks 277:22
taught 21:14 24:3 43:6 260:25 265:13 295:3 298:5,6
tax 303:17
taylor 1:23 338:2,17
teach 325:10
teacher 20:10 83:3 85:13
teaching 269:25 309:25
teachings 119:9
team 20:2 47:1 48:6
technically 120:20
telephone 298:18
tell 9:10 18:24 26:16 31:21 77:9 87:13 109:17 129:12 129:14 151:18 168:25 186:21 198:5 211:20 219:6 221:18 228:2 234:15 236:15 253:18 254:2,5 275:25 276:12 296:17 298:5 303:6 325:12
telling 61:12 65:5 69:9 87:12 88:19 121:10 204:16 317:10 326:3
tells 58:20,21 117:23 197:2
ten 103:3 204:15
tenets 300:8
tenure 98:10
term 13:25 44:10 49:10 118:21 128:17 177:21 298:2 315:8 319:21
termed 26:21 245:13
terming 55:7
terminology 221:9
terms 217:6 225:4
terrain 97:4
terribly 241:17
terry 4:13,18 5:13 7:5 69:24 123:19 307:17 308:6 317:16
testified 8:20 71:11 73:2 91:2 98:25 129:8 150:3 160:2 167:6 174:17 244:20 256:18 257:3 262:15,24 273:6 291:24 303:20 327:17 327:22 328:4 329:23
testify 273:5 338:6
testifying 9:3,7 11:21 84:7 135:4,11 200:12 212:13
testimony 9:22 49:18 71:20 73:4,8,10 98:12,13,14 99:5 137:23 138:1,2 140:9 143:6,9 145:17 147:19,20 154:18 174:4 175:8,12 212:9 220:23,25 260:17 261:19 262:3,4,7,9,10 273:22 274:2 274:16 275:18 276:4 278:6,14 291:23 293:18 295:14 296:11 300:15 312:16 314:4 315:3 318:4,12 328:8 338:7,10
testing 266:19
text 13:5 163:1
thank 19:19 26:6 41:17

62:20 63:6
69:14 75:9
79:9 82:14
84:5 93:9
103:1 129:19
130:13 152:17
161:18 165:2
205:24 206:10
206:14 251:23
291:10 293:22
305:5,7 315:10
316:21 318:24
328:14 331:11
334:1
thanks 157:22
tharwani 7:6
133:15,19
307:22 308:7
309:10 310:7
310:25
tharwani's
133:13 312:6
that'd 85:1
192:5 226:6
theirs 245:14
theory 38:15
therapeutic
21:19
therapies 312:7
therapist 48:8
therapy 46:8
113:8 189:19
193:2,7,8,11,13
193:16,17,18
193:21 221:22
222:1,7,17
232:24 233:5
233:11,15,19
238:22
thereof 136:13
136:15 338:13
thick 292:11
thing 24:7 40:4
48:12 96:8
117:15 168:15
204:6 243:17
269:9 272:8
288:14
things 10:1
11:19 17:5
22:22 23:21
31:9 35:13
39:19 44:2
72:20 92:23
120:9 128:21
163:5 175:21
175:23 176:6
177:19 181:22
203:13 209:23
213:18 223:13
226:14 236:20
236:24 243:6
285:23 287:11
290:20 323:12
323:15
think 9:22
14:15 16:18
17:23 22:10
26:1 28:19,23
29:15 37:21
39:3 40:21
42:20 46:23
47:4 49:24
50:16,24,25
51:7 52:2,13
52:22 53:1,5
55:25 59:23
60:8,9 63:4
64:10 67:5
70:2 79:11
82:11 96:3
100:12 105:23
106:4 111:23
113:24 116:2
120:5 121:2,11
125:2 127:5
128:2,7 130:11
130:25 131:13
135:25 147:22
149:4 153:11
159:14,22
161:1 166:20
166:23 167:1
169:4 175:1
177:16,21
178:2 179:16
182:15 183:16
188:10,11
189:12,20
193:6,20
195:20 196:19
196:20 197:24
199:23 203:12
203:17,18
204:1 207:5
216:23 221:23
230:10 231:25
242:13 243:5
244:5,20
248:20,21
265:18,25
266:23,24
270:4 273:23
278:2 279:19
280:7 282:2
285:20 286:25
287:22,23
304:24 316:15
321:12,19
324:2 326:11
327:14 328:21
328:24 329:1,6
thinking 8:25
38:5 154:9
189:20 218:10
222:19 240:22
third 68:15,17
75:17 91:22
98:4 102:11
246:16 288:11
thomas 275:14
thought 25:15
38:5 96:20
186:21 264:10
274:11

thousand 255:1
thousands 59:14,14,18,18
threatening 181:18 185:4 185:16
three 17:4,5,6 64:18,19,23 65:6,8 66:10 125:12,14 127:5 161:1 238:22 241:12 241:15 246:22 253:2 257:12 263:5,16 300:9 330:6 334:8,11 334:20
threshold 34:24
threw 26:12 37:25
time 9:14 13:15 36:16 39:4,4 44:1 45:3 47:13 54:10 65:10 76:4 78:13 80:20 83:2,2,6,24,24 88:12 92:10 93:8,15 94:1 103:15 105:3 111:25 116:2 119:22 122:17 124:14 132:8 134:9 139:7 140:14 146:5 147:3,21 149:19 151:19 156:16 158:21 159:4 162:15 164:5 166:9,19 167:15 178:9 188:3 189:2,22 195:17 197:1 200:17 202:12 205:17 208:7 208:21,22 211:10 213:5 213:20 215:14 216:7 218:15 220:13 221:23 227:24 228:21 229:25 231:20 232:13 233:1 233:15 235:24 248:10 249:9,9 257:17 265:5,7 265:17,19,22 267:11 271:12 274:7 279:20 284:13 290:2 294:3 296:20 297:25 302:10 311:18 314:17 315:14,16 320:6,8 324:19 326:18 333:22 338:5,8,10
timeline 244:16 256:6,16 261:24
times 37:4 40:7 40:9 62:10 107:1,2,3,5 131:24 132:2 171:23 204:15 218:7,10 238:22 273:2 276:20 321:23 323:3,20,21
tinajero 268:12 324:4
tiny 200:9
title 20:23
titled 80:24
today 8:25 9:3 11:3,22 128:14 169:8 172:23 222:23 267:12 287:12 288:1 292:1,7 293:2 293:8 294:8 295:6 307:2 333:19,25
today's 8:4
together 35:21 162:5,6,23
told 15:18 61:18 79:2 80:17 100:23 105:12 110:12 113:22,25 114:7 144:18 167:25 168:16 168:18 169:24 170:8 200:19 202:4,21 203:3 203:8,13 204:7 209:14 212:23 212:24 229:2 235:7 239:2 247:9 306:1
tolerance 181:20
tolerate 167:21 178:25
tone 222:11
took 9:6 104:2 198:25 232:7 260:21 267:3
top 102:11 149:6 251:15 271:2,3,15 273:13 275:21 279:6 309:2,9
topic 111:23
total 154:21 303:9
totally 303:4
towards 81:20 84:12 317:3
track 283:5 288:12
trained 309:19
training 16:16 43:25 119:3

158:5,16 264:4 264:7,8,9,16 295:1,4
transcribed 338:9
transcript 5:12 5:14,23 6:2 97:19 99:13 100:13 106:3 109:8,25 127:7 127:11 129:13 130:24 131:1 131:11 132:7 134:8,11 135:7 135:17 140:2 143:3 145:10 147:10 149:11 150:10 160:1 174:17 246:1,6 336:9 338:6
transcripts 150:2 245:22 259:13,16
transferability 302:24
transferable 81:7,11 82:2 95:5,9 183:3 183:11 303:2
transferred 95:10
transition 81:6 88:15 95:6 267:17,22,23
transitioning 236:6
transplant 21:3 97:12 100:2,7 100:12,16,18 100:22 244:18 244:25 246:10 246:14,20 249:22 252:5,8 252:13,20 255:3 257:11 258:17,17,22 259:3 261:2,20 262:5,25 320:22
transplanted 253:25
transplants 100:10
transportation 21:23 254:25
trauma 39:25
traumatic 42:4
travel 168:12 274:5
traveling 28:17
treat 172:13 173:7
treated 18:19 19:6,12,14 40:14,15,16,21 173:16 212:16
treating 13:13 13:16 14:12,13 14:19,22 15:8 15:19 16:14,21 18:17 19:2,4,8 50:2,8,15,22 51:23,24 52:4 52:5,11,13 56:16 88:25,25 89:8 94:22 98:24 99:13,23 100:14 106:11 124:17,21 125:1,8 131:6 157:17 169:14 171:2 172:24 173:12 178:6 178:17 180:4,6 188:23 190:24 191:7,16 195:5 195:23 198:17 201:17,22 202:10 216:20 218:19 220:6 220:16 221:25 222:4,16,24 223:8 224:7,24 226:15,18 227:2,9 228:11 232:16 233:4,8 234:6,21,25 235:16,19 236:1,12 245:16 252:19 253:1 255:6 256:17 257:2 259:6,13 279:17 280:2,3 290:10 295:11 295:24 296:7 296:15,18 300:12,22 301:2,23 302:1 302:3,5 312:13 315:6,12
treatise 13:7 19:20 25:19 26:9,15,18 27:4 294:16
treatises 10:3 19:17 22:11 25:11 36:3 45:14 87:16
treatment 14:9 19:7,9 20:2 36:22 37:7 48:6,10 57:18 68:18 79:7 84:2 101:7 102:7 113:9 114:22,24 133:12 159:3 171:7 173:25 201:6 204:20 217:17 219:20 219:25 220:4 225:7 248:11 256:2 313:2
treats 100:9 105:24 172:22

tremor 40:11
trevor 216:22
trial 137:18 334:20,24 335:6
tricia 11:9
tricky 16:23
tried 74:23 107:3 131:24 169:13 189:12 234:15
trier 17:23 18:11
triggers 310:2
trouble 200:10
true 47:16 143:9 154:12 168:24 281:16 282:19 295:15 295:18 301:16 301:17 307:22 336:11 338:9
truth 338:6,7,7
truthfully 9:3
try 15:12 28:15 40:17 52:9 61:6 75:3 106:20 108:20 109:20 143:10 169:19 206:17 209:11 245:12 245:15 259:5 293:4 300:6 304:18
trying 60:2 63:10 94:3 179:11 195:22 199:4 227:21 229:1 262:13 265:17 294:3
tsa 276:8,13
tubin 3:19 4:3 4:5 8:12,12,23 16:3 33:14 34:7,17 37:23 52:10 54:7 55:12 57:16 62:18,22 63:1 63:3,10,13 65:10,13,21,24 67:6,13 68:1 69:18,21 70:22 71:18 72:4,24 73:11 74:25 75:10 76:7,12 76:14,16 78:16 79:15,22 80:22 82:16,19 84:4 86:17 90:6,11 91:18 92:16 93:23 95:3 96:7 98:18 99:8 101:19 102:21 103:2 103:10 107:19 108:17 111:12 112:6,16,25 122:4 123:14 124:16 125:22 126:4,21 128:4 128:9 129:24 130:12,15 133:7 136:20 137:12 138:3 138:10,18 139:15 140:5 140:13,21 141:10,17 142:10,17,20 143:2,5,14,18 143:24 144:3,6 144:9,15,22 145:2,7,11,14 145:20 146:3,7 146:10 147:17 148:2,9 149:13 150:8 151:10 151:20 152:23 153:18,25 154:17 155:2 155:20 156:2 156:12 157:21 157:23 158:25 160:6,16,24 161:12,17,19 164:4,10 165:3 170:21 171:13 172:1,20 173:20 174:11 174:14 175:7 176:5,21 178:5 180:3 183:12 185:6,18 186:5 187:11,15 190:4,23 191:5 191:15 192:2 192:20 193:9 194:6 195:2,11 197:12,20 198:15 199:13 201:4,19 202:6 206:8,13,15,16 211:16 212:8 213:7,19 214:8 214:10,12 215:13,21 218:12 220:2 220:15 222:5 222:15,22 223:7,18 224:6 224:13,20 225:8 226:20 227:1,7,23 228:23 230:5 232:15,22 233:3,9,17,23 234:11,20 235:1,10,21 236:10,17 238:20 240:10 243:15 244:9 247:12,20 248:4 249:25 250:23 251:6,8 252:10,18,25 253:6 255:22

257:1,13,17
258:1 260:9,15
261:17 269:16
270:7,11 273:8
275:3,6 277:1
277:6,9,15,17
278:21,24
280:12,20,22
282:4,24 283:4
283:6,13,15
284:14 285:17
285:25 286:4
286:12 291:2,8
291:12 295:16
296:2 297:14
297:22 304:24
306:10 307:12
311:6,14,25
312:23 313:15
313:24 314:9
314:18 315:20
316:9 317:24
318:9,19
319:13 320:11
320:19 321:5
322:4,17
324:14 326:6
327:20 329:21
330:22 331:12
332:17,22
334:3,6 335:9
tukes 6:13
257:18 258:7,8
258:16 259:6
259:19 260:1
260:10,17,21
261:1,7,7,19
262:3,12,15,24
263:17 287:18
288:5 289:22
turn 64:1 66:7
68:14 70:4
75:15 78:17
84:6 85:6
91:20 97:14
102:10 113:1
123:23 130:2
135:16 136:21
137:13 139:21
150:9 151:11
152:24 155:12
164:11 166:4
174:19 180:12
199:19 206:18
215:22 231:8
243:24 246:15
248:5 251:9
270:25 271:13
273:19 275:13
275:20 277:18
279:4 280:23
283:16 308:10
310:18
turned 58:12
149:6
turning 159:24
204:17
two 10:3 17:18
19:10 31:9,15
63:2,4 66:10
67:7 81:7 89:8
89:20 96:3
125:12,14
182:13 209:15
241:6,8,15
263:18 279:22
284:2 292:11
329:5 330:5,8
331:1,7
type 41:2,4
48:12 53:18
94:18 95:11
102:19 109:6
117:15 156:10
168:14 181:1
186:10 193:23
208:3 227:19
264:19 297:3
297:19
typed 104:17
163:1,3,7,11,23
338:9
types 20:24
41:8 226:14
254:22 296:13
297:10
typical 78:6
254:11 303:11
typically 27:12
78:1 117:7,22
146:25 149:24
195:15 221:4
221:11 224:11
231:21 260:7
267:12 285:1
296:14 297:19
298:20 300:6
303:17
typing 84:19
85:16,18 167:8
248:23
typo 329:13
typos 137:20

u

u 43:3 123:2
190:18
u.s. 3:18 45:23
46:2,11 49:3
285:2
ucr 36:6 162:13
uh 49:5 60:25
89:2,16 107:7
117:1 124:6
125:4 131:15
135:19 158:8
219:9 238:21
249:4 256:5
261:25 269:17
277:15
ultimately
34:11 100:16
ultrasound
159:7,7 160:3
160:10

unable 84:14 84:19 180:25 186:10 277:21
unanswered 223:14,16
unavailable 28:15 284:9,18
unaware 75:19 75:20 82:25 91:25 93:4,13 222:24 307:3
unbiased 269:6
unclear 325:24
under 14:5 116:7 144:16 145:3 149:21 157:10 183:9 210:16,19 273:13 278:3 309:12 312:7 336:7,8,16
undergone 73:20
underlined 219:10
underneath 288:7
understand 9:5 9:10 15:21 21:12 54:9 57:25 59:2 63:12 110:23 113:19,21 114:1 134:1 172:19 175:2,6 177:6,9 179:11 179:20 198:3 209:2 227:8 236:18 256:24 319:10 325:14
understanding 61:14,17 62:15 79:12 101:15 107:16,20 108:6 122:7 156:9 169:17 172:15,17 173:3 182:18 212:19 227:18 234:19 313:17 313:19 314:8 317:20 318:14 320:1,8 333:11 336:15
understood 38:23 75:6 88:9 90:3 110:21 112:20 209:9 210:6,14 231:8 247:13 257:14 272:15
unfamiliar 150:4
unit 64:11 122:23 139:1 155:6 207:15 311:21 312:25 313:14
united 1:1 8:13 8:16 10:9 164:5 245:9
university 265:2,10
unjustified 56:22 57:6
unrelated 61:24 62:1 66:15,21 91:1
unsafe 195:24
untimely 164:6 164:7
update 84:10 312:8 314:21 314:23
updated 57:21 58:2,7
updates 58:10
upper 193:19
upwards 321:23
urinary 74:21 113:11 120:10 127:21 128:13 305:12
urological 100:9
urologist 98:24 99:23,25 100:1 100:9,14 108:19 131:6 190:15,17,18 190:25
urostomy 126:24
usdoj.gov 3:22 3:22
use 19:21 20:23 25:23 35:7 36:3,4,7,11,18 37:13 45:14 52:4 58:8 59:21 60:6 84:9 85:15 92:6 114:15 118:22 166:2 183:2,10 208:3 217:5 224:1,14 243:18 269:25 294:22,24 298:4 325:9 329:11
used 34:25 35:5 35:19 57:17 58:11 60:1,1 82:1 177:21 227:21 242:25 268:9 298:17 310:2 315:9
useful 20:3 100:12 258:20 259:1
uses 36:9 92:1 92:5,6 196:22
using 17:25 36:21 37:6 38:11 93:8

161:2 162:12 163:24 236:21 236:22 239:24 260:1 289:1 292:23
usual 35:24 294:11
usually 297:3
utilize 259:9
utuc 101:2,8,22 102:14

v

va 15:19 16:6 169:24 333:7
vague 177:5
vaguely 272:21
valid 26:25 112:23 306:21 326:19
value 126:13 128:24,25 192:12 303:18
valued 18:24
vantage 87:19
variation 46:22
varied 45:3
variety 298:15
various 279:10
vegetative 48:11
vehicle 97:4
vendors 207:16 298:11
venture 24:24
verbatim 73:9
verdict 73:3
verify 59:10
version 27:10 32:13 294:17 329:6
versions 48:4 329:5
versus 14:19 17:12,22 21:15 52:17 89:13 210:4 329:7
veterans 16:6
vha 6:11 251:1
video 103:25 266:1,3
videographer 3:25 8:3 65:16 65:19 103:5,8 146:8,11,14 149:2,5 160:19 160:22 215:16 215:19 257:19 257:22 286:3,5 286:10 291:13 291:16 308:13 308:17,21 335:13
videos 266:4
videotaped 1:11 2:2
view 128:22 276:2
violate 30:25
virtue 156:18
visit 237:9 247:25
visits 125:12,16 125:24 126:7 126:17 155:22 296:10
vocal 222:10
vocalizations 222:12
vocation 87:20
vocational 43:22 44:12 45:4 50:18 51:1 75:21 76:9,20 77:1 80:14 85:24 86:7,14 87:13 88:22 89:22 97:23 98:21 99:17 105:22 180:14 182:23 183:21,23 184:2,5,13 229:19,20 230:24,25 273:23 276:17 281:2,4,10,20 282:8 301:21 302:7,21 321:11,17 323:2
voice 85:15
volume 26:8,12
voluntarily 85:11 93:13 94:9 227:14 228:3 229:12
volunteer 274:8
volunteered 193:12
vulnerable 153:15

w

w 50:8
w99593 6:23
wages 81:10 89:24 182:20 274:3 303:10
waiting 139:12
walking 234:17 263:2,10
wallace 2:5 3:4 3:5 4:4 8:9,9 8:10 15:25 33:10 34:4,14 37:20 52:1 53:1,8,11,24 54:24 57:7 62:21,24 63:2 63:6 67:1,9,21 70:18 71:14 72:3,17 73:6 74:17 75:9

76:2,10,13,15
78:11 79:1,18
80:9 84:1
85:21 90:9
92:9 93:19
94:25 98:15
99:6 101:9
102:17 107:12
108:16 111:9
112:12,19
122:2 123:13
124:12 125:17
125:25 126:18
128:1 130:10
133:4 136:11
137:9,24 138:6
138:14 139:11
139:22 140:7
141:2,2,4,14
142:7,13,19
143:11,16,21
144:2,4,8,12,18
144:25 145:6,9
145:12,18,22
146:6,16 148:5
148:10,13,17
148:21 149:1,3
149:9,17 151:8
151:16 152:20
153:2,22 154:6
154:19 155:17
155:24 156:8
157:19,22
158:18 160:5
160:17 161:16
161:18 170:17
171:9,25
172:16 173:18
174:5 175:4,25
176:17 178:1
179:24 183:6
185:1,14 186:3
187:6 189:25
190:19 191:1
191:12,23
192:17 193:4
193:25 194:24
195:9 197:6,19
198:9 200:25
201:16 202:1
206:10,14
211:8,19 213:3
213:15 214:6,9
218:8 219:22
220:12 222:2,8
222:18 223:4
223:10 224:3,9
224:16 225:2
226:17,23
227:4,16
228:17 230:1
232:12,18,25
233:6,12,20
234:8,14,23
235:4,18 236:3
236:14 238:11
239:19 243:4
247:5,16,23
249:12 251:3
252:6,14,21
253:3 255:18
256:21 257:7
260:3,12 261:9
269:7 274:19
277:4,7,13
280:18 281:22
282:10 283:11
284:10 290:24
291:10,19
295:20 296:4
297:18,23
301:13,15
304:22 305:1
306:13 307:15
307:24 308:3
308:15,19,23
309:1 311:9,20
312:1 313:8,20
314:3,13,25
315:24 316:11
318:2,10,23
319:17 320:16
320:23 321:7
322:10,24
325:11 326:25
328:3,10,14,15
329:22 330:14
330:19,24
331:15 332:11
332:19,23
333:2 334:1
335:11
wallacegraha...
3:7
walls 194:20
want 9:13
10:21 15:11
25:4 27:3 31:4
32:7 36:10
44:16 49:16,20
63:14 75:5,18
103:3 118:22
128:20 140:17
141:16,22
142:3,20 143:7
143:19,23
145:21 146:3
157:7 159:19
160:16,25
164:12,14
170:13 197:4
197:15,21
198:2,7,11
204:11,12,15
205:2,25
206:21 219:6
238:9 288:15
292:3 297:19
304:11 312:18
330:20
wanted 31:4,6
31:9 51:3
53:16 184:2,4
211:10 291:21
295:8 326:22
329:12

wanting 44:15
wants 195:21 226:5 239:13 239:14
ward 3:9
wardandsmit... 3:11
washington 3:21
waste 294:3
watch 330:21
water 1:4 66:14 130:7 336:4
way 21:5 23:3 26:22 49:11 52:21 54:23 64:12,24 89:10 102:20 108:24 142:5 154:15 159:2 177:17 179:17 192:24 193:21 194:14 195:21 200:6 219:7 241:5 248:22,24 270:6,18 293:1 293:24 299:7 306:16 319:20 323:6 326:13 329:18 333:6
wayne 4:20 5:7
we've 287:12 287:25 312:5
web 37:12,13
website 60:10
websites 59:19 59:20 60:14
week 31:16,21 116:4 125:13 125:14 237:8 330:8,9
weekly 330:1 331:2
weighed 322:2
weight 16:19 16:25 18:20,22 73:22 138:5 141:25 150:18 150:18,21,22 150:24 151:1 274:1,3,16,22 276:3 278:13 279:24 315:2 315:15,19 322:16
welch 5:1 6:7 90:8,19 91:2 187:12 206:2 206:13,19 207:5,21 208:2 208:7 209:13 209:20,23 210:6 231:9,14 232:4,10,23 233:10,18 234:12 235:2,8 235:17,22 236:2 237:3,6 237:10 241:2 241:25 287:20 288:4
welch's 90:24 236:11
welcome 141:23 143:10 147:21
went 11:6 12:4 43:8,10 104:13 150:15 209:5 212:18 265:13 327:25 329:6
wheelchair 28:6 206:22,23 207:11,15 208:4
whitney 3:5 8:9 53:10
wife's 245:25 260:17
willing 85:4
wilmington 3:10
witness 8:8 33:11 34:5,15 52:2 54:4 55:2 57:9 63:7,12 65:12,15 67:3 67:10,22 70:20 71:15 72:18 73:7 74:18 76:3,11 78:12 79:2,19 80:10 84:2 85:22 92:14 93:20 95:1 98:16 99:7 101:10 102:18 103:4 107:16 111:10 112:13,20 122:3 124:13 125:18 126:1 126:20 128:7 130:14 133:5 136:13 137:10 137:25 138:7 138:15 141:12 141:15 142:25 143:4,12 145:25 146:22 146:24,25 147:11,25 148:6 149:10 149:14,22 150:3 151:18 152:21 153:4 153:23 154:8 154:20 155:19 155:25 156:9 158:20 160:18 165:2 170:19 171:10 172:17 173:19 174:8 175:5 176:1,18 178:2 179:25 183:7 185:2,15

186:4 187:8
190:1,20 191:2
191:13,24
192:18 193:5
194:1,25
195:10 197:7
198:10 201:1
201:17 202:2
211:9,20 213:4
213:16 215:15
218:9 219:23
220:13 222:3,9
222:19 223:5
223:11 224:4
224:10,17
225:3 226:18
226:24 227:5
227:17 228:18
230:2 232:13
232:19 233:1,7
233:13,21
234:9,15,24
235:5,19 236:4
236:15 238:12
239:20 243:5
247:6,17,24
249:13 251:4,7
252:7,15,22
253:4 255:19
256:22 257:8
260:4,13
261:10 267:11
269:8 272:24
274:20 277:10
277:14,16
280:21 281:23
282:11 283:1
283:14 284:12
285:21 290:25
291:9 295:17
296:3 297:15
301:14 306:11
307:13 308:24
311:7,15
312:24 313:16
313:25 314:11
314:19 315:21
316:10 317:25
318:20 319:14
320:12,20
321:6 322:5,18
324:15 326:7
327:21 332:25
335:12 338:13
wonderful 325:7
word 44:9
45:14 52:5
114:15 128:3,8
163:3 166:2
204:4 211:1,1
217:5 242:25
243:19
worded 179:16
words 196:22
227:20
work 38:24
39:15 40:5
43:23 46:12,16
47:8,9,10
66:23 67:18,23
80:6 85:13
86:12 88:14
95:11,18,23
145:3 181:21
183:8 228:9
231:2 268:2,6
271:24 274:13
281:15,19
282:2,3,6,7,12
282:14,21,22
302:1,19 303:7
322:9 327:5
worked 39:2,12
47:23 75:24
182:12 230:7
worker's 44:11
workers 44:9
44:12 321:2
323:8
working 76:22
76:25 80:7
83:16 87:12
88:21 94:19
99:1,2 149:8
152:14 228:21
229:10 274:25
282:16
workplace
93:15,18
102:14 228:14
works 152:11
152:12 187:10
242:14,15
workspace
82:3
worse 200:18
320:10
worsen 150:19
worth 147:17
152:15,16
wound 117:25
write 105:15
199:1 241:14
287:23 297:6
writing 132:8
182:9 295:13
written 53:6
241:4 333:6
335:2
wrong 150:16
199:15 219:6
246:12 248:23
wrote 11:18
15:22 23:3
86:24 87:25
88:8 104:20
114:20 163:20
202:19 203:13
204:8 210:9
213:5,10
269:15,23
290:2,7 324:16
wwallace 3:7

x

x 4:10
x86647 6:25

y

y 43:3
ya 46:24,25 47:2,16
yard 167:22 168:2 179:19
yeah 11:18 21:18 22:15 23:15 25:22 26:5 28:3 32:3 32:5 33:15 45:22 49:13 52:9 63:1,18 65:5 70:1 77:11 81:2 94:6 95:16 96:23 101:24 106:19 107:7 113:6 117:4,21 118:15 123:19 128:7 129:15 129:17 130:12 130:13 131:9 138:15 142:7 148:2 154:3 158:3 161:6,7 163:17 166:5 168:1 169:20 184:14 186:25 187:3,11 199:21 202:15 205:7 206:4 207:2,13 208:1 209:3 214:22 217:1,11 219:3 227:11,24 230:9 250:4 251:6,14 255:8 256:7,8 265:4 267:21 270:17 271:2 278:1 280:20 283:13 285:21,24,25 291:12 296:3 298:18 322:18 330:23 331:9 334:17
year 43:1,18 58:3,8,9 68:8 78:14 136:5 159:7,8 186:17 238:22 241:5 241:18,19 263:18
years 16:16 19:8 20:12 31:15,18,20 39:5 42:20,25 49:8 59:24 73:21 160:2 162:6 208:6,24 213:8 240:23 241:5,6,8,12,13 241:15,15,19 241:25 243:23 246:22 253:2 257:12 263:16 269:18 275:17 277:11 279:3 280:16 313:17 321:21,22 324:21 330:5,8 331:1
yep 83:10 207:19
yesterday 63:24
yount 11:9 287:16 331:25
yuhas 42:25 119:8

z

z 135:25
zero 257:4
zoloft 136:5
zoom 3:9,14,20 28:11 103:11 108:1 119:12 149:9,19 165:21 166:7 187:22 203:2 215:25 231:13 232:1 239:2

Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate. The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

DISCLAIMER: THE FOREGOING FEDERAL PROCEDURE RULES ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY. THE ABOVE RULES ARE CURRENT AS OF APRIL 1, 2019. PLEASE REFER TO THE APPLICABLE FEDERAL RULES OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.

VERITEXT LEGAL SOLUTIONS

COMPANY CERTIFICATE AND DISCLOSURE STATEMENT

Veritext Legal Solutions represents that the foregoing transcript is a true, correct and complete transcript of the colloquies, questions and answers as submitted by the court reporter. Veritext Legal Solutions further represents that the attached exhibits, if any, are true, correct and complete documents as submitted by the court reporter and/or attorneys in relation to this deposition and that the documents were processed in accordance with our litigation support and production standards.

Veritext Legal Solutions is committed to maintaining the confidentiality of client and witness information, in accordance with the regulations promulgated under the Health Insurance Portability and Accountability Act (HIPAA), as amended with respect to protected health information and the Gramm-Leach-Bliley Act, as amended, with respect to Personally Identifiable Information (PII). Physical transcripts and exhibits are managed under strict facility and personnel access controls. Electronic files of documents are stored in encrypted form and are transmitted in an encrypted

fashion to authenticated parties who are permitted to access the material. Our data is hosted in a Tier 4 SSAE 16 certified facility.

Veritext Legal Solutions complies with all federal and State regulations with respect to the provision of court reporting services, and maintains its neutrality and independence regardless of relationship or the financial outcome of any litigation. Veritext requires adherence to the foregoing professional and ethical standards from all of its subcontractors in their independent contractor agreements.

Inquiries about Veritext Legal Solutions' confidentiality and security policies and practices should be directed to Veritext's Client Services Associates indicated on the cover of this document or at www.veritext.com.

Exhibit 775

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF NORTH CAROLINA

IN RE: CAMP LEJEUNE WATER LITIGATION	) Case No. 7:23-cv-00897
This Document Relates to: ALL CASES	)

VIDEOTAPED DEPOSITION
OF
MARJORIE HACKETT-WALLACE
Wednesday, March 4, 2026
Salisbury, North Carolina

Reported by: Christine A. Taylor, RPR

Job No.: 7903876

On March 4, 2026, commencing at 9:08 a.m., the videotaped deposition of MARJORIE HACKETT-WALLACE was taken pursuant to notice and pursuant to the Federal Rules of Civil Procedure, on behalf of the Defendants at the offices of Wallace & Graham, 525 North Main Street, Salisbury, North Carolina.

* * *

REMOTE APPEARANCES:

Representing the Plaintiffs:

WALLACE & GRAHAM
BY: WHITNEY WALLACE, ESQ.
525 North Main Street
Salisbury, North Carolina 28144
704.633.5244
wwallace@wallacegraham.com

and

WARD AND SMITH, P.A.
BY: JENNA BUTLER, ESQ. (via Zoom)
127 Racine Drive
Wilmington, North Carolina 28403
910.794.4800
jfb@wardandsmith.com

and

BELL LEGAL GROUP
BY: LESLIE LAMACCHIA, ESQ. (via Zoom)
219 Ridge Street
Georgetown, South Carolina 29440
843.438.7480
llamacchia@belllegalgroup.com

Representing the Defendant:

U.S. DEPARTMENT OF JUSTICE
BY: MELANIE KONSTANTOPOULOS, ESQ.
GIOVANNI ANTONUCCI, ESQ.
JOEY TURNER, ESQ. (via Zoom)
1100 L Street NW
Washington, D.C. 20005
202.598.9555
melanie.konstantopoulos@usdoj.gov
giovanni.antonucci@usdoj.gov

Also Present:
Matt Walters, Videographer

C O N T E N T S

	PAGE
EXAMINATION BY MS. KONSTANTOPOULOS	9
EXAMINATION BY MS. WALLACE	217

* * *

E X H I B I T S

EXHIBIT	DESCRIPTION	PAGE
Exhibit 1	Subpoena/Notice of Deposition for Marjorie Hackett-Wallace	14
Exhibit 2	Invoices PLG-EXPERT_HACKETT-WALLACE_ 00000000119 - 120	20
Exhibit 3	9/24/2025 Engagement Letter PLG-EXPERT_HACKETT-WALLACE_ 00000000121 - 122	21
Exhibit 4	10/29/2025 Expert Opinion Report	22
Exhibit 5	10/29/2025 Expert Opinion Report with handwritten changes	47
Exhibit 6	1/20/2026 Rebuttal Expert Opinion Report, Corrected: January 27, 2026	51
Exhibit 7	First Amended Materials Considered List for October 29, 2025 Expert	52

	Report of Marjorie Hackett-Wallace, RHIA, CHC, CFE, CPMA, CPC, CDEO, CPIP	
Exhibit 8	Supplemental Materials Considered List for October 29, 2025, Expert Report of Marjorie Hackett-Wallace, RHIA, CHC, CFE, CPMA, CPC, CDEO, CPIP	53
Exhibit 9	Expert Opinion Report by Wang Ji, MD	54
Exhibit 10	Expert Report of Dr. Syed A. Hasan	55
Exhibit 11	Plaintiffs List of Conditions PLG-EXPERT_HACKETT-WALLACE_ 00000000015 - 18	55
Exhibit 12	Plaintiffs List of Conditions PLG-EXPERT_HACKETT-WALLACE_ 00000000100 - 103	58
Exhibit 13	1/20/26 Rebuttal Expert Opinion Report	59
Exhibit 14	Materials Considered List for January 20, 2026, Expert Rebuttal Report of Marjorie Hackett-Wallace, RHIA, CHC, CFE, CPMA, CPC, CDEO, CPIP	60
Exhibit 15	Rebuttal Expert Opinion Report,	60

		Corrected: January 27, 2026	
	Exhibit 16	Third Supplemental Materials Considered List for October 29, 2025, Expert Report and January 20, 2026, Expert Rebuttal Report of Marjorie Hackett-Wallace, RHIA, CHC< CFE, CPMA, CPC, CDEO, CPIP (March 3, 2026)	62
	Exhibit 17	1/14/2026 Letter from Dr. Thomas Longo	140
	Exhibit 18	Novant Health records 00357_DYER_0000002061 - 2073	142
	Exhibit 19	Novant Health records 00357_DYER_0000000061 - 84	142
	Exhibit 20	4/25/2024 Deposition Transcript - Michael Davis, MD	168
	Exhibit 21	7/10/2025 Deposition Transcript - Dean W. Felsher, MD, PhD	183
	Exhibit 22	Specific Causation Expert Report of Dean W. Felsher, M.D., Ph.D.	188
	Exhibit 23	Order Regarding Track 1 Trial Plaintiff Selection Protocol (Case Management Order No. 12)	194
	Exhibit 24	2/4/2026 Deposition Transcript - Syed Hasan, M.D.	201

Exhibit 25	1/12/2026 Letter by Richard L. Barbano, M.D., Ph.D.	204
Exhibit 26	1/9/2025 Letter from Heidi B. Schwarz, MD, FAAN	211
Exhibit 27	2/25/2026 Deposition Transcript - Heidi Schwarz, MD, FAAN	212

P R O C E E D I N G S

THE VIDEOGRAPHER: We are now on record. Today's date is March 4, 2026. The time is 9:08 a.m. This is the video deposition of Marjorie Hackett-Wallace in the matter regarding Camp Lejeune Water Litigations being held in Salisbury, North Carolina.

Our court reporter is Christine Taylor, and I'm Matt Walters, the videographer.

Would counsel please introduce themselves.

MS. WALLACE: Whitney Wallace with Wallace & Graham for Plaintiffs' Leadership Group.

MS. KONSTANTOPOULOS: Melanie Konstantopoulos on behalf of the United States.

MR. ANTONUCCI: Giovanni Antonucci for the United States.

* * *

MARJORIE HACKETT-WALLACE, having first been duly sworn, was examined and testified as follows:

* * *

EXAMINATION

BY MS. KONSTANTOPOULOS:

Q. Can you please state your full name.

A. My name is Marjorie Hackett-Wallace.

Q. Can you please state your current business address?

A. My current business address is my home, 103 Elbridge Road, New Britain, Connecticut 06052.

Q. As you heard, my name is Melanie Konstantopoulos, and I am an attorney for the Department of Justice. I represent the United States in the Camp Lejeune Water Litigation currently pending in the Eastern District of North Carolina.

Have you ever had your deposition taken before?

A. Yes, I have.

Q. How many times?

A. Two times.

Q. What kind of cases did you have your deposition taken in?

A. There were two civil cases.

Q. Were you an expert in those cases or

were those personal cases?
A. Those were personal cases.
Q. What was the nature of those personal cases?
A. Motor vehicle accidents.
Q. You took an oath before we started this morning; correct?
A. Yes.
Q. Do you understand the nature of that oath?
A. Yes, I do.
Q. It requires you to fully answer each question; is that correct?
A. It -- it requires me to answer each question fully and truthfully.
Q. If you're not sure of an answer or don't have a complete answer, then you must still answer the question to the extent that you can. Do you understand?
A. Yes.
Q. As you can see, a court reporter is taking down everything that we say. Because she can only record words, it's important that you answer any question verbally. For example, you must say "yes" or "no" rather than nodding or

shaking your head. Do you understand?

A. Yes, I do.

Q. Also, please talk at a reasonable pace like the pace I'm speaking now so the reporter can record everything; is that fair?

A. Yes.

Q. We should also try not to interrupt one another during the deposition. Otherwise, the reporter will not be able to record us accurately. So please wait until I finish my question before you start to answer, and I will not interrupt you either. Do you understand?

A. Yes.

Q. Once the deposition is complete, you will be given an opportunity to read the transcript of your testimony and to make any corrections. You will then be asked to sign it. Do you understand?

A. Yes.

Q. Only you are testifying today. You must answer to the best of your ability. You may not ask other people for their help. Do you understand?

A. Yes.

Q. If you do not understand a question,

please let me know and I will try and clarify. If you do not ask for clarification, I will assume that you understood the question. Is that fair?

A. Yes.

Q. During the deposition, you may hear other attorneys say "objection." Unless your attorney instructs you not to answer the question, please answer the question after the objection has been made. Do you understand?

A. Yes.

Q. Is there any reason why you are unable to give your most truthful and accurate testimony today?

A. No.

Q. Is there any reason your memory might be impaired?

A. No.

Q. Have you taken or do you intend to take any medication that might affect your ability to testify accurately or honestly today?

A. No.

Q. So you know you may ask for breaks during the course of the deposition. Please just answer any question that I have asked before we

take a break. Do you understand?
A. Yes.
Q. Am I correct that you have been retained by the Plaintiffs' Leadership Group as an expert witness in the In Re: Camp Lejeune Water Litigation pending in the United States District Court for the Eastern District of North Carolina?
A. Yes.
Q. When were you hired?
A. I don't recall off the top of my head. I believe it was September 2025.
Q. Who hired you?
A. I think it was a concensus of the leadership group.
Q. That would be the Plaintiffs' Leadership Group?
A. Yes.
Q. Before being retained, had you heard about Camp Lejeune?
A. Only in passing.
Q. What did you know?
A. I hadn't -- I -- a headline here and there, but I've not read any of the articles.
Q. What was your understanding of Camp

Lejeune before you were hired in this case?

A. I really didn't have an understanding of it because I didn't read the articles.

Q. Had you seen any commercials on the television regarding Camp Lejeune?

A. No.

Q. At this time, I am going to be showing you what will be marked as Exhibit 1.

(Exhibit 1 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. If you could please examine this. You would agree that this is a copy of the deposition notice and subpoena in this case; is that correct?

A. Yes.

Q. Did you have any of the previously mentioned materials in your custody or control that are contained in the subpoena?

MS. WALLACE: Object to form.

THE WITNESS: What specifically are we talking about? This request for emails, letters, correspondence with these people?

BY MS. KONSTANTOPOULOS:

Q. Correct.
A. I have no communication with them.
Q. Did you provide responsive documents to this subpoena to plaintiffs' counsel?
A. Everything was provided to counsel.
Q. When did you provide that?
A. Exactly? Hmm. It was prior to the required date. Off the top of my head, I don't know. I want to say it was the end of January or February.
Q. Did you do anything to prepare for your deposition today?
A. Yes. I reviewed files.
Q. What files did you review?
A. I reviewed my reports. I reviewed the footnotes. I reviewed depositions. I reviewed some of the -- just in passing, some of the Excels that were provided.
Q. And did you speak to anyone in preparation for today's deposition?
A. Just counsel.
Q. How many times did you meet with the plaintiffs' attorneys to prepare for your deposition today?
A. Once.

Q. And how long was that meeting with the plaintiffs' attorneys, approximately?

A. Approximately eight, maybe nine hours.

Q. And who was present during those meetings -- during that one meeting?

A. Whitney.

Q. Was anyone else present?

A. We did have a brief videoconference with Leslie and Jenna.

Q. Okay. Earlier, you stated that you reviewed depositions in preparation for today's deposition; is that correct?

A. Yes.

Q. What deposition transcripts did you review?

A. Daniel Clarke. I -- can I just -- I think their names are in here. I don't remember all of their names. I'm sorry.

Q. If you need to refresh your recollection with any of those doc -- any of your documents, that's fine.

A. Thank you. Ms. Hartwell, I reviewed hers. Briefly Ms. Zikaryan's.

Q. Thank you. And I noticed that you

were looking at a document that's in front of you. What document are you refreshing your recollection with?

A. My report. I have my report. I have my rebuttal and my materials consider lists. Would you like copies?

Q. No, that's okay. Thank you.

Are any of the documents in front of you marked up in any way?

A. Yes. Yes. I had noticed during our meeting yesterday that some of the pages for -- for example, Daniel Clarke, where we had notated were incorrect. So we made some corrections, if you'd like copies.

Q. Yes. I would ask for copies during one of the breaks.

MS. WALLACE: Yeah.

MS. KONSTANTOPOULOS: Thank you.

BY MS. KONSTANTOPOULOS:

Q. Other than the documents that you mentioned, do you have any other documents here today?

A. I have, as I said, my rebuttal and my materials considered lists.

Q. So nothing else?

A. Nothing else.
Q. Okay. Other than the markings that you just mentioned earlier, are there any other markings on any of the documents you brought today?
A. No. Just, like I said, wherever we found that the page might not be correct. And it was mostly Daniel Clarke. There might be one -- Ms. Hunter. And I believe on the rebuttal report, we made a correction on a Bates number that was incorrectly stated on one of the Peterson documents.
Q. Have you ever testified at trial?
A. No.
Q. In arbitration?
A. No.
Q. Have you ever testified at mediation?
A. No.
Q. Prior to this case, had you ever prepared an expert report for litigation?
A. No.
Q. Prior to this case, have you served as an expert?
A. No.
Q. So this is the first case that you

started serving as an expert witness; is that correct?

A. Correct.

Q. Why did you start working as an expert witness?

A. A gentleman had approached me maybe a year or so ago. He has a group of people that he, I guess, manages as an expert witness. He felt that my qualifications were perfect for that. And he asked me if I was interested in, you know, him sending me any cases. And I said, certainly, I'd be glad to.

Q. What is name of the gentleman?

A. Craig -- I may say this wrong -- Moskowitz. He does -- he's a civil engineer who does a lot of engineering cases, but he said he's had people approach him and ask him for an expert in billing, coding, and documentation.

Q. How much have you billed to date in this case?

A. I would have to look at my invoices. I don't know. And I believe you have copies of them.

Q. Does your payment depend on the outcome of this case?

A. No.

Q. Did you have the opportunity to be an expert in other cases that you may or may not have turned down?

A. I have a couple of other cases that I am an expert in. One is a criminal case where I'm working with the defense. One is an accident case where I'm reviewing medical records. And I recently had someone reach out on a qui tam case.

Q. In the personal injury case that you just referred to, are you serving as an expert for the plaintiff or the defendant?

A. The defendant.

Q. But you have not prepared expert reports in those cases yet; is that correct?

A. No, I'm still reviewing records.

Q. At this time, I will be marking your invoices as Exhibit 2.

(Exhibit 2 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. If you could please review those.

Are these the invoices that you produced in response to the subpoena that you saw earlier?

A. These are the invoices I have submitted to counsel.

Q. Are there any other invoices that you have yet to submit to counsel that are not included?

A. I have not submitted one for February yet. I haven't even totaled all the hours yet, so...

Q. And what is your fee schedule for this case?

A. It's 200 an hour to review records. It's 275 an hour for deposition.

Q. I'm now going to show you what we will be marking as Exhibit 3, which is a copy of your engagement letter.

(Exhibit 3 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. First, you would agree that this is a copy of the engagement letter; correct? Your engagement letter?

A. Yes.

Q. And it is dated September 24, 2025?

A. Correct.

Q. And I'm going to point your attention

to the scope of work section. The scope of work section states, "You will act as a testifying expert to review records, including medical and billing records of plaintiffs, and to formulate and render opinions regarding charges that were incurred with respect to the plaintiff's Camp Lejeune-related illnesses."

Did I read that correctly?

A. Yes, you did.

Q. You were not engaged to provide any medical opinions in the scope of your work in this case; is that correct?

A. That is correct.

Q. I am now going to show you -- be marking as Exhibit 4 a copy of your expert report dated October 29th of 2025.

(Exhibit 4 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. You would agree that this is a copy your October 29, 2025, report; is that correct?

A. Yes, it appears to be.

Q. I'd like to turn your attention to Attachment 1 of Exhibit 4.

A. Yes.

Q. This attachment is your curriculum vitae, or CV; is that correct?

A. Yes.

Q. Is this a complete and accurate copy of CV or resume?

A. It needs to be updated. I start a new position on Monday, March 9, with Geisinger Health as director of compliance audits.

Q. Other than this update, looking at your resume now, is there anything else you would like to change or add?

A. No. I think it -- it encompasses everything. The only piece missing would be my AAPC fellow. But I don't put that on every document anyway.

Q. What does AAPC stand for?

A. American Academy of Professional Coders. I'm a fellow.

Q. What does that mean?

A. It's a fancy title for reaching a high level of coding and providing documentation to support that.

Q. How do you become a fellow?

A. You write a research paper.

Q. Is that research paper peer-reviewed?

A. No.

Q. Okay. What was the subject of that research paper?

A. It had to do with labs that are ordered by providers not fully understanding the lab that they've ordered or the results that they're obtaining and how they impact the patient care.

Q. Are there specific labs that you refer to in this paper?

A. I have not reviewed the paper in several years, so I would not know off the top of my head. But there were some labs that had historically been ordered by providers that they did not interpret the results as would be recommended, I guess is the best way to put it.

Q. What's --

A. They were ordering multiple labs for a patient, and it did not really address the patient's health care issues. And it was based on percentages and ratios that they were using.

Q. What sort of providers were ordering these labs that you referenced in this research paper?

A. It was a vast number of providers,

all specialties.

Q. Was this -- were these private insurance providers?

A. Again, I don't recall. It's been a while since I've looked at it. It was never published. It was just presented.

Q. Is it publicly available?

A. No.

Q. Do you recall when you wrote the paper -- the report -- I'm sorry -- when you wrote this -- this document?

A. It had to be September of 2018.

Q. And did you write it for the purpose of becoming a fellow?

A. Yes. Correct.

Q. Since that time, have you written any other reports?

A. No.

Q. Or publications?

A. No.

Q. You have a Bachelor of Science in health information management and healthcare administration from Charter Oak State College; is that correct?

A. Yes.

Q. Did you obtain your bachelor in science in 2018?
A. Yes. May of 2018.
Q. You also have a master of legal studies from Northeastern University School of Law; is that correct?
A. Yes.
Q. And you obtained your master's in legal studies in 2020; is that correct?
A. Yes.
Q. Have you obtained any other educational degree since graduating from high school?
A. No. I do maintain multiple certifications, which is quite a lot to maintain.
Q. But you do not have any other profession -- educational degrees; is that correct?
A. No educational degrees.
Q. Okay. Do you agree you're not a lawyer or attorney in any jurisdiction; correct?
A. Correct.
Q. You do not have a juris doctorate; correct?
A. Correct.

Q. You do not have an LLM degree; correct?
A. Correct.
Q. You are not offering legal opinions in this case; correct?
A. Correct.
Q. And you are not a doctor; correct?
A. Correct.
Q. You are not a nurse; correct?
A. Correct.
Q. And you are not licensed to provide medical care to patients; correct?
A. Correct.
Q. And you are not offering any medical opinions in this case; correct?
A. Correct.
Q. And you are not a clinician; is that correct?
A. That is correct.
Q. You would agree that a clinician is a doctor who provides direct hands-on -- hands-on care to patients, including diagnosing, treating, and monitoring illnesses; correct?
A. I would agree that it's medical doctors, advanced practice nurse, registered

nurses, and physician assistants are all kind of in that same category.

Q. And you agree with the statement that you are not a clinician and do not purport to make clinical determinations throughout the course of your analysis in this case; correct?

A. That is correct.

Q. You agree that you do not have medical expertise in the diagnosis or treatment of bladder cancer; correct?

A. That is correct.

Q. The same for kidney cancer?

A. Correct.

Q. The same for non-Hodgkin's lymphoma?

A. Correct.

Q. The same for leukemia?

A. Correct.

Q. And the same for Parkinson's disease?

A. Correct.

Q. And you don't hold yourself out as a medical expert; correct?

A. I do not.

Q. Moving back to your curriculum vitae, the first position you held on the CV was as an accounts examiner with the Medical Audit Division

of Department of Social Services Office of Quality Assurance for the state of Connecticut -- I mean, excuse me -- yes, Connecticut; is that correct?

A. Yes.

Q. And you worked there from 2007 to 2021; is that right?

A. Correct.

Q. As an accounts examiner -- I'm reading from your CV -- you identified potential fraud, waste, and abuse in the state medical assistance program using data analytics. You analyzed American Medical Association current procedural terminology, CPT and health care common procedures, coding systems, HCPCS, and the international classification of diseases tenth revision, ICD-10 coding.

You initiated investigations of medical providers for double billing, upcoding, false claims, unbundling, and Stark Law violations. You determined areas for recouping funds and guide the recovery of over payments from medical providers. You ascertained gaps in claims, edits, policies, and procedures.

You reviewed patient documentation

from compliance with federal and state regulations. And you communicated audit findings for -- to federal and state law enforcement agencies and to senior management. You also recommended actions. Is that correct?

A. Yes.

MS. WALLACE: Object to form.

You may answer.

THE WITNESS: Yes.

BY MS. KONSTANTOPOULOS:

Q. You indicated that you initiated investigations of medical providers for double billing, upcoding, false claims, and Stark Law violations in your role as an accounts examiner; is that correct?

A. Yes.

Q. What is double billing?

A. Double billing is where a provider may bill the same service two times. It could also be a situation where a provider and their advanced practice practitioner that works with them bills the same service. It's essentially the same person, the physician and the advanced practice.

I've also identified where we had a

dental provider who enrolled 13 times using different middle initials, first name, last name. He confused it several different ways, and that was another double billing situation related to orthodontia.

Q. Is that an example of a false claim that you just gave?

A. It's also an example of double billing because he billed the same orthodontia from two different provider IDs.

Q. And what is upcoding?

A. Upcoding is a situation where a provider uses a higher level code than what is substantiated in their documentation.

Q. And you indicated that you investigated false claims. Can you describe what kind of false claims you investigated in your role as an accounts examiner?

A. Certainly. It would be a provider who had submitted a claim and there was no documentation to support that.

Q. And you also mentioned that you investigated Stark violations. Can you indicate what Stark violations are?

A. I always get Stark and anti-kickback

confused. Stark is where they're referring a patient to an organization that they have a connection to. And we saw that in some cases with labs where it was the same lab director referring labs to another lab that he was overseeing, so yes.

Q. As an accounts examiner, did you work on a team with other accounts examiners?

A. No. We worked independently.

Q. You would agree this wasn't a managerial position; is that correct?

A. That is correct.

Q. And did you have a manager?

A. Yes.

Q. Okay. As a part of your role as an accounts examiner, did you ever consult with clinicians or other doctors in your position?

A. Yes.

Q. What sort of work would you consult with them on?

A. If there was a situation that I needed clarification on a document, on a medical record, or on a procedure that was performed.

Q. What sort of clarification would you have needed from the doctor in your position as

an accounts examiner?

A. We did not have doctors on staff -- well, we had a dentist. I would consult with the dentist on dental claims. We did not have a doctor on staff to ask clinical questions to. I would ask them to our -- our nurse team.

Q. And your nurse team, did they have medical degrees, to your knowledge?

A. Yes. They were registered nurses.

Q. What kinds of questions would you ask them, the nurse team?

A. I believe we covered that. Anything that -- procedural-related that I was -- I wanted clarification on.

Q. Would that be related to treatment?

A. That would be related to the procedure itself.

Q. Can you give an example?

A. Related to a procedure? If I had a question about an op note, as an example, I would ask them a question regarding the procedure. You know, I did not see any complications, is that your assessment as well.

Q. Now, I'm looking again at your CV, at the second to last bullet point under your role

as accounts examiner, it states, "Led the investigation and prosecution of CMAP providers by the Office of the Attorney General, Office of the Chief States Attorney, Medical Fraud Control Unit, and U.S. Department of Health and Human Services Office of the Inspector General, resulting in multiple fines and license revocations."

A. Uh-huh.

Q. Can you please explain how you led this investigation of prosecution?

A. Well, it -- this is -- we'll talk about one case that I can discuss because it's a public knowledge. It came in as a complaint. I analyzed the data identifying multiple situations where pediatric patients were having multiple surface restorations on their molars, sometimes on baby teeth, sometimes on permanent teeth.

In identifying this through data, I then went out and collected the records, met with the OAG, met with MFCU. That case was prosecuted. I worked through that case from beginning to end. The MFCU investigator brought 18 of my patients to UConn Dental to validate that the patients who were -- their

parents were told were getting an upgraded sealant were, in fact, having their teeth damaged by this dentist.

He's permanently excluded from the Medicaid program, and he was fined -- I want to say it was $50,000, which in my opinion was not enough.

Q. Did you ever testify in any proceeding regarding this investigation?

A. No, because MFCU -- what happens is we develop the case. We work with MFCU or with the OAG. In some cases, both. In some cases, HHS OIG gets involved. And they take it from there. We're still consulting and giving them information needed to understand some of the data, some of the documentation, but they essentially take the case over, and they prosecute it based on what we found.

Q. In your role as an accounts examiner, were there any certifications or trainings that were required of you?

A. Yes. There was the CPIP, which is a certified -- certified and program integrity, which was held at the National Advocacy Center in Columbia, South Carolina, the Medicaid Integrity

Institute.

Q. Were there any other certifications that were required of you to complete as an accounts -- accounts examiner?

A. Not required for me to complete, but were encouraged for me to obtain. So I took it upon myself to obtain my certification as a professional coder, professional medical auditor, and document expert.

Q. And did you do that while you were an accounts examiner?

A. Yes. I also obtained my certification as a fraud examiner, registered health information administrator, all during that time.

Q. Okay. According to your CV, from 2021 to 2025, you held the position of program manager for revenue compliance for Hartford HealthCare in Hartford, Connecticut; is that correct?

A. That is correct.

Q. And in reviewing your CV, you indicated in your role as program manager that you conducted chart-to-bill audits and risk assessment for providers and acute care

hospitals; is that correct?

A. Yes.

Q. What sort of chart-to-bill audits did you do as a program manager?

A. We looked at -- me specifically, I looked at professional billing and professional claims.

Q. Can you explain step by step how you would perform a chart-to-bill audit?

A. I would -- it was based on our work plan, unless, of course, it was an ad hoc issue that my director required me to look at.

I would run a query, download the data into Excel. I would use random sample within Excel to select a random sample of whatever claims were required, sometimes it was ten, sometimes it was 20. It depend upon what my director wanted me to look at. I would pull a random sample and then review the documents, and validate whether or not the diagnosis codes and the procedure codes were appropriate.

Q. What percentage of your work as a program manager included performing chart-to-bill audits?

A. Quite a lot of it. A lot of it had

to do with ad hoc issues that were identified by other providers that needed to be reviewed in a sensitive manner.

Q. What types of providers did you review?

A. All of them. Physicians, APRNs, PAs, all of them. It depended upon what the issue was.

I had a physician who was -- she was the medical director of a SNF and also performing E&M visits, evaluation and management visits, on the patients in the SNF, and I was asked to look at her documentation and validate it. So it was quite a lot of -- I -- I did at least one audit a month, if not more, depending upon what needed to be done. As well as managing primary care and specialty care physicians, reviewing whatever the leadership needed to me to look at.

Q. How did you manage physicians in your role as a program manager?

MS. WALLACE: Object to form.

You may answer.

THE WITNESS: Can you be more clear on what you mean by manage? I didn't manage the physicians. I worked with

their leadership on different cases, giving them insights into regulations that were coming, changes to CPT codes, changes to their workflow. I also taught many providers.

BY MS. KONSTANTOPOULOS:

Q. What did you teach those providers?

A. Documentation mainly.

Q. What sort of documentation?

A. How to document in a patient record to make sure that it's clear and concise and meets the standard of what CPT code they were billing.

Q. You would agree that Hartford HealthCare accepts various government insurance plans and provides specialized services for veterans; correct?

MS. WALLACE: Object to form.

You may answer.

THE WITNESS: I don't know.

BY MS. KONSTANTOPOULOS:

Q. You would agree that Hartford HealthCare accepts Medicare; correct?

A. Yes, they accept Medicare. They accept Medicare, managed Medicare, Medicaid, and

many commercial insurance companies.

Q. You would agree that Hartford HealthCare also accepts TriCare; correct?

A. I have not reviewed any TriCare claims. I would think that it -- they were minimal.

Q. Did you ever review any Medicare claims when you were at Hartford -- Hartford HealthCare?

A. Yes, I reviewed Medicare claims.

Q. In what context did you review medical claims in your role as a program manager at Hartford HealthCare?

A. I'm sorry. What's your question?

Q. What was the purpose of reviewing Medicare claims in your role as a program manager at Hartford HealthCare?

A. It was to validate that the providers' documentation met the expectation of the code billed and the expectation of the diagnosis.

Q. Did you perform chart-to-bill audits for Medicare records?

A. All records.

Q. Did you perform chart-to-bill audits

for review of TriCare records in your role at Hartford HealthCare?

A. As I said, I don't recall seeing any TriCare. If we had any TriCare claims, they were very, very minimal and probably not enough population to be selected in an audit. We stuck mainly with Medicare and Medicaid. Those were our biggest payers of claims.

Q. According to your resume, from 2025 to present, you have been a revenue integrity manager at Connecticut Children's Medical Center; is that correct?

A. Yes.

Q. When -- earlier you indicated that you were going to start a new position soon; is that correct?

A. Uh-huh, yes.

Q. Are you still currently working at Connecticut Children's Medical Center?

A. No. My employment ended on the 27th.

Q. Can you describe your role as a revenue integrity manager at Connecticut Children's Medical Center?

A. Certainly. Our -- my job was to identify any revenue leakage or try to identify

any areas where we could bill for a service based on the documentation we had.

Q. Did you conduct -- conduct chart-to-bill audits as a revenue integrity manager?

A. I had to review many different medical records in identifying whether or not something was correct. They weren't necessarily chart-to-bill audits. They were -- we identified an issue, and I would look at the claims and at the documentation to validate. It wasn't a standard audit where I would create a report.

Q. You would agree that Children's Medical Center in Hartford, Connecticut, accepts Medicare; correct?

A. I want to say our Medicare population at Children's was less than 10 percent, so it was very minimal. The largest part of our claims were Blue Cross and Medicaid.

Q. And Children's Medical Center in Hartford, Connecticut, accepts TriCare; is that correct?

A. I'm not aware. I saw absolutely no TriCare claims while I was there.

Q. In your role -- your upcoming role as

director of compliance audits at Geisinger, what will that role have you be doing?

A. We will be looking across the system. I will be developing a work plan for both facility and professional to address any potential concerns identified by HHS OIG or Medicare or Penn Medicaid.

Q. And Geisinger accepts Medicare, to your understanding; is that correct?

A. I believe so. I'm not sure. I haven't started, so I can't really speak to what claims they -- they have. I know they have their own insurance company as well.

MS. WALLACE: Object to form. I didn't quite have time to get that in.

THE WITNESS: Oh, I'm sorry.

MS. WALLACE: No problem.

BY MS. KONSTANTOPOULOS:

Q. And do you know if Geisinger accepts TriCare?

A. I'm not aware.

Q. And according to your CV, you have a number of certifications listed; correct?

A. Yes. Correct.

Q. And can you please let me know which

of these certifications is a -- has a continuing education requirement?

A. All of them except for the CPIP. Every last one of them. AAPC, I'm required to have 45 CEUs every other year. CHC is 20 every year, 10 live, 10 not live. CFE is 20 every year. And RHIA has gone up. I believe it's 30. I -- I have to double-check that, but I believe it's 30 every other year.

Q. And you indicated that the Certified Program Integrity Professional -- Professional certification does not have a continuing education requirement; is that correct?

A. That is correct.

Q. When did you obtain that?

A. Oh, gosh. I don't recall. I don't recall. It was a number of years ago.

Q. Prior to 2015?

A. I don't recall, honestly. It had -- we were one of the first classes to obtain a CPIP from the Medicaid Integrity Institute. I don't recall what year that was. It was a new certification that they had developed.

Q. You agree that you did not list any publication authored by you in the previous ten

years in your CV; is that correct?

A. I have not published anything in the past ten years or prior to that.

Q. I am going to point your attention back to your actual report, your October 29th report. And the report that you have in front of you, is that the report that you brought with the notes annotated or the exhibit?

A. This is the one you just gave me. Hold on. No. This is the one you gave me.

Q. I would ask that when I'm asking you any questions about the report, that you would refer to the exhibit.

A. I'm sorry.

Q. That's okay. When did you draft this report?

A. I think we completed it on the 29th.

Q. Okay. Do you agree with all the opinions and statements made in your first report?

A. Yes.

Q. Okay. Is there anything in this report that you believe is incorrect?

A. No.

Q. You indicated earlier that there were

some citations that might be different. Was that in your October 29, 2025, report?

A. Yes.

Q. Can you please indicate what you believe may be incorrect that you've identified?

A. Well, it's -- certainly. I think the first one is on page...

MS. WALLACE: Do you want a copy of this before she goes through it?

MS. KONSTANTOPOULOS: Sure. Can we take a brief break?

MS. WALLACE: Yeah. And I'll get a copy.

THE VIDEOGRAPHER: Going off the record. The time is 9:56 a.m.

(Recess taken from 9:56 a.m. until 10:07 a.m.)

THE VIDEOGRAPHER: Going back on the record. The time is 10:07 a.m.

MS. KONSTANTOPOULOS: Thank you.

BY MS. KONSTANTOPOULOS:

Q. During the break, counsel for plaintiffs provided us with a copy of your expert opinion report dated October 29, 2025, that you had markings on; is that correct?

A. That is correct.

Q. We can mark that as Exhibit 5.

(Exhibit 5 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. Please go through Exhibit 5 to tell us what markings are on the report and why you made them.

A. Certainly. I believe the markings begin on page 13. We updated the footnote at 11 to say Supra Footnote 9.

Q. Why did you do that?

A. Because it appeared that we -- that I did not put the appropriate citation there. It's all part of the same document above.

Q. So in Footnote 11, the citation that is currently there, is that incorrect?

A. I would have to look at that and review it.

Q. Currently, the footnote for Footnote 11, you indicated in your notes "See Supra Footnote 9." Should it be the same citation as Footnote 9?

A. Correct. Yes, that is correct.

Q. Can you please explain your next marking on this report?

A. Certainly. The next markings are on page 15. I paraphrased some of the phrases in here, and these additional pages provide more clarification.

Q. So you included a set of numbers next to the citation for Clarke deposition; is that correct?

A. That is correct.

Q. And you added additional page numbers to provide context for the paraphrasing that you add -- you had in your report; is that correct?

A. That is correct.

Q. At the bottom of the second full paragraph, you have a quote that says, "cost assignments, page 44"; correct?

A. Yes, that is correct.

Q. What does that mean?

A. That's where you can find cost assignments.

Q. What does cost assignments mean there?

A. It's what the deponent answered in his deposition.

Q. And in the next paragraph, the third -- the third full paragraph, you also have

some additional page numbers?

A. Correct. To add context to the paraphrasing.

Q. Are these page number -- what are these page number referencing? For example, in the first sentence, there's a reference to page 141. Page 141 of what document?

A. Correct. That's where Mr. Clarke acknowledged that veterans are not billed for care within the VA system.

Q. So that's for -- that's page 141 of his deposition?

A. Correct.

Q. And on the left of that paragraph, I see 188 --

A. Well, it's -- I believe it's 88 and 96. That's a quote around CPT. That's where he's identifying CPT codes where he talks about them.

Q. And that was not in your original citations; is that correct?

A. That is correct.

Q. And you also include at the bottom of the third full paragraph, page 96 -- in a marking, page 96, "not a flat cost related to the

CPT code, page 152 to 153"; is that correct?

A. That is correct. And, again, that's to add context to the -- the paraphrasing.

Q. Can you please identify the next markings that you made in this report?

A. Certainly. It's on page 17. At the top of the page, it identifies Ms. Hartwell's depo. And it said pages 3 and 37 when it should have said 120 to 121, to add context to the paragraph.

Q. So in this marking, you crossed off pages 3 and 37 and added pages 120 to 121; is that correct?

A. That is correct.

Q. So the original citations that you had in your expert report of October 29, 2025, were incorrect here; is that correct?

A. I believe that 120 to 121 gives a better, clear understanding.

Q. If that's the case, why cross off pages 3 and pages 37?

A. Well, again, because I felt 120 and 121 give a much clearer indication of what she was trying to express.

Q. And in the first full paragraph of

page 17 of Exhibit 5, you also included a notation that says "page 30"?

A. Yes. And that's where she states she's an end user of the data and not the individual who is responsible for the data.

And I believe that's it for this -- oh, sorry. I apologize. On page 19, and this is Ms. Hunter's deposition. Paragraph 4 on the right-hand side, it says "page 88." And it just gives some context to history of codes and what she's talking about at that page number.

Q. So --

A. I want to be sure that it's clear.

Q. Thank you. So for the last paragraph on page 19, you reference the Hunter deposition. Your marking of page 88, you would -- that is for her deposition that you want to add to this report?

A. Yeah, well, to add context to this report.

And I believe that's it.

(Exhibit 6 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. I'm now going to mark as Exhibit 6 a

copy of rebuttal expert opinion report with your markings that you identified prior to the break.

A. Yes. And in this report, it's on page 21, it -- it dropped a number for some reason. It should be citing Bates Number 1 -- 01576_Peterson_000003905, and not 390.

BY MS. KONSTANTOPOULOS:

Q. So the citation 01576_Peterson_000000390 was incorrect in your original --

A. Well, it dropped a number. Somehow the number was removed. So it should say 3905.

Q. All right. Are there any other markings?

A. Not in this report.

Q. I am now marking -- I'm going to mark as Exhibit 7 a copy of your materials considered list dated December 2nd, 2025.

(Exhibit 7 marked for identification.)

MS. WALLACE: Thank you. Did you say December 2nd?

THE WITNESS: Yeah. That's...

BY MS. KONSTANTOPOULOS:

Q. So this document, Exhibit 7, is

entitled "First Amended Materials Considered List for October 29, 2025, expert report of Marjorie Hackett-Wallace, RHIA, CHC, CFE, CPMA, CPC, CDEO, CPIP; is that correct?

A. Yes.

Q. And do you recall producing this document on or around --

A. Yes, I do.

Q. -- December 2nd, 2025?

A. Yes, I do.

Q. Okay. Is there anything else other than in this materials considered list, Exhibit 7, that you considered in rendering your report for October 29, 2025, that is not included in this list?

A. No.

Q. I am now going to mark as Exhibit 8 a copy of your supplemental materials considered list for October 29, 2025, report.

MS. KONSTANTOPOULOS: Exhibit 8.

(Exhibit 8 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. Does this materials considered list include all documents, articles, or other

materials you reviewed in preparing your first report along with Exhibit 7?

A. Correct.

Q. Were there any other materials considered list that you were provided along with your expert report of October 29th of 2025?

A. No.

Q. These were the only two?

A. Correct.

Q. Okay. I'm now going to show you what will be marked as Exhibit 9.

(Exhibit 9 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. You would agree that this is a copy of the expert report of Dr. Wang Ji in this case; is that correct?

A. Yes.

Q. And in response to your expert report of October 29, 2025, Dr. Ji submitted this report in the Camp Lejeune litigation; is that correct?

A. I believe so, yes.

Q. And this report was related to the bladder cancer Track 1 plaintiffs, kidney cancer Track 1 plaintiffs, leukemia plaintiffs, and

non-Hodgkin's lymphoma plaintiffs in the Camp Lejeune litigation; is that correct?

A. Yes.

Q. I'm now marking as Exhibit 10 a copy of the expert report prepared by Dr. Syed Hasan.

(Exhibit 10 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. And you've reviewed this document before; is that correct?

A. Yes.

Q. And in response to your expert report, Dr. Hasan submitted this report with regard to the Parkinson's Track 1 plaintiffs in this case; correct?

A. Yes.

Q. I will now be marking as Exhibit 10 -- 11 a copy of a table with lists of conditions for the plaintiffs.

(Exhibit 11 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. Would you agree that this is a table that was a part of your October 29, 2025, report that you relied on?

A. Yes.
Q. Did you create this table?
A. It was provided to me.
Q. And it was provided to you in the form that it is currently in front of you?
A. Yes.
Q. Can you please explain what the table includes generally?
MS. WALLACE: Object to form.
BY MS. KONSTANTOPOULOS:
Q. You can answer.
A. It provides the Track 1 and the related diagnoses.
Q. You would agree that there are three columns in this table; correct?
A. Yes.
Q. And the first column says "Name of Plaintiff"; correct?
A. Yes.
Q. The second column next to that says "Track 1 Injury"; correct?
A. Yes.
Q. And the third column next to that says "Also assume to be related to Track 1"; correct?

A. Yes.
Q. And the Track 1 injury is listed as either kidney cancer, bladder cancer, NHL, Parkinson's, leukemia, NHL, or some combination of the two; is that correct?
A. Yes.
Q. And then there are specific conditions for each plaintiff in this case that are listed in more detail next to that; correct?
A. Yes.
Q. And you were to assume that these were the conditions related to the Track 1 injury for each plaintiff; correct?
A. Yes.
Q. And did you not independent -- independently verify these -- that these conditions were caused by the Track 1 injury for each plaintiff; is that correct?
A. This list was provided by counsel.
Q. And just -- I don't believe you answered the last question, but you would agree that you didn't independently verify that these conditions were related to the Track 1 injuries; correct?
A. Could you rephrase that?

Q. Sure. Did you assume that the conditions in this table were true?

MS. WALLACE: Object to form.

THE WITNESS: These were provided to me by counsel. You would have to not -- I -- what I am interpreting from your question is that I'm an expert to determine whether or not these are associated with the Track 1 illness, and that's not within my wheelhouse.

BY MS. KONSTANTOPOULOS:

Q. So you didn't independently verify these with any specific causation expert reports to determine whether they were accurate; is that correct?

A. That is correct.

Q. I'm now going to show you what I will be marking as Exhibit 12.

(Exhibit 12 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. I'm showing you another table of conditions. Would you agree that this table of conditions is associated with your rebuttal expert report?

MS. WALLACE: Object to form.
You may answer.
THE WITNESS: Yes, I would agree.
BY MS. KONSTANTOPOULOS:
Q. And you would agree that there were some changes to this chart; correct?
A. I see one addition.
Q. Did you yourself make that addition?
A. I did not add that.
Q. What is the addition?
A. Diabetic neuropathy.
Q. Which plaintiff is that for?
A. That is Mr. Keller for NHL.
Q. I'm now going to show you what we'll be marking as Exhibit 13, your rebuttal expert opinion report dated January 20th of 2026.
(Exhibit 13 marked for identification.)
BY MS. KONSTANTOPOULOS:
Q. You would agree that was the report that you drafted for this case; correct? Submitted January 20th of 2026?
A. Yes.
Q. I'm now showing you what will be marked at Exhibit 14, material considered list

for the January 20, 2026, rebuttal expert report.

MS. WALLACE: Did you say 14?

MS. KONSTANTOPOULOS: Yes.

(Exhibit 14 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. Does this materials considered list include all of the documents that you rely upon for preparing your January 20, 2026, rebuttal expert opinion report?

A. Yes.

Q. Is there anything else that you considered for that rebuttal expert opinion report that is not included in this materials considered list identified as Exhibit 14?

A. No.

Q. Okay. Now going to be showing you what will be marked as Exhibit 15, which is a copy of your rebut -- rebuttal expert opinion report, dated January 27, 2026.

(Exhibit 15 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. Is this, in fact, a copy of your corrected rebuttal expert opinion report --

A. Yes.
Q. -- of January 27, 2026?
A. Yes.
Q. And on March 3rd, there was an additional materials considered list that was provided by counsel. Are you aware of this?
A. Yes.
Q. What was included on that materials considered list?
A. Do you have it? I -- I don't have it memorized. I'm sorry.
MS. KONSTANTOPOULOS: And for the record, we reserve the right to keep the deposition open in light of the late disclosure.
BY MS. KONSTANTOPOULOS:
Q. Isn't it true that the additional documents that you reviewed for the materials considered list that was provided March 3rd, 2026, included Greg Russo's expert reports and appendices?
A. I believe so, yes.
Q. Do you recall anything else that was added to that materials considered list provided on March 3rd, 2026?

A. No. Can I see a copy of it?
Q. You were just provided to us -- it was provided to us just last evening.
MS. WALLACE: If you'd like for me to get copies for you guys to mark, I'd be happy to.
MS. KONSTANTOPOULOS: That would be great. Thank you. We can take a short break.
THE VIDEOGRAPHER: Going off the record. The time is 10:35 a.m.
(Recess taken from 10:35 a.m. until 10:39 a.m.)
THE VIDEOGRAPHER: Going back on the record. The time is 10:39 a.m.
MS. KONSTANTOPOULOS: Thank you.
(Exhibit 16 marked for identification.)
BY MS. KONSTANTOPOULOS:
Q. In front of you, plaintiffs' counsel provided us with a copy of the third supplemental materials considered list for October 29, 2025, expert report and January 20, 2026, expert rebuttal report of Marjorie Hackett-Wallace, RHIA, CHC, CFE, CPMA, CPC, CDEO, CPIP.
That was marked as Exhibit 16;

correct?

A. Yes.

Q. And this was the supplemental materials considered list provided on March 3rd of 2026; correct?

A. Correct.

Q. Okay. And you would agree that the materials considered that are listed in Exhibit 16 are reports from Gregory Russo regarding the plaintiffs along with appendices; is that correct?

A. Yes, that is correct.

Q. Other than what I just identified, is there anything else contained in these -- this materials considered list?

A. No.

Q. And when did you first review Gregory Russo's reports and appendices for these plaintiffs?

A. I believe I reviewed -- started looking at one of his reports after they were submitted, but it really -- his report is not within my expertise, and I did not go any further with it, but Whitney and I reviewed some of the documents yesterday.

Q. And did you review his reports after you submitted your January 27, 2026, corrected rebuttal opinion report?

MS. WALLACE: Object to form.

You may answer.

THE WITNESS: I reviewed them, really, yesterday because, as I said, my expertise is not in his area.

BY MS. KONSTANTOPOULOS:

Q. Okay. Now that we've entered all of those exhibits, I will point you back to your October 29, 2025, report, which is Exhibit 4.

What was the scope of your assignment for the plaintiffs?

A. The scope of my assignment was to review the billing and coding and validate the medical record.

Q. On page 3 of Exhibit 4 under the heading "Documents Relied Upon," you would agree that you indicated, "My analysis was based on a comprehensive review of the documentation provided to me for each plaintiff. I was provided medical and billing records for each plaintiff and a list of Track 1 conditions for each plaintiff and other conditions that I was

assumed are related to the Track 1 condition or its treatment."

Did I read that correctly?

MS. WALLACE: What page did you say?

MS. KONSTANTOPOULOS: I am on page 3 of Exhibit 4, under the heading "Documents Relied Upon."

THE WITNESS: Okay.

MS. WALLACE: I think you cited page 4. That's why we weren't able to follow along. You might want to reask it.

MS. KONSTANTOPOULOS: I apologize. Thank you.

BY MS. KONSTANTOPOULOS:

Q. You would agree that on page 3 of Exhibit 4, you indicated that "I was provided medical and billings records for each plaintiff and a list of the Track 1 conditions for each plaintiffs and other conditions that I was assumed -- I was to assume are related to the Track 1 condition or its treatment."

Did I read that correctly?

A. Yes.

Q. And the table of conditions, which was listed -- which was provided to you as

Exhibit 11, that was one of the documents that was provided to you by the plaintiffs' attorneys; correct?

A. Yes.

Q. And Exhibit 11, which was the additional table of conditions, that was also provided to you after this expert report was created; is that correct?

A. After? I'm sorry. Could you rephrase your question?

Q. Sure. So there was an original table of conditions that was provided to you so that you could prepare your October 29, 2025, report; correct?

A. And which exhibit are you identifying.

Q. Exhibit 11.

A. Okay. Yes. This is -- was available to me when I created the -- drafted the first report.

Q. Okay. Thank you.

And then there was a subsequent updated table of conditions just listed as exhibit -- which I provided to you as Exhibit 12.

A. Correct.

Q. That was provided to you for your rebuttal expert opinion report; is that correct?

A. Yes.

Q. On page 3 of your expert report, Exhibit 4, you also state later in that paragraph -- in the first full paragraph, "In making relatedness determinations, I then reviewed the available medical records and billing information to confirm that the billing records included charges related to the Track 1 condition or its treatment or to the other conditions and/or treatments identified."

Did I read that correctly?

A. Yes.

Q. What does "relatedness determinations" in this sentence mean?

A. It means conditions that were identified as being related to the initial diagnosis and any of its treatments.

Q. Keeping on page 3 of Exhibit 4, under the heading "Medical Expenses Based on Private Insurance," you stated in the first sentence, "With regard to payments issued by private medical insurance companies and out-of-pocket costs, my analysis was based on a comprehensive

review of all potentially related medical records, corresponding billing records, and lien information from private insurance carriers."

Did I read that correctly?

A. Yes.

Q. Okay. And then at the end of that paragraph, still on page 3, the last sentence you indicated, "Unfortunately, I did not have access to all billing and medical records for all plaintiffs, Track 1, and related conditions. Therefore, with respect to certain plaintiffs, my work conservatively quantifies private medical insurance charges, payments, and patient contributions -- contribution."

Did I read that correctly?

A. Yes.

Q. You agree that your analysis is limited by the information provided to you by the plaintiffs' attorneys; correct?

MS. WALLACE: Object to form.

You may answer.

THE WITNESS: Yes.

BY MS. KONSTANTOPOULOS:

Q. Staying on that same page under the section "Government Medical Expenses" in

Exhibit 4, you indicated in that first sentence, "With regard to payments or reimbursements by government agencies, my analysis was based on data files and payment extracts which I understand were produced to the Department of Justice by CMS, TriCare, the Veterans Health Administration, TriWest, and the Community Care Network."

Did I read that correctly?

A. Yes.

Q. You would agree that you had access to not only medical bills in this case but also medical records; is that correct?

A. No, that's not correct. I did not have bills for all of this, no. I had your data extracts. I did not have access to all of the medical records.

Q. But you were -- you did have medical records in your possession for each of the plaintiffs; is that correct?

A. With regard to?

Q. Did you have medical records in your possession that you reviewed to make determinations in this case?

A. With regard to what payer?

Q. My question is more general than that. Did you have medical records that was provided to you by plaintiffs counsel to make determinations in this case?

A. Yes. Yes.

Q. Did you attempt to evaluate the available med -- medical records you had and correspond them with various claims data produced by CMS?

MS. WALLACE: I would -- I would just say objection. You may need to show her what data you're referring to. She has a large number of appendices in this case.

BY MS. KONSTANTOPOULOS:

Q. Okay. Let me rephrase the question.

You agree that you did not review any medical records when reviewing CMS data; is that correct?

MS. WALLACE: Object. Objection to form. Foundation.

THE WITNESS: I don't know that I would agree or not agree to that. I reviewed medical records for the billings that I had. Could some of those billings have also had primary, secondary, and

tertiary payers that may be Medicare, Medicaid, TriCare, any one of those? Yes, that's a possibility. But the billings that I had were not the government billings. They were private. So, I mean, your question is a little ambiguous to me.

BY MS. KONSTANTOPOULOS:

Q. Okay. You did have data from CMS, VHA, CCN, TriWest, and TriCare -- not billings as you described, but you did have data; correct?

A. That is correct.

Q. And you did not attempt to correlate the medical records that you did have in your possession with this agency data; is that fair?

MS. WALLACE: Object to form. Foundation.

THE WITNESS: Again, your question is a bit ambiguous to me. The medical -- I reviewed a medical record. How that medical record was billed by the organization is not available to me, I would say.

BY MS. KONSTANTOPOULOS:

Q. Okay. Turning to page 5 of your report under "Background Principles of Medical

Billing and Coding," reading the first paragraph there, you state, "Understanding how medical billing and coding operate is essential to evaluating the reliability and accuracy of the medical expense data at issue in this case."

Did I read that correctly?

A. Yes.

Q. So you would agree that a proper coding, unbundling, or duplicative billing can occur in private medical billings; is that correct?

A. That's a very limited list. A lot of things can happen in medical billing and coding that are beyond that.

Q. Other than what I listed, can you please describe what other --

A. It depends --

Q. -- coding or billing errors there could be?

A. Certainly. It -- it depends upon who is dropping the bill, who is coding that service.

Q. What do you mean by that?

A. In some cases, in a facility, facility billing is billed by a coder, and it depends upon the coder's knowledge and experience

with the information they're coding. Professional claims can be billed by the provider. They can be billed by his office staff. They can inappropriately take a diagnosis code off of a problem list and use that in place of the diagnosis for which the patient came in. There are multiple -- as many possibilities in the universe are as many possibilities in billing coding and documentation.

Q. Moving to page 7 of Exhibit 4. The first full paragraph, you state, "Because billing codes are administrative tools created for reimbursement, not clinical documentation, they are not by themselves a reliable indicator of causation or relatedness in a legal setting."

Did I read that correctly?

A. Yes.

Q. You would agree that there is no citation provided here to support that statement in your report; correct?

A. That is correct.

Q. Can you please explain what you mean by causation in this sentence?

A. Again, providers, coders, using diagnosis codes may not select the correct code

indicating what the causation of the patient's visit is.

Q. Is the term "causation" a typical term used in medical coding?

A. Describe what you mean by typical.

Q. Is causation frequently used for describing medical coding in your field?

A. In certain diagnosis codes, causation is the code. It is the descriptor in the code, so...

Q. This is not a legal term that you were using but a medical coding term; is that correct?

A. Yes.

Q. And in that same sentence that I read, can you explain what you mean here by relatedness?

A. A code a person uses, whether it be a provider or a coder -- let me be specific. A diagnosis code may not be the appropriate code to use to tie together a primary, secondary, tertiary diagnosis indicating that it's related to the primary or secondary.

Q. So you're not using the term "relatedness" in the legal sense; correct?

A. Not in a legal sense, but it does come into play in a legal setting.

Q. What do you mean by that?

A. Well, for example, if you take diagnosis codes out of the billed sequence, you've now changed the relatedness of those diagnosis codes.

Q. How does this apply in the legal setting?

A. Again, if you take the diagnosis codes out of their billed sequence, you've now changed what that billing was from its original, and it changes the sequence of those diagnosis codes. Maybe removing "relatedness," maybe removing "causation," maybe taking it out of context for the patient visit, which is why we look at the medical record to validate that the diagnosis code on the claim is the diagnosis code that was present and used in the visit.

Q. So when you referenced legal setting earlier, are you saying that it could be -- this could be important for this litigation? Is that what you mean by that?

A. Yes.

Q. In the second full paragraph on

page 7, Exhibit 4, you indicate, "It is the rule of an expert to perform this analysis, to systematically evaluate each billed service, correlate it with the underlying medical records, and apply professional judgment to determine whether the billing is genuinely related to the compensable condition."

Did I read that correctly?

A. Yes.

Q. How are you able to determine whether the billing was genuinely related to the compensable condition?

A. Based on what the provider wrote in his note.

Q. Can you please explain your methodology for evaluating past medical payments in this case?

A. Reviewing the medical record as it relates to the billing record, identifying the chief complaint, history of present illness, the data points the provider used in his medical decision-making, which include the exam and any imaging studies or related labs, and what his assessment and plan is.

Q. And can you please explain your

methodology for evaluating TriCare payments?
A. Are you talking about the data?
Q. I'm --
A. Can -- can you be clear on your question, please?
Q. Absolutely. Did you review TriCare data in this case?
A. I did review TriCare data in this case.
Q. What was the methodology that you used in order to review TriCare data in this case?
MS. WALLACE: Object to form. Do you have the TriCare dataset to show her?
MS. KONSTANTOPOULOS: I'm just asking her what her methodology was.
THE WITNESS: I would really need to see the data in order to walk through it.
BY MS. KONSTANTOPOULOS:
Q. So is it fair to say that as we sit here today, you can't articulate what methodology you used?
A. I would not --
MS. WALLACE: Object to form and foundation.

THE WITNESS: I would not say that.
BY MS. KONSTANTOPOULOS:
Q. Would reviewing your expert report help refresh your recollection as to what your methodology was when you reviewed TriCare data?
A. I would prefer to review the -- the data itself.
Q. I'm going to move on to page 7, again, the last complete paragraph under Private Medical Payments. You indicated, "For this analysis, I relied on the medical billing Bates numbers and medical record Bates numbers compiled and provided by plaintiffs' counsel. These materials were organized by patient provider and date of service allowing for a side-by-side comparison of billed entries with the corresponding medical documentation. Using this compiled list, I reviewed each billing line to determine whether the service was supported by and consistent with the associated clinical record."
Did I read that correctly?
A. Yes.
Q. Starting at the bottom of the page, that last paragraph on page 7, still under the

"Methodology for Private Medical Payments," you state, "First, I identified the compensable diagnoses at issue and in consultation with the applicable ICD-9 and/or ICD -- and/or 10 and procedural code sets, determine the diagnostic and procedural codes that could reasonably represent the evaluation or treatment of those conditions."

Did I read that correctly?

A. Yes.

Q. In other words, you first determined whether the procedural and diagnostic codes in the medical billing records for a particular plaintiff could be associated with one of the listed conditions for the plaintiff; is that correct?

A. I reviewed the billing along with the medical record. I did not review the billing independently to identify whether or not a diagnosis was compensable or not. I reviewed this in conjunction with the medical record.

Q. But first did you have to determine what ICD-9 or ICD-10 codes were related to the list of conditions that were provided to you by plaintiffs' counsel?

A. There are 80,000 ICD-10 codes, all identifying specific conditions and causes and -- I reviewed the record along with the ICD-10 and the billing.

Q. Did you determine that any of the bills that were provided to you were not related to the list of conditions that were provided to you by plaintiffs' counsel?

A. Yes. And they're on the appendix. There should be -- I believe there's a listing by provider, and they're at the bottom beneath what was related. There's a listing of unrelated.

Q. How did you determine that diagnostic and procedural codes could reasonably represent evaluation and treatment for a specific condition?

MS. WALLACE: Object to form.

You may answer.

THE WITNESS: Oh, I'm sorry.

I reviewed the medical record.

BY MS. KONSTANTOPOULOS:

Q. When you reviewed the medical record, what were you looking for specifically to determine whether these diagnostic and procedural codes reasonably represent the valuation and

treatment for a specific condition?

A. I reviewed the chief complaint, the history of present illness, the data points identified by the provider, whether they are within his exam, within a clinical lab, within an imaging study, and his assessment and plan.

Q. And you did not consult with a clinician or a doctor to make these determinations in your October 29, 2025, report; is that correct?

A. No, I did not.

Q. Did you reference any document or literature to assist you in determining whether a diagnostic code was associated with a specific condition?

A. I consulted the ICD-9 and ICD-10.

Q. Was there anything else that you looked at to assist you?

A. I looked at the ICD-9 and ICD-10.

Q. So the answer is no?

A. No.

Q. Okay. After identifying related diagnostic and procedural codes, you then determined whether there were operative notes and facility charges to substantiate the related

codes and the billing records; is that correct?
MS. WALLACE: Object to form.
THE WITNESS: Yeah, could you rephrase that?
BY MS. KONSTANTOPOULOS:
Q. After you determined what the diagnostic and procedural codes were, you then reviewed medical records to ensure that there were records that correspond to those codes; correct?
A. I reviewed the billing in conjunction with the medical record and determined whether or not the provider documented the procedure and the diagnosis that matched the billing. Does that make sense?
MS. WALLACE: Yes. I had an objection to that question again for the record. Thank you.
BY MS. KONSTANTOPOULOS:
Q. What did you refer -- review first, the billing record or the medical record --
A. Again --
Q. -- for your methodology?
A. Again, I reviewed them in conjunction. I reviewed the billing and the

medical record in conjunction.

Q. I understand. But when reviewing them together, did you review the medical bills first and then look at the medical records, or did you review the medical records first and then look at the billing records?

A. I reviewed them in conjunction. I pulled them both up on my screen and went, this is the Bates number, this is the Bates number, and I pulled them both up and read them. Does that make sense?

Q. I'm just trying to understand. Is it possible to read two documents at the same time?

A. I think your question is ambiguous. The record -- I pull up both records and review both records, and I have my coding book in front of me. I am not sure if my eyes looked at this screen first or that screen first, but they're reviewed in conjunction.

Q. Okay. Thank you for the clarification.

On page 8 of your report, you indicated at the bottom of the first full paragraph that, "This comparison was performed to confirm that the service was actually performed

and the service was rendered for the purpose of evaluating, treating, or managing the compensable condition or a direct secondary consequence of that condition."

Did I read that correctly?

A. I'm sorry. What paragraph are you looking at?

Q. I'm looking at the last sentence of the first full paragraph above the bullet points on page 8.

A. Okay.

Q. And it indicates that, "This comparison was performed to confirm that the service was actually performed and the service was rendered for the purpose of evaluating, treating, or managing the compensable condition or a direct secondary consequence of that condition."

Did I read that correctly?

A. Again, you're on page 8?

Q. Yes. Of Exhibit 4.

A. Okay. And --

Q. The beginning of the paragraph starts with "next." It's the first full paragraph. And then the last sentence starts with "this

comparison."

A. Correct.

Q. Okay.

A. Service was performed, service rendered found -- yes.

Q. And you would agree that only those services for which the compensable condition was clearly identified as the reason for treatment or evaluation was classified as related by you in this report; is that correct?

A. Yes.

Q. Right underneath those bullet points on page 8, you indicated that, "When multiple diagnoses were present, I analyzed the medical documentation to determine whether the compensable condition was the primary clinical driver of the accounter or whether it represented a coincidental or historical diagnosis. Only those services for which the compensable condition was clearly identified as the reason for treatment or evaluation were classified as related."

Did I read that correctly?

A. Yes.

Q. And what do you mean here by the

primary clinical driver?

A. The reason for the patient's visit.

Q. And to ensure consistency and accuracy in your methodology, you agree that you conducted an internal quality control review of a representative subset of the correlated records; is that correct?

A. Yes.

Q. And you indicated that, "This confirmed that the coding documentation linkages were applied consistently across providers and service types"; is that correct?

A. Yes.

Q. What internal quality control review did you perform specifically?

A. Random sample of a few for each patient.

Q. And you agree that coding -- coding errors often occur in private -- private -- private pay insurance records as we discussed earlier; correct?

A. I would not agree with that. Coding errors happen across all payers.

Q. You would agree that coding errors occur in private pay insurance records; correct?

A. I would agree that billing errors occur across all payers.

Q. Going back to your internal quality control review, how many were included in the sample?

A. It was a random sample, five to ten, depending upon the size of the data.

Q. And how did you determine representativeness for this sample?

A. Meaning?

Q. How did you determine what sample you would use to conduct --

A. Random sample. So random sample generator within Excel.

Q. Why are only five claims -- approximately five claims representative for an internal control review?

A. Compliance standards are ten. This is a much smaller sample of claims.

Q. So you would agree that you did not perform an internal quality control review for all of the patients' medical records in this case; is that correct?

MS. WALLACE: Object to form and foundation.

THE WITNESS: I would not agree with that.

BY MS. KONSTANTOPOULOS:

Q. You agree that there are 22 plaintiffs in this case; correct?

A. I'm not sure I would agree with that. I think there are a couple that are not a part or may have settled, so...

Q. Okay. You indicated that you did a internal quality control review by reviewing a random sample of approximately five of the records; is that correct?

A. Yeah.

Q. Okay. And you would agree that there are more than five plaintiffs in this case that you reviewed; correct?

A. Right. We're talking five per plaintiff.

Q. Okay. Thank you for the clarification.

You indicated that compliance requires typically ten; correct?

A. Require -- compliance standards are typically ten, but you're talking about a sample size of several thousands claims and several

different providers. And it would be stratified based on how many claims per provider.

Q. Do you know how many claims and providers there are that you reviewed for this litigation?

A. No. Off the top of my head, I would not have that answer.

Q. And when you reviewed the plaintiffs' private pay insurance records, did you review their medical bills for coding errors?

A. No. I did not perform an -- a compliance audit of, you know, their E&M levels, no.

Q. Could you have?

A. I was not -- it's not within my scope. Could I have? Yes. I've been doing that for 19 years.

Q. But that's not what you did for your expert report of October 29th of 2025?

A. I was -- my scope was to validate the diagnosis codes and the documentation with the billing. It was not to validate did Dr. Smith bill level 5 versus a level 3.

Q. I'm going to point your attention to page 9 under the heading TriCare Payments. You

indicated that you were asked to examine TriCare billing data for plaintiffs Tukes, Hill, Cogiano, and Downs to identify potentially related billing associated with their Track 1 diagnoses and secondary conditions; is that correct?

A. Yes.

Q. And you completed that analysis for each of the four plaintiffs; correct?

A. Yes.

Q. You indicated at the bottom of that page that, "Unfortunately, not all medical records were able to be identified for each claim in line item in the TriCare data extractions"; is that correct?

A. That is correct.

Q. Did you attempt to correlate the data extraction with medical records for TriCare data?

A. In some instances if we had a medical record, but we did not have all the records.

Q. Going back to page 2 of your report, the beginning of the second paragraph starting with "I was retained."

A. Uh-huh.

Q. You indicate, "I was retained and assigned by Plaintiff Leadership Group to," and

under Number 1, "use my training, expertise, and experience to quantify past medical expenses claimed by all 22 of the remaining bellwether plaintiffs to include patient payments related to the Track 1 diagnoses and those injuries or conditions stemming from a Track 1 illness or its treatment."

Did I read that correctly?

A. Yes.

Q. What do you mean by the phrase "patient payments" in this sentence I just read?

A. Payments made by patients.

Q. Are patient payments the same as out-of-pocket payments made by plaintiffs?

A. I would think so, yes.

Q. You agree that patient payments and billed charges are not necessarily the same; correct?

MS. WALLACE: Object to form. Foundation.

You may answer if you can.

THE WITNESS: Charges are not my wheelhouse. What a provider charges is not within my scope or my expertise.

BY MS. KONSTANTOPOULOS:

Q. You would agree that patients don't always pay 100 percent of what they're billed; is that correct?

MS. WALLACE: Objection.

THE WITNESS: I don't have any data on that. I'm sorry.

BY MS. KONSTANTOPOULOS:

Q. So you're not aware of whether patients can negotiate their bills down?

A. I am not a part of that. That's not within my expertise.

Q. I'm going to point your attention to page 3 of your report. One moment. I apologize.

Again, I'm pointing you to page 3 of your report under Section A. I'm looking at the second full section -- second full sentence -- excuse me -- which is, "The combination of medical billing and insurance data allowed me to reconcile and quantify known billed and paid amounts related to the plaintiffs' care, as well as patient payments to the extent this data was available."

Did I read that correctly?

A. Yes. To the extent the data is available. We did not have access to all of

their payments.

Q. And that's what you state in the next sentence in your report, which states, "Unfortunately, I did not have access to all of the billing and medical records for all plaintiffs"; is that correct?

A. Yes.

Q. In that first sentence that I read, why did you use the phrase "billed and paid amounts" here?

A. Why did I use it?

Q. Correct.

A. Because providers submit charges and receive payments from multiple locations. Some patients have multiple insurance. Some patients pay out of pocket. Some patients prefer to pay self-pay. Where it's available, I reviewed it.

Q. And you would agree there's a difference between amounts billed and amounts paid; correct?

A. That's not something I look at.

Q. You would agree that you separated out billed and paid amounts related to each plaintiff's care; is that correct?

A. Where it was available, yes.

Q. Now I'm going to refer you to page 2, the last sentence of Number 2 under "Introduction and Assignment." You indicate, "The analysis addresses how these deviations from standardized protocols -- standardized protocols affect the reliability of billing data, particularly when used to determine medical relatedness or quantified damages in litigation."

Did I read that correctly?

A. Yes.

Q. You reviewed plaintiffs' medical billing records and added the billed charges for conditions that you determined were related to plaintiffs' compensable condition; correct?

MS. WALLACE: Objection.

THE WITNESS: I entered the amount that was present on the bill. It's not something I review or opine on.

BY MS. KONSTANTOPOULOS:

Q. And did you present those as patient payments?

MS. WALLACE: Objection.

THE WITNESS: That's a very vague question.

BY MS. KONSTANTOPOULOS:

Q. You agree that you didn't review payment receipts from plaintiffs to verify that they made payments on billed charges; is that correct?

A. I would not agree with that. In some cases, we had some handwritten notes or payments from patients, but not a complete list or from all patients.

Q. Are these handwritten notes that were drafted by patients in this case?

A. I don't know who drafted them. I'm not privy to the providence of the document.

Q. In what cases were there handwritten notes regarding patient payments?

MS. WALLACE: Objection.

THE WITNESS: Off the top of my head, I have no idea.

BY MS. KONSTANTOPOULOS:

Q. You agree you did not review credit card records from plaintiffs to verify that they made payments on billed charges; correct?

A. I reviewed whatever documentation that I had, I reviewed.

Q. Did you review credit card records from plaintiffs?

A. I don't recall.
Q. Did you review bank statements from plaintiffs to verify that they made payment on billed charges?
MS. WALLACE: Objection.
THE WITNESS: I don't believe so.
BY MS. KONSTANTOPOULOS:
Q. And you didn't interview plaintiffs to verify that they made payment on billed charges; is that correct?
A. That was not within my scope.
Q. So you would agree that you did not do anything to verify that plaintiffs actually made payment on the billed charges; correct?
MS. WALLACE: Objection. Form. Foundation.
THE WITNESS: I did not validate that they made the payment, no. That was not within my scope.
BY MS. KONSTANTOPOULOS:
Q. Thank you. I'm going to move on to page 10 of Exhibit 4. And in the second full paragraph, starting the third sentence down, starting with "based upon my training."
A. Uh-huh.

Q. You indicate, "Based upon my training, education, experience, and review, and subject to the qualifications articulated above, all billing entries included in my charts as related are in my professional opinion and to a reasonable degree of certainty as a result of and/or related to the applicable Track 1 diagnoses for that plaintiff; i.e., kidney cancer, bladder cancer, Parkinson's disease, non-Hodgkin's lymphoma, or leukemia, and those injuries or conditions stemming from that illness or its treatment."

Did I read that correctly?

A. Yes.

Q. What does reasonable degree of certainty mean here?

MS. WALLACE: Object to form. Foundation.

THE WITNESS: Could you clarify?

BY MS. KONSTANTOPOULOS:

Q. Yes. You indicated in your report that "all billing entries included in my charts as related are in my professional opinion and to a reasonable -- reasonable degree of certainty as a result and/or related to the applicable Track 1

diagnoses for that plaintiff."

What do you mean in your report when you state "reasonable degree of certainty"?

A. My reasonable degree of certainty in reviewing and validating the records and the billing.

Q. Does that mean you have confidence that your work is 50 percent accurate?

A. I would have confidence in my accuracy is much higher than that.

Q. What would you estimate the accuracy of your work to be in this expert report?

A. I don't -- I don't know. I did not validate my accuracy. I can say that your experts agreed with approximately 97 percent of my findings.

Q. How did you calculate 97 percent?

A. It was --

MS. WALLACE: Objection.

You can answer.

THE WITNESS: It was based on just side-by-side comparison.

BY MS. KONSTANTOPOULOS:

Q. Did you make that 97 percent calculation yourself?

MS. WALLACE: Objection.

THE WITNESS: No.

BY MS. KONSTANTOPOULOS:

Q. Who did?

A. Counsel.

Q. Did you check to determine whether that 97 percent accuracy was correct?

A. Yes.

Q. You did calculations to make that determination?

A. We reviewed the document together.

MS. WALLACE: I'm very close to objecting on the basis of attorney-client privilege to this line of questioning.

BY MS. KONSTANTOPOULOS:

Q. And I'm not asking you to indicate what you and your attorney have discussed. So just to clarify.

Did you perform the actual calculations yourself to make a determination that your work was 97 percent accurate as identified by the plaintiff -- the United States experts?

A. I reviewed the document --

Q. Okay.

A. -- and the findings.

Q. You reviewed the document, but you didn't perform the calculation; is that fair?

A. I reviewed the calculation. It made sense.

Q. Okay. But you didn't actually calculate the amount yourself; correct?

A. I reviewed the calculation. If the calculation is correct -- there's no question in my mind that it's correct.

Q. You agree that you're not offering an opinion on whether the water at Camp Lejeune may have led to any of the plaintiffs' development of any disease; correct?

A. I'm not a medical expert, no.

Q. Move forward to page 20 of your expert report under the heading Conclusion, you indicated, "In conclusion, I am able to testify to a reasonable degree of professional certainty only with respect to those billed services for which I was able to review and correlate medical documentation, demonstrating that the treatment was rendered for the compensable condition or a directly associated secondary effect."

Did I read that correctly?

A. Yes.
Q. The subset of data that you reviewed that you're referring to here, that was comprised primarily of private pay billing records; is that correct?
A. What is your question?
Q. Strike that. I'll ask a different question.
MS. KONSTANTOPOULOS: I think at this time, I'd like to take a brief break. Is ten minutes all right?
MS. WALLACE: Sure.
THE VIDEOGRAPHER: Going off the record. The time is 11:31 a.m.
(Recess taken from 11:31 a.m. until 11:47 a.m.)
THE VIDEOGRAPHER: Going back on the record. The time is 11:47 a.m.
MS. KONSTANTOPOULOS: Thank you.
BY MS. KONSTANTOPOULOS:
Q. Would you agree that to determine whether data is reliable, you must review that data?
MS. WALLACE: Objection.
THE WITNESS: I don't agree with that. You need to validate that the data

represents what you anticipate it to represent, and you can only do that if you're validating it against what the data was built on.

BY MS. KONSTANTOPOULOS:

Q. So you would agree that there would need to be some sort of review to validate data. Is that fair to say?

MS. WALLACE: Objection.

THE WITNESS: I don't agree. What your question sounds to me like -- and maybe you need to rephrase it -- is that if I review the data, I can validate whether or not it's correct. I can't. You need to validate it against the system with which the data is pulling from to validate that what you have is actually what is in the system.

BY MS. KONSTANTOPOULOS:

Q. You agree that you can't validate data without reviewing that data, though; correct?

A. I don't agree with your statement again. It's more than reviewing the dataset. You need to validate it against where you're

pulling the data from. The data is coming from a source. Claims is an example. And you have to validate that what you have pulled is actually what was in that system.

Q. So it includes more than just review. It includes what you just described; is that correct?

A. Correct.

Q. I'm going to point your attention to Exhibit 4, which is your October 29, 2025, report again. Specifically on page 14. Looking at the Section 8 -- Roman Numeral 8 entitled The Limitations of the Government Agency Review Processes in CLJA Litigation, VHA, CCN, TriWest, TriCare, CMS.

You agree in this section you lay out issues that you have with the reliability of VHA, CCN, TriWest, TriCare, and CMS data; correct?

A. Could you rephrase that? Your question sounds as if you're putting words in my mouth, and I'm having a problem with that. So could you just ask your questions more directly and not "would you agree."

Q. Did you not understand the question?

A. I -- your questions are phrased in

such a way that you're putting words in my mouth, and I'm having a difficult time answering them.

Q. So, Counsel -- if your attorney does not object to a question, you do have to answer the question. Do you understand?

A. Okay. Please rephrase.

Q. Did you not understand the question that I just asked you? Or are you choosing not to answer it because you don't like the way I asked it?

MS. WALLACE: Objection.

THE WITNESS: I --

MS. WALLACE: Can I -- she's asked you to rephrase. She didn't understand the question.

MS. KONSTANTOPOULOS: That's not exactly what she said. She said she didn't like the way that I phrased the question because it put words in her mouth.

THE WITNESS: Please rephrase. I did not understand your question.

BY MS. KONSTANTOPOULOS:

Q. In Section 8 of your report, did you lay out issues that you had with VHA, CCN,

TriWest, TriCare, and CMS data regarding their reliability?

A. Yes.

Q. What does reliability mean to you as a billing and coding expert?

A. That I can rely on the data representing what the system has in it. So in a billing system such as Epic, that the Epic data and the Epic data extraction would match, and I could rely on that data.

Q. On page 16 of your expert report at the very top, this is the last sentence under the section -- Section 8, Subsection A for VHA, you state, "Consequence -- consequently, any use of MCA-generated data to establish damages, offsets, or fair market value would be methodologically unsound and contrary to the system's stated purpose."

Did I read that correctly?

A. Yes, you did.

Q. You, therefore, declined to review any of the plaintiffs' specific VHA data and compare that to their medical records; is that correct?

MS. WALLACE: Objection to form and

foundation.

THE WITNESS: Can you say that -- can you ask that again, please?

BY MS. KONSTANTOPOULOS:

Q. Sure. In light of what I just read, you would agree that you did not review medical records and compare that to VHA data that you were provided?

MS. WALLACE: Objection.

BY MS. KONSTANTOPOULOS:

Q. Is that correct?

A. No, I did not.

Q. Are you saying that you reviewed medical records and tried to correlate that to VAH -- VHA data?

A. No, I did not.

Q. You would agree that the VA incurs cost for the care of patients; correct?

MS. WALLACE: Objection.

THE WITNESS: That's outside my expertise. I am not an expert on VA financials or how it's funded.

BY MS. KONSTANTOPOULOS:

Q. On page 14 -- going back to page 14 of your report, under Section 8 -- Roman

Numeral 8, Subsection VHA, second paragraph. I am looking at the second sentence of that second paragraph. You indicate, "Errored -- errors in clinical coding, workload reporting, or resource classification can propagate through the MCA's cost modeling process without detection or correction."

Did I read that correctly?

A. Yes.

Q. MCA stands for managerial cost accounting system; is that correct?

MS. WALLACE: Objection.

THE WITNESS: That's my understanding of the acronym.

BY MS. KONSTANTOPOULOS:

Q. You would agree that many hospitals use managerial cost accounting systems; isn't that true?

A. I would not agree with that.

Q. Do hospitals use managerial cost accounting systems?

MS. WALLACE: Objection. Foundation.

THE WITNESS: I don't agree with that. As far as what? Running their financials or submitting claims?

BY MS. KONSTANTOPOULOS:

Q. I'm asking generally. Do hospitals use managerial -- managerial cost accounting systems?

MS. WALLACE: Objection.

THE WITNESS: It's not within my scope. That's not something that I would be privy to.

BY MS. KONSTANTOPOULOS:

Q. So you -- so do you know one way or the other if hospitals use cost accounting managerial -- managerial cost accounting systems?

MS. WALLACE: Objection.

THE WITNESS: I would not know. I'm not a -- I don't work as an accountant in a hospital.

BY MS. KONSTANTOPOULOS:

Q. Okay. You would agree that coding errors, unbundling, and duplicative charges can occur with private pay insurance?

MS. WALLACE: Objection.

THE WITNESS: I would agree that it happens across all payer sources. It's not specific to just primary. I mean, I'm sorry, not specific to just commercial.

BY MS. KONSTANTOPOULOS:

Q. Isn't it true that the cost of medical services on average is less at a VHA facility than at a private hospital for the same services?

MS. WALLACE: Objection. Foundation.

THE WITNESS: It's not within my expertise.

BY MS. KONSTANTOPOULOS:

Q. You agree that you're never opined on the reliability of VHA payments in the past as an expert; is that correct?

MS. WALLACE: Objection.

THE WITNESS: No, I have not.

BY MS. KONSTANTOPOULOS:

Q. And you have not authored any peer-reviewed publications that express any opinion about VHA medical payments; is that correct?

A. No, I have not.

Q. You've never worked for the VHA or worked with -- directly with VHA records prior to the litigation that we're here about today; correct?

A. No, I have not.

Q. And you've never worked the VA; correct?
A. No, I have not.
Q. And you've never written articles about the VA; is that correct?
A. No, I have not.
Q. You're not aware of VHA medical payments being offset in any other type of litigation; is that correct?
MS. WALLACE: Objection.
THE WITNESS: I have no knowledge of that, no.
BY MS. KONSTANTOPOULOS:
Q. You did not look into any other context where VHA medical payments can be taken as an offset; is that correct?
A. I'm sorry. Could you rephrase that?
Q. Did you look into any other context outside of this litigation where VHA medical payments could or could not be taken as an offset?
MS. WALLACE: Objection.
THE WITNESS: Here's the issue I'm having with your question is I did review GAO reports and DOD reports and Inspector

General reports, all talking about that. So your question is a bit -- I'm -- to answer no would be incorrect. To answer yes would be incorrect.

BY MS. KONSTANTOPOULOS:

Q. Have you looked to see whether VHA offsets can be deducted in any other sort of case -- have you looked --

A. I have not looked --

Q. -- to see if that's possible?

MS. WALLACE: I'm sorry. Objection to form and foundation.

THE WITNESS: I've not any experience looking at that.

BY MS. KONSTANTOPOULOS:

Q. Okay. It's generally true that all U.S. government agencies have some sort of oversight; correct?

MS. WALLACE: Objection.

THE WITNESS: It's not something I am following or are privy to.

BY MS. KONSTANTOPOULOS:

Q. So you don't know what the purpose of oversight is; is that correct?

MS. WALLACE: Objection.

THE WITNESS: Could you rephrase your question, please?

BY MS. KONSTANTOPOULOS:

Q. Do you have expertise regarding the purpose of government oversight?

A. No.

Q. Moving on to page 17 of your report. Excuse me. Page 16 under CCN. You would agree that you indicated that "The CCN dataset cannot be considered a verifiable or reliable representation of VA medical expenditures or offsets"; is that correct?

A. I identified inconsistencies in the data and duplications between CCN and VA data.

Q. Thank you.

And to assist in this questioning, I'm going to direct your attention to page 17, the last paragraph before the section TriCare. It's the last sentence of the section for CCN, which states, "Consequently, the CCN dataset cannot be considered a verified or reliable representation of VA medical expenditures or offsets, and any analysis derived from it should be treated as informational only, not suitable for forensic or economic quantification."

Did I read that correctly?

A. Yes, you did.

Q. You do not have a degree in forensic accounting; correct?

A. No.

Q. You don't have any economics-related degree as well; correct?

A. Correct.

Q. And you've never opined on the reliability of CCN medical expenditures or offsets in the past as an expert; is that correct?

A. That is correct.

Q. You have never worked for CCN; is that correct?

A. No.

Q. You have never worked directly -- strike that.

And you've not cited in the section to any document or literature that states that CCN expenditures cannot be used as an offset; is that correct?

MS. WALLACE: Objection to form. Foundation.

THE WITNESS: Not in this section,

but I believe there were some reports that identify issues with the data.

BY MS. KONSTANTOPOULOS:

Q. My question was specific to offsets, though. You would agree that you haven't cited to any document or literature that state that TriCare is specifically unreliable as an offset?

MS. WALLACE: Objection.

THE WITNESS: I would say it would be questionable to use as an offset based on the inconsistencies in the data.

BY MS. KONSTANTOPOULOS:

Q. I'm not sure you're answering my question. Did you cite to any document that states that CCN data cannot be used as an offset?

A. No, I have not cited to any, but the duplications between CCN and other data would lead me to believe that there's inconsistencies.

Q. And to be clear, you did not verify whether there were inconsistencies with the plaintiffs' specific CCN data because you did not review underlying medical records associated with them?

MS. WALLACE: Objection.

BY MS. KONSTANTOPOULOS:

Q. Is that correct?
A. I would not agree with that. I compared it to the VA data and found duplicates between the two datasets.
Q. Are you saying that you reviewed medical records and compared it --
A. That's not what I --
Q. -- to VA data?
A. That's not what I said. I said I compared the two datasets.
Q. What two datasets did you compare?
A. VA and CCN.
Q. Did you review underlying medical records to verify that data?
A. No.
Q. Subsequent to your report dated October 29th of 2025, you agree that Dr. Ji and Dr. Hasan submitted expert reports; correct?
A. Yes.
Q. Those -- just for reference, Dr. Ji's report was Exhibit 9 and Dr. Hasan's report was Exhibit 10.
You agree that their reports included clinical review of CMS, VHA, CCN, TriCare, and TriWest data; isn't that correct?

MS. WALLACE: Object to form.
You may answer.
THE WITNESS: I'm not privy to what they reviewed. I have their expert reports, and I've reviewed that.
BY MS. KONSTANTOPOULOS:
Q. You would agree that their expert report include -- expert reports included information regarding what they reviewed; correct?
A. In some cases, and Dr. Ji did not identify who the providers were, so I hesitate to answer that question.
Q. I'm going to point your attention to your rebuttal expert report, which I believe is Exhibit 15.
At -- towards the bottom of the second full paragraph of Exhibit 4 of your rebuttal expert report starting with "because" --
MS. WALLACE: Of Exhibit 4? Did you say the word "Exhibit 4"?
MS. KONSTANTOPOULOS: Page 4, Exhibit 15.
BY MS. KONSTANTOPOULOS:
Q. Towards the middle of the second

paragraph starting with "because" -- "because many substantive."

I want to make sure everyone was there.

MS. WALLACE: Will you help both of us again?

MS. KONSTANTOPOULOS: Sure, of course. It would be Exhibit -- Exhibit 13. My apologies, Counsel.

BY MS. KONSTANTOPOULOS:

Q. First, we all agree that we're looking at the rebuttal exhibit report that you drafted on January 20th of 2026; is that correct? Okay.

Pointing your attention to page 4, in the middle of the second full paragraph, starting with "because many substantive," are we all there? Okay. Wonderful.

You stated in your report, "Because many substantive concerns continue to exist with respect to data relied upon by the defendant, I have not conducted a full validation, reconciliation, or relatedness review of alleged past payments or billing charges administered by CMS Medicare, the Veterans Health Administration,

VHA, or TriWest Community Care Network, CCN."

Did I read that correctly?

A. Yes.

Q. You do not offer an opinion in your rebuttal expert report on the methodology used by Dr. Ji or Dr. Hasan to determine whether offsets are clinically related to the plaintiffs' Track 1 conditions; is that correct?

MS. WALLACE: Objection to form.

You may answer if you can.

THE WITNESS: Yes.

BY MS. KONSTANTOPOULOS:

Q. You did not review clinical records to determine whether any of the offsets claims data was clinically related to the alleged Track 1 disease for plaintiffs; correct?

MS. WALLACE: Objection to form.

THE WITNESS: I'm sorry. Could you be more specific?

BY MS. KONSTANTOPOULOS:

Q. Did you not understand the question?

A. It was very broad.

Q. Did you review any clinical records to determine whether any of the offsets claims data that you reviewed was related to a

plaintiffs' Track 1 disease?

A. Which offsets are we talking about?

Q. Did you review any clinical records --

MS. WALLACE: Object to form.

BY MS. KONSTANTOPOULOS:

Q. -- related to offset data?

Let me rephrase that. Did you compare clinical records for any of the plaintiffs to the agency data?

A. That -- again, because some patients have multiple insurance companies, they may have Medicare primary or Medicare secondary, I may have reviewed those records, so that's why I'm having a problem answering your question.

MS. WALLACE: Yeah, and object to form. You may want to do it by agency because it's really broad. TriCare, for example, she's already testified she reviewed records for. And it's confusing which ones are being claimed as offset, so I think you might need to be a little more specific.

BY MS. KONSTANTOPOULOS:

Q. Okay. You agree that you haven't

conducted a full validation, reconciliation, or relatedness review of CMS Medicare, VHA, TriWest, CCN records as stated in page 4 of your report; is that correct?

A. It says, "I have not conducted a full validation, reconciliation, or relatedness review." Yes, not a full, no.

Q. And did you review all of the records that Dr. Ji and Dr. Hasan reviewed in their expert reports?

A. I don't know that I reviewed all of the records that they reviewed. I reviewed where we conflicted.

Q. On the bottom of page 4 of your rebuttal expert report, starting at the first bottom paragraph, it states, "If the defendant's data and methodology are nonetheless found to be reliable and/or otherwise accepted by the court as sufficient proof of an applicable offset for care provided through or expenses administered by CMS Medicare, VHA, and/or CCN, then I incorporate the amounts defendant is allowed as an offset into my report as a corresponding damage."

Did I read that correctly?

A. Yes.

Q. You would agree that this is a legal opinion; correct?

MS. WALLACE: Objection. Form.

THE WITNESS: I would not agree with that.

BY MS. KONSTANTOPOULOS:

Q. Did you provide this opinion as a billing and coding expert?

MS. WALLACE: Objection to form.

BY MS. KONSTANTOPOULOS:

Q. Or is this based on a fundamental fairness argument that you're making?

MS. WALLACE: Objection.

THE WITNESS: I don't have a way to validate thoroughly any of the data you provided. And this is just my statement saying that if the court accepts it, then I accept it. Does that make sense?

BY MS. KONSTANTOPOULOS:

Q. You're saying that if the court accepts an offset amount, then you incorporate those amounts that defendant is allowed as an offset into your report as a corresponding damage. What do you mean by corresponding damage?

MS. WALLACE: Object to form.
You may answer.
THE WITNESS: If your expert is saying that these are related to their Track 1 or their related diagnoses, then I am ex -- accepting it as also a damage. Does that make sense?
BY MS. KONSTANTOPOULOS:
Q. You agree that in your expert report, you don't cite to any documentation or publications to support this position; isn't that correct?
MS. WALLACE: Objection.
THE WITNESS: I would agree, yes.
BY MS. KONSTANTOPOULOS:
Q. But you're currently willing -- unwilling to accept these as offsets -- offset amounts; is that correct?
MS. WALLACE: Objection.
THE WITNESS: It's -- I don't believe it's my place to accept them or not accept them.
BY MS. KONSTANTOPOULOS:
Q. But you indicated if the court accepts them, you're willing to forget the issues

you have with them. Is that fair to say?
MS. WALLACE: Objection.
THE WITNESS: I'm not in agreement with that. What I'm saying is if the court accepts your data, then I accept your data.
BY MS. KONSTANTOPOULOS:
Q. On the top of page 5, you indicate starting with "I do so in acknowledgment that any award, payment, or benefit provided to a plaintiff for medical care through a program administered by or through CMS/Medicare, VHA, or CCN TriWest which is sufficiently validated for purposes of being allowed as an offset necessarily constitutes proof of an expense that was incurred by that plaintiff for the medical care that was provided."
Did I read that correctly?
A. Yes.
Q. Do you agree that this is a new opinion that was not previously provided in your October 29, 2025, report; correct?
MS. WALLACE: Objection.
THE WITNESS: I agree.
BY MS. KONSTANTOPOULOS:

Q. And you did not cite to any documentation or literature to support this position in your report; isn't that correct?

MS. WALLACE: Objection.

THE WITNESS: No. But to the extent that the patients were treated and the services were paid by Medicare, VHA, CCN, or TriWest, those should be accepted as an offset as well.

BY MS. KONSTANTOPOULOS:

Q. This is not an opinion that is based on your own independent evaluation of the billing records; isn't that true?

MS. WALLACE: Objection.

THE WITNESS: We did not have complete sets of data -- of billing records. I was not provided those, so...

BY MS. KONSTANTOPOULOS:

Q. You agree, then, that you did not independently verify whether government offset amounts equalled the amount that the patient has actually paid for those services; correct?

MS. WALLACE: Objection.

THE WITNESS: It's not information that I had.

BY MS. KONSTANTOPOULOS:

Q. So you weren't able to independently verify it; is that correct?

A. That is correct.

Q. You would agree that you've never asserted this opinion before this rebuttal expert opinion report of January 20th, 2026; is that correct?

MS. WALLACE: Object to form.

BY MS. KONSTANTOPOULOS:

Q. Sorry. I didn't hear your answer. You said yes?

A. Yes, I would agree.

Q. And you would agree that determinations regarding what constitutes proof in a case is a legal determination; correct?

A. Yes.

Q. Have you read the language of the Camp Lejeune Justice Act?

A. Yes.

Q. Was this opinion based on your interpretation of the Camp Lejeune Justice Act?

MS. WALLACE: Objection.

THE WITNESS: No.

BY MS. KONSTANTOPOULOS:

Q. What was this opinion based on?

MS. WALLACE: Objection. Which opinion? I'm sorry. I lost track of what opinion the question is in reference to. I apologize.

BY MS. KONSTANTOPOULOS:

Q. Well, you had stated that -- go back to page 4. "If the defendant's stated methodology are nonetheless found to be reliable and/or otherwise accepted by the court as sufficient proof of an applicable offset for care provided through or expenses administered by CMS, Medicare, VHA, and/or CCN, then I incorporate the amounts defendant is allowed as an offset into my report as a corresponding damage."

What was the basis of that opinion?

A. As I explained, it's based on the court accepting your data for these different agencies, then I would accept that data.

Q. And then later you indicate at the top of page 5 again, "I do so in acknowledgment that any award, payment, or benefit provided to a plaintiff for medical care through a program administered by or through CMS, Medicare, VHA, or CCN, TriWest, which is sufficiently validated for

purposes of being allowed as an offset necessarily constitutes proof of an expense that was incurred by that plaintiff for the medical care that was provided."

What was the basis for that opinion?

A. I believe you're separating the context. It's based on the data and the court accepting your data.

Q. What authority do you have -- what authority did you rely upon to make this opinion?

MS. WALLACE: Objection to form.

THE WITNESS: I'm sorry. I don't understand your question, what authority. I'm basing it on the Court accepting your data.

BY MS. KONSTANTOPOULOS:

Q. Why would an offset necessarily constitute proof of an expense that was incurred by a plaintiff?

A. You're separating it from the context listed above as the data. If the Court accepts your data, then I accept your data.

Q. Again, my question was, why does an offset necessarily constitute proof of an expense that was incurred by a plaintiff?

A. Because --

MS. WALLACE: Objection to form.

THE WITNESS: I'm sorry.

MS. WALLACE: You may answer.

THE WITNESS: Again, you're separating one sentence from the context. As I explained, there are many inconsistencies with five different -- five different, six different, I can't even keep track now -- government agencies and how they pulled their data and what inconsistencies were relied upon in that data. And what I'm saying is if the Court accepts your data, then I accept your data, and it should be included based on that acceptance.

BY MS. KONSTANTOPOULOS:

Q. Understood. So if the Court accepts this data, you indicated that an offset necessarily constitutes proof of an expense that was incurred by that plaintiff. How do you know that it constitutes proof of an expense that was incurred by a plaintiff?

MS. WALLACE: Object to form.

THE WITNESS: It goes back to your

data. In your data, you got charges and payments in there. I'm merely accepting your data.

BY MS. KONSTANTOPOULOS:

Q. So is it your testimony or your understanding -- strike that.

Is it your understanding that if an offset can be proved, that offset would be the exact same amount as the expense incurred by the plaintiff?

MS. WALLACE: Object to form.

THE WITNESS: I'm sorry. Could you rephrase that question?

BY MS. KONSTANTOPOULOS:

Q. Do you not understand it?

A. No. We've gone in circles on this question for quite some time now.

Q. So I'm reading your own report, and I can read the section again.

"I do so in acknowledgment that any award, payment, or benefit provided to a plaintiff for medical care through a program administered by or through CMS, Medicare, VHA, or CCN, TriWest which is sufficiently validated for purposes of being allowed as an offset

necessarily constitutes proof of an expense that was incurred by that plaintiff for the medical care that was provided."

Do you understand the sentence that's in your own report?

A. Yes, I do understand the sentence that's in my own report. However, you're separating it from the context, which is what you seem to be hooked on.

The context of that sentence is based on the data and the methodology. You had multiple agencies pull information based on your -- the DOJ's requirements, and that data has inconsistencies. To the extent that the Court accepts it, then I accept it and I accept it as an offset.

Q. Okay. Do you understand the difference between what patient payments are and what an offset is?

MS. WALLACE: Object to form. Can you rephrase?

BY MS. KONSTANTOPOULOS:

Q. What is your understanding of what an offset is?

MS. WALLACE: Objection.

THE WITNESS: It's not my expertise.
MS. KONSTANTOPOULOS: I think this is a good time to take a break for lunch. It's about 12:23.
THE VIDEOGRAPHER: Going off the record. The time is 12:24 p.m.
(Recess taken from 12:24 p.m. until 1:08 p.m.)
THE VIDEOGRAPHER: Going back on the record. The time is 1:08 p.m.
BY MS. KONSTANTOPOULOS:
Q. You recall you are still under oath; correct?
A. Correct.
Q. Did you have any substantive communications about your deposition testimony with your counsel during the break?
MS. WALLACE: Objection.
THE WITNESS: Substantive meaning? Define what you would suggest is sub -- substantive.
BY MS. KONSTANTOPOULOS:
Q. Did you discuss how you were to answer questions --
MS. WALLACE: Objection.
BY MS. KONSTANTOPOULOS:

Q. -- for the deposition?

MS. WALLACE: I would object to the extent that it calls for confidential attorney-client work product communications.

BY MS. KONSTANTOPOULOS:

Q. Without telling me what counsel said, did counsel instruct you on how to respond to questions, the deposition during the break?

MS. WALLACE: Objection.

BY MS. KONSTANTOPOULOS:

Q. You can answer the question.

A. No.

Q. All right. I'm going to point your attention back to Exhibit 7, which is Dr. Ji's report.

MS. WALLACE: I have Exhibit 7 as the First Amended Materials Considered List.

MS. KONSTANTOPOULOS: Thank you, Counsel.

BY MS. KONSTANTOPOULOS:

Q. I would point your attention to Exhibit 9, Dr. Ji's report. Please confirm that the number -- exhibit number is correct.

A. Yes.

Q. Thank you. Sorry about that.

At the bottom of the page, "Summary of Damages," Dr. Ji stated, "Assuming the conclusions from the plaintiffs' expert Dr. Sfakianos are correct for purposes of my opinions, these claimed medical expenses submitted by Mr. Cogiano were reviewed. The plaintiff reported total medical expenses of $148,972. $27,672 of charges were reviewed but determined to be unrelated to the claimed condition. $121,300 of charges were verified to be related to the claimed conditions."

Did I read that correctly?

A. What page are you on?

Q. Page 7.

A. Yes, that's what his report says.

Q. And then in his report, moving on to page 10, under "Noninstitutional," Number 1 is listed as the Emory Clinic Incorporated; is that correct?

A. Yes.

Q. Okay. And the note says for the entry 6/9/2009 -- June 9, 2009, he writes, "The charges referred to cystourethroscopy and TURBT, but primarily for benign prosthetic hypertrophy,

(EUH OPS RPT). This was nine years prior to the diagnosis of UTUC, and the results did not show cancer at that time."

Did I read that correctly?

A. Yes.

Q. And he indicated the charges total $3,009 but are not related to the claimed diagnosis; is that correct?

A. Well, that's what it states, yes.

Q. And on page 11 of his report under Number 6, Southeastern Regional Medical Center, he indicates for 2/2/2024, or February 2, 2024, he writes, "This was -- was a hospitalization for management of prostate cancer. A transurethral prostate resection was performed by Dr. Ravi, but this was not indicated for the surveillance or management of bladder cancer."

Did I read that correctly?

A. Yes, that's what it states.

Q. And he stated, "The charges totaled $23,763 but are not related to the claimed diagnosis"; correct?

A. That's what he states, yes.

Q. I'm going to point your attention back to your amended -- I'm sorry -- rebuttal

report, Exhibit 13, and ask you to turn to page 6. And I am referring to the very top at the -- at the top, you indicated, "After review, I am reducing the amount of medical billing expenses to the amount confirmed by the defense expert Wang Ji, M.D., and have amended my totals accordingly to reflect $121,300 in charges verified by the experts for both parties to be related to the conditions claimed"; correct?

A. Correct.

Q. And you would agree that you deferred to Dr. Ji's opinion regarding prostate cancer because he's a clinician?

MS. WALLACE: Objection. Form.

THE WITNESS: I agree that -- with Dr. Ji's opinion, yes.

BY MS. KONSTANTOPOULOS:

Q. Moving on to -- going back to Dr. Ji's report, which was Exhibit 9, for Jefferson Criswell.

A. What page?

Q. Page 12.

You would agree under "Summary of Damages" in the first bullet point in bold, Dr. Ji wrote, "The plaintiff reported total

medical expenses of 200 -- $202,674, and these were charges -- these charges were all verified to be related to the claimed conditions"; correct?

A. Yes.

Q. There was no dispute regarding the past medical expenses --

A. Correct.

Q. -- for Jefferson Criswell; correct?

A. That is correct.

Q. Staying on that Exhibit 9 regarding Terry Dyer on page 20. Under "Summary of Damages," Dr. Ji wrote, "Assuming the conclusion from the plaintiffs' experts Dr. Longo and Tharwani are correct for purposes of my opinion, these claimed medical expenses submitted by the plaintiff were reviewed.

"The plaintiff reported total medical expenses of $279,994. They were incorrectly entered -- there were incorrectly entered charge amounts, data entry errors on 7/31/2013 and 5/6/2021 with a difference of plus $210 (plus 341 and minus $131). After correcting for this, I reached the following conclusions: 282,204 of the charges were identified on the review -- on

review of the plaintiffs' analysis; $23,979 of charges were determined to be unrelated to the claimed conditions; $256,224 were verified to be related to the claimed conditions."

Did I read that correctly?

A. Yes, you did.

Q. Going back to your report on Exhibit 13 -- in Exhibit 13, page 7.

A. Uh-huh.

Q. You indicated in the second full paragraph under your heading for Terry Dyer, "Based upon my review of the medical records for the dates of service disputed by the defense expert Dr. Wang Ji, I agree with certain disputed medical expenses and disagree with others as detailed below."

Did I read that correctly so far?

A. Yes.

Q. Okay. Under Number 1, you indicated right underneath that, "Dr. Ji alleged data entry errors on 7/31/2013 and 5/6/2021 with a difference of $210 (plus $341 and minus $131). I agree with these assessments."

Did I read that correctly?

A. Yes.

Q. And under A, "Duke Health charges for the date of service July 31, 2013, related to plaintiff's Track 1 condition for cytology and pathology services were inaccurately understated by $341 -- $341. This amount has been corrected to reflect a total of $18,381.31."

Did I read that correctly?

A. Yes.

Q. So you agreed with Dr. Ji's opinion for those Duke Health charges; correct?

A. Correct.

Q. Under B, you stated, "The Novant Health Regional Medical Center charges for an emergency department visit, laboratory services, and CT scans on May 6, 2021, were inaccurately reported as $1,097.99"; is that correct?

A. Yes.

Q. And they were inaccurately reported in your expert report --

A. And the appendices.

Q. And appendices. Okay.

And that was the expert report dated October 29, 2025; correct?

A. Correct.

Q. You stated, "This total had been

revised to reflect the correct amount of $966.74"; correct?

A. Correct.

Q. And under C, you stated, "Additionally, advanced imaging performed on August 4, 2022, was inaccurately reported twice. The duplicate charge from Columbus Regional HCS in the amount of $1,671 has been removed."

Did I read that correctly?

A. Yes, you did.

Q. So you made the following adjustments based on Dr. Ji's report; is that correct?

A. Yes.

Q. And under Number 2 -- strike that.

Moving to page 8, Exhibit -- same exhibit, Exhibit 13, under Subsection C, you indicated, "Because of the dispute with respect to these charges raised by Dr. Ji, I sought further input from the urologist Dr. Thomas Longo to confirm relatedness as assessed. I have relied upon this letter dated January 14, 2026, in formulating the opinions set forth in this report"; is that correct?

A. Yes.

Q. And the dispute that you're referring

to here, is that related to charges for dates of service for June 22, 2014, and December 2, 2015?

A. Yes.

Q. You would agree that you did not speak to Dr. Longo directly about Terry Dyer's case; correct?

A. That is correct.

Q. And you didn't have any email correspondence with Dr. Longo; correct?

A. Correct.

Q. Other than the letter from Dr. Thomas Longo dated January 14, 2026, you did not review any of his prior reports that he drafted for Terry Dyer; is that correct?

A. That is correct.

Q. I'm going to mark the letter from Dr. Thomas Longo dated January 14, 2026, as Exhibit 17.

MS. WALLACE: Thank you.

(Exhibit 17 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. Is this a copy of the letter that you reviewed and relied upon in your rebuttal expert report?

A. Yes.

Q. You would agree that in this letter, Dr. Longo does not state that he reviewed the medical bills associated with these visits; isn't that correct?

MS. WALLACE: Object to form. Foundation.

THE WITNESS: That's correct.

BY MS. KONSTANTOPOULOS:

Q. And in that later -- letter -- January 14, 2026, letter, he indicated that he reviewed certain Bates documents; is that correct?

A. Yes.

Q. The first was for records for -- for June 27, 2014, visit --

A. Yes.

Q. -- which is Bates Number 000357_Dyer_0000002061-73. Did I read that correctly?

A. Yes.

Q. I am marking as Exhibit 18 Novant Health records with that same Bates number regarding -- Bates number range for -- for June 27, 2014, visit.

(Exhibit 18 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. Take a moment to review those. You would agree that these are the records cited by Dr. Longo for the June 27, 2014, visit; correct?

MS. WALLACE: Objection.

BY MS. KONSTANTOPOULOS:

Q. Would you agree that based on those Bates numbers, that the records that Dr. Longo reviewed for the June 27, 2014, visit are the same as the records in front of you?

A. Yes.

Q. And you would agree that there are no bills contained in the records that he reviewed, correct, for the -- specifically for the June 27, 2014, visit?

A. No, there are no billing records that he reviewed.

Q. Okay. And I'm going to show you what will be marked as Exhibit 19.

(Exhibit 19 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. What I'm showing you are records for

Ms. Dyer's December 2, 2014, visit, _00357 -- excuse me -- 00357_Dyer_000000061-84.

You would agree that these are the records that Dr. Longo reviewed for the December 2, 2014, visit, according to his letter?

MS. WALLACE: Objection.

THE WITNESS: Yes, that appears to be the -- the records.

BY MS. KONSTANTOPOULOS:

Q. Okay. And you would agree that Exhibit 19, the records from the December 2, 2014, visit referenced by Dr. Longo do not include any medical bills; correct?

A. That is correct.

Q. You're aware that Dr. Ji reviewed both the medical visits and bills to make his determinations regarding Ms. Dyer; is that correct?

MS. WALLACE: Objection.

THE WITNESS: I'm not sure how I would know what Dr. Ji looked at. I can presume he did.

BY MS. KONSTANTOPOULOS:

Q. Okay. I'll point your attention back to Dr. Ji's report, which is Exhibit 9, and point

your attention to page 24. Looking towards the top of page 24 under Section C, he indicated on 6/27/2014, -00357_Dyer_0000002653, under that heading, he stated, "These are charges from 6/27/2014" -- and I apologize. Do you want me -- do you know where we are?

A. Uh-huh.

Q. Okay. Start over. These are -- he stated, "These are charges from 6/27/2014 related to an ER visit with primary complaints of fever and abdominal pain with a chief complaint of fever, PT states. Dr. William Hope wants to be called when I'm here.

"This chief complaint is the primary reason for the ER visit, which was a request for general surgeon Dr. William Hope to evaluate her for right upper quadrant abdominal pain (00357_Dyer_0000002061 to 2067). Dr. Hope evaluated and found the pain to be due to gallstones and she was discharged from the ER (00357_Dyer_0000002067 to 2069)."

Did I read that correctly so far?

Did I read that correctly so far?

A. Yes.

Q. Okay. And about three weeks in -- he

continues to state, "About three weeks later on 7/17/2014, she underwent a laparoscopic cholecystectomy" --

A. Cholecystectomy.

Q. -- "cholecystectomy with intraoperative cholangiogram with Dr. Hope (00357_Dyer_000002074 to 2075). While she did also have a urinary infection, this was sensitive to ciprofloxacin, an oral medication, and was not the primary reason for ER visit. This is not related to the claimed conditions. The charges were related to gallstones. The total charges of $1,787 were not related to the claimed condition."

Did I read that correctly?

A. Yes, you did.

Q. Okay. You would agree that gallstones are unrelated to Ms. Dyer's Track 1 condition; isn't that correct?

MS. WALLACE: Objection.

THE WITNESS: Reading --

BY MS. KONSTANTOPOULOS:

Q. I'd like to refer to the table of conditions in Exhibit 11 to refresh your recollection.

A. Yes, I would agree with that. However, they found the patient had a urinary tract infection that was not responsive to the ciprofloxacin and was given Rocephin. IV Rocephin.

Q. You would agree that the urinary tract infection was not the primary reason for her visit to the hospital; isn't that correct?

A. No, I would not agree with that. She came in with a fever and pain, and what they found was a urinary tract infection that they treated.

Q. Again, you're not a medical expert; correct?

A. I'm following the provider's note.

Q. So you're interpreting what the provider is stating; correct?

A. Yes.

Q. And you're interpreting the medical records in this case; is that correct?

A. That is correct.

Q. And is it your testimony that your interpretation of the medical records are more accurate than Dr. Ji's interpretation of the medical records?

MS. WALLACE: Objection.

THE WITNESS: Based on my education, training, experience, and knowledge base, I follow objectivity when I'm looking at a medical record. The provider states that the patient had a urinary tract infection that was not sensitive to the antibiotic that had been previously prescribed.

BY MS. KONSTANTOPOULOS:

Q. You would agree that Dr. Ji is a clinician; correct?

A. Yes.

Q. And you are not a clinician; correct?

A. No.

Q. And you agree that a clinician would be in a better position to interpret medical records; correct?

MS. WALLACE: Objection.

THE WITNESS: No, I would not agree with that.

BY MS. KONSTANTOPOULOS:

Q. You believe that your interpretation of medical records is superior to Dr. Ji's interpretation of medical records who is --

MS. WALLACE: Objection.

BY MS. KONSTANTOPOULOS:

Q. -- a clinician and doctor?

MS. WALLACE: Objection. Sorry.

THE WITNESS: I would state that I have spent 19 years training physicians on how to document in a medical record, and I am trained in reviewing medical records with objectivity.

BY MS. KONSTANTOPOULOS:

Q. You've never been to medical school; correct?

A. No.

Q. And you don't train doctors on the types of treatments that are related to specific diseases; correct?

A. I train doctors on how to document their notes and how to interpret the codes that they're using.

Q. You don't train doctors on how to interpret diagnoses; correct?

MS. WALLACE: Objection.

THE WITNESS: I do, to a certain extent, provide guidance on how to interpret ICD-10 and how best to document clearly and concisely in their note.

BY MS. KONSTANTOPOULOS:

Q. You would agree that you previously indicated that when multiple diagnoses are present, that you would analyze medical documentation to determine whether the compensable condition was the primary clinical driver of the accounter or whether it was represented -- whether it represented a coincidental or historical diagnosis. Do you recall that?

A. Yes, I do recall that.

Q. Was it your testimony here today that the UTI that was found during the ER visit was the primary clinical driver of this ER visit?

MS. WALLACE: Objection.

THE WITNESS: I'm following the medical record written by the provider with the support of a clinician who reviewed the same medical record I reviewed and is in agreement with my assessment.

BY MS. KONSTANTOPOULOS:

Q. Dr. Ji had indicated that the charges were related to gallstones for the June 27, 2014, visit; correct?

MS. WALLACE: Objection.

THE WITNESS: You're asking me if his statements are -- what he is assessing is gallstones? I would agree that that's what he wrote, yes.

BY MS. KONSTANTOPOULOS:

Q. I'll move on to plaintiff Jimmy Laramore. Referring to Exhibit 13, your rebuttal report, page 8, starting right under Laramore, Jimmy Carol. You indicated for Jimmy Laramore, "I quantified $0 in medical billing expenses"; is that correct?

A. Yes.

Q. So it is your opinion that Mr. Laramore, based on the information you had been given, has $0 in past medical expenses; is that correct?

MS. WALLACE: Objection.

THE WITNESS: I would not agree with the way you stated it, no. I was not provided documentation or billings to review.

BY MS. KONSTANTOPOULOS:

Q. And you noted also on page 8 in the second paragraph under Mr. Laramore's heading

that the government claimed VHA offsets and CCN/TriWest offsets; is that correct?

A. That's what it says, yes.

Q. And you did not conduct a full validation, reconciliation, or relatedness review of those past payments and billing charges administered by VHA or CCN, TriWest; correct?

A. Correct.

Q. Okay. For Mr. Laramore, is it fair to say that you have not reviewed any of his medical records in this case?

A. No, I have not.

Q. Moving on to Mr. Frank Lee Mousser on page 9 of your report under Kidney Cancer Plaintiffs. Again, Exhibit 13, page 9. For Frank Mousser, you stated "I quantified $0 in medical billing expenses."

And you did not review any past billing expenses or records of Mr. Frank Mousser; is that correct?

MS. WALLACE: Objection to the form.

THE WITNESS: I was not provided any information regarding billing or documentation for Mr. Mousser.

BY MS. KONSTANTOPOULOS:

Q. You noted for Mr. Mousser that the government claimed VHA offset; is that -- VHA offsets; is that correct?

A. Yes.

Q. You didn't independently evaluate those VHA offsets; correct?

MS. WALLACE: Objection.

THE WITNESS: I believe those VHA offsets are coming from your expert.

BY MS. KONSTANTOPOULOS:

Q. So you did not independently evaluate those; correct?

MS. WALLACE: Objection.

THE WITNESS: The VHA data, no.

BY MS. KONSTANTOPOULOS:

Q. And you haven't reviewed any of Mr. Mousser's medical billing expenses or records in this case; is that correct?

MS. WALLACE: Objection.

THE WITNESS: None were provided.

BY MS. KONSTANTOPOULOS:

Q. Moving on to Mr. Allan Howard on page 9 -- strike that.

Still on Mr. Howard, going back to Dr. Ji's expert report, Exhibit 9. Point your

direction to page 30 of Exhibit 9. Under Howard, Allan Wayne -- Plaintiff 6, Howard, Allan Wayne, under "Summary of Damages" starting at the bullet points, Dr. Ji indicated, "The plaintiff reported total medical expenses of $839,643.06. $187 of charges were determined to be unrelated to the claimed conditions. 839,401 were verified to be related to the claimed conditions."

Did I read that correctly?

A. Yes.

Q. Moving on to page 33 of Dr. Ji's report, Exhibit 9, staying with the same exhibit. I point your attention to Number 2 under Kettering Health. He indicated, "There was one charge for 3/21/2011 for an office visit for internal medicine. However, the visit was focused on hyper" --

A. Hyperlipidemia.

Q. Thank you.

-- "hyperlipidemia with no indication for management of any cancer, lymphoma, or RCC, -00490_Howard_0000000957 to 963. This is not related to the claimed conditions. $184 is not related to the claimed conditions."

You agreed with that assessment and

removed that charge from your calculations; correct?

A. Yes.

Q. Moving on to Mr. Fancher, David Fancher. I would refer you to Exhibit 13, back to your rebuttal expert opinion report, page 10. You agree that, "For Mr. -- for David Fancher, I quantified $6,475.30 in medical billing expense. Of these expenses $6,475.30 was confirmed by the defense expert Wang Ji, M.D., leaving a disputed amount of charges totaling $0."

Did I state that correctly?

A. Yes.

Q. And you also indicated that the government claimed additional offsets for VHA; correct?

A. Again, those offsets, I believe, are in Dr. Ji's report. And we are -- I'm merely accepting his finding.

Q. Okay.

A. Or whatever page he might be on.

Q. Fair enough. Moving to David Downs, I would refer you to, again, page 10 of your rebuttal report, Exhibit 13. You indicated for David Downs, "I quantified $49,971.61 in medical

billing expenses all incurred under the TriCare program. Of these expenses, $49,971.61 was confirmed by the defense expert Wang Ji, leaving a disputed amount of charges totaling $0.

Did I read that correctly?

A. Yes.

Q. Moving on page 11 of your expert report, under Section 5, Tukes, Jacqueline. Keeping on that same plaintiff, I will actually ask you to refer whack to Dr. Ji's report, Exhibit 9, page 39.

At the bottom of the page under "Summary of Damages," under the bullet points, he states, "The plaintiff reported total medical expenses of $410,564. $78,632 were duplicate charges that were flagged as denials by TriCare. $3,478 of charges were not related to the claimed conditions. $328,454 were verified to be related to the claimed conditions."

Did I read that correctly?

A. Yes, you did.

Q. You would agree that you were incorrect to include these charges; correct?

A. I would preface that by saying the -- this is an illustration of the TriCare data's

inconsistencies showing that the information provided by the Department of Justice included duplicate charges.

Q. Once Dr. Ji -- once Dr. Ji in his reported determined that there were duplicative charges, you removed those from your totals for --

A. Yes, I removed the duplicates.

Q. Okay. Going back to your report, Exhibit 13, page 11, under Jacqueline Tukes, the third paragraph starting with "I reviewed."

You indicated, "I reviewed the $78,632 duplicate charges that were flagged initially as denials by TriCare. I note that there are no duplicates in the paid amounts, only in the charges in the TriCare dataset. My review is consistent with the assessment of Dr. Ji, and duplicative billing entries have been excluded from the related damages totals. I have amended my totals to deduct the duplicate -- duplicative billing charges."

Did I read that correctly?

A. Yes, you did.

Q. You also indicated underneath that paragraph on page 11 in Exhibit 13 -- 13,

"Further, after review, plaintiffs agree to the disputed medical expenses identified by Dr. Ji in the amount of $3,478. I have amended my totals to reflect $328,454 in charges verified to be related to the claimed conditions."

Did I read that correctly?

A. Yes, you did.

Q. I'm going to point your attention back to Exhibit 9, Dr. Ji's report, on page 42.

One of the disputed charges that Dr. Ji mentioned and that you agreed to revise your amount for Ms. Tukes was a 5/12/2021 visit, and that's according to Dr. Ji's report, Carolina Healthcare Associates, Inc., under Section D, 5/12/2021.

You would agree it reads "Perioperative medicine consult for a knee replacement surgery. This is not related to the claimed concerns"; is that correct?

A. That is correct.

Q. And then the other charge that he was referring to that you accepted was on page 46 of Exhibit 9, which was the Onslow Memorial Hospital, Inc., visit on July 16th of 2010; is that correct?

A. Yes. Colonoscopy.

Q. Okay. And it states, "Routine colon cancer screening with colon -- colonoscopy found with diverticulosis without evidence of any cancer." He indicated that $3,002 was not related to the claimed conditions, and you agreed; correct?

A. Correct.

Q. Please stay with Exhibit 9, Dr. Ji's report, and ask that you flip to page 52. This is under Plaintiff 10, Amsler, Karen. Moving to the second paragraph in the bullet points of page 52, Exhibit 9, Dr. Ji indicated, "The plaintiff reported total medical expenses of $831,690.04. On review, based on the plaintiff's cited billing records, there were two data entry errors detected totaling a difference of $714 ($741 overcharged and $27 undercharged). After correctly for these errors, $830,977 of billing charges were identified."

Did I read that correctly?

A. Yes, you read that correctly.

Q. And you agreed with Dr. Ji's assessment of these billing errors; correct?

MS. WALLACE: Objection.

THE WITNESS: No.

BY MS. KONSTANTOPOULOS:

Q. All right. I'm going to point your attention to -- strike that.

You did not agree with the disputed amount of $714; correct?

A. Correct.

Q. Yes. And your opinions with respect to Karen Amsler are, therefore, unchanged. Is that fair to say?

A. That is fair to say. Well, I think the $27 that was allegedly undercharged, I think we made a correction for that. But the other amount, the 741, we did not reduce.

Q. Okay. Thank you.

Staying with Dr. Ji's report, Exhibit 9, page 55. In reviewing Vivian Connard's medicals, I'm going to direct your attention to the "Summary of Damages" section towards the bottom of the page beginning with the bullet points.

Here, Dr. Ji stated, "The plaintiff reported total medical expenses of $560,984.97. There was a small data error of $4. Corrected for this error, $560,981 in charges were

identified and were related to the claimed condition."

Did I read that correctly?

A. Yes.

Q. And you agreed with Dr. Ji's assessment regarding the additional charge amount; is that correct?

A. That is correct.

Q. Okay. And you, therefore, corrected that amount in your records?

A. That is correct.

Q. Now, moving back to your rebuttal expert report, Exhibit 13, page 13. For Joseph Gleesing -- Plaintiff Joseph Gleesing, you indicated at the top on the first paragraph under Gleesing, Joseph, "For Joseph Gleesing, I quantified $397,144.90 in medical billing expense. Of these expenses, $381,452 was confirmed by the defense expert Wang Ji, M.D., leaving a disputed amount of charges totaling $15,692.90."

Did I read that correctly?

A. Yes.

Q. And further down in the second -- beginning of the second paragraph, you indicate,

"Based upon my review, the amounts disputed by the defense expert Dr. Wang Ji, I agree with certain disputed -- disputed medical expenses and disagree with others, as detailed below."

A. Correct.

Q. And you indicated that you agreed to the data entry -- data entry errors totaling a difference of $9,315; is that correct?

A. That is correct.

Q. And under A, under that section, you indicated, "I agree that the charged amount for three separate dates of service, 12/2/2017, 7/2/2019, and 9/27/22, performed at the Borgress Medical Center were overstated."

A. Correct.

Q. And you adjusted those charges; correct?

A. Yes.

Q. You also agreed under B that the laboratory services identified under the multiple locations tabbed inaccurately included charges in the amount of $885.67; correct?

A. Correct.

Q. And you adjusted that amount accordingly in your records; correct?

A. That's correct.

Q. And then under C for date of service, 4/11/2018, multiple providers, you disagreed with Dr. Ji's determination that plaintiff's charges -- charges claims were overstated; correct?

A. Yes.

Q. Under Number 2 on page 14, you indicated that "Dr. Ji identified $6,824 in medical charges as unrelated to the claimed conditions and $381,452 in charges as related."

You stated in your report, "While the plaintiff has raised objections to the relatedness determinations involving the aortic aneurysm and pancreatic lesions, absent -- absent physician confirmation, I have not challenged Dr. Ji's determinations for purposes of this billing analysis"; is that correct?

A. That is correct.

Q. And you also adjusted those patient payments to reflect those amendments?

A. That is correct.

Q. And you added $446 in --

A. Pharmacy copays, yes.

Q. And you added $446 in pharmacy

copays; correct?

A. Correct.

Q. I'm going to move on to Mr. Bruce Hill on page 14 of your report, Exhibit 13. For Mr. Bruce Hill, you quantified $0 in medical expenses; is that correct?

A. I was not provided any billing or medical records to validate that, yes.

Q. And although the government claimed VHA and Medicare offsets for Mr. Hill, you did not evaluate those offsets; correct?

A. Correct.

Q. You have not reviewed any of Mr. Hill's medical billing expenses in this case; correct?

MS. WALLACE: Objection. Form.

THE WITNESS: Correct. Oh, I'm sorry.

BY MS. KONSTANTOPOULOS:

Q. Sorry. I didn't hear you. I apologize.

MS. KONSTANTOPOULOS: Can we take a brief break?

MS. WALLACE: Sure.

MS. KONSTANTOPOULOS: Wonderful.

THE VIDEOGRAPHER: Going off the record. The time is 2:02 p.m.

(Recess taken from 2:02 p.m. until 2:18 p.m.)

THE VIDEOGRAPHER: Going back on the record. The time is 2:18 p.m.

BY MS. KONSTANTOPOULOS:

Q. Thank you. And you recall you are still under oath; correct?

A. Yes.

Q. Did you have any substantive communications about your deposition testimony with your counsel during the break?

MS. WALLACE: Objection to the extent that the question calls for confidential communications.

THE WITNESS: No.

BY MS. KONSTANTOPOULOS:

Q. I am going to move back to Dr. Ji's expert report, which is Exhibit 9. I'm going to point your attention to page 67 where he discusses plaintiff Ronald Lee Carter.

MS. WALLACE: What page, Counsel?

THE WITNESS: 67.

MS. KONSTANTOPOULOS: Page 67.

MS. WALLACE: Thank you.

BY MS. KONSTANTOPOULOS:

Q. At the top there are bullet points.

A. Uh-huh.

Q. Dr. Ji states, "The plaintiff reported total medical expenses of $600,016 and 900 -- excuse me -- $616 and 910 -- $616,000 excuse me -- $616,910. $1,121 of charges were reviewed but determined to be unrelated to the claimed conditions. $615,789 of charges were verified to be related to the claimed conditions."

Did I read that correctly?

A. Yes, you read that correctly.

Q. Thank you.

On page 69 of Exhibit 9 of his report -- Dr. Ji's report, under Number 3, CCHC Coastal Primal Care, he noted a total of $4,681 in charges were identified.

Under B, five charges, all primary care visits were identified as not related to claimed conditions. Those five charges that he noted included a charge on 2/4/2014, and he indicated that the visit was focused on a post hospital visit for heart attack; correct?

A. That's what it states, yes.

Q. He indicated that the lymphoma was in remission and there was no mention of any management for the claimed conditions. That's what he stated; correct?

A. Yes.

Q. And in the second Roman numeral, he mentioned three visits on -- one on 12/15/2015, one on 12/17/2015, and one on 12/21/2015. And he indicated that "These three visits were all focused on the management of a lung infection/pneumonia. Lymphoma was in remission, and there was no mention of any management for claimed conditions."

That's what Dr. Ji stated in his report; correct?

A. Yes.

Q. And then that final visit of the five charges he was referring to in his report was on April -- excuse me -- May 14, 2018. He stated that "This visit was for an upper respiratory infection with cough. The lymphoma was in remission, and there was no mention of any management for the claimed conditions."

Those were the charges that he was referring to that were unrelated in his report;

is that correct?

A. Yes.

Q. You disputed these charges on the basis that you believe that they're related to his NHL; is that correct?

A. I believe they're related to his chronic infection, if I'm not -- Mr. Carter...

Q. Well, actually, moving back to your rebuttal expert report, Exhibit 13.

A. Chronic infections.

Q. Page 16. You comment on those charges.

A. Yes.

Q. Under Number 6 -- Section 6, on page 16, you stated in your report, Exhibit 13, "Because of the dispute with respect to certain charges raised by Dr. Ji, I was provided with additional materials considered for the plaintiff, specifically the deposition testimony of Dr. Michael Davis.

"Dr. Davis testified that when a patient has non-Hodgkin's lymphoma or mantle cell lymphoma, their treatment for those conditions, particularly chemotherapy, tremendously suppress your immune system. Davis, pages 123 to 124.

For the aforementioned reasons, I dispute Dr. Ji's relatedness opinion with respect to this treatment."

Did I read that correctly?

A. Yes.

Q. I am marking the deposition of Dr. Michael Davis, M.D., as Exhibit 20.

(Exhibit 20 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. I ask that you turn to the deposition pages you cited, 123 and 124 in your report.

On page 123, line 18, there's a question. "Okay. When you are -- when you have non-Hodgkin's lymphoma or mantle cell lymphoma or -- the treatment for that, that can cause immunosuppression; right?

"ANSWER: Oh, yeah.

"MS. O'LEARY: Objection. Foundation.

"THE WITNESS: The -- the -- yeah, the chemotherapy suppresses your immune system tremendously."

Was that the basis for your opinion in this case report?

A. Yes. That and the -- what is this called? Exhibit 11, where it states that his secondary also assumed related to Track 1 talks about chronic infections, and pneumonia is an infection.

Q. You agree you did not review the specific causation report --

A. I'm sorry --

Q. -- for Mr. Carter; correct?

A. What was your question again?

Q. You -- you agreed earlier that you did not review specific causation reports in this case?

A. This is true.

Q. In this deposition testimony, you would agree that Dr. Davis generally stated that chronic infections can occur with NHL patients in a treatment, but he didn't specifically state that this occurred with Mr. Carter; isn't that right?

MS. WALLACE: Objection.

THE WITNESS: I -- I -- I'm not going to agree with that. The list that I was provided to also include states that chronic infections for Mr. Carter should

be included.

BY MS. KONSTANTOPOULOS:

Q. And you would agree when we were reviewing Dr. Ji's notes in his report, that his lymphoma was in remission at these disputed visits; correct?

A. I would have to see the medical record.

Q. But you would agree that's what Dr. Ji noted in his report; correct?

A. That's what he states, but I would like to see the medical record. And, again, to reiterate, my -- I was provided by counsel these related Track 1 -- these conditions that are related to Track 1. And the patient had pneumonia and was given, I believe, an antibiotic, azithromycin.

Q. You would agree that in this deposition testimony, pages 123 to 124, this specific dates of service February 4, 2014; December 15, 2015; December 17, 2015; December 25, 2015; and 5/14/2018 are not specifically discussed in the deposition testimony; correct?

MS. WALLACE: Objection.

THE WITNESS: I would have to say that -- who is this doctor? Dr. Davis does not state in his deposition testimony when a patient's immune system would be bounced back and functioning normal in his testimony.

So I would still reiterate that I was provided guidance to follow related symptoms -- related issues for a patient, and one of those related issues was a chronic infection, and clearly he had pneumonia.

BY MS. KONSTANTOPOULOS:

Q. And you didn't speak to doc -- Dr. Davis directly; correct?

A. No, I did not.

Q. You haven't had any other email correspondence with him?

A. No.

Q. So other than reviewing his deposition testimony, you haven't reviewed any other reports that he has made; is that correct?

A. No, I have not.

Q. Okay. Moving back to your expert reports -- rebuttal expert report Exhibit 13,

page 16. For Davis, Cometto, you stated for Cometto Davis, "I quantified $0 in medical billing expenses"; is that correct?

A. That is correct. I was not provided any medical billing or documents to support medical billing.

Q. So you did not review any of his past medical bills or records; correct?

A. They were not --

MS. WALLACE: Objection to form.

THE WITNESS: They were not provided.

BY MS. KONSTANTOPOULOS:

Q. And you note on page 16 that the government claimed VHA offsets; is that correct?

A. Yes.

Q. But you did not independently evaluate the government-alleged VHA offsets; correct?

A. When you're using the term "offsets," these offsets, quite frankly, come directly from Dr. -- your expert Dr. Ji's report, so...

Q. So is it fair to say you didn't review that information --

MS. WALLACE: Objection.

BY MS. KONSTANTOPOULOS:

Q. -- independently?
A. Could you be more specific about what information you're referring to?
Q. Did you evaluate the government's alleged offsets -- VHA offsets?
MS. WALLACE: Objection.
THE WITNESS: Their data? Their data had inconsistencies. And, again, it was reviewed by your expert.
BY MS. KONSTANTOPOULOS:
Q. I'm going to point your attention to your report page 16 in Exhibit 13, second paragraph. You indicate, "Consistent with the framework set forth in Sections 3 and 4 above, I did not independently evaluate the government's alleged VHA offsets of $3,178 or $1,614."
Did I read that correctly?
A. You did read that correctly.
Q. Thank you.
Moving on still on page 16 to Keller, Scott, which is under Number 3 of your report. You indicated for Scott Keller, "I quantified $404,537.96 in medical billing expenses. Of these expenses, $403,404 was confirmed by the defense expert Wang Ji, M.D., leaving a disputed

amount of charges totaling $1,133.96."

Did I state that correctly?

A. Yes, you did.

Q. Moving on to page 17, first paragraph starting with "based upon."

You indicated that "Based upon my review of the amounts disputed by the defense expert, Dr. Wang Ji, I disagree with the disputed medical expenses as detailed below."

Now I would like to turn your attention to Dr. Ji's report again, which is Exhibit 9, page 76.

Page 76 includes an itemized review of claimed medical expenses for Mr. Keller in Dr. Ji's report; correct?

A. Yes.

Q. And in summary under Number 1, it states, "Providence Sacred Heart Medical Center. Dr. Ji indicated the plaintiff claimed $101,303 in billed charges. On office visit 2/21/23 was identified as gastroenterology visit related to duodenal ulcers and was unrelated to the claimed conditions $657,000" -- I mean, excuse me -- "$657." Very different.

Let me start over. I apologize. For

the record.

Under Number 1, Providence Sacred Heart Medical Center, "The plaintiff claimed $101,303 in billed charges. On office visit 2/21/23 was identified as a gastroenterology visit related to duodenal ulcers and was unrelated to the claimed conditions, $657. The remaining $100,646 was found to be related to the claimed condition of CKD. No charges related to the cardiomyopathy or lymphoma were identified."

Did I read that correctly?

A. Yes.

Q. You disputed Dr. Ji's findings related to this visit; is that correct?

A. It was based on the documentation provided.

Q. What do you mean?

A. The patient's medical record.

Q. You disputed Dr. Ji's finding based on your review of the patient's medical records?

A. Correct.

Q. This was not a dispute based -- that was -- strike that.

You did not rely on official -- physician's note or opinion to dispute the

Providence Sacred Heart Medical Center charges; is that correct?

MS. WALLACE: Objection.

THE WITNESS: I referred to the medical record and based it on what was found in the medical record.

BY MS. KONSTANTOPOULOS:

Q. Was that opinion confirmed by any other doctor or clinician regarding Providence Sacred Heart Medical Center?

A. It was confirmed by the medical record that is in the patient's file.

Q. And do you believe that your interpretation of medical records is -- strike that.

Dr. Ji and you both evaluated the Providence Sacred Heart Medical Center record; correct?

A. I'm not privy to what Dr. Ji looked at or didn't look at. I can tell you I reviewed the medical record, and I found that in my opinion -- my expert opinion as a billing coding and documentation expert, evidenced by my education, training, and experience, that it was related to the rest of the bill that was produced

for his visit.

Q. You agree that you made a determination based on your interpretation of these medical records regarding whether cardiomyopathy or lymphoma was related to the claimed conditions in this record; isn't that true?

MS. WALLACE: Objection to form. You can answer.

THE WITNESS: I related based on my education, experience, and training that that 600 and -- $657 charge on January 4, 2023, was part of the entire visit and was related. That was my determination.

BY MS. KONSTANTOPOULOS:

Q. And that, in your opinion, does not involve a medical decision-making; is that correct?

MS. WALLACE: Objection.

THE WITNESS: Dr. Ji should not be making medical decision-making in reviewing a patient's medical record. He is not being objective if he's making that opinion.

BY MS. KONSTANTOPOULOS:

Q. But it's okay for you to be making medical decisions as a nondoctor --

A. I --

MS. WALLACE: Objection.

BY MS. KONSTANTOPOULOS:

Q. -- regarding your review of medical records?

A. I am --

MS. WALLACE: Objection.

BY MS. KONSTANTOPOULOS:

Q. And Dr. Ji, a clinician, is not?

A. I am not a medical person. I am following what another provider has written, and based on what the provider is documenting in the patient record, that's what my opinion is.

Q. So your opinion is based on your interpretation of another doctor's medical notes; is that correct?

MS. WALLACE: Objection.

THE WITNESS: My interpretation is based on the medical record presented.

BY MS. KONSTANTOPOULOS:

Q. Moving on to page 76 of Exhibit 9, Dr. Ji's report, Number 3, Rawling's Lien.

A. Uh-huh.

Q. It indicates here, "The plaintiff claims $62,192 in billed charges. A hospitalization service -- service on 4/30/2017 by internal medicine physician Dr. Feldman was related to an influ -- influenza pneumonia infection and not related to the claimed conditions."

Did I read Dr. Ji's report correctly?

A. Yes, you did.

Q. And going to C, he indicates in his report on that same page 76, "A total of $62,192 were confirmed as total billed charges. Of those, $477 were found to be unrelated to the claimed conditions. The remaining $62,192 were found to be related to the claimed condition of CKD and $36,082 were related to the cardiomyopathy with some charges related to both. No charges were related to lymphoma. A total of 62,192 were related to either cardiomyopathy or CKD. And a total of $477 of charges unrelated to the claimed conditions were identified."

Did I read Dr. Ji's report correctly?

A. Yes, you did.

Q. Going back to your expert report, Exhibit 13, page 17. Under paragraph B, you

indicated that you disagreed with Dr. Ji's assessment; is that correct?

A. That is correct.

Q. And you indicated in B, second sentence, "Although the plaintiff presented to the emergency department with influenza A, the provider noted in the history of present illness that the chemistry panel revealed worsening renal function."

A. Yes.

Q. "The plaintiff's chronic kidney disease was a contributing factor in the provider's medical decision-making process."

Did I read that correctly?

A. Yes.

Q. What do you mean by "contributing factor" here?

A. The patient was very ill with a fever, apparently dehydrating, which was also creating more kidney issues. His assessment and plan specifically referenced acute kidney injury. The treatment plan included instructions to hydrate gently and to monitor strictly his intakes and outputs, which would indicate to me that the kidney function was also impacted by the

influenza A.

Q. And why does it say "a contributing factor" what you just read -- or stated?

A. Because the physician in the ED is stating that it's a contributing factor, that they have to be careful with his kidneys because of this illness.

Q. Moving on to Number 2 on page 17 of your expert report, Exhibit 13, you stated that "Dr. Ji also questioned the relatedness of plaintiff's medical treatment associated with his diabetes diagnosis"; correct?

A. Uh-huh. I was to assume that diabetes and diabetic neuropathy are related conditions for the purpose of my analysis.

Q. And diabetes was a new condition that was added in a subsequent table of conditions; is that correct?

A. Yes.

Q. Okay. And that was the table of conditions --

A. Well, I did --

Q. -- notified -- that we noted as Exhibit 12; is that correct?

A. That is correct.

Q. In the prior table of conditions that was originally provided to you by plaintiffs' counsel, Exhibit 11, diabetes was not listed as one of the conditions for Mr. Keller; correct?

A. Correct.

Q. And you stated that you did not add diabetes in this table; is that correct?

A. That is not my -- yeah, it's not my addition, no.

Q. And that was not your decision; correct?

A. No.

Q. I want to go back to Dr. Ji's report. Exhibit 9, page 18.

A. 18?

Q. No. Excuse me. Page 74 of Dr. Ji's report, Exhibit 74 -- I mean Exhibit 13.

MS. WALLACE: 13?

MS. KONSTANTOPOULOS: Exhibit 13.

THE WITNESS: Page 74.

BY MS. KONSTANTOPOULOS:

Q. Excuse me. Strike that. Exhibit 9, Dr. Ji's report, page 74.

Under the table for Mr. Keller, Dr. Ji writes, "The disability diagnosis to

non-Hodgkin's lymphoma with anemia is clinically related to the claimed diagnosis lymphoma, but the diabetes diagnosis is neither claimed nor related to lymphoma. The patient's NHL was diagnosed and treated in 1997. There was no clinical documentation to suggest the NHL or treatment led to diabetes."

You would agree that according to Dr. Ji's report, he is not questioning whether the diabetes diagnosis is related to his NHL. He is definitive that it is not; correct?

A. Well, that's what he's stating. However, there is expert testimony from Dr. Dean Felsher who I believe states otherwise.

Q. Did you ever review the deposition testimony of Dr. David D'Alessio?

A. No.

MS. WALLACE: Do you want to spell that for the court reporter?

MS. KONSTANTOPOULOS: We'll do that during...

(Exhibit 21 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. I'm showing you what has been marked

as Exhibit 21, the deposition transcript of Dr. Dean W. Felsher.

Is this the deposition transcript that you reviewed that you were mentioning earlier?

A. Yes.

Q. Looking at your rebuttal expert report, you cited to pages 294 and 296 of Dr. Felsher's deposition.

A. Uh-huh.

Q. And that was to support the statement in your report that Dr. Felsher explained that "steroids are known to accelerate and exacerbate diabetic often causing metabolic decompensation. He further testified that in patients such as Mr. Keller, diabetes may be acutely aggravated by these treatments because steroids adversely affect the medical processes -- processes associated with diabetes."

Did I read your report correctly?

A. Yes.

Q. Okay. And you cited to pages 294 to 296 of his deposition, so let's start there.

Can you please identify in those two pages where Dr. Felsher specifically states that

Mr. Keller's diabetes was acutely aggravated by steroid treatments?

MS. WALLACE: Objection.

THE WITNESS: Well, on -- starting on 294, line 20. So I would say, you know, he'll always have more risk getting a worse infection. There would be a multitude of other things, often part of the high-dose chemotherapy and some stem cell -- sorry -- stem cell transplant, he'll go on high-dose steroids.

Steroids accelerate diabetes, heart disease that can cause cataracts and other problems. I didn't see a description of those, but I would tell you although all of those things can be associated with people who have received the high-dose chemotherapy. Very common.

Unfortunately, they'll have -- it may be subclinical now, but he's more likely to have this problem, many, many other problems. It is not something you can casually decide to get somebody just to do it, a stem cell transplant and high-dose chemotherapy.

It goes on.

Not all that I can anticipate. Obviously, he's -- has a higher -- obviously, he has a secondary cancer related to his exposure and treatment, then he'll need specific, given the fact that his kidney disease and cardiomyopathy, he'll need management. He can go into end-stage renal disease, and there's a chance he'll need a nephrologist and dio -- dialysis.

So, I mean, he goes on and he continues.

BY MS. KONSTANTOPOULOS:

Q. And you just only cited, though, to pages 294 and 296 and 301 to 318 in your expert report; correct?

A. Yes.

Q. Okay. And in those two pages, you would agree --

MS. WALLACE: Objection. It's three pages.

MS. KONSTANTOPOULOS: Correct. Thank you.

BY MS. KONSTANTOPOULOS:

Q. You would agree that in 294, 295, and 296, Dr. Felsher didn't say that Mr. Keller's diabetes has been acutely aggregated by these treatments. He's saying that it's possible --

MS. WALLACE: Objection.

BY MS. KONSTANTOPOULOS:

Q. -- correct?

A. I don't agree with that. He's saying that there's a high likelihood of this happening.

And we could go on.

Patients who have diabetes when treated with stem cell high-dose chemotherapy, often their diabetes can be short-term aggravated because often part of their treatment is high-dose steroids that usually causes decompensation of people's diabetes.

So I would -- so I would disagree, but I don't completely disagree. I appreciate the opinion that diabetes is a factor as I clarified for you. I didn't say diabetes is a nonfactor and had no influence.

Q. So based on your interpretation of Dr. Felsher's deposition, it's your position that he has stated that Mr. Keller's diabetes was acutely aggravated by treatments of steroids; is

that correct?

A. I would agree with Dr. Felsher's statement regarding what happens to a patient who's been on stem cell transplant and high-dose chemo and steroids. I would agree with that.

Q. Are you aware that Dr. Felsher wrote a specific causation report regarding Plaintiff Mr. Keller?

A. No.

(Exhibit 22 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. I am showing you what's been marked as Exhibit 22. The specific causation expert report of Dr. Dean W. Felsher, M.D., Ph.D.

Is that what's in front of you?

A. Yes.

Q. Okay. I want you to go to page 29 of this report, which is Dr. Felsher's conclusion.

MS. WALLACE: I just want to object to the extent that the witness has testified she has not seen this document, and it is --

THE WITNESS: Extensive.

MS. WALLACE: -- voluminous in

length. It's almost 70 pages. She hasn't had sufficient time to review the document prior to being asked questions about its contents.

MS. KONSTANTOPOULOS: Understood.

BY MS. KONSTANTOPOULOS:

Q. So if you can please go to page 29 under "Conclusion."

A. Uh-huh.

Q. It's about half a page and then a quarter of a page onto page 30.

Can you please read that to yourself, and let me know when you're done.

A. I am done.

Q. Okay. In Dr. Felsher's conclusion on pages 29 to 30, you would agree that he does not state that the Camp Lejeune water caused his diabetes; correct?

MS. WALLACE: Object to form and foundation for these questions.

You may answer if you can.

THE WITNESS: Well, I would not agree with that because he's not opining on the treatment that Mr. Keller received for his cancer. In his deposition, he is talking

about the treatment of his cancer having stem cell transplant, high-dose chemotherapy, and repeated steroid use as what was affecting his possible getting diabetes. To me, you're comparing apples to oranges.

BY MS. KONSTANTOPOULOS:

Q. You would agree that the word "diabetes" isn't even mentioned in his conclusion?

A. What is --

MS. WALLACE: Objection to form and foundation.

THE WITNESS: I'm sorry.

MS. WALLACE: No problem.

THE WITNESS: What is not mentioned in his conclusion has nothing -- it has no statement whatsoever about the treatment, which is what he opined on in his deposition. It's comparing apples to oranges.

BY MS. KONSTANTOPOULOS:

Q. I'm going to point your attention to the same report, page 27, the very top of the page of Dr. Felsher's report.

In his report, he states at the very top, "Mr. Keller was diagnosed with diabetes after his diagnosis of NHL. Diabetes can be associated with an increased risk of cancer. However, the timing suggests that it is unlikely to be a contributing cause."

Did I read that correctly?

A. Yes, you did read that correctly. But, again, it doesn't talk about the treatment that Mr. Keller received. In his deposition, Dr. Felsher speaks directly to what can happen with a patient on high-dose chemotherapy, on stem cell transplant, and repeated steroid use. I think you're comparing apples and oranges.

Q. And that's based on your interpretation of Dr. Felsher's deposition; correct?

MS. WALLACE: Objection. Form and foundation.

You may answer.

THE WITNESS: I believe these two reports are looking at things through two different lenses. One report is looking at the contaminated water case. The other one, his deposition, is looking at the

treatment that the patient received.

Now, this deposition was taken in 2025 and this report was generated in February of '24. So my question would be: Did Dr. Felsher have the information related to his treatment at that time and did he provide an opinion on the finding.

This is, what, a 70-page report? I think you're comparing two very different things. In his deposition, he's clearly stating that he's talking about what can happen with treatment.

BY MS. KONSTANTOPOULOS:

Q. Do you know when he was diagnosed, Mr. Keller, with Type 2 diabetes?

A. No.

Q. Did you review the report of the United States's -- United States's expert endocrinologist for Mr. Keller?

A. No, I did not.

Q. So you're basing your opinion after reviewing a deposition transcript -- one deposition transcript; correct?

A. This is what you have presented to me to provide you clarity on why I wrote what I

wrote. I -- I'm telling you that based on what Dr. Felsher wrote, what he deposed his statement as, he identified as a clinician that there were concerns with the treatment creating diabetes.

Q. To be clear, when you say that I presented you with this documentation, you're saying that I showed this documentation to you at today's deposition; correct?

A. Yes.

Q. But I did not represent this deposition to you before this deposition; correct?

A. Correct.

Q. And you were not presented with any other documentation other than the medical records that you reviewed in this deposition transcript; is that correct?

MS. WALLACE: Objection.

THE WITNESS: Yes.

BY MS. KONSTANTOPOULOS:

Q. Are you familiar with the court's -- court management order, Number 12?

A. I have no idea what you're referring to.

Q. Are you aware that the court issues

various orders in the Camp Lejeune litigation?

MS. WALLACE: Object to foundation.

(Exhibit 23 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. In front of you is an order at the top right regarding Track 1 trial plaintiff selection protocol case management order Number 12.

I'm going to point your attention to the second paragraph, and it is the third sentence. And it states, "The Track 1 plaintiffs will be waiving their rights to allege that any other illnesses or injuries besides Track 1 illnesses and those injuries or conditions stemming from Track 1 illnesses or its treatment were caused by the water at Camp Lejeune."

MS. WALLACE: Objection.

BY MS. KONSTANTOPOULOS:

Q. Did I read that correctly?

MS. WALLACE: Object to this line of questioning of this witness. Object to form and foundation.

BY MS. KONSTANTOPOULOS:

Q. Did I read that correctly? I'm

sorry. I --

A. Yes, you read that correctly.

Q. Okay. Do you understand what stemming from a Track 1 illness means in this order?

A. Yes.

MS. WALLACE: Object to form and foundation.

THE WITNESS: I -- I understand what it means, yes.

BY MS. KONSTANTOPOULOS:

Q. And you are not aware of any doctors stating that Mr. Keller's diabetes stems from his NHL; correct?

A. It stems from the treatment of his NHL.

Q. And that's -- that opinion is not based on your own medical opinion; correct?

A. I have no medical opinion.

Q. Moving on to Robert Kidd, looking at Exhibit 13 of your rebuttal report. For Robert Kidd, you indicated, "I quantified $0 in medical billing expenses. Despite no past medical -- despite no past medical damages being claimed for the plaintiff, the government claimed the

following offset damages."

So far did I read that correctly?

A. Yes.

Q. And the government claimed VHA offset damages, TriWest, CCN -- and CCN damages; is that correct?

A. Yes, that's what it states.

Q. And you indicated, "Consistent with the framework set forth in Section 3 and 4 above, I did not independently evaluate the government's alleged VHA and TriWest offsets"; is that correct?

A. That is correct.

Q. And you have not reviewed any of Mr. Kidd's medical billing expenses in this case; is that correct?

MS. WALLACE: Object to form and foundation.

THE WITNESS: None have been provided.

BY MS. KONSTANTOPOULOS:

Q. Moving on to Gary McIlheny, looking again at your report, Exhibit 13, page 18. You indicated that "For Gary McIlheny -- McIlheny, I quantified -- quantified $0 in medical billing

expenses"; correct?

A. Yes.

Q. You noted that the government claimed VHA and TriWest, CCN, Medicare, and TriCare offsets; is that correct?

A. Yes.

Q. And you did not independently evaluate the government's alleged offsets; is that correct?

MS. WALLACE: Object to --

THE WITNESS: That is --

MS. WALLACE: -- form and foundation.

THE WITNESS: That is correct.

BY MS. KONSTANTOPOULOS:

Q. Moving on to Edgar Peterson in your report, Exhibit 13, page 19. You indicated under the heading Peterson, Edgar, "For Edgar Peterson, I quantified $616,336.09 in medical billing expenses. Of these expenses, $611,735.93 was confirmed by the defense expert Dr. Syed A. Hasan, leaving a disputed amount of charges totaling $3,127.61. I quantified $181,586.98 in past medical and $10,201.11 in patient payments, totaling $191,788.01."

Did I read that correctly?

A. Yes.
Q. And you indicated in the next paragraph, "Based upon my review of the amounts disputed by defense expert Dr. Hasan, I agree to reduce the plaintiff's medical billing expenses from $616 and -- $616,000 -- 616 --
A. -- thousand and 336 dollars and 90 cents.
Q. Thank you.
-- "to $614,000" -- 614 dollar -- excuse me.
A. $614,836.90.
Q. Correct.
-- "due to an inadvertently included 1,500 duplicate charge"; is that correct?
A. Yes.
Q. So you would agree that Dr. Hasan discovered a duplicative charge in your billing of $1,500; is that correct?
A. Yes.
Q. And you adjusted that payment in your records?
A. Correct.
Q. However, for the date of service for 9/12/2017 -- September 12, 2017, you disagreed

with his opinion; is that correct?

A. That is correct.

Q. Okay. And you indicated under Number 1 for page 19, "For date of service 9/12/2017, a review of the plaintiff's medical documentation for September 12, 2017, emergency visit at Methodist University Hospital does not support the conclusion that it was unrelated to the plaintiff's Track 1 disease.

"In the history of present illness, the provider described the cord of the plaintiff's deep brain stimulator as notable for palpable cord centrally -- centrally to erythema from medial calf to thigh, which corresponds to the documented location of the plaintiff's superficial thrombophlebitis.

"During this encounter, the plaintiff was educated on the proper technique and timing of Lovenox injections. The plaintiff was also provided guidance on taking Parkinson's medication to reduce tremors prior to administering Lovenox for treatment of thrombophlebitis. These instructions demonstrate that management of plaintiff's Track 1 disease was directly relevant to and addressed during the

emergency department visit."

Did I read that correctly?

A. Yes.

Q. You would agree that you reviewed the medical bills and then summarized them here in your report; is that correct?

A. I reviewed the medical record and summarized it in my report.

Q. Are you aware that there is no cord that is part of a deep brain stimulator?

A. Correct. But the provider had to educate the patient on how to take his medication so that he could inject himself with his Lovenox. It's related. And there is an expert witness -- or I should say a physician's note from Dr. Barbano that formulates an opinion that supports.

Q. So is it your opinion that there is a cord that is part of a deep brain stimulator?

A. It is my opinion that the plaintiff's tremors created a problem for him to inject himself with his Lovenox, and Dr. Barbano supports that for all -- I believe it's all of these dates of service.

Q. Is it fair to say you don't know

whether there is a cord that is a part of a deep brain stimulator?

A. What the -- what the provider is talking about is a feeling in the patient's leg that felt like a cord. Could be a muscle, could be a vein, could be a tendon, the ligament. What he felt, he corresponds to his thrombophlebitis.

Q. The cord didn't have anything to do with the deep brain stimulator; is that correct?

A. That is correct.

Q. And you're aware that a deep brain stimulator is not located in the upper thigh?

A. Correct.

Q. But that is not what you stated in your report; correct?

A. Yes. That's an error.

Q. And are you aware that Dr. Hasan was deposed in this case?

A. I'm not aware, no.

Q. Okay. I'll mark Dr. Hasan's deposition exhibit as Exhibit 24.

(Exhibit 24 marked for identification.)

THE WITNESS: Oh, I'm sorry. I have him confused with Dr. Barbano. Yes, I am

aware. Yes. And he states in here that he feels I was confused, and I probably was. But my findings are backed up by Dr. Barbano.

BY MS. KONSTANTOPOULOS:

Q. On page 84, line 6, of Dr. Hasan's deposition, he was asked if he agrees with your assessment. On line 6, he says: Answer -- I'm sorry. Let's start at page 83, line 25.

"So having reviewed Ms. Hackett-Wallace's opinion here, do you agree with her assessment?

"ANSWER: Actually, I do not agree with her assessment.

"QUESTION: Okay. Why not?

"ANSWER: Well, for a few reasons. One, she writes in her report that -- let me find the right paragraph. The provider described the cord of the plaintiff's deep brain stimulator as notable for a palpable cord simply to be erythema from medial calf to thigh. I don't believe Marjorie Hackett-Wallace is a medical -- has formal medical training. But irrespective of that, she's -- she's I think confused by the word 'cord'. Her example, a deep brain stimulator has

a pulse generator that's usually in the chest or abdomen. And then she's referring to the cord -- a palpable cord centrally" --

A. Erythema.

Q. -- "erythema for medial calf to thigh. Cord in the latter part is described in a physical exam finding where when you palpate the thigh, you feel like a rope-like structure or like a hard vein or a hard vessel.

"So I think she's getting mixed up between the cord in the medial calf and thigh with the deep -- where she's writing the cord on the patient's -- the patient's deep brain stimulator. There's -- there's no cord that's part of a deep brain stimulator, and that's nowhere in the position of the upper thigh, so I don't -- I'm not sure if she -- yeah, I don't agree with it."

Did I read that correctly?

A. Yes, you did.

Q. Okay. And he disagrees with the description that you provided in your report; correct?

A. Correct.

Q. And you admit that you were confused

when you wrote this report?

A. I admit that I was incorrect.

Q. Okay.

A. However, it was -- the thrombophlebitis was backed up by Dr. Barbano.

Q. And by backed up by Dr. Barbano, are you referring to a letter that Dr. Barbano wrote dated January 12th of 2026?

A. Yes.

(Exhibit 25 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. I'm going to mark that same letter from Dr. Barbano dated January 12, 2026, as Exhibit 25.

Is this a copy of the letter that you're referring to?

A. Yes.

Q. You have not spoken directly to Dr. Barbano; correct?

A. Correct.

Q. You have not exchanged correspondence with Dr. Barbano; correct?

A. Correct.

Q. And other than this letter, you have

not reviewed any additional information from Dr. Barbano; correct?

A. Correct.

Q. In this letter, Dr. Barbano has not identified the documents he has reviewed by providing Bates numbers; is that correct?

A. Correct.

Q. Do you have any reason to dispute that Dr. Hasan has reviewed all medical records and bills available to him?

MS. WALLACE: Object to form and foundation.

THE WITNESS: I have no opinion on that.

BY MS. KONSTANTOPOULOS:

Q. You would agree that you can't say from looking at this January 12, 2026, letter that Dr. Barbano reviewed all of the medical record reports and corresponding bills --

MS. WALLACE: Objection.

BY MS. KONSTANTOPOULOS:

Q. -- is that correct?

A. I would dispute that. Dr. Barbano reviewed the medical records for 8/31/17, 9/15/17, and 9/12/17, and he related the

treatment to superficial venous thrombophlebitis. Immobile -- he states "immobility is a significant risk factor for development of this condition."

Q. So my question specifically was that you can't say from looking at this letter that Dr. Barbano has reviewed all of Mr. Peterson's medical bills and records; correct?

MS. WALLACE: Object to form and foundation.

THE WITNESS: I would not agree with that. He reviewed the three records that he identified in this letter.

BY MS. KONSTANTOPOULOS:

Q. You would agree that Mr. Peterson has more than these three visits; correct?

A. I would agree to that, yes.

Q. So --

A. Dr. Barbano is opining on the three visits that I'm disputing.

Q. Correct. And my question was more broad than that. You would agree that you can't tell from this letter by itself that he's reviewed all of Mr. Peterson's records; correct?

MS. WALLACE: Objection to form and

foundation.

THE WITNESS: I don't know what Dr. Barbano has reviewed beyond these three records.

BY MS. KONSTANTOPOULOS:

Q. Okay. Moving on to Diane Rothchild. I'm going to turn your attention back to your report, Exhibit 13, starting at page 21 at the top. You indicated, "For Diane Rothchild, I quantified $43,401.44 in medical billing expenses. Of these expenses, $38,594.44 was confirmed by the defense expert Dr. Syed A. Hasan, leaving a disputed amount of charges totaling $4,807."

Did I read that correctly?

A. Yes.

Q. You go on to state, "Based on my review of the amounts disputed by the defense expert Dr. Hasan, I agree with the disputed medical expenses. Please see amended appendices and materials considered."

A. Correct.

Q. You agreed with Dr. Hasan's determination for Ms. Rothchild's past medical billing expenses and changed your findings; is

that correct?

A. Yes.

Q. Now moving on to Robert Welch, still on Exhibit 13, page 21. You indicated, "For Robert Welch, I quantified $5,155.92 in medical billing expenses. These were confirmed by the defense expert Dr. Hasan, leaving a disputed amount of $0"; is that correct?

A. That is correct.

Q. And according to your report, the government claimed no additional offset damages; is that correct?

A. That is correct.

Q. And you did not review any medical bills or records for Mr. Welch; is that correct?

A. That is correct.

Q. Now, moving on to Mr. Sparks. I am in Exhibit 13, your rebuttal report, and page 21. You indicated, "For Richard Sparks, I quantified $36,602.89 in medical billing expenses. Of these expenses, $33,084.46 was confirmed by the defense expert Dr. Syed A. Hasan, leaving a disputed amount of charges totaling $3,418.43."

Did I read that correctly?

A. Yes.

Q. And then you stated that -- in the next paragraph, "Based upon my review of the amounts disputed by the defense expert Dr. Hasan," you disputed or disagreed with -- excuse me -- "I disagree with the disputed medical bills"; is that correct?

A. Yes.

Q. And specifically you disagreed with -- starting with Number 1, you indicated, "For date of service 4/6/2018," and you included Bates Number 00682_Sparks_000006849, "a review of the medical documentation for services performed on April 6, 2018, indicates that the plaintiff underwent a brain MRI without contrast and then -- and the stated indication for this radiologic study was the plaintiff's diagnosis of Parkinson's disease."

Did I read that correctly?

A. Yes.

Q. I'm going to point your attention to Dr. Hasan's report on page 22, which is Exhibit 10.

A. Am I looking at the right...

Q. On the top of the page, Dr. Hasan indicates that "The treatment that Mr. Sparks

receives -- received that were clinically unrelated to his Parkinson's disease include medical care at University of Colorado Hospital around April 6, 2018, involved Mr. Sparks undergoing cardiac stress test for evaluation of dyspnea or exertion and chest pain for patient with significant smoking history as well as oxygen monitoring during stress test."

Did I read that correctly?

A. Yes.

Q. Do you agree that Dr. Hasan did not state in his report that the MRI was unrelated?

MS. WALLACE: Object to form.

THE WITNESS: I -- I agree, I guess.

BY MS. KONSTANTOPOULOS:

Q. Okay. I'm going to point your attention back to Dr. Hasan's deposition, which was Exhibit 24. I'm going to ask you to go to page 106 of his deposition. I'm going to direct your attention to line 7.

"So a portion of the charges from this visit are related and a portion are not; is that correct?

"ANSWER: Yeah, I just -- I just want to make sure I explain my answer. So it looks

like on the same date of service, there's multiple testing, different testing modalities were done. So, yes, the MRI of the brain is related. The other testing based on the cardiac stress test, which was also done on the same day, was unrelated."

Did I read that correctly?

A. Yes, you did.

Q. But you would agree that Dr. Hasan does not take the position that the MRI is unrelated?

A. Correct.

Q. Okay. You indicated back in your report that "Because of the dispute with respect to these charges raised by Dr. Hasan, I further sought input from a physician to confirm relatedness as assessed"; is that correct?

A. Yes.

Q. And you were provided with a letter from Dr. Heidi Schwarz?

A. Correct.

Q. I'm going to show you what will be marked as Exhibit 26.

(Exhibit 26 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. You've based your opinion for Mr. Sparks on Dr. Schwarz's letter; is that correct?

A. Yes. In the documentation, it states it's a brain MRI.

Q. And you never spoke to Dr. Schwarz directly; isn't that correct?

A. That is correct.

Q. You haven't had any correspondent with -- correspondence with her directly?

A. No, I have not.

Q. And you were not provided with a copy of the documents that she reviewed in response to this letter; is that correct?

A. That is correct.

Q. Are you aware that Dr. Schwarz was deposed in this matter?

A. No, I was not.

Q. Okay. I'm going to show you what will be marked as Defendant's Exhibit 27. This is a copy of the deposition transcript of Dr. Heidi Schwarz.

(Exhibit 27 marked for identification.)

BY MS. KONSTANTOPOULOS:

Q. I would like to point your attention to page 31, line 18.

On line 18, the question posed to Dr. Schwarz is, "Without discussing any specific details of your conversation, have you spoken with any other experts in the damages and offsets phases of this litigation?

"ANSWER: I have not.

"QUESTION: What about Marjorie Hackett-Wallace?

"ANSWER: I do not know who that is."

Did I read that correctly?

MS. WALLACE: Objection.

THE WITNESS: Yes.

MS. WALLACE: For the record, the witness has testified that she's not seen or had sufficient time to review the deposition transcript that was taken on February 25, 2026. I'd ask for the witness to be given sufficient time to review the deposition transcript before being asked questions about the content.

MS. KONSTANTOPOULOS: Well, I'm just showing her specific portions.

MS. WALLACE: I'd like to note my objection for the record to design a question based on deposition transcript she's not had the opportunity to fully review.

BY MS. KONSTANTOPOULOS:

Q. I'm going to point your attention to page 51, line 18 of Dr. Schwarz's deposition, Exhibit 27.

Excuse me. I'm going to point your attention to page 51, line 7.

"QUESTION: Okay. But your overall position is that a stress test is typically not related to Parkinson's disease?

"ANSWER: Correct."

You'd agree here that Dr. Schwarz indicated that a stress test is not typically related to Parkinson's disease; is that correct?

A. Yes.

MS. WALLACE: Object to form and foundation.

BY MS. KONSTANTOPOULOS:

Q. So you wouldn't disagree with the position that Dr. Hasan took that the stress test was unrelated to Parkinson's but the MRI was

related to Parkinson's?

A. Correct.

MS. WALLACE: Objection. And I just -- this is all related to the date of service for 6/20/18?

MS. KONSTANTOPOULOS: This is for April 6, 2018.

MS. WALLACE: Objection to this line of questioning based upon the lack of the witness's ability to review the full content and context of the deposition testimony.

MS. KONSTANTOPOULOS: I stated for the record, we are indicating to keep the deposition open in light of the supplemental materials considered list provided yesterday evening and the corrected reports provided this morning, which are Exhibits 5 and 6 that were entered into evidence.

BY MS. KONSTANTOPOULOS:

Q. Are there any answers you have given to my questions that you wish to change before we end this deposition?

A. No.

Q. Is there any information I asked about that you didn't recall at the time but now remember?

A. No.

Q. Were there any questions I asked that you did not understand?

A. I think we addressed those.

MS. WALLACE: I -- I'd like to make for the record my objection to keeping the deposition open on the basis of what you just stated.

MS. KONSTANTOPOULOS: Noted.

BY MS. KONSTANTOPOULOS:

Q. Do you have any other opinions that you have not testified to today?

A. No.

Q. Once it is ready, you will be provided with the transcript of this deposition. We ask that you read it carefully, correct, and sign the deposition transcript as applicable. Do you understand?

A. Yes.

MS. KONSTANTOPOUS: Thank you for your patience and answering my many questions today. I will now pass the

witness, and, of course, if you'd take like to take a break.

MS. WALLACE: Yes. I would like to take 5- to 10-minute break prior to any redirect.

THE VIDEOGRAPHER: Going off the record. Time is 3:34 p.m.

(Recess taken from 3:34 p.m. until 4:20 p.m.)

THE VIDEOGRAPHER: Going back on the record. The time is 4:20 p.m.

EXAMINATION

BY MS. WALLACE:

Q. Ms. Hackett-Wallace, I have just a couple questions for you in follow-up to the questions you've been asked today.

I wanted to start with some of the questions that you were asked about the Plaintiff Sparks. Do you recall those?

A. Yes.

Q. You were asked about a date of service 4/6/2018 for Plaintiff Sparks. Do you recall that based upon the information that you reviewed, he received an MRI on that date of service that you, Dr. Schwarz, and Dr. Hasan have all opined was related to his Parkinson's

disease?

A. Yes.

MS. KONSTANTOPOULOS: Objection to form. Foundation.

BY MS. WALLACE:

Q. Is that the reason that MRI you included that date of service and medical visit in your report?

A. Yes.

MS. KONSTANTOPOULOS: Object to form. Foundation.

BY MS. WALLACE:

Q. Regarding Plaintiff Peterson, your report attributed the dates of service that you deemed to be related to the thrombophlebitis that he suffers from --

A. Yes.

Q. -- is that correct?

A. Yes, that is correct.

Q. And based upon the assumptions that you were asked to make -- make by counsel, which are Exhibits 11 and 12, if you recall, was leg pains and difficulty walking two of the assumptions that you were asked to make regarding the Plaintiff Peterson?

MS. KONSTANTOPOULOS: Objection. Form. Foundation.

THE WITNESS: Yes.

BY MS. WALLACE:

Q. And is it correct based on the materials that you've reviewed, that both you and Dr. Barbano attributed the dates of service that are related to the thrombophlebitis?

MS. KONSTANTOPOULOS: Objection. Form. Foundation.

THE WITNESS: Yes.

BY MS. WALLACE:

Q. And so the error that you testified to earlier had to do primarily with the language regarding the deep cord stimulator; is that right?

MS. KONSTANTOPOULOS: Objection. Form. Foundation.

THE WITNESS: That is correct.

BY MS. WALLACE:

Q. But your relatedness opinion as well as Dr. Barbano's has to do with the thrombophlebitis that was being treated on those dates of service?

A. That is correct.

MS. KONSTANTOPOULOS: Objection. Form. Foundation.

BY MS. WALLACE:

Q. You were asked questions earlier today regarding confirmation of patient payments. Do you recall that testimony?

A. Yes, I do.

Q. You testified earlier that you did not independently review bank statements or credit card records to confirm that the patients had actually paid the patient payments. Do you recall that testimony?

A. Yes, that's correct.

Q. Did you, however, review billing records and data extractions from the defendants that indicated that patient payments had been made?

A. Yes, I did.

MS. KONSTANTOPOULOS: Objection. Form.

BY MS. WALLACE:

Q. And was that the reliance material that permitted you to make the past medical expense determinations regarding patient payments?

MS. KONSTANTOPOULOS: Objection. Form. Foundation.

THE WITNESS: Yes.

BY MS. WALLACE:

Q. You were asked as a part of your expert reports to correlate the TriCare data extractions that you reviewed and received from government and their experts to the medical records corresponding to those data extractions for relatedness to the T1 conditions in your first report; is that correct?

MS. KONSTANTOPOULOS: Objection. Form.

THE WITNESS: Yes.

BY MS. WALLACE:

Q. And you identified medical expenses related to TriCare based upon that methodology and process; correct?

MS. KONSTANTOPOULOS: Objection. Form. Foundation.

THE WITNESS: Yes, that is correct.

BY MS. WALLACE:

Q. The notations that you had included on your reports that we made copies of and are included as exhibits in this deposition under

Exhibits 5 and 6, I wanted to ask you, did you add any additional source material on those notes or were those sources already identified in your report?

MS. KONSTANTOPOULOS: Objection. Form.

THE WITNESS: Those sources were already identified in the deposition, and I did not add any additional source material.

BY MS. WALLACE:

Q. Your notes, as you testified earlier, just added context and additional page cites to the statements that you made?

MS. KONSTANTOPOULOS: Objection. Form.

THE WITNESS: This is correct.

BY MS. WALLACE:

Q. You testified earlier today that you did not review actual billing records related to CMS, Medicare, VHA, or Community Care Network; correct?

MS. KONSTANTOPOULOS: Objection. Form.

THE WITNESS: This is correct, yes.

BY MS. WALLACE:
Q. But in your first report, you indicate throughout that you did review the datasets, the financial and billing datasets, provided by those agencies for the plaintiff; correct?
MS. KONSTANTOPOULOS: Objection. Form. Foundation.
THE WITNESS: Yes.
BY MS. WALLACE:
Q. And you identified in your first report the reliability issues that you identified within those datasets?
A. Yes.
MS. KONSTANTOPOULOS: Objection. Form. Foundation.
THE WITNESS: That is correct.
BY MS. WALLACE:
Q. And so when you testified regarding certain of the plaintiffs that you did not have billing records for, were you referring to actual physical billing records such as those that you reviewed for private payers in this litigation?
MS. KONSTANTOPOULOS: Objection. Form. Foundation.

THE WITNESS: That is correct.
BY MS. WALLACE:
Q. You were asked questions regarding the -- the findings in your report related to Drs. Hasan and Ji regarding their -- their verbiage of offsets. Do you recall that testimony?
A. Yes, I do.
Q. And is your testimony that if the court accepts the data in the data extractions as reliable and related to healthcare expenses related to the plaintiffs T1's conditions, then you have adopted those expenses into your rebuttal report as evidence of past medical expenses?
MS. KONSTANTOPOULOS: Objection. Form. Foundation.
THE WITNESS: Yes, that is correct.
BY MS. WALLACE:
Q. Okay. I don't have any further questions for you. Thank you.
A. You're welcome.
MS. KONSTANTOPOULOS: Thank you. Could we possibly order a rough? Is it possible to get it tonight?

THE COURT REPORTER: Yes.

THE VIDEOGRAPHER: Going off the record. That ends the deposition. The time is 4:27 p.m.

* * *

(Deposition concluded at 4:27 p.m.)

* * *

(Signature reserved.)

* * *

DEPOSITION ERRATA SHEET

Our Assignment No: 7903876

Case Caption: In Re: Camp Lejeune Water Litigation

DECLARATION UNDER PENALTY OF PERJURY

I declare under penalty of perjury that I have read the entire transcript of my deposition taken in the captioned matter or the same has been read to me, and the same is true and accurate, save and except for changes and/or corrections, if any, as indicated by me on the DEPOSITION ERRATA SHEET hereof, with the understanding that I offer these changes as if still under oath.

Sign on the _____ day of _____, 20 __.

_____

MARJORIE HACKETT-WALLACE

DEPOSITION ERRATA SHEET

Page No. _____ Line No. _____ Change to: _____

_____

Reason for Change: _____

Page No. _____ Line No. _____ Change to: _____

_____

Reason for Change: _____

Page No. _____ Line No. _____ Change to: _____

_____

Reason for Change: _____

Page No. _____ Line No. _____ Change to: _____

_____

Reason for Change: _____

Page No. _____ Line No. _____ Change to: _____

_____

Reason for Change: _____

Page No. _____ Line No. _____ Change to: _____

_____

Reason for Change: _____

SIGNATURE: _____ DATE:_____

MARJORIE HACKETT-WALLACE

CERTIFICATE OF REPORTER

I, Christine A. Taylor, Registered Professional Reporter and Notary Public for the State of North Carolina at Large, do hereby certify:

That the foregoing deposition was taken before me on the date and at the time and location stated in this transcript; that the deponent was duly sworn to testify to the truth, the whole truth and nothing but the truth; that the testimony of the deponent and all objections made at the time of the examination were recorded stenographically by me and were thereafter transcribed; that the foregoing deposition as typed is a true, accurate and complete record of the testimony of the deponent and of all objections made at the time of the examination to the best of my ability.

I further certify that I am neither related to nor counsel for any party to the cause pending or interested in the events thereof.

Witness my hand, this 18th of March, 2026.

_____

Christine A. Taylor,
Registered Professional Reporter
Notary Public 19960530077
State of North Carolina

&

& 2:6 3:4 8:15

0

0 150:11,16 151:16 154:11 155:4 163:5 172:2 195:22 196:25 208:8
00000000015 5:14
00000000100 5:17
00000000119 4:15
00000000121 4:18
0000000061 6:14
000000061-84 143:2
0000000957 153:22
0000002061 6:12 144:18
0000002061-... 141:19
0000002067 144:21
0000002653 144:3
000000390 52:9
000002074 145:7
000003905 52:6
000006849 209:11
000357 141:19
00357 6:12,14 143:1,2 144:3 144:18,21 145:7
00490 153:22
00682 209:11
00897 1:4
01576 52:6,9
06052 9:10

1

1 4:11 6:21 14:8 14:9 22:24 52:5 54:24,25 55:14 56:12,21,24 57:2,12,17,23 58:9 64:24 65:1 65:18,21 67:10 68:10 90:4 91:1 91:5,6 97:7,25 118:7,16 119:1 122:5 133:18 137:19 138:3 145:18 169:3 170:14,15 174:17 175:2 194:7,12,14,16 195:4 199:4,9 199:24 209:9
1,097.99 138:16
1,121 165:7
1,133.96. 174:1
1,500 198:15,19
1,614 173:16
1,671 139:8
1,787 145:13
1/12/2026 7:1
1/14/2026 6:9
1/20/2026 4:22
1/20/26 5:18
1/9/2025 7:3
10 5:11 29:17 42:17 44:6,6 55:4,6,18 79:4 79:23 80:1,3 81:16,19 96:22 115:22 133:18 148:24 154:6 154:23 158:11 209:22 217:4
10,201.11 197:23
10/29/2025 4:19 4:20
100 92:2
100,646 175:8
101,303 174:19 175:4
103 5:17 9:9
106 210:19
10:07 46:16,18
10:35 62:11,12
10:39 62:12,14
11 5:12 47:9,15 47:20 55:18,20 66:1,5,17 134:10 145:24 155:7 156:10 156:25 169:2 182:3 218:22
1100 3:20
11:31 101:14,15
11:47 101:15,17
12 5:15 6:23 58:18,19 66:24 135:22 181:24 193:22 194:9 198:25 199:6 204:14 205:17 218:22
12/15/2015 166:7
12/17/2015 166:8
12/2/2017 161:12
12/21/2015 166:8
120 4:15 50:9 50:12,18,22
121 50:9,12,18 50:23
121,300 133:11 135:7
122 4:18
123 167:25 168:12,13

170:19
124 167:25 168:12 170:19
127 3:10
12:23 131:4
12:24 131:6,7
12th 204:8
13 5:18 31:1 47:9 59:15,17 117:9 135:1 137:8,8 139:16 150:8 151:15 154:5,24 156:10,25,25 160:13,13 163:4 167:9,15 171:25 173:12 179:25 181:9 182:17,18,19 195:21 196:23 197:16 207:8 208:4,18
131 136:23 137:22
14 4:11 5:20 59:25 60:2,4,15 103:11 106:24 106:24 139:21 140:12,17 141:11 162:8 163:4 166:19
140 6:9
141 49:7,7,11
142 6:11,13
148,972 133:9
15 5:25 48:2 60:18,21 116:16,23 170:21
15,692.90. 160:21
152 50:1
153 50:1
16 6:2 62:16,25 63:9 105:11 112:8 167:11 167:15 172:1 172:13 173:12 173:20
168 6:15
16th 157:24
17 6:9 50:6 51:1 112:7,17 140:18,20 170:21 174:4 179:25 181:8
18 5:14 6:11 34:24 141:22 142:1 168:13 182:14,15 196:23 213:3,4 214:8
18,381.31. 138:6
181,586.98 197:22
183 6:17
184 153:23
187 153:5
188 6:19 49:15
18th 228:13
19 6:13 51:7,15 89:17 142:21 142:22 143:11 148:5 197:16 199:4
191,788.01. 197:24
194 6:21
19960530077 228:19
1997 183:5
1:08 131:7,9

2

2 4:13 20:18,19 90:20 94:1,2 134:12 139:14 140:2 143:1,5 143:11 153:13 162:8 181:8 192:15
2/2/2024 134:12
2/21/23 174:20 175:5
2/25/2026 7:5
2/4/2014 165:22
2/4/2026 6:24
20 4:13 5:21 6:4 6:15 37:17 44:5 44:6 60:1,9 62:22 100:16 136:12 168:7,8 185:5 226:18
200 21:11 136:1
20005 3:21
2007 29:6
2009 133:23
201 6:24
2010 157:24
2013 138:2
2014 140:2 141:16,25 142:6,11,17 143:1,5,12 149:24 170:20
2015 44:18 140:2 170:21 170:21,22
2017 198:25 199:6
2018 25:12 26:2 26:3 166:19 209:13 210:4 215:7
202,674 136:1
202.598.9555 3:21
2020 26:9
2021 29:7 36:17 138:15
2022 139:6
2023 177:13
2024 134:12

2025 4:25 5:5 6:4 13:12 21:23 22:16,21 36:17 41:9 46:2,23 50:16 52:18 53:2,9,14,19 54:6,20 55:24 62:21 64:12 66:13 81:9 89:19 103:10 115:17 123:22 138:23 192:3
2026 1:14 2:1 4:23 5:21 6:1,5 6:8 8:3 59:16 59:22 60:1,9,20 61:2,20,25 62:22 63:5 64:2 117:13 125:7 139:21 140:12 140:17 141:11 204:8,14 205:17 213:20 228:13
204 7:1
2067 144:18
2069 144:21
2073 6:12
2075 145:7
20th 59:16,22 117:13 125:7
21 4:16 6:17 52:4 183:22 184:1 207:8 208:4,18
210 136:22 137:22
211 7:3
212 7:5
21572 228:17
217 4:4
219 3:14
22 4:19 6:19 88:4 91:3 140:2 188:10,14 209:21
23 6:21 194:3
23,763 134:21
23,979 137:1
24 6:24 21:23 144:1,2 192:4 201:21,22 210:18
25 7:1 170:22 202:9 204:10 204:15 213:20
256,224 137:3
26 7:3 211:23 211:24
27 4:23 6:1 7:5 60:20 61:2 64:2 141:16,25 142:6,11,16 149:24 158:18 159:12 190:24 212:21,24 214:9
27,672 133:9
275 21:12
279,994 136:19
27th 41:20
28144 3:6
282,204 136:24
28403 3:10
29 4:25 5:5 6:3 22:21 46:2,23 50:16 53:2,14 53:19 54:20 55:24 62:21 64:12 66:13 81:9 103:10 123:22 138:23 188:18 189:7 189:16
294 184:8,22 185:5 186:16 187:1
29440 3:15
295 187:1
296 184:8,23 186:16 187:2
29th 22:16 45:5 45:17 54:6 89:19 115:17
2:02 164:2,3
2:18 164:3,5
2nd 52:18,22 53:9

3

3 4:16 6:8 21:14 21:16 50:8,12 50:21 64:18 65:5,15 67:4,20 68:7 89:23 92:13,14 165:16 173:14 173:21 178:24 196:9
3,002 158:5
3,009 134:7
3,127.61. 197:22
3,178 173:16
3,418.43. 208:23
3,478 155:17 157:3
3/21/2011 153:15
30 44:7,9 51:2 153:1 189:11 189:16
301 186:16
31 138:2 213:3
318 186:16
328,454 155:18 157:4
33 153:11
33,084.46 208:21
336 198:7

341 136:22 137:22 138:5,5
36,082 179:16
36,602.89 208:20
37 50:8,12,21
38,594.44 207:11
381,452 160:18 162:11
39 155:11
390 52:6
3905 52:12
397,144.90 160:17
3:34 217:7,8
3rd 61:4,19,25 63:4

4

4 1:14 2:1 4:19 8:3 22:15,17,24 51:8 64:12,18 65:6,10,16 67:5 67:20 69:1 73:10 76:1 84:21 96:22 103:10 116:18 116:20,21,22 117:15 120:3 120:14 126:8 139:6 159:24 170:20 173:14 177:12 196:9
4,681 165:17
4,807 207:14
4/11/2018 162:3
4/25/2024 6:15
4/30/2017 179:3
4/6/2018 209:10 217:21
403,404 173:24
404,537.96 173:23
410,564 155:15
42 157:9
43,401.44 207:10
44 48:15
446 162:23,25
45 44:5
46 157:22
47 4:20
477 179:13,20
49,971.61 154:25 155:2
4:20 217:8,10
4:27 225:4,6

5

5 4:20 47:1,2,5 51:1 71:24 89:23 123:8 126:21 155:8 215:19 217:4 222:1
5,155.92 208:5
5/12/2021 157:12,15
5/14/2018 170:22
5/6/2021 136:22 137:21
50 98:8
50,000 35:6
51 4:22 214:8 214:11
52 4:24 158:10 158:13
525 2:6 3:5
53 5:4
54 5:9
55 5:11,12 159:17
560,981 159:25
560,984.97. 159:23
58 5:15
59 5:18

6

6 4:22 51:22,25 134:11 135:2 138:15 153:2 167:14,14 202:6,8 209:13 210:4 215:7,19 222:1
6,475.30 154:8 154:9
6,824 162:9
6/20/18 215:5
6/27/2014 144:3 144:5,9
6/9/2009 133:23
60 5:20,25
600 177:12
600,016 165:5
611,735.93 197:19
614 198:10
614,000 198:10
614,836.90. 198:12
615,789 165:9
616 165:6 198:6 198:6
616,000 165:6 198:6
616,336.09 197:18
616,910 165:7
62 6:2
62,192 179:2,11 179:14,19
657 174:24 175:7 177:12
657,000 174:23
67 164:20,23,24
69 165:15

7

7 4:24 52:17,19 52:25 53:13 54:2 73:10 76:1 78:8,25 132:15 132:17 133:15 137:8 210:20 214:11

7/10/2025 6:17
7/17/2014 145:2
7/2/2019 161:13
7/31/2013 136:21 137:21
70 189:1 192:8
704.633.5244 3:6
714 158:17 159:6
74 182:16,17,20 182:23
741 158:18 159:14
76 174:12,13 178:23 179:11
78,632 155:15 156:13
7903876 1:25 226:3
7:23 1:4

8

8 5:4 53:17,20 53:21 83:22 84:10,20 85:13 103:12,12 104:24 105:13 106:25 107:1 139:15 150:9 150:24
8/31/17 205:24
80,000 80:1
83 202:9
830,977 158:19
831,690.04. 158:15
839,401 153:7
839,643.06. 153:5
84 6:14 202:6
843.438.7480 3:15
88 49:16 51:9 51:16
885.67 161:22

9

9 4:3 5:9 23:7 47:10,21,22 54:11,12 79:4 79:23 81:16,19 89:25 115:21 132:23 133:23 135:19 136:11 143:25 151:14 151:15 152:23 152:25 153:1 153:12 155:11 157:9,23 158:9 158:13 159:17 164:19 165:15 174:12 178:23 182:14,22
9,315 161:8
9/12/17 205:25
9/12/2017 198:25 199:5
9/15/17 205:25
9/24/2025 4:16
9/27/22 161:13
90 198:7
900 165:6
910 165:6
910.794.4800 3:11
96 49:17,24,25
963 153:22
966.74 139:2
97 98:15,17,24 99:7,21
9:08 2:1 8:4
9:56 46:15,16

a

a.m. 2:1 8:4 46:15,16,16,18 62:11,12,12,14 101:14,15,15 101:17
aapc 23:14,16 44:4
abdomen 203:2
abdominal 144:11,17
ability 11:21 12:21 215:10 228:11
able 11:9 65:10 76:10 90:12 100:18,21 125:2
above 47:14 84:9 97:3 127:21 173:14 196:9
absent 162:15 162:15
absolutely 42:23 77:6
abuse 29:11
academy 23:17
accelerate 184:13 185:12
accept 39:24,25 121:18 122:17 122:21,21 123:5 126:19 127:22 128:14 130:15,15
acceptance 128:16
accepted 120:18 124:8 126:10 157:22
accepting 122:6 126:18 127:8 127:14 129:2 154:19
accepts 39:15 39:23 40:3 42:14,21 43:8 43:19 121:17 121:21 122:25 123:5 127:21 128:14,18

130:15 224:10
access 68:8 69:11,16 92:25 93:4
accident 20:7
accidents 10:5
accountant 108:15
accounter 85:17 149:7
accounting 107:11,17,21 108:3,11,12 113:4
accounts 28:25 29:9 30:14 31:18 32:7,8,16 33:1 34:1 35:19 36:4,4,11
accuracy 72:4 86:4 98:10,11 98:14 99:7
accurate 12:13 23:4 58:14 98:8 99:21 146:24 226:12 228:9
accurately 11:10 12:21
acknowledged 49:9
acknowledg... 123:9 126:21 129:20
acronym 107:14
act 22:2 125:19 125:22
actions 30:5
actual 45:5 99:19 222:20 223:21
actually 83:25 84:14 96:13 100:6 102:17 103:3 124:22 155:9 167:8 202:13 220:11
acute 36:25 180:21
acutely 184:16 185:1 187:3,25
ad 37:11 38:1
add 23:11 48:11 49:2 50:3 50:9 51:17,19 59:9 182:6 222:2,9
added 48:9 50:12 61:24 94:12 162:23 162:25 181:17 222:13
addition 59:7,8 59:10 182:9
additional 48:3 48:9 49:1 61:5 61:17 66:6
154:15 160:6 167:18 205:1 208:11 222:2,9 222:13
additionally 139:5
address 9:7,8 24:19 43:5
addressed 199:25 216:7
addresses 94:4
adjusted 161:16,24 162:20 198:21
adjustments 139:11
administered 117:24 120:20 123:12 126:12 126:24 129:23 151:7
administering 199:22
administration 25:23 69:7 117:25
administrative 73:12
administrator 36:14
admit 203:25 204:2
adopted 224:13
advanced 27:25 30:21,23 139:5
adversely 184:17
advocacy 35:24
affect 12:20 94:5 184:18
affecting 190:4
aforementioned 168:1
agencies 30:4 69:3 111:17 126:19 128:10 130:12 223:5
agency 71:14 103:13 119:10 119:17
aggravated 184:16 185:1 187:13,25
aggregated 187:3
ago 19:7 44:17
agree 14:13 21:19 22:20 26:20 27:20,24 28:3,8 32:10 39:14,22 40:2 42:13 44:24 45:18 54:15 55:23 56:14 57:21 58:23 59:3,5,20 63:7 64:19 65:15

68:17 69:11
70:16,22,22
72:8 73:18 85:6
86:4,18,22,24
87:1,20 88:1,4
88:6,14 91:16
92:1 93:18,22
95:1,5,19 96:12
100:11 101:20
101:24 102:6
102:10,20,23
103:16,23
106:6,17
107:16,19,23
108:18,22
109:10 112:8
114:5 115:2,17
115:23 116:7
117:11 119:25
121:1,4 122:9
122:14 123:20
123:24 124:19
125:5,13,14
135:11,15,23
137:14,23
140:4 141:2
142:5,9,14
143:3,10
145:17 146:1,6
146:9 147:10
147:15,19
149:2 150:4,19
154:7 155:22
157:1,16 159:5
161:2,11 169:6
169:16,23
170:3,9,18
177:2 183:8
186:20 187:1,8
188:2,5 189:16
189:22 190:8
198:4,17 200:4
202:11,13
203:18 205:16
206:11,15,17
206:22 207:19
210:11,14
211:9 214:16

agreed 98:15
138:9 153:25
157:11 158:7
158:23 160:5
161:6,19
169:11 207:23

agreement
123:3 149:20

agrees 202:7

allan 152:22
153:2,2

allege 194:13

alleged 117:23
118:15 137:20
172:17 173:5
173:16 196:11
197:8

allegedly
159:12

allowed 92:18
120:22 121:22
123:14 126:14
127:1 129:25

allowing 78:15

ambiguous
71:6,18 83:14

amended 4:24
53:1 132:18
134:25 135:6
156:19 157:3
207:20

amendments
162:21

american 23:17
29:13

amount 94:16
100:7 121:21
124:21 129:9
135:4,5 138:5
139:1,8 154:11
155:4 157:3,12
159:6,14 160:7
160:10,20
161:11,22,24
174:1 197:21
207:13 208:8
208:23

amounts 92:20
93:10,19,19,23
120:22 121:22
122:18 124:21
126:14 136:21
156:15 161:1
174:7 198:3
207:18 209:3

amsler 158:11
159:9

analysis 28:6
64:20 67:25
68:17 69:3 76:2
78:11 90:7 94:3
112:23 137:1
162:18 181:15

analytics 29:12

analyze 149:4

analyzed 29:13
34:15 85:14

anemia 183:1

aneurysm
162:15

annotated 45:8

answer 10:12
10:14,16,17,18
10:24 11:11,21
12:8,9,25 30:8
38:22 39:19
56:11 59:2 64:5
68:21 80:18
81:20 89:7
91:21 98:20
104:4,9 111:3,3
116:2,13
118:10 122:2
125:11 128:4
131:23 132:12
168:18 177:9
189:21 191:20

202:8,13,16 210:24,25 213:9,12 214:15
answered 48:22 57:21
answering 104:2 114:13 119:15 216:24
answers 215:22
anti 31:25
antibiotic 147:7 170:17
anticipate 102:1 186:2
antonucci 3:19 8:20,20
anyway 23:15
aortic 162:14
apologies 117:9
apologize 51:7 65:12 92:13 126:5 144:5 163:21 174:25
apparently 180:19
appearances 3:1
appeared 47:12
appears 22:22 143:7
appendices 61:21 63:10,18 70:13 138:20 138:21 207:20
appendix 80:9
apples 190:5,20 191:14
applicable 79:4 97:7,25 120:19 126:11 216:20
applied 86:11
apply 75:8 76:5
appreciate 187:18
approach 19:17
approached 19:6
appropriate 37:21 47:13 74:20
approximately 16:2,3 87:16 88:11 98:15
april 166:19 209:13 210:4 215:7
aprns 38:6
arbitration 18:15
area 64:8
areas 29:21 42:1
argument 121:12
articles 13:24 14:3 53:25 110:4
articulate 77:21
articulated 97:3
ascertained 29:23
asked 11:17 12:25 19:10 38:12 90:1 104:8,10,13 189:3 202:7 213:23 216:1,5 217:15,17,20 218:21,24 220:4 221:5 224:3
asking 45:11 77:15 99:16 108:2 150:2
asserted 125:6
assessed 139:20 211:17
assessing 150:3
assessment 33:23 36:25 76:24 81:6 149:21 153:25 156:17 158:24 160:6 180:2,20 202:8,12,14
assessments 137:23
assigned 90:25
assignment 64:13,15 94:3 226:3
assignments 48:15,19,20
assist 81:13,18 112:16
assistance 29:12
assistants 28:1
associated 58:9 58:24 78:20 79:14 81:14 90:4 100:24 114:22 141:4 181:11 184:19 185:16 191:4
associates 157:14
association 29:13
assume 12:3 56:24 57:11 58:1 65:20 181:13
assumed 65:1 65:20 169:3
assuming 133:3 136:13
assumptions 218:20,24
assurance 29:2
attachment 22:24 23:1

attack 165:24
attempt 70:6 71:12 90:16
attention 21:25 22:23 45:4 89:24 92:12 103:9 112:17 116:14 117:15 132:15,22 134:24 143:24 144:1 153:13 157:8 159:4,19 164:20 173:11 174:11 190:23 194:10 207:7 209:20 210:17 210:20 213:2 214:7,11
attorney 9:12 12:8 26:21 34:3 34:4 99:13,17 104:3 132:4
attorneys 12:7 15:23 16:2 66:2 68:19
attributed 218:14 219:7
audit 28:25 30:2 37:9 38:14 41:6 42:12 89:12
auditor 36:8
audits 23:8 36:24 37:3,24 40:22,25 42:4,9 43:1
august 139:6
authored 44:25 109:16
authority 127:9 127:10,13
available 25:7 66:18 67:8 70:7 71:21 92:22,25 93:17,25 205:10
average 109:3
award 123:10 126:22 129:21
aware 42:23 43:21 61:6 92:8 110:7 143:15 188:6 193:25 195:12 200:9 201:11,17,19 202:1 212:17
azithromycin 170:17

b

b 4:9 7:3 138:12 161:19 165:19 179:25 180:4
baby 34:18
bachelor 25:21 26:1
back 28:23 45:5 46:17 62:13 64:11 87:3 90:20 101:16 106:24 126:7 128:25 131:8 132:15 134:25 135:18 137:7 143:24 152:24 154:5 156:9 157:9 160:12 164:4,18 167:8 171:5,24 179:24 182:13 207:7 210:17 211:13 217:9
backed 202:3 204:5,6
background 71:25
bank 96:2 220:9
barbano 7:2 200:16,22 201:25 202:4 204:5,6,7,14,20 204:23 205:2,4 205:18,23 206:7,19 207:3 219:7
barbano's 219:22
base 147:3
based 24:20 35:18 37:10 42:1 64:20 67:21,25 69:3 76:13 89:2 96:24 97:1 98:21 114:10 121:11 124:11 125:21 126:1 126:17 127:7 128:15 130:10 130:12 137:12 139:12 142:9 147:2 150:15 158:15 161:1 174:5,6 175:15 175:19,22 176:5 177:3,10 178:14,16,21 187:22 191:15 193:1 195:18 198:3 207:17 209:2 211:4 212:2 214:3 215:9 217:22 218:20 219:5 221:17
basing 127:14 192:21
basis 99:13 126:16 127:5 167:4 168:24 216:10
bates 18:10 52:5 78:11,12 83:9,9 141:12 141:18,23,24 142:10 205:6

209:11
becoming 25:14
beginning 34:23 84:23 90:21 159:20 160:25
behalf 2:5 8:18
believe 13:12 18:9 19:22 33:12 43:10 44:7,8 45:23 46:5 47:8 49:16 50:18 51:6,21 54:22 57:20 61:22 63:20 80:10 96:6 114:1,18 116:15 122:20 127:6 147:22 152:8 154:17 167:4,6 170:16 176:13 183:14 191:21 200:23 202:21
bell 3:13
belllegalgrou... 3:16
bellwether 91:3
beneath 80:11
benefit 123:10 126:22 129:21
benign 133:25
best 11:21 24:16 148:24 228:11
better 50:19 147:16
beyond 72:14 207:3
biggest 41:8
bill 30:19 36:24 37:3,9,23 40:22 40:25 42:1,4,9 72:21 89:23 94:17 176:25
billed 19:19 31:9 40:20 49:9 71:20 72:24 73:2,3 75:5,11 76:3 78:16 91:17 92:2,19 93:9,19,23 94:12 95:3,21 96:4,9,14 100:20 174:20 175:4 179:2,12
billing 19:18 22:4 29:19 30:13,17,18 31:4,9 37:6 39:13 64:16,23 67:9,9 68:2,9 72:1,3,9,13,18 72:24 73:8,11 75:12 76:6,11 76:19 78:11,18 79:13,17,18 80:4 82:1,11,14 82:21,25 83:6 87:1 89:22 90:2 90:3 92:18 93:5 94:6,12 97:4,22 98:6 101:4 105:5,8 117:24 121:8 124:12 124:16 135:4 142:18 150:11 151:6,17,19,23 152:17 154:8 155:1 156:18 156:21 158:16 158:19,24 160:17 162:18 163:7,14 172:3 172:5,6 173:23 176:22 195:23 196:15,25 197:18 198:5 198:18 207:10 207:25 208:6 208:20 220:14 222:20 223:4 223:21,22
billings 65:17 70:23,24 71:3,5 71:9 72:10 150:21
bills 30:22 69:12,15 80:6 83:3 89:10 92:9 141:4 142:15 143:13,16 172:8 200:5 205:10,19 206:8 208:15 209:6
bit 71:18 111:2
bladder 28:10 54:24 57:3 97:9 134:17
blue 42:19
bold 135:24
book 83:16
borgress 161:13
bottom 48:13 49:23 78:24 80:11 83:23 90:10 116:17 120:14,16 133:2 155:12 159:20
bounced 171:5
brain 199:12 200:10,19 201:2,9,11 202:19,25 203:13,15 209:14 211:3 212:6
break 13:1 46:11,21 52:2 62:9 101:10 131:3,16 132:9

163:23 164:12 217:2,4
breaks 12:23 17:16
brief 16:9 46:11 101:10 163:23
briefly 16:24
britain 9:9
broad 118:22 119:18 206:22
brought 18:4 34:24 45:7
bruce 163:3,5
built 102:4
bullet 33:25 84:9 85:12 135:24 153:3 155:13 158:12 159:21 165:2
business 9:7,8
butler 3:9

c

c 4:1 8:1 139:4 139:16 144:2 162:2 179:10
calculate 98:17 100:7
calculation 98:25 100:3,4,8 100:9
calculations 99:9,20 154:1
calf 199:14 202:21 203:5 203:11
called 144:13 169:2
calls 132:3 164:14
camp 1:4 8:6 9:14 13:5,20,25 14:5 22:6 54:21 55:1 100:12 125:19,22 189:17 194:1 194:17 226:4
cancer 28:10 28:12 54:24,24 57:3,3 97:9,9 134:3,14,17 135:12 151:14 153:21 158:3,5 186:4 189:25 190:1 191:4
caption 226:4
captioned 226:10
card 95:20,24 220:10
cardiac 210:5 211:4
cardiomyopat... 175:10 177:5 179:17,19 186:8
care 24:8,20 27:12,22 29:14 36:25 38:16,17 49:10 69:7 92:20 93:24 106:18 118:1 120:20 123:11 123:17 126:11 126:23 127:4 129:22 130:3 165:17,20 210:3 222:21
careful 181:6
carefully 216:19
carol 150:10
carolina 1:1,15 2:7 3:6,10,15 8:8 9:16 13:8 35:25 157:13 228:3,20
carriers 68:3
carter 164:21 167:7 169:9,19 169:25
case 1:4 6:22 14:1,14 18:19 18:22,25 19:20 19:25 20:6,8,9 20:10 21:10 22:12 27:5,15 28:6 34:13,21 34:22 35:11,17 50:20 54:16 55:15 57:8 59:21 69:12,24 70:4,13 72:5 76:17 77:7,9,12 87:23 88:5,15 95:10 111:8 125:16 140:6 146:20 151:11 152:18 163:14 168:25 169:13 191:24 194:8 196:15 201:18 226:4
cases 1:6 9:22 9:24,25 10:1,2 10:4 19:11,16 20:3,5,15 32:3 35:12,12 39:1 72:23 95:6,13 116:11
casually 185:23
cataracts 185:13
category 28:2
causation 6:19 58:13 73:15,23 74:1,3,6,8 75:15 169:7,12 188:7,14
cause 168:16 185:13 191:6 228:12
caused 57:17 189:17 194:17
causes 80:2 187:15

causing 184:14
cchc 165:16
ccn 71:9 103:14 103:18 104:25 112:8,9,14,19 112:20 113:10 113:14,21 114:15,17,21 115:12,24 118:1 120:3,21 123:13 124:7 126:13,25 129:24 151:2,7 196:5,5 197:4
cdeo 5:2,7,23 6:7 53:3 62:24
cell 167:22 168:15 185:10 185:10,24 187:12 188:4 190:2 191:13
center 35:24 41:11,19,23 42:14,20 134:11 138:13 161:14 174:18 175:3 176:1,10 176:17
centrally 199:13,13 203:3
cents 198:8
certain 68:11 74:8 137:14 141:12 148:22 161:3 167:16 223:20
certainly 19:12 31:19 41:24 46:6 47:8 48:1 50:6 72:20
certainty 97:6 97:16,24 98:3,4 100:19
certificate 228:1
certification 36:7,13 44:12 44:23
certifications 26:15 35:20 36:2 43:23 44:1
certified 35:23 35:23 44:10
certify 228:4,12
ceus 44:5
cfe 5:2,7,23 6:7 44:6 53:3 62:24
challenged 162:16
chance 186:10
change 23:11 215:23 227:3,5 227:6,8,9,11,12 227:14,15,17 227:18,20
changed 75:6 75:12 207:25
changes 4:21 39:3,3 59:6 75:13 226:12 226:15
charge 136:20 139:7 153:15 154:1 157:21 160:6 165:22 177:12 198:15 198:18
charged 161:11
charges 22:5 67:10 68:13 81:25 91:17,22 91:23 93:13 94:12 95:3,21 96:4,10,14 108:19 117:24 129:1 133:9,11 133:24 134:6 134:20 135:7 136:2,2,25 137:2 138:1,10 138:13 139:18 140:1 144:4,9 145:11,12 149:23 151:6 153:6 154:11 155:4,16,17,23 156:3,6,13,16 156:21 157:4 157:10 158:20 159:25 160:20 161:16,21 162:5,5,10,11 165:7,9,18,19 165:21 166:18 166:24 167:3 167:12,17 174:1,20 175:4 175:9 176:1 179:2,12,17,18 179:20 197:21 207:13 208:23 210:21 211:15
chart 36:24 37:3,9,23 40:22 40:25 42:4,9 59:6
charter 25:23
charts 97:4,22
chc 5:2,7,23 6:7 44:5 53:3 62:24
check 44:8 99:6
chemistry 180:8
chemo 188:5
chemotherapy 167:24 168:22 185:9,18,25 187:12 190:3 191:12
chest 203:1 210:6
chief 34:4 76:20 81:2 144:11,14

children's 41:11,19,23 42:13,17,20
cholangiogram 145:6
cholecystecto... 145:3,4,5
choosing 104:8
christine 1:23 8:9 228:2,18
chronic 167:7 167:10 169:4 169:17,25 171:11 180:11
ciprofloxacin 145:9 146:4
circles 129:16
citation 47:13 47:15,22 48:6 52:8 73:19
citations 46:1 49:21 50:15
cite 114:14 122:10 124:1
cited 65:9 113:19 114:5 114:16 142:5 158:16 168:12 184:8,22 186:15
cites 222:13
citing 52:5
civil 2:4 9:24 19:15
ckd 175:9 179:16,20
claim 31:6,20 75:18 90:12
claimed 91:3 119:21 133:6 133:10,12 134:7,21 135:9 136:3,16 137:3 137:4 145:11 145:13 151:1 152:2 153:7,8 153:23,24 154:15 155:17 155:19 157:5 157:19 158:6 160:1 162:10 163:9 165:9,10 165:21 166:3 166:13,23 172:14 174:14 174:19,22 175:3,7,9 177:6 179:6,14,15,21 183:2,3 195:24 195:25 196:4 197:3 208:11
claims 29:20,24 30:13 31:16,17 33:4 37:7,16 40:5,8,10,12,16 41:4,8 42:10,18 42:24 43:12 70:8 73:2 87:15 87:16,19 88:25 89:2,3 103:2 107:25 118:14 118:24 162:5 179:2
clarification 12:2 32:22,24 33:14 48:4 83:21 88:20
clarified 187:20
clarify 12:1 97:19 99:18
clarity 192:25
clarke 16:17 17:12 18:8 48:6 49:8
classes 44:20
classification 29:16 107:5
classified 85:9 85:21
clear 38:23 39:11 50:19 51:13 77:4 114:19 193:5
clearer 50:23
clearly 85:8,20 148:25 171:11 192:10
client 99:13 132:4
clinic 133:19
clinical 28:5 33:5 73:13 78:20 81:5 85:16 86:1 107:4 115:24 118:13,23 119:3,9 149:6 149:14 183:6
clinically 118:7 118:15 183:1 210:1
clinician 27:17 27:20 28:4 81:8 135:13 147:11 147:13,15 148:2 149:18 176:9 178:11 193:3
clinicians 32:17
clja 103:14
close 99:12
cmap 34:2
cms 69:6 70:9 70:17 71:8 103:15,18 105:1 115:24 117:25 120:2 120:21 123:12 126:12,24 129:23 222:21
coastal 165:17
code 31:13 39:12 40:20 50:1 73:5,25 74:9,9,18,20,20 75:18,18 79:5

81:14
coder 36:8 72:24 74:19
coder's 72:25
coders 23:18 73:24
codes 37:20,21 39:3 49:18 51:10 73:12,25 74:8 75:5,7,11 75:14 79:6,12 79:23 80:1,14 80:25 81:23 82:1,7,9 89:21 148:17
coding 19:18 23:21 29:15,17 64:16 72:1,3,9 72:13,18,21 73:1,9 74:4,7 74:12 83:16 86:10,18,18,22 86:24 89:10 105:5 107:4 108:18 121:8 176:22
cogiano 90:2 133:7
coincidental 85:18 149:9
collected 34:20
college 25:23
colon 158:2,3
colonoscopy 158:1,3
colorado 210:3
columbia 35:25
columbus 139:7
column 56:17 56:20,23
columns 56:15
combination 57:4 92:17
come 75:2 172:20
cometto 172:1 172:2
coming 39:3 103:1 152:9
commencing 2:1
comment 167:11
commercial 40:1 108:25
commercials 14:4
common 29:15 185:18
communicated 30:2
communication 15:2
communicati... 131:15 132:5 164:11,15
community 69:7 118:1 222:21
companies 40:1 67:24 119:12
company 43:13
compare 105:23 106:7 115:11 119:9
compared 115:3,6,10
comparing 190:5,20 191:14 192:9
comparison 78:16 83:24 84:13 85:1 98:22
compensable 76:7,12 79:2,20 84:2,16 85:7,16 85:19 94:14 100:23 149:6
compiled 78:12 78:18
complaint 34:14 76:20 81:2 144:11,14
complaints 144:10
complete 10:17 11:14 23:4 36:3 36:5 78:9 95:7 124:16 228:9
completed 45:17 90:7
completely 187:18
compliance 23:8 30:1 36:18 43:1 87:18 88:21,23 89:12
complications 33:22
comprehensive 64:21 67:25
comprised 101:3
concensus 13:14
concerns 43:6 117:20 157:19 193:4
concise 39:11
concisely 148:25
concluded 225:6
conclusion 100:17,18 136:13 188:19 189:8,15 190:10,17 199:8
conclusions 133:4 136:24
condition 65:1 65:21 67:11

76:7,12 80:16 81:1,15 84:3,4 84:16,18 85:7 85:16,20 94:14 100:23 133:11 138:3 145:14 145:19 149:6 160:2 175:9 179:15 181:16 206:4
conditions 5:12 5:15 55:19 57:8 57:12,17,23 58:2,23,24 64:24,25 65:18 65:19,24 66:6 66:12,23 67:12 67:17 68:10 79:8,15,24 80:2 80:7 90:5 91:6 94:13 97:11 118:8 133:12 135:9 136:3 137:3,4 145:11 145:24 153:7,8 153:23,24 155:18,19 157:5 158:6 162:11 165:9 165:11,21 166:3,13,23 167:23 170:14 174:23 175:7 177:6 179:7,14 179:21 181:15 181:17,21 182:1,4 194:15 221:10 224:12
conduct 42:3,3 87:12 151:4
conducted 36:24 86:5 117:22 120:1,5
confidence 98:7 98:9
confidential 132:3 164:14
confirm 67:9 83:25 84:13 132:23 139:20 211:16 220:10
confirmation 162:16 220:5
confirmed 86:10 135:5 154:9 155:3 160:19 173:24 176:8,11 179:12 197:20 207:12 208:6 208:21
conflicted 120:13
confused 31:3 32:1 201:25 202:2,24 203:25
confusing 119:20
conjunction 79:21 82:11,25 83:1,7,19
connard's 159:18
connecticut 9:9 29:2,3 36:19 41:11,19,22 42:14,21
connection 32:3
consequence 84:3,17 105:14
consequently 105:14 112:20
conservatively 68:12
consider 17:5
considered 4:24 5:4,20 6:3 17:24 52:17 53:1,12,13,18 53:24 54:5 59:25 60:7,13 60:15 61:5,9,19 61:24 62:21 63:4,8,15 112:10,21 132:18 167:18 207:21 215:16
consistency 86:3
consistent 78:20 156:17 173:13 196:8
consistently 86:11
constitute 127:18,24
constitutes 123:15 125:15 127:2 128:20 128:22 130:1
consult 32:16 32:19 33:3 81:7 157:17
consultation 79:3
consulted 81:16
consulting 35:14
contained 14:19 63:14 142:15
contaminated 191:24
content 213:23 215:11
contents 189:4
context 40:11 48:10 49:2 50:3 50:9 51:10,19 75:16 110:15 110:18 127:7 127:20 128:6 130:8,10

215:11 222:13
continue 117:20
continues 145:1 186:13
continuing 44:1 44:12
contrary 105:17
contrast 209:14
contributing 180:12,16 181:2,5 191:6
contribution 68:14
contributions 68:14
control 14:18 34:4 86:5,14 87:4,17,21 88:10
conversation 213:6
copays 162:24 163:1
copies 17:6,14 17:15 19:22 62:5 221:24
copy 14:13 21:14,20 22:15 22:20 23:4 46:8 46:13,22 52:1 52:17 53:18 54:15 55:4,18 60:19,24 62:1 62:20 140:23 204:16 212:13 212:22
cord 199:11,13 200:9,19 201:1 201:5,8 202:19 202:20,25 203:2,3,6,11,12 203:14 219:15
correct 10:7,13 13:3 14:15 15:1 16:13 18:7 19:2 19:3 20:15 21:20,24 22:12 22:13,21 23:2 25:15,24 26:6,9 26:18,21,22,24 26:25 27:2,3,5 27:6,7,8,9,10 27:12,13,15,16 27:18,19,23 28:6,7,10,11,13 28:15,17,19,21 29:4,8 30:5,15 32:11,12 36:20 36:21 37:1 39:17,23 40:3 41:12,16 42:8 42:15,22 43:9 43:23,24 44:13 44:14 45:1 46:24,25 47:23 47:23 48:7,8,11 48:12,15,16 49:2,8,13,21,22 50:1,2,13,14,17 53:4 54:3,9,17 54:21 55:2,10 55:15 56:15,18 56:21,25 57:5,9 57:13,18,24 58:15,16 59:6 59:21 63:1,5,6 63:11,12 66:3,8 66:14,25 67:2 68:19 69:13,14 69:20 70:18 71:10,11 72:11 73:20,21,25 74:13,25 79:16 81:10 82:1,10 85:2,10 86:7,12 86:21,25 87:23 88:5,12,16,22 90:5,8,14,15 91:18 92:3 93:6 93:12,20,24 94:14 95:4,21 96:10,14 99:7 100:7,9,10,14 101:5 102:14 102:22 103:7,8 103:18 105:24 106:11,18 107:11 109:12 109:19,24 110:2,5,9,16 111:18,24 112:12 113:4,7 113:8,12,13,15 113:22 115:1 115:18,25 116:10 117:13 118:8,16 120:4 121:2 122:12 122:18 123:22 124:3,22 125:3 125:4,8,16 131:12,13 132:24 133:5 133:20 134:8 134:22 135:9 135:10 136:4,8 136:9,10,15 138:10,11,16 138:23,24 139:1,2,3,12,23 140:6,7,9,10,14 140:15 141:5,8 141:13 142:6 142:16 143:13 143:14,18 145:19 146:8 146:14,17,20 146:21 147:11 147:13,17 148:11,15,20 149:25 150:12 150:17 151:2,7 151:8,20 152:3 152:6,12,18

154:2,16
155:23 157:19
157:20,25
158:7,8,24
159:6,7 160:7,8
160:11 161:5,8
161:9,15,17,22
161:23,25
162:1,6,18,19
162:22 163:1,2
163:6,11,12,15
163:17 164:8
165:24 166:4
166:15 167:1,5
169:9 170:6,10
170:24 171:15
171:22 172:3,4
172:8,14,18
174:15 175:14
175:21 176:2
176:18 177:18
178:18 180:2,3
181:12,18,24
181:25 182:4,5
182:7,11
183:11 186:17
186:23 187:7
188:1 189:18
191:17 192:23
193:8,12,13,17
195:14,18
196:6,12,13,16
197:1,5,9,13
198:13,15,19
198:23 199:1,2
200:6,11 201:9
201:10,13,15
203:23,24
204:20,21,23
204:24 205:2,3
205:6,7,22
206:8,16,21,24
207:22 208:1,8
208:9,12,13,15
208:16 209:6
210:23 211:12
211:17,21
212:4,8,9,15,16
214:15,18
215:2 216:19
218:18,19
219:5,19,25
220:13 221:11
221:18,21
222:17,22,25
223:6,17 224:1
224:18
corrected 4:23
6:1 60:25 64:2
138:5 159:24
160:9 215:18
correcting
136:23
correction
18:10 107:7
159:13
corrections
11:17 17:13
226:13
correctly 22:8
65:3,22 67:13
68:4,15 69:9
72:6 73:16 76:8
78:22 79:9 84:5
84:19 85:23
91:8 92:23 94:9
97:13 100:25
105:19 107:8
113:1 118:2
120:24 123:18
133:13 134:4
134:18 137:5
137:17,24
138:7 139:9
141:20 144:22
144:23 145:15
153:9 154:12
155:5,20
156:22 157:6
158:19,21,22
160:3,22
165:12,13
168:4 173:17
173:18 174:2
175:11 179:8
179:22 180:14
184:20 191:7,8
194:20,25
195:2 196:2
197:25 200:2
203:19 207:15
208:24 209:18
210:9 211:7
213:13
correlate 71:12
76:4 90:16
100:21 106:14
221:6
correlated 86:6
correspond
70:8 82:9
correspondence
14:23 140:9
171:18 204:22
212:11
correspondent
212:10
corresponding
68:2 78:17
120:23 121:23
121:24 126:15
205:19 221:9
corresponds
199:14 201:7
cost 48:14,18
48:20 49:25
106:18 107:6
107:10,17,20
108:3,11,12
109:2
costs 67:25
cough 166:21
counsel 8:12
15:4,5,21 21:2
21:4 46:21
57:19 58:5 61:6

62:19 70:3 78:13 79:25 80:8 99:5 104:3 117:9 131:16 132:7,8,20 164:12,22 170:13 182:3 218:21 228:12
couple 20:5 88:7 217:14
course 12:24 28:6 37:11 117:8 217:1
court 1:1 8:9 10:21 13:7 120:18 121:17 121:20 122:24 123:5 126:10 126:18 127:7 127:14,21 128:13,18 130:14 183:19 193:22,25 224:10 225:1
court's 193:21
covered 33:12
cpc 5:2,7,23 6:7 53:3 62:24
cpip 5:3,8,24 6:7 35:22 44:3 44:20 53:4 62:24
cpma 5:2,7,23 6:7 53:3 62:24
cpt 29:14 39:3 39:12 49:17,18 50:1
craig 19:14
create 42:12 56:2
created 66:8,19 73:12 200:21
creating 180:20 193:4
credit 95:19,24 220:10
criminal 20:6
criswell 135:20 136:9
cross 42:19 50:20
crossed 50:11
ct 138:15
current 9:6,8 29:13
currently 9:15 41:18 47:16,19 56:5 122:16
curriculum 23:1 28:23
custody 14:18
cv 1:4 23:2,5 28:24 29:10 33:24 36:16,22 43:22 45:1
cystourethros... 133:24
cytology 138:3

d

d 8:1 157:14
d'alessio 183:16
d.c. 3:21
damage 120:23 121:24,25 122:6 126:15
damaged 35:2
damages 94:8 105:15 133:3 135:24 136:13 153:3 155:13 156:19 159:19 195:24 196:1,5 196:5 208:11 213:7
daniel 16:17 17:12 18:8
data 29:12 34:15,19 35:16 37:14 51:4,5 69:4,15 70:8,12 70:17 71:8,10 71:14 72:5 76:21 77:2,7,8 77:11,18 78:5,7 81:3 87:7 90:2 90:13,16,17 92:5,18,21,24 94:6 101:2,21 101:22,25 102:3,7,13,16 102:21,21 103:1,1,18 105:1,6,8,9,10 105:15,22 106:7,15 112:14,14 114:2,11,15,17 114:21 115:3,8 115:14,25 117:21 118:15 118:25 119:7 119:10 120:17 121:15 123:5,6 124:16 126:18 126:19 127:7,8 127:15,21,22 127:22 128:11 128:13,14,15 128:19 129:1,1 129:3 130:11 130:13 136:21 137:20 152:14 158:16 159:24 161:7,7 173:7,7 220:15 221:6,9 224:10,10
data's 155:25
dataset 77:14 102:24 112:9 112:20 156:16
datasets 115:4 115:10,11 223:4,4,13
date 8:3 15:8 19:19 78:15

138:2 162:2 198:24 199:4 209:10 211:1 215:4 217:20 217:23 218:7 227:22 228:5
dated 21:23 22:16 46:23 52:18 59:16 60:20 115:16 138:22 139:21 140:12,17 204:8,14
dates 137:13 140:1 161:12 170:20 200:24 218:14 219:7 219:24
david 154:4,7 154:22,25 183:16
davis 6:16 167:20,21,25 168:7 169:16 171:2,15 172:1 172:2
day 211:5 226:17
dean 6:18,20 183:13 184:2 188:15
december 52:18,22 53:9 140:2 143:1,5 143:11 170:21 170:21,22
decide 185:23
decision 76:22 177:17,21 180:13 182:10
decisions 178:2
declaration 226:7
declare 226:8
declined 105:21
decompensati... 184:14 187:16
deduct 156:20
deducted 111:7
deemed 218:15
deep 199:12 200:10,19 201:1,9,11 202:19,25 203:12,13,15 219:15
defendant 3:17 20:12,13 117:21 120:22 121:22 126:14
defendant's 120:16 126:8 212:21
defendants 2:5 220:15
defense 20:7 135:5 137:13 154:10 155:3 160:19 161:2 173:25 174:7 197:20 198:4 207:12,18 208:7,21 209:3
deferred 135:11
define 131:19
definitive 183:11
degree 26:12 27:1 97:6,15,24 98:3,4 100:19 113:3,7
degrees 26:17 26:19 33:8
dehydrating 180:19
demonstrate 199:23
demonstrating 100:22
denials 155:16 156:14
dental 31:1 33:4 34:24
dentist 33:3,4 35:3
department 3:18 9:13 29:1 34:5 69:5 138:14 156:2 180:6 200:1
depend 19:24 37:17
depended 38:7
depending 38:15 87:7
depends 72:17 72:20,25
depo 50:8
deponent 48:22 228:6,7,10
deposed 193:2 201:18 212:18
deposition 1:11 2:2 4:11 6:15 6:17,24 7:5 8:5 9:17,23 11:8,14 12:6,24 14:14 15:12,20,24 16:13,15 21:12 48:6,23 49:12 51:8,15,17 61:14 131:15 132:1,9 164:11 167:19 168:6 168:11 169:15 170:19,23 171:3,21 183:15 184:1,3 184:9,23 187:23 189:25 190:20 191:10 191:16,25 192:2,10,22,23 193:8,11,11,16

201:21 202:7 210:17,19 212:22 213:19 213:22 214:3,8 215:11,15,24 216:10,18,20 221:25 222:8 225:3,6 226:1,9 226:14 227:1 228:5,9
depositions 15:16 16:12
derived 112:23
describe 31:16 41:21 72:16 74:5
described 71:10 103:6 199:11 202:18 203:6
describing 74:7
description 4:10 185:14 203:22
descriptor 74:9
design 214:2
despite 195:23 195:24
detail 57:9
detailed 137:16 161:4 174:9
details 213:6
detected 158:17
detection 107:6
determination 99:10,20 125:16 162:4 177:3,14 207:24
determinations 28:5 67:7,16 69:24 70:4 81:9 125:15 143:17 162:14,17 220:24
determine 58:8 58:14 76:5,10 78:19 79:5,22 80:5,13,24 85:15 87:8,11 94:7 99:6 101:20 118:6 118:14,24 149:5
determined 29:21 79:11 81:24 82:6,12 94:13 133:10 137:2 153:6 156:5 165:8
determining 81:13
develop 35:11
developed 44:23
developing 43:4
development 100:13 206:3
deviations 94:4
diabetes 181:12 181:14,16 182:3,7 183:3,7 183:10 184:16 184:19 185:1 185:12 187:3 187:11,13,16 187:19,20,24 189:18 190:5,9 191:2,3 192:15 193:4 195:13
diabetic 59:11 181:14 184:14
diagnosed 183:5 191:2 192:14
diagnoses 56:13 79:3 85:14 90:4 91:5 97:8 98:1 122:5 148:20 149:3
diagnosing 27:22
diagnosis 28:9 37:20 40:21 67:19 73:4,6,25 74:8,20,22 75:5 75:7,10,13,18 75:18 79:20 82:14 85:18 89:21 134:2,8 134:22 149:9 181:12 182:25 183:2,3,10 191:3 209:16
diagnostic 79:5 79:12 80:13,24 81:14,23 82:7
dialysis 186:11
diane 207:6,9
difference 93:19 130:18 136:22 137:22 158:17 161:8
different 31:2,3 31:10 39:1 42:6 46:1 89:1 101:7 126:18 128:8,9 128:9 174:24 191:23 192:9 211:2
difficult 104:2
difficulty 218:23
dio 186:11
direct 27:21 84:3,17 112:17 159:18 210:19
direction 153:1
directly 100:24 103:22 109:22 113:17 140:5 171:15 172:20 191:11 199:25 204:19 212:8 212:11

director 23:8 32:4 37:12,18 38:10 43:1
disability 182:25
disagree 137:15 161:4 174:8 187:17,18 209:5 214:23
disagreed 162:3 180:1 198:25 209:4,8
disagrees 203:21
discharged 144:20
disclosure 61:15
discovered 198:18
discuss 34:13 131:22
discussed 86:20 99:17 170:23
discusses 164:21
discussing 213:5
disease 28:18 97:9 100:14 118:16 119:1 180:12 185:13 186:7,9 199:9 199:24 209:17 210:2 214:14 214:18 218:1
diseases 29:16 148:15
dispute 136:6 139:17,25 167:16 168:1 175:22,25 205:8,23 211:14
disputed 137:13,14 154:10 155:4 157:2,10 159:5 160:20 161:1,3 161:3 167:3 170:5 173:25 174:7,8 175:13 175:19 197:21 198:4 207:13 207:18,19 208:7,22 209:3 209:4,5
disputing 206:20
district 1:1,1 9:15 13:7,7
diverticulosis 158:4
division 28:25
doc 16:21 171:14
doctor 27:7,21 32:25 33:5 81:8 148:2 171:2 176:9
doctor's 178:17
doctorate 26:23
doctors 27:25 32:17 33:2 148:13,16,19 195:12
document 1:5 17:1,2 23:15 25:11 32:22 36:9 39:10 47:14 49:7 52:25 53:7 55:9 81:12 95:12 99:11,24 100:2 113:20 114:6 114:14 148:6 148:16,24 188:22 189:2
documentation 19:18 23:21 29:25 31:14,21 35:16 38:13 39:8,9 40:19 42:2,11 64:21 73:9,13 78:17 85:15 86:10 89:21 95:22 100:22 122:10 124:2 149:5 150:21 151:24 175:15 176:23 183:6 193:6,7 193:15 199:6 209:12 212:5
documented 82:13 199:15
documenting 178:14
documents 15:3 16:22 17:8 17:20,21 18:4 18:12 37:19 53:25 60:8 61:18 63:25 64:19 65:6 66:1 83:13 141:12 172:5 205:5 212:14
dod 110:25
doing 43:2 89:16
doj's 130:13
dollar 198:10
dollars 198:7
dose 185:9,11 185:17,24 187:12,15 188:4 190:2 191:12
double 29:19 30:12,17,18 31:4,8 44:8
download 37:13
downs 90:3 154:22,25

dr 5:11 6:9 54:16,20 55:5 55:13 89:22 115:17,18,20 115:21 116:11 118:6,6 120:9,9 132:15,23 133:3,5 134:15 135:12,16,19 135:25 136:13 136:14 137:14 137:20 138:9 139:12,18,19 140:5,9,11,17 141:3 142:6,10 143:4,12,15,21 143:25 144:12 144:16,18 145:6 146:24 147:10,23 149:23 152:25 153:4,11 154:18 155:10 156:4,4,17 157:2,9,11,13 158:9,13,23 159:16,22 160:5 161:2 162:4,9,17 164:18 165:4 165:16 166:14 167:17,20,21 168:2,7 169:16 170:4,10 171:2 171:15 172:21 172:21 174:8 174:11,15,19 175:13,19 176:16,19 177:20 178:11 178:24 179:4,8 179:22 180:1 181:10 182:13 182:16,23,25 183:9,13,16 184:2,9,12,25 187:2,23 188:2 188:6,15,19 189:15 190:25 191:11,16 192:5 193:2 197:20 198:4 198:17 200:16 200:22 201:17 201:20,25 202:4,6 204:5,6 204:7,14,20,23 205:2,4,9,18,23 206:7,19 207:3 207:12,19,23 208:7,22 209:4 209:21,24 210:11,17 211:9,15,20 212:3,7,17,23 213:5 214:8,16 214:24 217:24 217:24 219:7 219:22
draft 45:15
drafted 59:21 66:19 95:10,11 117:13 140:13
drive 3:10
driver 85:17 86:1 149:7,14
dropped 52:4 52:11
dropping 72:21
drs 224:5
due 144:19 198:14
duke 138:1,10
duly 8:24 228:6
duodenal 174:22 175:6
duplicate 139:7 155:15 156:3 156:13,20 198:15
duplicates 115:3 156:8,15
duplications 112:14 114:17
duplicative 72:9 108:19 156:5,18,20 198:18
dyer 6:12,14 136:12 137:11 140:14 141:19 143:2,17 144:3 144:18,21 145:7
dyer's 140:5 143:1 145:18
dyspnea 210:6

e

e 4:1,9 8:1,1
e&m 38:11 89:12
earlier 16:11 18:3 20:25 41:14 45:25 75:21 86:21 169:11 184:5 219:14 220:4,8 222:12,19
eastern 1:1 9:15 13:7
economic 112:25
economics 113:6
ed 181:4
edgar 197:15 197:17,17
edits 29:24
educate 200:12
educated 199:18
education 44:2 44:13 97:2 147:2 176:24 177:11

educational 26:12,17,19
effect 100:24
eight 16:3
either 11:12 57:3 179:19
elbridge 9:9
email 140:8 171:17
emails 14:23
emergency 138:14 180:6 199:6 200:1
emory 133:19
employment 41:20
encompasses 23:12
encounter 199:17
encouraged 36:6
ended 41:20
endocrinologist 192:19
ends 225:3
enforcement 30:3
engaged 22:10
engagement 4:16 21:15,20 21:21
engineer 19:15
engineering 19:16
enrolled 31:1
ensure 82:8 86:3
entered 64:10 94:16 136:20 136:20 215:20
entire 177:13 226:9
entitled 53:1 103:12
entries 78:16 97:4,22 156:18
entry 133:23 136:21 137:20 158:16 161:7,7
epic 105:8,8,9
equalled 124:21
er 144:10,15,20 145:10 149:13 149:14
errata 226:1,14 227:1
error 159:24,25 201:16 219:13
errored 107:3
errors 72:18 86:19,23,24 87:1 89:10 107:3 108:19 136:21 137:21 158:17,19,24 161:7
erythema 199:13 202:20 203:4,5
esq 3:5,9,14,19 3:19,20
essential 72:3
essentially 30:22 35:17
establish 105:15
estimate 98:11
euh 134:1
evaluate 70:6 76:3 144:16 152:5,11 163:11 172:17 173:4,15 196:10 197:8
evaluated 144:19 176:16
evaluating 72:4 76:16 77:1 84:2 84:15
evaluation 38:11 79:7 80:15 85:9,21 124:12 210:5
evening 62:3 215:17
events 228:13
evidence 158:4 215:20 224:14
evidenced 176:23
ex 122:6
exacerbate 184:13
exact 129:9
exactly 15:7 104:17
exam 76:22 81:5 203:7
examination 4:3,4 9:2 217:11 228:8 228:10
examine 14:12 90:1
examined 8:24
examiner 28:25 29:9 30:14 31:18 32:7,16 33:1 34:1 35:19 36:4,11,13
examiners 32:8
example 10:24 17:12 31:6,8 33:18,20 49:5 75:4 103:2 119:19 202:25
excel 37:14,15 87:14
excels 15:18
except 44:3 226:12
exchanged 204:22

excluded 35:4 156:18
excuse 29:3 92:17 112:8 143:2 165:6,7 166:19 174:23 182:16,22 198:11 209:5 214:10
exertion 210:6
exhibit 4:10,11 4:13,16,19,20 4:22,24 5:4,9 5:11,12,15,18 5:20,25 6:2,9 6:11,13,15,17 6:19,21,24 7:1 7:3,5 14:8,9 20:18,19 21:14 21:16 22:15,17 22:24 45:8,13 47:1,2,5 51:1 51:22,25 52:17 52:19,25 53:13 53:17,20,21 54:2,11,12 55:4 55:6,18,20 58:18,19 59:15 59:17,25 60:4 60:15,18,21 62:16,25 63:9 64:12,18 65:6 65:16 66:1,5,15 66:17,24,24 67:5,20 69:1 73:10 76:1 84:21 96:22 103:10 115:21 115:22 116:16 116:18,20,21 116:23 117:8,9 117:12 132:15 132:17,23,24 135:1,19 136:11 137:8,8 139:15,16,16 140:18,20 141:22 142:1 142:21,22 143:11,25 145:24 150:8 151:15 152:25 153:1,12,12 154:5,24 155:11 156:10 156:25 157:9 157:23 158:9 158:13 159:17 160:13 163:4 164:19 165:15 167:9,15 168:7 168:8 169:2 171:25 173:12 174:12 178:23 179:25 181:9 181:24 182:3 182:14,17,17 182:19,22 183:22 184:1 188:10,14 194:3 195:21 196:23 197:16 201:21,21,22 204:10,15 207:8 208:4,18 209:22 210:18 211:23,24 212:21,24 214:9
exhibits 64:11 215:19 218:22 221:25 222:1
exist 117:20
expectation 40:19,20
expenditures 112:11,22 113:10,21
expense 72:5 123:15 127:2 127:18,24 128:20,22 129:9 130:1 154:8 160:18 220:24
expenses 67:21 68:25 91:2 120:20 126:12 133:6,8 135:5 136:1,7,16,19 137:15 150:11 150:16 151:17 151:19 152:17 153:5 154:9 155:1,2,15 157:2 158:14 159:23 160:18 161:3 163:6,14 165:5 172:3 173:23,24 174:9,14 195:23 196:15 197:1,19,19 198:5 207:11 207:11,20,25 208:6,20,21 221:16 224:11 224:13,15
experience 72:25 91:2 97:2 111:13 147:3 176:24 177:11
expert 4:14,17 4:19,20,22,25 5:5,9,11,13,16 5:18,21,25 6:4 6:5,19 9:25 13:5 18:20,23 19:1,5,8,17 20:3,6,11,14 22:3,15 28:21 36:9 46:22 50:16 52:1 53:2 54:6,16,19 55:5 55:12 58:7,13 58:25 59:15

60:1,10,13,19 60:25 61:20 62:22,22 66:7 67:2,4 76:2 78:3 89:19 98:12 100:15 100:17 105:5 105:11 106:21 109:12 113:11 115:18 116:4,7 116:8,15,19 118:5 120:10 120:15 121:8 122:3,9 125:6 133:4 135:6 137:14 138:19 138:22 140:24 146:13 152:9 152:25 154:6 154:10 155:3,7 160:13,19 161:2 164:19 167:9 171:24 171:25 172:21 173:9,25 174:8 176:22,23 179:24 181:9 183:13 184:7 186:16 188:14 192:18 197:20 198:4 200:14 207:12,19 208:7,22 209:3 221:6

expertise 28:9 63:23 64:8 91:1 91:24 92:11 106:21 109:8 112:4 131:1

experts 98:15 99:23 135:8 136:14 213:7 221:8

explain 34:10 37:8 47:24 56:7 73:22 74:16 76:15,25 210:25

explained 126:17 128:7 184:12

exposure 186:5

express 50:24 109:17

extensive 188:24

extent 10:18 92:21,24 124:5 130:14 132:3 148:23 164:13 188:21

extraction 90:17 105:9

extractions 90:13 220:15 221:7,9 224:10

extracts 69:4 69:16

eyes 83:17

f

faan 7:4,6

facility 43:5 72:23,24 81:25 109:4

fact 35:2 60:24 186:6

factor 180:12 180:17 181:3,5 187:19 206:3

fair 11:5 12:4 71:14 77:20 100:3 102:8 105:16 123:1 151:9 154:22 159:10,11 172:22 200:25

fairness 121:12

false 29:20 30:13 31:6,16 31:17

familiar 193:21

fancher 154:4,5 154:7

fancy 23:20

far 107:24 137:17 144:22 144:23 196:2

february 15:10 21:6 134:12 170:20 192:4 213:20

federal 2:4 30:1 30:3

fee 21:9

feel 203:8

feeling 201:4

feels 202:2

feldman 179:4

fellow 23:14,18 23:23 25:14

felsher 6:18,20 183:14 184:2 184:12,25 187:2 188:6,15 191:11 192:5 193:2

felsher's 184:9 187:23 188:2 188:19 189:15 190:25 191:16

felt 19:9 50:22 201:5,7

fever 144:10,12 146:10 180:19

field 74:7

file 176:12

files 15:13,14 69:4

final 166:17

financial 223:4

financials 106:22 107:25

find 48:18 202:17

finding 154:19 175:19 192:7 203:7
findings 30:2 98:16 100:1 175:13 202:3 207:25 224:4
fine 16:22
fined 35:5
fines 34:7
finish 11:10
first 4:24 8:24 18:25 21:19 28:24 31:2 44:20 45:19 46:7 49:6 50:25 53:1 54:1 56:17 63:17 66:19 67:6,22 69:1 72:1 73:11 79:2 79:11,22 82:20 83:4,5,18,18,23 84:9,24 93:8 117:11 120:15 132:18 135:24 141:15 160:15 174:4 221:11 223:2,11
five 87:6,15,16 88:11,15,17 128:8,9 165:19 165:21 166:17
flagged 155:16 156:13
flat 49:25
flip 158:10
focused 153:17 165:23 166:10
follow 65:11 147:4 171:8 217:14
following 111:21 136:24 139:11 146:15 149:16 178:13 196:1
follows 8:25
footnote 47:9 47:10,15,19,20 47:21,22
footnotes 15:16
foregoing 228:5 228:9
forensic 112:25 113:3
forget 122:25
form 14:20 30:7 38:21 39:18 43:14 56:5,9 58:3 59:1 64:4 68:20 70:20 71:15 77:13,24 80:17 82:2 87:24 91:19 96:15 97:17 105:25 111:12 113:23 116:1 118:9,17 119:5,17 121:3 121:9 122:1 125:9 127:11 128:2,24 129:11 130:20 135:14 141:6 151:21 163:16 172:10 177:8 189:19 190:12 191:18 194:23 195:7 196:17 197:12 205:11 206:9,25 210:13 214:20 218:4,10 219:2 219:10,18 220:2,20 221:2 221:13,20 222:6,16,24 223:8,16,25 224:17
formal 202:23
formulate 22:4
formulates 200:16
formulating 139:22
forth 139:22 173:14 196:9
forward 100:16
found 18:7 35:18 85:5 115:3 120:17 126:9 144:19 146:2,11 149:13 158:3 175:8 176:6,21 179:13,15
foundation 70:20 71:16 77:25 87:25 91:20 96:16 97:18 106:1 107:22 109:6 111:12 113:24 141:7 168:20 189:20 190:13 191:19 194:2 194:23 195:8 196:18 197:12 205:12 206:10 207:1 214:21 218:4,11 219:2 219:10,18 220:2 221:2,20 223:8,16,25 224:17
four 90:8
framework 173:14 196:9
frank 151:13 151:16,19
frankly 172:20
fraud 29:11 34:4 36:13
frequently 74:6
front 17:1,8 45:6 56:5 62:19

83:16 142:12 188:16 194:6
full 9:4 48:13 48:25 49:24 50:25 67:6 73:11 75:25 83:23 84:9,24 92:16,16 96:22 116:18 117:16 117:22 120:1,5 120:7 137:10 151:4 215:10
fully 10:12,15 24:5 214:4
function 180:9 180:25
functioning 171:5
fundamental 121:11
funded 106:22
funds 29:22
further 63:23 139:19 157:1 160:24 184:15 211:15 224:20 228:12

g

g 8:1
gallstones 144:20 145:12 145:18 149:24 150:4
gao 110:25
gaps 29:23
gary 196:22,24
gastroenterol... 174:21 175:5
geisinger 23:7 43:1,8,19
general 34:3,6 70:1 111:1 144:16
generally 56:8 108:2 111:16 169:16
generated 105:15 192:3
generator 87:14 203:1
gentleman 19:6 19:13
gently 180:23
genuinely 76:6 76:11
georgetown 3:15
getting 35:1 185:6 190:4 203:10
giovanni 3:19 8:20
giovanni.anto... 3:22
give 12:13 33:18 50:23
given 11:15 146:4 150:16 170:16 186:6 213:21 215:22
gives 50:18 51:10
giving 35:14 39:2
glad 19:12
gleesing 160:14 160:14,16,16
go 47:5 63:23 126:7 182:13 185:11 186:9 187:10 188:18 189:7 207:17 210:18
goes 46:9 128:25 186:1 186:12
going 14:7 21:13,25 22:14 41:15 45:4 46:14,17 51:25 52:16 53:17 54:10 58:17 59:14 60:17 62:10,13 78:8 87:3 89:24 90:20 92:12 94:1 96:21 101:13,16 103:9 106:24 112:17 116:14 131:5,8 132:14 134:24 135:18 137:7 140:16 142:20 152:24 156:9 157:8 159:3,18 163:3 164:1,4,18,19 169:22 173:11 179:10,24 190:23 194:10 204:13 207:7 209:20 210:16 210:18,19 211:22 212:20 214:7,10 217:6 217:9 225:2
good 131:3
gosh 44:16
government 39:15 68:25 69:3 71:4 103:13 111:17 112:5 124:20 128:10 151:1 152:2 154:15 163:9 172:14 172:17 195:25 196:4 197:3 208:11 221:8
government's 173:4,15 196:10 197:8
graduating 26:12

graham 2:6 3:4 8:15
great 62:8
greg 61:20
gregory 63:9 63:17
group 3:13 8:16 13:4,15,17 19:7 90:25
guess 19:8 24:16 210:14
guidance 148:23 171:8 199:20
guide 29:22
guys 62:5

h

h 4:9
hackett 1:13 2:3 4:12,14,17 5:1,6,13,16,22 6:6 8:5,23 9:5 53:3 62:23 202:11,22 213:11 217:13 226:23 227:23
half 189:10
hand 51:9 228:13
hands 27:21,21
handwritten 4:21 95:6,9,13
happen 72:13 86:23 191:11 192:12
happening 187:9
happens 35:10 108:23 188:3
happy 62:6
hard 203:9,9
hartford 36:18 36:19 39:14,22 40:2,8,8,13,17 41:2 42:14,21
hartwell 16:23
hartwell's 50:7
hasan 5:11 6:25 55:5,13 115:18 118:6 120:9 197:21 198:4 198:17 201:17 205:9 207:13 207:19 208:7 208:22 209:4 209:24 210:11 211:9,15 214:24 217:24 224:5
hasan's 115:21 201:20 202:6 207:23 209:21 210:17
hcpcs 29:15
hcs 139:7
he'll 185:6,11 186:6,8,10
head 11:1 13:12 15:8 24:13 89:6 95:16
heading 64:19 65:6 67:21 89:25 100:17 137:11 144:4 150:25 197:17
headline 13:23
health 6:11,13 23:8 24:20 25:22 29:14 34:5 36:14 69:6 117:25 138:1 138:10,13 141:23 153:14
healthcare 25:22 36:19 39:15,23 40:3,9 40:13,17 41:2 157:14 224:11
hear 12:6 125:11 163:20
heard 9:11 13:19
heart 165:24 174:18 175:3 176:1,10,17 185:12
heidi 7:3,6 211:20 212:23
held 8:7 28:24 35:24 36:17
help 11:22 78:4 117:5
hereof 226:14
hesitate 116:12
hhs 35:13 43:6
high 23:21 26:12 185:9,11 185:17,24 187:9,12,15 188:4 190:2 191:12
higher 31:13 98:10 186:3
hill 90:2 163:4 163:5,10
hill's 163:14
hired 13:10,13 14:1
historical 85:18 149:9
historically 24:14
history 51:10 76:20 81:3 180:7 199:10 210:7
hmm 15:7
hoc 37:11 38:1
hodgkin's 28:14 55:1 97:10 167:22 168:15 183:1
hold 28:20 45:10

home 9:9
honestly 12:21 44:19
hooked 130:9
hope 144:12,16 144:18 145:6
hospital 108:16 109:4 146:8 157:24 165:24 199:7 210:3
hospitalization 134:13 179:3
hospitals 37:1 107:16,20 108:2,11
hour 21:11,12
hours 16:4 21:7
howard 152:22 152:24 153:1,2 153:22
huh 34:9 41:17 90:23 96:25 137:9 144:7 165:3 178:25 181:13 184:10 189:9
human 34:5
hunter 18:9 51:15
hunter's 51:8
hydrate 180:23
hyper 153:17
hyperlipidemia 153:18,20
hypertrophy 133:25

i

i.e. 97:8
icd 29:17 79:4,4 79:23,23 80:1,3 81:16,16,19,19 148:24
idea 95:17 193:23
identification 14:10 20:20 21:17 22:18 47:3 51:23 52:20 53:22 54:13 55:7,21 58:20 59:18 60:5,22 62:17 140:21 142:2 142:23 168:9 183:23 188:11 194:4 201:23 204:11 211:25 212:25
identified 29:10 30:25 38:1 42:9 43:6 46:5 52:2 60:15 63:13 67:12,18 79:2 81:4 85:8,20 90:12 99:22 112:13 136:25 157:2 158:20 160:1 161:20 162:9 165:18 165:20 174:21 175:5,10 179:21 193:3 205:5 206:13 221:16 222:3,8 223:11,12
identifies 50:7
identify 41:25 41:25 50:4 79:19 90:3 114:2 116:12 184:24
identifying 34:15,19 42:7 49:18 66:16 76:19 80:2 81:22
ids 31:10
illness 58:9 76:20 81:3 91:6 97:11 180:7 181:7 195:4 199:10
illnesses 22:7 27:23 194:14 194:15,16
illustration 155:25
imaging 76:23 81:6 139:5
immobile 206:2
immobility 206:2
immune 167:25 168:22 171:4
immunosupp... 168:17
impact 24:7
impacted 180:25
impaired 12:17
important 10:23 75:22
inaccurately 138:4,15,18 139:6 161:21
inadvertently 198:14
inappropriately 73:4
include 49:23 53:25 60:8 76:22 91:4 116:8 143:13 155:23 169:24 210:2
included 21:5 37:23 48:5 51:1 53:14 60:14 61:8,20 67:10 87:4 97:4,22 115:23 116:8 128:15 156:2 161:21 165:22 170:1 180:22 198:14 209:10 218:7 221:23

221:25
includes 56:8 103:5,6 174:13
including 22:3 27:22
inconsistencies 112:13 114:11 114:18,20 128:8,12 130:14 156:1 173:8
incorporate 120:21 121:21 126:13
incorporated 133:19
incorrect 17:13 45:23 46:5 47:16 50:17 52:9 111:3,4 155:23 204:2
incorrectly 18:11 136:19 136:20
increased 191:4
incurred 22:6 123:16 127:3 127:18,25 128:21,23 129:9 130:2 155:1
incurs 106:17
independent 57:15 124:12
independently 32:9 57:16,22 58:12 79:19 124:20 125:2 152:5,11 172:16 173:1 173:15 196:10 197:7 220:9
indicate 31:23 46:4 76:1 90:24 94:3 97:1 99:16 107:3 123:8 126:20 160:25 173:13 180:24 223:3
indicated 30:11 31:15 36:23 41:14 44:10 45:25 47:20 64:20 65:16 68:8 69:1 78:10 83:23 85:13 86:9 88:9,21 90:1,10 97:21 100:18 112:9 122:24 128:19 134:6,16 135:3 137:10,19 139:17 141:11 144:2 149:3,23 150:10 153:4 153:14 154:14 154:24 156:12 156:24 158:5 158:13 160:15 161:6,11 162:9 165:23 166:1,9 173:22 174:6 174:19 180:1,4 195:22 196:8 196:24 197:16 198:2 199:3 207:9 208:4,19 209:9 211:13 214:17 220:16 226:13
indicates 84:12 134:12 179:1 179:10 209:13 209:25
indicating 74:1 74:22 215:14
indication 50:23 153:20 209:15
indicator 73:14
individual 51:5
infection 145:8 146:3,7,11 147:6 166:11 166:21 167:7 169:5 171:11 179:6 185:7
infections 167:10 169:4 169:17,25
influ 179:5
influence 187:21
influenza 179:5 180:6 181:1
information 25:22 35:15 36:14 67:9 68:3 68:18 73:1 116:9 124:24 130:12 150:15 151:23 156:1 172:23 173:3 192:5 205:1 216:1 217:22
informational 112:24
initial 67:18
initially 156:14
initials 31:2
initiated 29:18 30:11
inject 200:13 200:21
injections 199:19
injuries 57:23 91:5 97:11 194:14,15
injury 20:10 56:21 57:2,12 57:17 180:21
input 139:19 211:16

insights 39:2
inspector 34:6 110:25
instances 90:18
institute 36:1 44:21
instruct 132:8
instructions 180:22 199:23
instructs 12:8
insurance 25:3 39:15 40:1 43:13 67:22,24 68:3,13 86:20 86:25 89:9 92:18 93:15 108:20 119:12
intakes 180:24
integrity 35:23 35:25 41:10,22 42:4 44:11,21
intend 12:19
interested 19:10 228:13
internal 86:5 86:14 87:3,17 87:21 88:10 153:16 179:4
international 29:16
interpret 24:15 147:16 148:17 148:20,24
interpretation 125:22 146:23 146:24 147:22 147:24 176:14 177:3 178:17 178:20 187:22 191:16
interpreting 58:6 146:16,19
interrupt 11:7 11:12
interview 96:8
intraoperative 145:6
introduce 8:12
introduction 94:2
investigated 31:16,17,23
investigation 34:2,11 35:9
investigations 29:18 30:12
investigator 34:23
invoices 4:13 19:21 20:18,23 21:1,3
involve 177:17
involved 35:13 210:4
involving 162:14
irrespective 202:23
issue 37:11 38:7 42:10 72:5 79:3 110:23
issued 67:23
issues 24:20 38:1 103:17 104:25 114:2 122:25 171:9 171:10 180:20 193:25 223:12
item 90:13
itemized 174:13
iv 146:4

j

jacqueline 155:8 156:10
january 4:23 5:21 6:1,4 15:9 59:16,22 60:1,9 60:20 61:2 62:22 64:2 117:13 125:7 139:21 140:12 140:17 141:11 177:12 204:8 204:14 205:17
jefferson 135:20 136:9
jenna 3:9 16:10
jfb 3:11
ji 5:9 54:16,20 115:17 116:11 118:6 120:9 133:3 135:6,25 136:13 137:14 137:20 139:18 143:15,21 147:10 149:23 153:4 154:10 155:3 156:4,4 156:17 157:2 157:11 158:13 159:22 160:19 161:2 162:9 165:4 166:14 167:17 170:10 173:25 174:8 174:19 176:16 176:19 177:20 178:11 181:10 182:25 224:5
ji's 115:20 132:15,23 135:12,16,19 138:9 139:12 143:25 146:24 147:23 152:25 153:11 154:18 155:10 157:9 157:13 158:9 158:23 159:16 160:5 162:4,17 164:18 165:16 168:2 170:4

172:21 174:11 174:15 175:13 175:19 178:24 179:8,22 180:1 182:13,16,23 183:9
jimmy 150:7,10 150:10
job 1:25 41:24
joey 3:20
joseph 160:13 160:14,16,16
judgment 76:5
july 138:2 157:24
june 133:23 140:2 141:16 141:25 142:6 142:11,16 149:24
juris 26:23
jurisdiction 26:21
justice 3:18 9:13 69:6 125:19,22 156:2

k

karen 158:11 159:9
keep 61:13 128:10 215:14
keeping 67:20 155:9 216:9
keller 59:13 173:20,22 174:14 182:4 182:24 184:16 188:8 189:24 191:2,10 192:15,19
keller's 185:1 187:2,24 195:13
kettering 153:14
kickback 31:25
kidd 195:20,22
kidd's 196:15
kidney 28:12 54:24 57:3 97:8 151:14 180:11 180:20,21,25 186:7
kidneys 181:6
kind 9:22 28:1 31:17
kinds 33:10
knee 157:17
know 12:1,23 13:22 15:9 19:11,22 24:12 33:22 39:20 43:12,19,25 70:21 89:3,12 95:11 98:13 108:10,14 111:23 120:11 128:21 143:21 144:6 185:5 189:13 192:14 200:25 207:2 213:12
knowledge 33:8 34:14 72:25 110:11 147:3
known 92:19 184:13
konstantopou... 3:19 4:3 8:17 8:18 9:3,12 14:11,25 17:18 17:19 20:21 21:18 22:19 30:10 39:6,21 43:18 46:10,19 46:20 47:4 51:24 52:7,24 53:20,23 54:14 55:8,22 56:10 58:11,21 59:4 59:19 60:3,6,23 61:12,16 62:7 62:15,18 64:9 65:5,12,14 68:23 70:14 71:7,23 77:15 77:19 78:2 80:21 82:5,19 88:3 91:25 92:7 94:19,25 95:18 96:7,20 97:20 98:23 99:3,15 101:9,18,19 102:5,19 104:16,23 106:4,10,23 107:15 108:1,9 108:17 109:1,9 109:15 110:13 111:5,15,22 112:3 114:3,12 114:25 116:6 116:22,24 117:7,10 118:12,20 119:6,24 121:6 121:10,19 122:8,15,23 123:7,25 124:10,18 125:1,10,25 126:6 127:16 128:17 129:4 129:14 130:22 131:2,10,21,25 132:6,11,19,21 135:17 140:22 141:9 142:3,8 142:24 143:9 143:23 145:22 147:9,21 148:1 148:9 149:1,22 150:6,23 151:25 152:10 152:15,21

159:2 163:19 163:22,25 164:6,17,24 165:1 168:10 170:2 171:13 172:12,25 173:10 176:7 177:15,25 178:5,10,22 182:19,21 183:20,24 186:14,23,25 187:6 188:12 189:5,6 190:7 190:22 192:13 193:20 194:5 194:19,24 195:11 196:21 197:14 202:5 204:12 205:15 205:21 206:14 207:5 210:15 212:1 213:1,24 214:6,22 215:6 215:13,21 216:12,13 218:3,10 219:1 219:9,17 220:1 220:19 221:1 221:12,19 222:5,15,23 223:7,15,24 224:16,23

konstantopous 216:23

l

l 3:20 7:1
lab 24:6 32:4,5 81:5
laboratory 138:14 161:20
labs 24:4,9,13 24:18,23 32:4,5 76:23
lack 215:9
lamacchia 3:14
language 125:18 219:14
laparoscopic 145:2
laramore 150:8 150:9,10,15 151:9
laramore's 150:25
large 70:13 228:3
largest 42:18
late 61:14
law 26:6 29:20 30:3,13
lawyer 26:21
lay 103:16 104:25
lead 114:18
leadership 8:16 13:4,15,17 38:18 39:1 90:25
leakage 41:25
leaving 154:10 155:3 160:20 173:25 197:21 207:13 208:7 208:22
led 34:1,10 100:13 183:7
lee 151:13 164:21
left 49:14
leg 201:4 218:22
legal 3:13 26:4 26:9 27:4 73:15 74:11,25 75:1,2 75:8,20 121:1 125:16
lejeune 1:4 8:6 9:14 13:5,20 14:1,5 22:7 54:21 55:2 100:12 125:19 125:22 189:17 194:1,17 226:4
length 189:1
lenses 191:23
lesions 162:15
leslie 3:14 16:10
letter 4:16 6:9 7:1,3 21:15,20 21:21 139:21 140:11,16,23 141:2,10,11 143:5 204:7,13 204:16,25 205:4,17 206:6 206:13,23 211:19 212:3 212:15
letters 14:23
leukemia 28:16 54:25 57:4 97:10
level 23:21 31:13 89:23,23
levels 89:12
license 34:7
licensed 27:11
lien 68:2 178:24
ligament 201:6
light 61:14 106:5 215:15
likelihood 187:9
likely 185:20
limitations 103:13
limited 68:18 72:12
line 78:18 90:13 99:14 168:13 185:5 194:21 202:6,8,9 210:20 213:3,4

214:8,11 215:8 227:3,6,9,12,15 227:18
linkages 86:10
list 4:25 5:5,12 5:15,20 6:3 44:24 52:18 53:1,12,15,19 53:24 54:5 57:19 59:25 60:7,15 61:5,9 61:19,24 62:21 63:4,15 64:24 65:18 72:12 73:5 78:18 79:24 80:7 95:7 132:18 169:23 215:16
listed 43:23 57:2,9 63:8 65:25 66:23 72:15 79:15 127:21 133:19 182:3
listing 80:10,12
lists 17:5,24 55:18
literature 81:13 113:20 114:6 124:2
litigation 1:4 9:14 13:6 18:20 54:21 55:2 75:22 89:5 94:8 103:14 109:23 110:9,19 194:1 213:8 223:23 226:5
litigations 8:7
little 71:6 119:22
live 44:6,6
llamacchia 3:16
llm 27:1
located 201:12
location 199:15 228:6
locations 93:14 161:21
long 16:1
longo 6:10 136:14 139:19 140:5,9,12,17 141:3 142:6,10 143:4,12
look 19:21 37:12,18 38:12 38:18 42:10 47:17 75:17 83:4,6 93:21 110:14,18 176:20
looked 25:5 37:5,6 81:18,19 83:17 111:6,8,9 143:21 176:19
looking 17:1 23:9 33:24 43:3 63:21 80:23 84:7,8 92:15 103:11 107:2 111:14 117:12 144:1 147:4 184:7 191:22 191:23,25 195:20 196:22 205:17 206:6 209:23
looks 210:25
lost 126:3
lot 19:16 26:15 37:25,25 38:14 72:12
lovenox 199:19 199:22 200:13 200:22
lunch 131:3
lung 166:10
lymphoma 28:14 55:1 97:10 153:21 166:1,11,21 167:22,23 168:15,15 170:5 175:10 177:5 179:18 183:1,2,4

m

m.d. 6:20,25 7:2 135:6 154:10 160:19 168:7 173:25 188:15
made 12:10 17:13 18:10 45:19 47:7 50:5 91:12,14 95:3 95:21 96:3,9,14 96:18 100:4 139:11 159:13 171:22 177:2 220:17 221:24 222:14 228:8 228:10
main 2:6 3:5
maintain 26:14 26:15
make 11:16 28:5 39:11 59:8 69:23 70:3 81:8 82:15 83:11 98:24 99:9,20 117:3 121:18 122:7 127:10 143:16 210:25 216:8 218:21 218:21,24 220:23
making 67:7 76:22 121:12 177:17,21,21

177:23 178:1 180:13
manage 38:19 38:24,25
managed 39:25
management 6:23 25:22 30:4 38:11 134:14 134:17 153:21 166:3,10,12,23 186:8 193:22 194:8 199:24
manager 32:13 36:18,23 37:4 37:23 38:20 40:12,16 41:11 41:22 42:5
managerial 32:11 107:10 107:17,20 108:3,3,12,12
manages 19:8
managing 38:16 84:2,16
manner 38:3
mantle 167:22 168:15
march 1:14 2:1 6:8 8:3 23:7 61:4,19,25 63:4 228:13
marjorie 1:13 2:2 4:12 5:1,6 5:22 6:6 8:5,23 9:5 53:2 62:23 202:22 213:10 226:23 227:23
mark 47:1 51:25 52:16 53:17 62:5 140:16 201:20 204:13
marked 14:8,9 17:9 20:19 21:16 22:17 47:2 51:22 52:19 53:21 54:11,12 55:6 55:20 58:19 59:17,25 60:4 60:18,21 62:16 62:25 140:20 142:1,21,22 168:8 183:22 183:25 188:10 188:13 194:3 201:22 204:10 211:23,24 212:21,24
market 105:16
marking 20:17 21:14 22:15 47:25 49:25 50:11 51:16 52:16 55:4,17 58:18 59:15 141:22 168:6
markings 18:2 18:4 46:24 47:6 47:8 48:1 50:5 52:2,14
master 26:4
master's 26:8
match 105:9
matched 82:14
material 59:25 220:22 222:2 222:10
materials 4:24 5:4,20 6:2 14:18 17:5,24 52:17 53:1,12 53:18,24 54:1,4 60:7,14 61:5,8 61:18,24 62:21 63:4,8,15 78:14 132:18 167:18 207:21 215:16 219:6
matt 3:25 8:10
matter 8:6 212:18 226:10
mca 105:15 107:10
mca's 107:5
mcilheny 196:22,24,24
md 5:10 6:16 6:18 7:4,6
mean 23:19 29:3 38:24 48:17,20 67:16 71:5 72:22 73:22 74:5,16 75:3,23 85:25 91:10 97:16 98:2,7 105:4 108:24 121:24 174:23 175:17 180:16 182:17 186:12
meaning 87:10 131:18
means 67:17 195:4,10
med 70:7
medial 199:14 202:21 203:5 203:11
mediation 18:17
medicaid 35:5 35:25 39:25 41:7 42:19 43:7 44:21 71:2
medical 20:8 22:3,11 27:12 27:14,24 28:9 28:21,25 29:11 29:13,19,23 30:12 32:22 33:8 34:4 36:8 38:10 40:12 41:11,19,23 42:7,14,20

64:17,23 65:17
67:8,21,24 68:1
68:9,12,25
69:12,13,17,18
69:22 70:2,7,17
70:23 71:13,18
71:19,20,25
72:2,5,10,13
74:4,7,12 75:17
76:4,16,18,21
78:10,11,12,17
79:1,13,18,21
80:20,22 82:8
82:12,21 83:1,3
83:4,5 85:14
87:22 89:10
90:11,17,18
91:2 92:18 93:5
94:7,11 100:15
100:21 105:23
106:6,14 109:3
109:18 110:7
110:15,19
112:11,22
113:10 114:22
115:6,13
123:11,16
126:23 127:3
129:22 130:2
133:6,8 134:11
135:4 136:1,7
136:16,18
137:12,15
138:13 141:4
143:13,16
146:13,19,23
146:25 147:5
147:16,23,24
148:6,7,10
149:4,17,19
150:11,16
151:11,17
152:17 153:5
154:8,25
155:14 157:2
158:14 159:23
160:17 161:3
161:14 162:10
163:5,8,14
165:5 170:7,12
172:2,5,6,8
173:23 174:9
174:14,18
175:3,18,20
176:1,5,6,10,11
176:14,17,21
177:4,17,21,22
178:2,6,12,17
178:21 180:13
181:11 184:18
193:15 195:18
195:19,22,23
195:24 196:15
196:25 197:18
197:23 198:5
199:5 200:5,7
202:22,23
205:9,18,24
206:8 207:10
207:20,24
208:5,14,20
209:6,12 210:3
218:7 220:23
221:8,16
224:14
medicals
159:18
medicare 39:23
39:24,25,25
40:7,10,16,23
41:7 42:15,16
43:7,8 71:1
117:25 119:13
119:13 120:2
120:21 123:12
124:7 126:13
126:24 129:23
163:10 197:4
222:21
medication
12:20 145:9
199:21 200:12
medicine
153:16 157:17
179:4
meet 15:22
meeting 16:1,6
17:11
meetings 16:6
meets 39:12
melanie 3:19
8:17 9:11
melanie.kons...
3:22
memorial
157:23
memorized
61:11
memory 12:16
mention 166:2
166:12,22
mentioned
14:18 17:21
18:3 31:22
157:11 166:7
190:9,16
mentioning
184:4
merely 129:2
154:18
met 34:20,21
40:19
metabolic
184:14
methodist
199:7
methodologic...
105:16
methodology
76:16 77:1,10
77:16,21 78:5
79:1 82:23 86:4
118:5 120:17
126:9 130:11
221:17

mfcu 34:21,23 35:10,11
michael 6:16 167:20 168:7
middle 31:2 116:25 117:16
mind 100:10
minimal 40:6 41:5 42:18
minus 136:23 137:22
minute 217:4
minutes 101:11
missing 23:13
mixed 203:10
modalities 211:2
modeling 107:6
molars 34:17
moment 92:13 142:4
monday 23:7
monitor 180:23
monitoring 27:23 210:8
month 38:15
morning 10:7 215:18
moskowitz 19:15
motor 10:5
mousser 151:13 151:16,19,24 152:1
mousser's 152:17
mouth 103:21 104:1,20
move 78:8 96:21 100:16 150:7 163:3 164:18
moving 28:23 73:10 112:7 133:17 135:18 139:15 151:13 152:22 153:11 154:4,22 155:7 158:11 160:12 167:8 171:24 173:20 174:4 178:23 181:8 195:20 196:22 197:15 207:6 208:3,17
mri 209:14 210:12 211:3 211:10 212:6 214:25 217:23 218:6
multiple 24:18 26:14 34:7,15 34:16 73:7 85:13 93:14,15 119:12 130:12 149:3 161:20 162:3 211:2
multitude 185:8
muscle 201:5

n

n 4:1,1 8:1
name 9:4,5,11 19:13 31:2,2 56:17
names 16:18,19
national 35:24
nature 10:3,9
necessarily 42:8 91:17 123:15 127:2 127:17,24 128:20 130:1
need 16:20 70:11 77:17 101:25 102:7 102:12,15,25 119:22 186:6,8 186:10
needed 32:22 32:25 35:15 38:2,15,18
needs 23:6
negotiate 92:9
neither 183:3 228:12
nephrologist 186:10
network 69:8 118:1 222:21
neuropathy 59:11 181:14
never 25:5 109:10,21 110:1,4 113:9 113:14,17 125:5 148:10 212:7
new 9:9 23:7 41:15 44:22 123:20 181:16
nhl 57:3,4 59:13 167:5 169:17 183:4,6 183:10 191:3 195:14,16
nine 16:3 134:1
nodding 10:25
non 28:14 55:1 97:10 167:22 168:15 183:1
nondoctor 178:2
nonfactor 187:21
noninstitutional 133:18
normal 171:5
north 1:1,15 2:6,7 3:5,6,10 8:7 9:16 13:7 228:3,20
northeastern 26:5

notable 199:12 202:20
notary 228:3 228:19
notated 17:12
notation 51:2
notations 221:23
note 33:20 76:14 133:22 146:15 148:25 156:14 172:13 175:25 200:15 214:1
noted 150:24 152:1 165:17 165:22 170:10 180:7 181:23 197:3 216:12
notes 45:8 47:20 81:24 95:6,9,14 148:17 170:4 178:17 222:2 222:12
notice 2:3 4:11 14:14
noticed 16:25 17:10
notified 181:23
novant 6:11,13 138:12 141:22
number 18:10 24:25 43:23 44:17 49:4,5 51:11 52:4,5,11 52:12 70:13 83:9,9 91:1 94:2 132:24,24 133:18 134:11 137:19 139:14 141:18,23,24 153:13 162:8 165:16 167:14 173:21 174:17 175:2 178:24 181:8 193:22 194:9 199:4 209:9,11
numbers 48:5,9 49:1 78:12,12 142:10 205:6
numeral 103:12 107:1 166:6
nurse 27:9,25 33:6,7,11
nurses 28:1 33:9
nw 3:20

o

o 4:1 8:1
o'leary 168:19
oag 34:21 35:12
oak 25:23
oath 10:6,10 131:11 164:8 226:16
object 14:20 30:7 38:21 39:18 43:14 56:9 58:3 59:1 64:4 68:20 70:19 71:15 77:13,24 80:17 82:2 87:24 91:19 97:17 104:4 116:1 119:5,16 122:1 125:9 128:24 129:11 130:20 132:2 141:6 188:20 189:19 194:2,21,22 195:7 196:17 197:10 205:11 206:9 210:13 214:20 218:10
objecting 99:13
objection 12:7 12:10 70:11,19 82:17 92:4 94:15,22 95:15 96:5,15 98:19 99:1 101:23 102:9 104:11 105:25 106:9 106:19 107:12 107:22 108:5 108:13,21 109:6,13 110:10,22 111:11,19,25 113:23 114:8 114:24 118:9 118:17 121:3,9 121:13 122:13 122:19 123:2 123:23 124:4 124:14,23 125:23 126:2 127:11 128:2 130:25 131:17 131:24 132:10 135:14 142:7 143:6,19 145:20 147:1 147:18,25 148:3,21 149:15 150:1 150:18 151:21 152:7,13,19 158:25 163:16 164:13 168:19 169:21 170:25 172:10,24 173:6 176:3 177:8,19 178:4 178:9,19 185:3 186:21 187:5 190:12 191:18 193:18 194:18 205:20 206:25 213:14 214:2 215:3,8 216:9 218:3 219:1,9

219:17 220:1 220:19 221:1 221:12,19 222:5,15,23 223:7,15,24 224:16
objections 162:13 228:7 228:10
objective 177:23
objectivity 147:4 148:8
obtain 26:1 36:6,7 44:15,20
obtained 26:8 26:11 36:12
obtaining 24:7
obviously 186:3 186:4
occur 72:10 86:19,25 87:2 108:20 169:17
occurred 169:19
october 4:25 5:5 6:3 22:16 22:21 45:5 46:2 46:23 50:16 53:2,14,19 54:6 54:20 55:24 62:21 64:12 66:13 81:9 89:19 103:10 115:17 123:22 138:23
offer 118:4 226:15
offering 27:4 27:14 100:11
office 29:1 34:3 34:3,6 73:3 153:15 174:20 175:4
offices 2:5
official 175:24
offset 110:8,16 110:21 113:21 114:7,10,15 119:7,21 120:19,22 121:21,23 122:17 123:14 124:9,20 126:11,14 127:1,17,24 128:19 129:8,8 129:25 130:16 130:19,24 152:2 196:1,4 208:11
offsets 105:15 111:7 112:12 112:23 113:11 114:4 118:6,14 118:24 119:2 122:17 151:1,2 152:3,6,9 154:15,17 163:10,11 172:14,17,19 172:20 173:5,5 173:16 196:11 197:5,8 213:7 224:6
oh 43:16 44:16 51:7 80:19 163:17 168:18 201:24
oig 35:13 43:6
okay 16:11 17:7 18:2 24:2 26:20 32:15 36:16 45:15,18,22 53:11 54:10 60:17 63:7 64:10 65:8 66:18,21 68:6 70:15 71:8,24 81:22 83:20 84:11,22 85:3 88:9,14,19 99:25 100:6 104:6 108:18 111:16 117:14 117:18 119:25 130:17 133:22 137:19 138:21 142:20 143:10 143:24 144:8 144:25 145:17 151:9 154:20 156:9 158:2 159:15 160:9 168:14 171:24 178:1 181:20 184:22 186:19 188:18 189:15 195:3 199:3 201:20 202:15 203:21 204:3 207:6 210:16 211:13 212:20 214:12 224:20
once 11:14 15:25 156:4,4 216:17
ones 119:21
onslow 157:23
op 33:20
open 61:14 215:15 216:10
operate 72:3
operative 81:24
opine 94:18
opined 109:10 113:9 190:19 217:25
opining 189:23 206:19
opinion 4:19,20 4:22 5:9,18,25 35:6 46:23 52:1 59:16 60:10,13 60:19,25 64:3 67:2 97:5,23

100:12 109:18 118:4 121:2,7 123:21 124:11 125:6,7,21 126:1,3,4,16 127:5,10 135:12,16 136:15 138:9 150:14 154:6 168:2,24 175:25 176:8 176:22,22 177:16,24 178:15,16 187:19 192:7 192:21 195:17 195:18,19 199:1 200:16 200:18,20 202:11 205:13 212:2 219:21
opinions 22:5 22:11 27:4,15 45:19 133:6 139:22 159:8 216:14
opportunity 11:15 20:2 214:4
ops 134:1
oral 145:9
oranges 190:6 190:21 191:14
order 6:21,23 77:11,18 193:22 194:6,8 195:5 224:24
ordered 24:5,6 24:14
ordering 24:18 24:22
orders 194:1
organization 32:2 71:21
organized 78:14
original 49:20 50:15 52:10 66:11 75:12
originally 182:2
orthodontia 31:5,9
outcome 19:25
outputs 180:24
outside 106:20 110:19
overall 214:12
overcharged 158:18
overseeing 32:6
oversight 111:18,24 112:5
overstated 161:14 162:5
own 43:13 124:12 129:18 130:5,7 195:18
oxygen 210:8

p

p 8:1
p.a. 3:9
p.m. 131:6,7,7 131:9 164:2,3,3 164:5 217:7,8,8 217:10 225:4,6
pace 11:4,4
page 4:2,10 18:7 46:7 47:9 48:2,9,15 49:1 49:4,5,7,7,11 49:24,25 50:1,6 50:7 51:1,2,7,9 51:11,15,16 52:4 64:18 65:4 65:5,10,15 67:4 67:20 68:7,24 71:24 73:10 76:1 78:8,24,25 83:22 84:10,20 85:13 89:25 90:11,20 92:13 92:14 94:1 96:22 100:16 103:11 105:11 106:24,24 112:7,8,17 116:22 117:15 120:3,14 123:8 126:8,21 133:2 133:14,15,18 134:10 135:2 135:21,22 136:12 137:8 139:15 144:1,2 150:9,24 151:14,15 152:23 153:1 153:11 154:6 154:21,23 155:7,11,12 156:10,25 157:9,22 158:10,13 159:17,20 160:13 162:8 163:4 164:20 164:22,24 165:15 167:11 167:15 168:13 172:1,13 173:12,20 174:4,12,13 178:23 179:11 179:25 181:8 182:14,16,20 182:23 188:18 189:7,10,11,11 190:24,25 192:8 196:23 197:16 199:4 202:6,9 207:8 208:4,18

209:21,24 210:19 213:3 214:8,11 222:13 227:3,6 227:9,12,15,18
pages 17:11 48:3 50:8,12,12 50:21,21 167:25 168:12 170:19 184:8 184:22,25 186:16,19,22 189:1,16
paid 92:19 93:9 93:20,23 124:7 124:22 156:15 220:11
pain 144:11,17 144:19 146:10 210:6
pains 218:23
palpable 199:13 202:20 203:3
palpate 203:7
pancreatic 162:15
panel 180:8
paper 23:24,25 24:3,10,11,24 25:10
paragraph 48:14,24,25 49:14,24 50:10 50:25 51:8,14 67:6,6 68:7 72:1 73:11 75:25 78:9,25 83:24 84:6,9,23 84:24 90:21 96:23 107:1,3 112:18 116:18 117:1,16 120:16 137:11 150:25 156:11 156:25 158:12 160:15,25 173:13 174:4 179:25 194:11 198:3 202:18 209:2
paraphrased 48:2
paraphrasing 48:10 49:3 50:3
parents 35:1
parkinson's 28:18 55:14 57:4 97:9 199:20 209:17 210:2 214:14 214:18,25 215:1 217:25
part 32:15 42:18 47:14 55:24 88:7 92:10 177:13 185:8 187:14 200:10,19 201:1 203:6,15 221:5
particular 79:13
particularly 94:6 167:24
parties 135:8
party 228:12
pas 38:6
pass 216:25
passing 13:21 15:17
past 45:3 76:16 91:2 109:11 113:11 117:24 136:7 150:16 151:6,18 172:7 195:23,24 197:23 207:24 220:23 224:14
pathology 138:4
patience 216:24
patient 24:7,19 29:25 32:2 39:10 68:13 73:6 75:16 78:14 86:17 91:4,11,13,16 92:21 94:20 95:14 124:21 130:18 146:2 147:6 162:20 167:22 170:15 171:9 178:15 180:18 188:3 191:12 192:1 197:23 200:12 210:6 220:5,11 220:16,24
patient's 24:20 74:1 86:2 171:4 175:18,20 176:12 177:22 183:4 201:4 203:13,13
patients 27:12 27:22 34:16,24 34:25 38:12 87:22 91:12 92:1,9 93:15,15 93:16 95:7,8,10 106:18 119:11 124:6 169:17 184:15 187:11 220:10
pay 86:20,25 89:9 92:2 93:16 93:16,17 101:4 108:20
payer 69:25 108:23
payers 41:8 71:1 86:23 87:2 223:23
payment 19:24 69:4 95:2 96:3

96:9,14,18 123:10 126:22 129:21 198:21
payments 29:22 67:23 68:13 69:2 76:16 77:1 78:10 79:1 89:25 91:4,11 91:12,13,14,16 92:21 93:1,14 94:21 95:3,6,14 95:21 109:11 109:18 110:8 110:15,20 117:24 129:2 130:18 151:6 162:21 197:23 220:5,11,16,25
pediatric 34:16
peer 23:25 109:17
penalty 226:7,8
pending 9:15 13:6 228:13
penn 43:7
people 11:22 14:24 19:7,17 185:17
people's 187:16
percent 42:17 92:2 98:8,15,17 98:24 99:7,21
percentage 37:22
percentages 24:21
perfect 19:9
perform 37:9 40:22,25 76:2 86:15 87:21 89:11 99:19 100:3
performed 32:23 83:24,25 84:13,14 85:4 134:15 139:5 161:13 209:12
performing 37:23 38:10
perioperative 157:17
perjury 226:7,8
permanent 34:18
permanently 35:4
permitted 220:23
person 30:23 74:18 178:12
personal 10:1,2 10:3 20:10
peterson 18:12 52:6,9 197:15 197:17,17 206:15 218:13 218:25
peterson's 206:7,24
ph.d. 6:20 7:2 188:15
pharmacy 162:24,25
phases 213:8
phd 6:18
phrase 91:10 93:9
phrased 103:25 104:18
phrases 48:2
physical 203:7 223:22
physician 28:1 30:23 38:9 162:16 179:4 181:4 211:16
physician's 175:25 200:15
physicians 38:6 38:17,19,25 148:5
piece 23:13
place 73:5 122:21
plaintiff 6:22 20:12 56:18 57:8,13,18 59:12 64:22,24 64:25 65:17 79:14,15 88:18 90:25 97:8 98:1 99:22 123:11 123:16 126:23 127:3,19,25 128:21,23 129:10,22 130:2 133:8 135:25 136:17 136:18 150:7 153:2,4 155:9 155:14 158:11 158:14 159:22 160:14 162:13 164:21 165:4 167:19 174:19 175:3 179:1 180:5 188:7 194:7 195:25 199:17,19 209:13 217:17 217:21 218:13 218:25 223:5
plaintiff's 22:6 93:24 138:3 158:15 162:4 180:11 181:11 198:5 199:5,9 199:12,15,24 200:20 202:19 209:16
plaintiffs 3:3 5:12,15 8:15 13:4,16 15:4,23 16:2 22:4 46:22

54:24,25,25 55:1,14,19 62:19 63:10,19 64:14 65:19 66:2 68:10,11 68:19 69:20 70:3 78:13 79:25 80:8 88:5 88:15 89:8 90:2 90:8 91:4,14 92:20 93:6 94:11,14 95:2 95:20,25 96:3,8 96:13 100:13 105:22 114:21 118:7,16 119:1 119:10 133:4 136:14 137:1 151:15 157:1 182:2 194:12 223:20 224:12
plan 37:11 43:4 76:24 81:6 180:21,22
plans 39:16
play 75:2
please 8:12 9:4 9:6 11:3,10 12:1,9,24 14:12 20:22 34:10 43:25 46:4 47:5 47:24 50:4 56:7 72:16 73:22 76:15,25 77:5 104:6,21 106:3 112:2 132:23 158:9 184:24 189:7,12 207:20
plg 4:14,17 5:13 5:16
plus 136:22,22 137:22
pneumonia 166:11 169:4 170:16 171:12 179:5
pocket 67:24 91:14 93:16
point 21:25 33:25 45:4 64:11 89:24 92:12 103:9 116:14 132:14 132:22 134:24 135:24 143:24 143:25 152:25 153:13 157:8 159:3 164:20 173:11 190:23 194:10 209:20 210:16 213:2 214:7,10
pointing 92:14 117:15
points 76:21 81:3 84:9 85:12 153:4 155:13 158:12 159:21 165:2
policies 29:24
population 41:6 42:16
portion 210:21 210:22
portions 213:25
posed 213:4
position 23:7 28:24 32:11,17 32:25 36:17 41:15 122:11 124:3 147:16 187:23 203:16 211:10 214:13 214:24
possession 69:19,23 71:14
possibilities 73:7,8
possibility 71:3
possible 83:13 111:10 187:4 190:4 224:25
possibly 224:24
post 165:23
potential 29:10 43:6
potentially 68:1 90:3
practice 27:25 30:21,24
practitioner 30:21
preface 155:24
prefer 78:6 93:16
preparation 15:20 16:12
prepare 15:11 15:23 66:13
prepared 18:20 20:14 55:5
preparing 54:1 60:9
prescribed 147:8
present 3:24 16:5,8 41:10 75:19 76:20 81:3 85:14 94:17,20 149:4 180:7 199:10
presented 25:6 178:21 180:5 192:24 193:6 193:14
presume 143:22
previous 44:25
previously 14:17 123:21 147:8 149:2
primal 165:17
primarily 101:4 133:25

219:14
primary 38:16 70:25 74:21,23 85:16 86:1 108:24 119:13 144:10,14 145:10 146:7 149:6,14 165:19
principles 71:25
prior 15:7 18:19,22 44:18 45:3 52:2 109:22 134:1 140:13 182:1 189:3 199:21 217:4
private 25:2 67:21,23 68:3 68:12 71:5 72:10 78:9 79:1 86:19,19,20,25 89:9 101:4 108:20 109:4 223:23
privilege 99:14
privy 95:12 108:8 111:21 116:3 176:19
probably 41:5 202:2
problem 43:17 73:5 103:21 119:15 185:21 190:15 200:21
problems 185:14,22
procedural 29:14 33:13 79:5,6,12 80:14 80:24 81:23 82:7
procedure 2:4 32:23 33:17,19 33:21 37:21 82:13
procedures 29:15,24
proceeding 35:9
process 107:6 180:13 221:18
processes 103:14 184:18 184:18
produced 20:24 69:5 70:8 176:25
producing 53:6
product 132:4
profession 26:17
professional 23:17 36:8,8 37:6,6 43:5 44:11,11 73:2 76:5 97:5,23 100:19 228:3 228:19
program 29:12 35:5,23 36:17 36:23 37:4,23 38:20 40:12,16 44:11 123:11 126:23 129:22 155:2
proof 120:19 123:15 125:15 126:11 127:2 127:18,24 128:20,22 130:1
propagate 107:5
proper 72:8 199:18
prosecute 35:18
prosecuted 34:22
prosecution 34:2,11
prostate 134:14 134:15 135:12
prosthetic 133:25
protocol 6:22 194:8
protocols 94:5 94:5
proved 129:8
provide 15:3,6 22:10 27:11 48:3,10 121:7 148:23 192:7 192:25
provided 15:5 15:18 46:22 54:5 56:3,4 57:19 58:4 61:6 61:19,24 62:2,3 62:20 63:4 64:22,23 65:16 65:25 66:2,7,12 66:24 67:1 68:18 70:3 73:19 78:13 79:24 80:6,7 106:8 120:20 121:16 123:10 123:17,21 124:17 126:12 126:22 127:4 129:21 130:3 150:21 151:22 152:20 156:2 163:7 167:17 169:24 170:13 171:8 172:4,11 175:16 182:2 196:20 199:20 203:22 211:19 212:13 215:17 215:18 216:18

223:5
providence 95:12 174:18 175:2 176:1,9 176:17
provider 30:18 30:20 31:1,10 31:13,19 73:3 74:19 76:13,21 78:14 80:11 81:4 82:13 89:2 91:23 146:17 147:5 149:17 178:13,14 180:7 199:11 200:11 201:3 202:18
provider's 146:15 180:13
providers 24:5 24:14,22,25 25:3 29:19,23 30:12 34:2 36:25 38:2,4 39:5,7 40:19 73:24 86:11 89:1,4 93:13 116:12 162:3
provides 27:21 39:16 56:12
providing 23:21 205:6
pt 144:12
public 34:14 228:3,19
publication 44:25
publications 25:19 109:17 122:11
publicly 25:7
published 25:6 45:2
pull 37:18 83:15 130:12
pulled 83:8,10 103:3 128:11
pulling 102:16 103:1
pulse 203:1
purport 28:4
purpose 25:13 40:15 84:1,15 105:18 111:23 112:5 181:15
purposes 123:14 127:1 129:25 133:5 136:15 162:17
pursuant 2:3,4
put 23:14 24:16 47:13 104:19
putting 103:20 104:1

q

quadrant 144:17
qualifications 19:9 97:3
quality 29:2 86:5,14 87:3,21 88:10
quantification 112:25
quantified 94:8 150:11 151:16 154:8,25 160:17 163:5 172:2 173:22 195:22 196:25 196:25 197:18 197:22 207:10 208:5,19
quantifies 68:12
quantify 91:2 92:19
quarter 189:11
query 37:13
question 10:13 10:15,18,24 11:11,25 12:3,9 12:9,25 33:20 33:21 40:14 57:21 58:7 66:10 70:1,15 71:6,17 77:5 82:17 83:14 94:24 100:9 101:6,8 102:11 103:20,24 104:4,5,7,15,19 104:22 110:24 111:2 112:2 114:4,14 116:13 118:21 119:15 126:4 127:13,23 129:13,17 132:12 164:14 168:14 169:10 192:4 202:15 206:5,21 213:4 213:10 214:3 214:12
questionable 114:10
questioned 181:10
questioning 99:14 112:16 183:9 194:22 215:9
questions 33:5 33:10 45:12 103:22,25 131:23 132:9 189:3,20 213:23 215:23 216:5,25 217:14,15,17 220:4 224:3,21

qui 20:9
quite 26:15 37:25 38:14 43:15 129:17 172:20
quote 48:14 49:17

r

r 8:1
racine 3:10
radiologic 209:16
raised 139:18 162:13 167:17 211:15
random 37:14 37:15,19 86:16 87:6,13,13 88:11
range 141:24
rather 10:25
ratios 24:21
ravi 134:15
rawling's 178:24
rcc 153:22
reach 20:9
reached 136:24
reaching 23:20
read 11:15 13:24 14:3 22:8 65:3,22 67:13 68:4,15 69:9 72:6 73:16 74:16 76:8 78:22 79:9 83:10,13 84:5 84:19 85:23 91:8,11 92:23 93:8 94:9 97:13 100:25 105:19 106:5 107:8 113:1 118:2 120:24 123:18 125:18 129:19 133:13 134:4 134:18 137:5 137:17,24 138:7 139:9 141:19 144:22 144:23 145:15 153:9 155:5,20 156:22 157:6 158:21,22 160:3,22 165:12,13 168:4 173:17 173:18 175:11 179:8,22 180:14 181:3 184:20 189:12 191:7,8 194:20 194:25 195:2 196:2 197:25 200:2 203:19 207:15 208:24 209:18 210:9 211:7 213:13 216:19 226:9 226:11
reading 29:10 72:1 129:18 145:21
reads 157:16
ready 216:17
really 14:2 24:19 43:11 63:22 64:7 77:17 119:18
reask 65:11
reason 12:12,16 52:5 85:8,20 86:2 144:15 145:10 146:7 205:8 218:6 227:5,8,11,14 227:17,20
reasonable 11:3 97:6,15,24 97:24 98:3,4 100:19
reasonably 79:6 80:14,25
reasons 168:1 202:16
rebut 60:19
rebuttal 4:22 5:18,21,25 6:5 17:5,23 18:9 52:1 58:24 59:15 60:1,9,13 60:19,25 62:23 64:3 67:2 116:15,19 117:12 118:5 120:15 125:6 134:25 140:24 150:8 154:6,24 160:12 167:9 171:25 184:7 195:21 208:18 224:14
recall 13:11 25:4,9 41:3 44:16,17,19,22 53:6 61:23 96:1 131:11 149:10 149:11 164:7 216:2 217:18 217:22 218:22 220:6,12 224:6
receipts 95:2
receive 93:14
received 185:17 189:24 191:10 192:1 210:1 217:23 221:7
receives 210:1
recently 20:9
recess 46:16 62:12 101:15 131:7 164:3 217:8
recollection 16:21 17:3 78:4 145:25

recommended 24:16 30:5
reconcile 92:19
reconciliation 117:23 120:1,6 151:5
record 8:3 10:23 11:5,9 32:23 39:10 46:15,18 61:13 62:11,14 64:17 71:19,20 75:17 76:18,19 78:12 78:21 79:18,21 80:3,20,22 82:12,18,21,21 83:1,15 90:19 101:14,17 131:6,9 147:5 148:6 149:17 149:19 164:2,5 170:8,12 175:1 175:18 176:5,6 176:12,17,21 177:6,22 178:15,21 200:7 205:19 213:16 214:2 215:14 216:9 217:7,10 225:3 228:9
recorded 228:8
records 6:11,13 20:8,16 21:11 22:3,4 34:20 40:23,24 41:1 42:7 64:23 65:17 67:8,10 68:2,2,9 69:13 69:17,19,22 70:2,7,17,23 71:13 76:4 79:13 82:1,8,9 83:4,5,6,15,16 86:6,20,25 87:22 88:12 89:9 90:12,17 90:19 93:5 94:12 95:20,24 98:5 101:4 105:23 106:7 106:14 109:22 114:22 115:6 115:14 118:13 118:23 119:4,9 119:14,20 120:3,8,12 124:13,17 137:12 141:15 141:23 142:5 142:10,12,15 142:18,25 143:4,8,11 146:20,23,25 147:17,23,24 148:7 151:11 151:19 152:17 158:16 160:10 161:25 163:8 172:8 175:20 176:14 177:4 178:7 193:16 198:22 205:9 205:24 206:8 206:12,24 207:4 208:15 220:10,15 221:9 222:20 223:21,22
recouping 29:21
recovery 29:22
redirect 217:5
reduce 159:14 198:5 199:21
reducing 135:4
refer 24:10 45:13 82:20 94:1 145:23 154:5,23 155:10
reference 49:6 51:15 81:12 115:20 126:4
referenced 24:23 75:20 143:12 180:21
referencing 49:5
referred 20:11 133:24 176:4
referring 32:1 32:5 70:12 101:3 135:2 139:25 150:8 157:22 166:18 166:25 173:3 193:23 203:2 204:7,17 223:21
reflect 135:7 138:6 139:1 157:4 162:21
refresh 16:20 78:4 145:24
refreshing 17:2
regard 55:14 67:23 69:2,21 69:25
regarding 6:21 8:6 14:5 22:5 33:21 35:9 63:10 95:14 105:1 112:4 116:9 125:15 135:12 136:6 136:11 141:24 143:17 151:23 160:6 176:9 177:4 178:6 188:3,7 194:7 218:13,24 219:15 220:5 220:24 223:19 224:3,5

regional 134:11 138:13 139:7
registered 27:25 33:9 36:13 228:2,19
regulations 30:2 39:2
reimbursement 73:13
reimburseme... 69:2
reiterate 170:13 171:7
related 22:7 31:4 33:13,15 33:16,19 49:25 54:23 56:13,24 57:12,23 65:1 65:20 67:10,18 68:1,10 74:22 76:6,11,23 79:23 80:6,12 81:22,25 85:9 85:22 90:3 91:4 92:20 93:23 94:13 97:5,7,23 97:25 113:6 118:7,15,25 119:7 122:4,5 133:12 134:7 134:21 135:9 136:3 137:4 138:2 140:1 144:9 145:11 145:12,13 148:14 149:24 153:8,23,24 155:17,18 156:19 157:5 157:18 158:6 160:1 162:11 165:10,20 167:4,6 169:3 170:14,15 171:8,9,10 174:21 175:6,8 175:9,14 176:25 177:5 177:10,14 179:5,6,15,16 179:17,18,19 181:14 183:2,4 183:10 186:5 192:6 200:14 205:25 210:22 211:4 214:14 214:18 215:1,4 217:25 218:15 219:8 221:17 222:20 224:4 224:11,12 228:12
relatedness 67:7,15 73:15 74:17,25 75:6 75:14 94:7 117:23 120:2,6 139:20 151:5 162:14 168:2 181:10 211:17 219:21 221:10
relates 1:5 76:19
relevant 199:25
reliability 72:4 94:6 103:17 105:2,4 109:11 113:10 223:12
reliable 73:14 101:21 112:10 112:21 120:18 126:9 224:11
reliance 220:22
relied 55:25 64:19 65:7 78:11 117:21 128:12 139:21 140:24
rely 60:8 105:6 105:10 127:10 175:24
remaining 91:3 175:8 179:14
remember 16:18 216:3
remission 166:2,11,22 170:5
remote 3:1
removed 52:12 139:8 154:1 156:6,8
removing 75:14 75:15
renal 180:8 186:9
render 22:5
rendered 84:1 84:15 85:5 100:23
rendering 53:13
repeated 190:3 191:13
rephrase 57:25 66:10 70:15 82:4 102:12 103:19 104:6 104:14,21 110:17 112:1 119:8 129:13 130:21
replacement 157:18
report 4:19,20 4:23 5:1,6,9,11 5:19,22,25 6:4 6:5,19 17:4,4 18:10,20 22:15 22:21 25:10 42:12 45:5,6,6 45:7,12,16,20 45:23 46:2,23 47:6,25 48:11 50:5,16 51:18 51:20 52:1,3,15

53:2,14,19 54:2
54:6,16,19,20
54:23 55:5,13
55:13,24 58:25
59:16,20 60:1
60:10,14,20,25
62:22,23 63:22
64:3,12 66:7,13
66:20 67:2,4
71:25 73:20
78:3 81:9 83:22
85:10 89:19
90:20 92:13,15
93:3 97:21 98:2
98:12 100:17
103:10 104:24
105:11 106:25
112:7 115:16
115:21,21
116:8,15,19
117:12,19
118:5 120:3,15
120:23 121:23
122:9 123:22
124:3 125:7
126:15 129:18
130:5,7 132:16
132:23 133:16
133:17 134:10
135:1,19 137:7
138:19,22
139:12,23
140:25 143:25
150:9 151:14
152:25 153:12
154:6,18,24
155:8,10 156:9
157:9,13
158:10 159:16
160:13 162:12
163:4 164:19
165:16,16
166:15,18,25
167:9,15
168:12,25
169:7 170:4,10
171:25 172:21
173:12,21
174:11,15
178:24 179:8
179:11,22,24
181:9 182:13
182:17,23
183:9 184:8,12
184:20 186:17
188:7,15,19
190:24,25
191:1,23 192:3
192:8,17
195:21 196:23
197:16 200:6,8
201:15 202:17
203:22 204:1
207:8 208:10
208:18 209:21
210:12 211:14
218:8,14
221:11 222:4
223:2,12 224:4
224:14
reported 1:23
133:8 135:25
136:18 138:16
138:18 139:6
153:4 155:14
156:5 158:14
159:23 165:5
reporter 8:9
10:21 11:5,9
183:19 225:1
228:1,3,19
reporting 107:4
reports 15:15
20:15 25:17
58:13 61:20
63:9,18,21 64:1
110:25,25
111:1 114:1
115:18,23
116:5,8 120:10
140:13 169:12
171:22,25
191:22 205:19
215:18 221:6
221:24
represent 9:13
79:7 80:14,25
102:2 193:10
representation
112:11,22
representative
86:6 87:16
representativ...
87:9
represented
85:17 149:8,8
representing
3:3,17 105:7
represents
102:1
request 14:22
144:15
require 88:23
required 15:8
35:21 36:3,5
37:12,16 44:4
requirement
44:2,13
requirements
130:13
requires 10:12
10:14 88:22
research 23:24
23:25 24:3,23
resection
134:15
reserve 61:13
reserved 225:8
resource 107:4
respect 22:6
68:11 100:20
117:21 139:17
159:8 167:16
168:2 211:14
respiratory
166:20

respond 132:8
response 20:24 54:19 55:12 212:14
responsible 51:5
responsive 15:3 146:3
rest 176:25
restorations 34:17
result 97:6,25
resulting 34:7
results 24:6,15 134:2
resume 23:5,10 41:9
retained 13:4 13:19 90:22,24
revealed 180:8
revenue 36:18 41:10,22,25 42:4
review 15:14 16:16 20:22 21:11 22:3 37:19 38:5 40:7 40:11 41:1 42:6 47:18 63:17 64:1,16,21 68:1 70:16 77:6,8,11 78:6 79:18 82:20 83:3,5,15 86:5,14 87:4,17 87:21 88:10 89:9 94:18 95:1 95:19,24 96:2 97:2 100:21 101:21 102:7 102:13 103:5 103:13 105:21 106:6 110:24 114:22 115:13 115:24 117:23 118:13,23 119:3 120:2,7,8 135:3 136:25 137:1,12 140:12 142:4 150:22 151:5 151:18 156:16 157:1 158:15 161:1 169:6,12 172:7,23 174:7 174:13 175:20 178:6 183:15 189:2 192:17 198:3 199:5 207:18 208:14 209:2,11 213:18,22 214:5 215:10 220:9,14 222:20 223:3
reviewed 15:13 15:15,15,16,17 16:12,23 23:25 24:11 29:25 38:2 40:4,10 54:1 55:9 61:18 63:20,24 64:6 67:8 69:23 70:23 71:19 78:5,18 79:17 79:20 80:3,20 80:22 81:2 82:8 82:11,24,25 83:7,19 88:16 89:4,8 93:17 94:11 95:22,23 99:11,24 100:2 100:4,8 101:2 106:13 109:17 115:5 116:4,5,9 118:25 119:14 119:20 120:9 120:11,12,12 133:7,9 136:17 140:24 141:3 141:12 142:11 142:15,19 143:4,15 149:19,20 151:10 152:16 156:11,12 163:13 165:8 171:21 173:9 176:20 184:4 193:16 196:14 200:4,7 202:10 205:1,5,9,18,24 206:7,12,24 207:3 212:14 217:23 219:6 221:7 223:23
reviewing 20:8 20:16 36:22 38:17 40:15 70:17 76:18 78:3 83:2 88:10 98:5 102:21,24 148:7 159:17 170:4 171:20 177:22 192:22
revise 157:11
revised 139:1
revision 29:17
revocations 34:8
rhia 5:2,7,23 6:6 44:7 53:3 62:24
richard 7:1 208:19
ridge 3:14
right 29:7 51:9 52:13 61:13 85:12 88:17 101:11 132:14 137:20 144:17 150:9 159:3 168:17 169:20 194:7 202:18 209:23 219:16
rights 194:13

risk 36:24 185:6 191:4 206:3
road 9:9
robert 195:20 195:21 208:3,5
rocephin 146:4 146:5
role 30:14 31:18 32:15 33:25 35:19 36:23 38:20 40:12,16 41:1 41:21 42:25,25 43:2
roman 103:12 106:25 166:6
ronald 164:21
rope 203:8
rothchild 207:6 207:9
rothchild's 207:24
rough 224:24
routine 158:2
rpr 1:23
rpt 134:1
rule 76:1
rules 2:4
run 37:13
running 107:24
russo 63:9
russo's 61:20 63:18

s

s 4:1,9 8:1
sacred 174:18 175:2 176:1,10 176:17
salisbury 1:15 2:7 3:6 8:7
sample 37:14 37:15,19 86:16 87:5,6,9,11,13 87:13,19 88:11 88:24
save 226:12
saw 20:24 32:3 42:23
saying 75:21 106:13 115:5 121:17,20 122:4 123:4 128:13 155:24 187:4,8 193:7
says 48:14 51:2 51:9 56:17,20 56:24 120:5 133:16,22 151:3 202:8
scans 138:15
schedule 21:9
school 26:5,13 148:10
schwarz 7:4,6 211:20 212:7 212:17,23 213:5 214:16 217:24
schwarz's 212:3 214:8
science 25:21 26:2
scope 22:1,1,11 64:13,15 89:16 89:20 91:24 96:11,19 108:7
scott 173:21,22
screen 83:8,18 83:18
screening 158:3
sealant 35:2
second 33:25 48:13 56:20 75:25 90:21 92:16,16 96:22 107:1,2,2 116:18,25 117:16 137:10 150:25 158:12 160:24,25 166:6 173:12 180:4 194:11
secondary 70:25 74:21,23 84:3,17 90:5 100:24 119:13 169:3 186:4
section 22:1,2 68:25 92:15,16 103:12,16 104:24 105:13 105:13 106:25 112:18,19 113:19,25 129:19 144:2 155:8 157:14 159:19 161:10 167:14 196:9
sections 173:14
see 10:21 33:22 47:20 49:15 59:7 62:1 77:18 111:6,10 170:7 170:12 185:14 207:20
seeing 41:3
seem 130:9
seen 14:4 188:22 213:17
select 37:15 73:25
selected 41:6
selection 6:22 194:8
self 93:17
sending 19:11
senior 30:4
sense 74:25 75:1 82:15 83:11 100:5 121:18 122:7
sensitive 38:3 145:8 147:7
sentence 49:6 67:16,22 68:7

69:1 73:23 74:15 84:8,25 91:11 92:16 93:3,8 94:2 96:23 105:12 107:2 112:19 128:6 130:4,6 130:10 180:5 194:12
separate 161:12
separated 93:22
separating 127:6,20 128:6 130:8
september 13:12 21:23 25:12 198:25 199:6
sequence 75:5 75:11,13
served 18:22
service 30:19 30:22 42:1 72:21 76:3 78:15,19 83:25 84:1,14,14 85:4 85:4 86:12 137:13 138:2 140:2 161:12 162:2 170:20 179:3,3 198:24 199:4 200:24 209:10 211:1 215:5 217:21 217:24 218:7 218:14 219:7 219:24
services 29:1 34:6 39:16 85:7 85:19 100:20 109:3,5 124:7 124:22 138:4 138:14 161:20 209:12
serving 19:1 20:11
set 48:5 139:22 173:14 196:9
sets 79:5 124:16
setting 73:15 75:2,9,20
settled 88:8
several 24:12 31:3 88:25,25
sfakianos 133:5
shaking 11:1
sheet 226:1,14 227:1
short 62:8 187:13
show 21:13 22:14 54:10 58:17 59:14 70:11 77:14 134:2 142:20 211:22 212:20
showed 193:7
showing 14:8 58:22 59:24 60:17 142:25 156:1 183:25 188:13 213:25
side 51:9 78:15 78:15 98:22,22
sign 11:17 216:20 226:17
signature 225:8 227:22 228:17
significant 206:3 210:7
simply 202:20
sit 77:20
situation 30:20 31:4,12 32:21
situations 34:15
six 128:9
size 87:7 88:25
small 159:24
smaller 87:19
smith 3:9 89:22
smoking 210:7
snf 38:10,12
social 29:1
somebody 185:23
soon 41:15
sorry 16:19 25:10 40:14 43:16 45:14 51:7 61:11 66:9 80:19 84:6 92:6 108:25 110:17 111:11 118:18 125:11 126:3 127:12 128:3 129:12 133:1 134:25 148:3 163:18,20 169:8 185:10 190:14 195:1 201:24 202:9
sort 24:22 32:19,24 37:3 39:9 102:7 111:7,17
sought 139:18 211:16
sounds 102:11 103:20
source 103:2 222:2,9
sources 108:23 222:3,7
south 3:15 35:25
southeastern 134:11
sparks 208:17 208:19 209:11 209:25 210:4 212:3 217:18 217:21

speak 15:19 43:11 140:5 171:14
speaking 11:4
speaks 191:11
specialized 39:16
specialties 25:1
specialty 38:17
specific 6:19 24:9 57:7 58:13 74:19 80:2,15 81:1,14 105:22 108:24,25 114:4,21 118:19 119:23 148:14 169:7 169:12 170:20 173:2 186:6 188:7,14 213:5 213:25
specifically 14:21 37:5 80:23 86:15 103:11 114:7 142:16 167:19 169:18 170:23 180:21 184:25 206:5 209:8
spell 183:18
spent 148:5
spoke 212:7
spoken 204:19 213:6
staff 33:2,5 73:4
stage 186:9
stand 23:16
standard 39:12 42:12
standardized 94:4,5
standards 87:18 88:23
stands 107:10
stark 29:20 30:13 31:23,24 31:25 32:1
start 11:11 19:4 23:6 41:15 144:8 174:25 184:23 202:9 217:16
started 10:6 19:1 43:11 63:20
starting 78:24 90:21 96:23,24 116:19 117:1 117:16 120:15 123:9 150:9 153:3 156:11 174:5 185:4 207:8 209:9
starts 84:23,25
state 9:4,6 25:23 29:2,11 30:1,3 67:5 72:2 73:11 79:2 93:2 98:3 105:14 114:6 141:3 145:1 148:4 154:12 169:18 171:3 174:2 189:17 207:17 210:12 228:3,20
stated 16:11 18:11 67:22 105:17 117:19 120:3 126:7,8 133:3 134:20 138:12,25 139:4 144:4,9 150:20 151:16 159:22 162:12 166:4,14,19 167:15 169:16 172:1 181:3,9 182:6 187:24 201:14 209:1 209:15 215:13 216:11 228:6
statement 28:3 73:19 102:23 121:16 184:11 188:3 190:18 193:2
statements 45:19 96:2 150:3 220:9 222:14
states 1:1 8:19 8:21 9:14 13:6 22:2 34:1,4 51:3 93:3 99:22 112:20 113:20 114:15 120:16 134:9,19,23 144:12 147:5 155:14 158:2 165:4,25 169:2 169:24 170:11 174:18 183:14 184:25 191:1 194:12 196:7 202:1 206:2 212:5
states's 192:18 192:18
stating 146:17 181:5 183:12 192:11 195:13
stay 158:9
staying 68:24 136:11 153:12 159:16
stem 185:9,10 185:24 187:12 188:4 190:2 191:12
stemming 91:6 97:11 194:16 195:4
stems 195:13 195:15

stenographic... 228:8
step 37:8,8
steroid 185:2 190:3 191:13
steroids 184:13 184:17 185:11 185:12 187:15 187:25 188:5
stimulator 199:12 200:10 200:19 201:2,9 201:12 202:19 202:25 203:14 203:15 219:15
stratified 89:1
street 2:6 3:5 3:14,20
stress 210:5,8 211:5 214:13 214:17,24
strictly 180:23
strike 101:7 113:18 129:6 139:14 152:23 159:4 175:23 176:14 182:22
structure 203:8
stuck 41:6
studies 26:5,9 76:23
study 81:6 209:16
sub 131:19
subclinical 185:20
subject 24:2 97:3
submit 21:4 93:13
submitted 21:2 21:6 31:20 54:20 55:13 59:22 63:22 64:2 115:18 133:7 136:16
submitting 107:25
subpoena 4:11 14:14,19 15:4 20:24
subsection 105:13 107:1 139:16
subsequent 66:22 115:16 181:17
subset 86:6 101:2
substantiate 81:25
substantiated 31:14
substantive 117:2,17,20 131:14,18,20 164:10
suffers 218:16
sufficient 120:19 126:11 189:2 213:18 213:21
sufficiently 123:13 126:25 129:24
suggest 131:19 183:6
suggests 191:5
suitable 112:24
summarized 200:5,8
summary 133:2 135:23 136:12 153:3 155:13 159:19 174:17
superficial 199:16 206:1
superior 147:23
supplemental 5:4 6:2 53:18 62:20 63:3 215:16
support 23:22 31:21 73:19 122:11 124:2 149:18 172:5 184:11 199:8
supported 78:19
supports 200:17,23
suppress 167:24
suppresses 168:22
supra 47:10,21
sure 10:16 39:11 43:10 46:10 51:13 58:1 66:11 83:17 88:6 101:12 106:5 114:13 117:3,7 143:20 163:24 203:17 210:25
surface 34:17
surgeon 144:16
surgery 157:18
surveillance 134:16
sworn 8:24 228:6
syed 5:11 6:25 55:5 197:20 207:12 208:22
symptoms 171:9
system 43:3 49:10 102:15 102:18 103:4 105:7,8 107:11 167:25 168:22 171:4

system's 105:17
systematically 76:3
systems 29:15 107:17,21 108:4,12

t

t 4:1,1,9
t1 221:10
t1's 224:12
tabbed 161:21
table 55:18,23 56:2,7,15 58:2 58:22,23 65:24 66:6,11,23 145:23 181:17 181:20 182:1,7 182:24
take 12:20 13:1 35:13,17 46:11 62:8 73:4 75:4 75:10 101:10 131:3 142:4 163:22 200:12 211:10 217:1,2 217:4
taken 2:3 9:18 9:23 12:19 46:16 62:12 101:15 110:15 110:20 131:7 164:3 192:2 213:19 217:8 226:10 228:5
talk 11:3 34:12 191:9
talking 14:22 51:11 77:2 88:17,24 111:1 119:2 189:25 192:11 201:4
talks 49:18 169:3
tam 20:9
taught 39:4
taylor 1:23 8:10 228:2,18
teach 39:7
team 32:8 33:6 33:7,11
technique 199:18
teeth 34:18,18 35:2
television 14:5
tell 47:5 176:20 185:15 206:23
telling 132:7 193:1
ten 37:17 44:25 45:3 87:6,18 88:22,24 101:11
tendon 201:6
tenth 29:16
term 74:3,4,11 74:12,24 172:19 187:13
terminology 29:14
terry 136:12 137:11 140:5 140:14
tertiary 71:1 74:22
test 210:5,8 211:5 214:13 214:17,24
testified 8:25 18:13,17 119:19 167:21 184:15 188:22 213:17 216:15 219:13 220:8 222:12,19 223:19
testify 12:21 35:8 100:18 228:6
testifying 11:20 22:2
testimony 11:16 12:14 129:5 131:15 146:22 149:12 164:11 167:19 169:15 170:19 170:24 171:3,6 171:21 183:13 183:16 215:12 220:6,12 224:7 224:9 228:7,10
testing 211:2,2 211:4
thank 16:23,25 17:7,18 46:19 51:14 52:21 62:8,15 65:13 66:21 82:18 83:20 88:19 96:21 101:18 112:15 132:19 133:1 140:19 153:19 159:15 164:7,25 165:14 173:19 186:23 198:9 216:23 224:21 224:23
tharwani 136:15
thereof 228:13
thigh 199:14 201:12 202:21 203:6,8,11,16
things 72:13 185:8,16 191:22 192:10
think 13:14 16:18 23:12 40:5 45:17 46:6 65:9 83:14 88:7 91:15 101:9 119:22 131:2 159:11,12 191:14 192:9

202:24 203:10 216:7
third 6:2 48:25 48:25 49:24 56:23 62:20 96:23 156:11 194:11
thomas 6:9 139:19 140:11 140:17
thoroughly 121:15
thousand 198:7
thousands 88:25
three 56:14 144:25 145:1 161:12 166:7,9 186:21 206:12 206:16,19 207:4
thrombophle... 199:16,23 201:7 204:5 206:1 218:15 219:8,23
tie 74:21
time 8:4 14:7 20:17 25:16 36:15 43:15 46:15,18 62:11 62:14 83:13 101:10,14,17 104:2 129:17 131:3,6,9 134:3 164:2,5 189:2 192:6 213:18 213:21 216:2 217:7,10 225:4 228:5,8,10
times 9:20,21 15:22 30:19 31:1
timing 191:5 199:18
title 23:20
today 11:20 12:14,21 15:12 15:24 17:22 18:5 77:21 109:23 149:12 216:15,25 217:15 220:5 222:19
today's 8:3 15:20 16:12 193:8
together 74:21 83:3 99:11
told 35:1
tonight 224:25
took 10:6 36:6 214:24
tools 73:12
top 13:11 15:8 24:12 50:7 89:6 95:16 105:12 123:8 126:21 135:2,3 144:2 160:15 165:2 190:24 191:2 194:7 207:9 209:24
total 133:8 134:6 135:25 136:18 138:6 138:25 145:12 153:5 155:14 158:14 159:23 165:5,17 179:11,12,18 179:20
totaled 21:7 134:20
totaling 154:11 155:4 158:17 160:20 161:7 174:1 197:22 197:24 207:14 208:23
totals 135:6 156:6,19,20 157:3
towards 116:17 116:25 144:1 159:20
track 6:21 54:24,25 55:14 56:12,21,24 57:2,12,17,23 58:9 64:24 65:1 65:18,21 67:10 68:10 90:4 91:5 91:6 97:7,25 118:7,16 119:1 122:5 126:3 128:10 138:3 145:18 169:3 170:14,15 194:7,12,14,16 195:4 199:9,24
tract 146:3,7,11 147:6
train 148:13,16 148:19
trained 148:7
training 91:1 96:24 97:2 147:3 148:5 176:24 177:11 202:23
trainings 35:20
transcribed 228:9
transcript 6:15 6:17,24 7:5 11:16 184:1,3 192:22,23 193:17 212:22 213:19,22 214:3 216:18 216:20 226:9 228:6
transcripts 16:15

transplant 185:10,24 188:4 190:2 191:13
transurethral 134:14
treated 112:24 124:6 146:12 183:5 187:12 219:23
treating 27:22 84:2,16
treatment 28:9 33:15 65:2,21 67:11 79:7 80:15 81:1 85:8 85:21 91:7 97:12 100:22 167:23 168:3 168:16 169:18 180:22 181:11 183:7 186:5 187:14 189:24 190:1,18 191:9 192:1,6,12 193:4 194:16 195:15 199:22 206:1 209:25
treatments 67:12,19 148:14 184:17 185:2 187:4,25
tremendously 167:24 168:23
tremors 199:21 200:21
trial 6:21 18:13 194:7
tricare 40:3,4 41:1,4,4 42:21 42:24 43:20 69:6 71:2,9 77:1,6,8,11,14 78:5 89:25 90:1 90:13,17 103:15,18 105:1 112:18 114:7 115:24 119:18 155:1 155:16,25 156:14,16 197:4 221:6,17
tried 106:14
triwest 69:7 71:9 103:14,18 105:1 115:25 118:1 120:2 123:13 124:8 126:25 129:24 151:2,7 196:5 196:11 197:4
true 58:2 61:17 107:18 109:2 111:16 124:13 169:14 177:7 226:11 228:9
truth 228:6,7,7
truthful 12:13
truthfully 10:15
try 11:7 12:1 41:25
trying 50:24 83:12
tukes 90:2 155:8 156:10 157:12
turbt 133:24
turn 22:23 135:1 168:11 174:10 207:7
turned 20:4
turner 3:20
turning 71:24
twice 139:6
two 9:21,24 30:19 31:10 54:8 57:5 83:13 115:4,10,11 158:16 184:24 186:19 191:21 191:22 192:9 218:23
type 110:8 192:15
typed 228:9
types 38:4 86:12 148:14
typical 74:3,5
typically 88:22 88:24 214:13 214:17

u

u.s. 3:18 34:5 111:17
uconn 34:24
uh 34:9 41:17 90:23 96:25 137:9 144:7 165:3 178:25 181:13 184:10 189:9
ulcers 174:22 175:6
unable 12:13
unbundling 29:20 72:9 108:19
unchanged 159:9
under 33:25 64:18 65:6 67:20 68:24 71:25 78:9,25 89:25 91:1 92:15 94:2 100:17 105:12 106:25 112:8 131:11 133:18 134:10 135:23 136:12 137:11 137:19 138:1 138:12 139:4 139:14,16 144:2,3 150:9

150:25 151:14
153:1,3,13
155:1,8,12,13
156:10 157:14
158:11 160:15
161:10,10,19
161:20 162:2,8
164:8 165:16
165:19 167:14
173:21 174:17
175:2 179:25
182:24 189:8
197:16 199:3
221:25 226:7,8
226:16
undercharged
158:18 159:12
undergoing
210:5
underlying
76:4 114:22
115:13
underneath
85:12 137:20
156:24
understand
10:9,19 11:1,12
11:18,23,25
12:10 13:1
35:15 69:5 83:2
83:12 103:24
104:5,7,14,22
118:21 127:13
129:15 130:4,6
130:17 195:3,9
216:6,21
understanding
13:25 14:2 24:5
43:9 50:19 72:2
107:13 129:6,7
130:23 226:15
understated
138:4
understood
12:3 128:18
189:5
underwent
145:2 209:14
unfortunately
68:8 90:11 93:4
185:19
unit 34:5
united 1:1 8:18
8:21 9:13 13:6
99:22 192:18
192:18
universe 73:8
university 26:5
199:7 210:3
unrelated
80:12 133:10
137:2 145:18
153:6 162:10
165:8 166:25
174:22 175:7
179:13,20
199:8 210:2,12
211:6,11
214:25
unreliable
114:7
unsound
105:17
unwilling
122:17
upcoding 29:19
30:13 31:11,12
upcoming
42:25
update 23:9
updated 23:6
47:9 66:23
upgraded 35:1
upper 144:17
166:20 201:12
203:16
urinary 145:8
146:2,6,11
147:6
urologist
139:19
usdoj.gov 3:22
3:22
use 37:14 73:5
74:21 87:12
91:1 93:9,11
105:14 107:17
107:20 108:3
108:11 114:10
190:3 191:13
used 74:4,6
75:19 76:21
77:11,22 94:7
113:21 114:15
118:5
user 51:4
uses 31:13
74:18
using 24:21
29:12 31:1
73:24 74:12,24
78:17 148:18
172:19
usually 187:15
203:1
uti 149:13
utuc 134:2

v

va 49:10 106:17
106:21 110:1,5
112:11,14,22
115:3,8,12
vague 94:23
vah 106:15
validate 34:25
37:20 38:13
40:18 42:11
64:16 75:17
89:20,22 96:17
98:14 101:25
102:7,13,15,17
102:20,25
103:3 121:15
163:8
validated
123:13 126:25

129:24
validating 98:5 102:3
validation 117:22 120:1,6 151:5
valuation 80:25
value 105:16
various 39:15 70:8 194:1
vast 24:25
vehicle 10:5
vein 201:6 203:9
venous 206:1
verbally 10:24
verbiage 224:6
verifiable 112:10
verified 112:21 133:11 135:8 136:2 137:3 153:7 155:18 157:4 165:10
verify 57:16,22 58:12 95:2,20 96:3,9,13 114:19 115:14 124:20 125:3
versus 89:23
vessel 203:9
veterans 39:17 49:9 69:6 117:25
vha 71:9 103:14 103:17 104:25 105:13,22 106:7,15 107:1 109:3,11,18,21 109:22 110:7 110:15,19 111:6 115:24 118:1 120:2,21 123:12 124:7 126:13,24 129:23 151:1,7 152:2,2,6,8,14 154:15 163:10 172:14,17 173:5,16 196:4 196:11 197:4 222:21
video 8:4
videoconfere... 16:9
videographer 3:25 8:2,11 46:14,17 62:10 62:13 101:13 101:16 131:5,8 164:1,4 217:6,9 225:2
videotaped 1:11 2:2
violations 29:21 30:14 31:23,24
visit 74:2 75:16 75:19 86:2 138:14 141:16 141:25 142:6 142:11,17 143:1,5,12 144:10,15 145:10 146:8 149:13,14,25 153:15,16 157:12,24 165:23,24 166:17,20 174:20,21 175:4,6,14 177:1,13 199:7 200:1 210:22 218:7
visits 38:11,11 141:4 143:16 165:20 166:7,9 170:6 206:16 206:20
vitae 23:2 28:23
vivian 159:17
voluminous 188:25

w

w 6:18,20 184:2 188:15
wait 11:10
waiving 194:13
walk 77:18
walking 218:23
wallace 1:13 2:3,6 3:4,5 4:4 4:12,14,17 5:1 5:6,13,16,22 6:6 8:5,14,14 8:15,23 9:5 14:20 17:17 30:7 38:21 39:18 43:14,17 46:8,12 52:21 53:3 56:9 58:3 59:1 60:2 62:4 62:23 64:4 65:4 65:9 68:20 70:10,19 71:15 77:13,24 80:17 82:2,16 87:24 91:19 92:4 94:15,22 95:15 96:5,15 97:17 98:19 99:1,12 101:12,23 102:9 104:11 104:13 105:25 106:9,19 107:12,22 108:5,13,21 109:6,13 110:10,22 111:11,19,25 113:23 114:8 114:24 116:1 116:20 117:5 118:9,17 119:5 119:16 121:3,9 121:13 122:1

122:13,19
123:2,23 124:4
124:14,23
125:9,23 126:2
127:11 128:2,4
128:24 129:11
130:20,25
131:17,24
132:2,10,17
135:14 140:19
141:6 142:7
143:6,19
145:20 147:1
147:18,25
148:3,21
149:15 150:1
150:18 151:21
152:7,13,19
158:25 163:16
163:24 164:13
164:22,25
169:21 170:25
172:10,24
173:6 176:3
177:8,19 178:4
178:9,19
182:18 183:18
185:3 186:21
187:5 188:20
188:25 189:19
190:12,15
191:18 193:18
194:2,18,21
195:7 196:17
197:10,12
202:22 205:11
205:20 206:9
206:25 210:13
213:11,14,16
214:1,20 215:3
215:8 216:8
217:3,12,13
218:5,12 219:4
219:12,20
220:3,21 221:4
221:15,22
222:11,18
223:1,10,18
224:2,19
226:23 227:23
wallace's 202:11
wallacegraha... 3:7
walters 3:25 8:10
wang 5:9 54:16 135:6 137:14 154:10 155:3 160:19 161:2 173:25 174:8
want 15:9 35:5 42:16 46:8 51:13,17 65:11 117:3 119:17 144:5 182:13 183:18 188:18 188:20 210:24
wanted 33:13 37:18 217:16 222:1
wants 144:12
ward 3:9
wardandsmit... 3:11
washington 3:21
waste 29:11
water 1:4 8:6 9:14 13:6 100:12 189:17 191:24 194:17 226:4
way 17:9 24:16 104:1,9,18 108:10 121:14 150:20
wayne 153:2,2
ways 31:3
we've 64:10 129:16
wednesday 1:14
weeks 144:25 145:1
welch 208:3,5 208:15
welcome 224:22
went 34:20 83:8
whack 155:10
whatsoever 190:18
wheelhouse 58:10 91:23
whitney 3:5 8:14 16:7 63:24
william 144:12 144:16
willing 122:16 122:25
wilmington 3:10
wish 215:23
witness 13:5 14:21 19:1,5,8 30:9 38:23 39:20 43:16 52:23 58:4 59:3 64:6 65:8 68:22 70:21 71:17 77:17 78:1 80:19 82:3 88:1 91:22 92:5 94:16,23 95:16 96:6,17 97:19 98:21 99:2 101:24 102:10 104:12,21 106:2,20 107:13,23 108:6,14,22 109:7,14 110:11,23

111:13,20
112:1 113:25
114:9 116:3
118:11,18
121:4,14 122:3
122:14,20
123:3,24 124:5
124:15,24
125:24 127:12
128:3,5,25
129:12 131:1
131:18 135:15
141:8 143:7,20
145:21 147:2
147:19 148:4
148:22 149:16
150:2,19
151:22 152:8
152:14,20
159:1 163:17
164:16,23
168:21 169:22
171:1 172:11
173:7 176:4
177:10,20
178:20 182:20
185:4 188:21
188:24 189:22
190:14,16
191:21 193:19
194:22 195:9
196:19 197:11
197:13 200:14
201:24 205:13
206:11 207:2
210:14 213:15
213:17,21
217:1 219:3,11
219:19 221:3
221:14,21
222:7,17,25
223:9,17 224:1
224:18 228:13
witness's 215:10
wonderful 117:18 163:25
word 116:21
190:8 202:24
words 10:23
79:11 103:20
104:1,19
work 22:1,1,11
32:7,19 35:11
37:10,22 43:4
68:12 98:8,12
99:21 108:15
132:4
worked 29:6
32:9 34:22
38:25 109:21
109:22 110:1
113:14,17
workflow 39:4
working 19:4
20:7 41:18
workload 107:4
works 30:21
worse 185:7
worsening 180:8
write 23:24
25:13
writes 133:23
134:13 182:25
202:17
writing 203:12
written 25:16
110:4 149:17
178:13
wrong 19:14
wrote 25:9,11
76:13 135:25
136:13 150:5
188:6 192:25
193:1,2 204:1,7
wwallace 3:7

x

x 4:9

y

yeah 17:17
46:12 51:19
52:23 82:3
88:13 119:16
168:18,21
182:8 203:17
210:24
year 19:7 44:5
44:6,7,9,22
years 24:12
44:17 45:1,3
89:17 134:1
148:5
yesterday 17:11 63:25
64:7 215:17

z

zikaryan's 16:24
zoom 3:9,14,20

Exhibit 776

UNITED STATES DISTRICT COURT

FOR THE EASTERN DISTRICT OF NORTH CAROLINA

- - - - - - - - - - - - - - - - - - - x

IN RE: :

CAMP LEJEUNE WATER LITIGATION :

- - - - - - - - - - - - - - - - - - - x

VIDEO DEPOSITION OF KAY FRANCES SEARS HAIRSTON

Washington, DC

Friday, February 27, 2026

REPORTED BY:

CARMEN SMITH

Video Deposition of KAY FRANCES SEARS HAIRSTON, called for examination pursuant to notice of deposition, on Friday, February 27, 2026, in Washington, DC, at 1300 L Street, NW, 2nd Floor, at 9:02 a.m., before CARMEN SMITH, a Notary Public within and for the District of Columbia, when were present on behalf of the respective parties:

JOSHUA G. CARPENITO, ESQ.
U.S. Department of Justice
Civil Division, Environmental Torts
310 New Bern Avenue
Raleigh, North Carolina 27601
joshua.g.carpenito@usdoj.gov
On behalf of United States of America

MARCUS TUBIN, ESQ.
U.S. Department of Justice
Civil Division, Environmental Torts
11 L Street, NW
Washington, DC 20005
On behalf of United States of America

-- continued --

ADDITIONAL APPEARANCES:

JOHN F. ROMANO, ESQ.
Romano Law Group
2701 Okeechobee Boulevard
West Palm Beach, Florida 33409
john@romanolawgroup.com
On behalf of Plaintiffs

LESLIE LA MACCHIA, ESQ. (Remote)
Bell Legal Group
219 Ridge Street
Georgetown, South Carolina 29440
llamacchia@belllegalgroup.com
On behalf of Plaintiffs

C O N T E N T S

WITNESS	EXAMINATION
KAY FRANCES SEARS HAIRSTON	
by Mr. Carpenito	7
by Mr. Romano	257

E X H I B I T S

EXHIBIT NUMBER	IDENTIFIED
Government Exhibit 1 - document containing the life care plan prepared for Mr. McElhiney by Ms. Hairston, her CV and a list of her testimony and fee schedule from The Coordinating Center	8
Government Exhibit 2 - document containing the life care plan prepared for Mr. Peterson by Ms. Hairston, her CV, her list of testimony and the fee schedule of The Coordinating Center	8
Government Exhibit 3 - Hairston notice of deposition with an accompanying subpoena and a document request	18
Government Exhibit 4 - Hairston CV	19

-- continued --

E X H I B I T S (Continued)

EXHIBIT NUMBER	IDENTIFIED
Government Exhibit 5 - assessment tool that Ms. Hairston has used during interviews	28
Government Exhibit 6 - small portion of the Dr. Richard Barbano deposition transcript	72
Government Exhibit 7 - questionnaire that was sent to Dr. Huffnagle	120
Government Exhibit 8 - follow-up questions to Dr. Huffnagle	120
Government Exhibit 9 - questionnaire to Dr. Sherwood	120
Government Exhibit 10 - Gary McElhiny medical notes, Bates stamped pages 0000000448 through 0000000484	136
Government Exhibit 11 - medical notes, Bates stamped pages 0000000029 through 0000000065	185
Government Exhibit 12 - copy of Eric Anderson housing report for Mr. Edgar Peterson	200
Government Exhibit 13 - Anderson 1/28/26 deposition transcript in this litigation	202
Government Exhibit 14 - Central Gardens Zoning Guidelines and Users Guide	213
Government Exhibit 15 - questionnaire sent to Dr. Kumar	221

P R O C E E D I N G S

VIDEO OPERATOR: Good morning. We are now on the record.

This is the deposition of Kay Hairston In Re: Camp Lejeune Water Litigation in the United States District Court for the Eastern District of North Carolina.

This deposition is being taken at 1300 L Street, Northwest, Washington, D.C. The time is approximately 9:02:00 a.m. The date today is February 27, 2026.

Our court reporter is Carmen Smith on behalf of Veritext Golkow. I am the video operator, Larry Flowers, also with Veritext Golkow, 1650 Market Street, Suite 5150, Philadelphia, Pennsylvania 19103.

Will all counsel identify themselves and who they represent.

MR. ROMANO: John Romano on behalf of Plaintiffs.

MR. CARPENITO: Good morning. Joshua Carpenito on behalf of the United States.

MR. TUBIN: Marcus Tubin on behalf of the United States.

MS. LA MACCHIA: I'm sorry, this is Leslie

LaMacchia. Can we put the video on the witness?

VIDEO OPERATOR: Can we go off the record?

MR. CARPENITO: Let's go off.

VIDEO OPERATOR: We're going off the record.

The time is approximately 9:03 a.m.

(Discussion off the record.)

VIDEO OPERATOR: We are back on the video record.

The time is approximately 9:13 a.m.

Whereupon,

KAY FRANCES SEARS HAIRSTON

was called as a witness and, having first been duly sworn, was examined and testified as follows:

EXAMINATION

BY MR. CARPENITO:

Q Can you tell us your full name, please.

A Kay Frances Sears Hairston.

Q Ms. Hairston, what do you do for a living?

A I am a certified nurse life care planner.

Q What's your understanding as to why we're here today?

A My understanding -- what I've been asked to do is work with two individuals who have been diagnosed with Parkinson's Disease and identify the

supports and services that they now need relative to their injuries.

Q You were retained by Plaintiffs counsel in connection with the Camp Lejeune water litigation; right?

A Yes.

Q And you were asked to prepare two life care plans in that litigation; is that right?

A Yes.

Q One of those cases was for Mr. McElhiney; correct?

A Yes.

Q The other case is Mr. Peterson's case; correct?

A Yes.

Q Did you prepare a written life care plan for Mr. McElhiney?

A Yes.

Q Did you also prepare a written life care plan for Mr. Peterson?

A Yes.

(Government Exhibits 1 and 2 identified.)

BY MR. CARPENITO:

Q I'm going to go ahead and introduce what will be marked as Exhibit 1 and Exhibit 2.

Ms. Hairston, if you would take a look at Exhibit 1 there that I've handed you and let me know what you recognize that to be.

A So this document contains the life care plan I prepared for Mr. McElhiney, my CV and a list of my testimony and fee schedule from The Coordinating Center.

Q Thank you.

And if you could also take a look at Exhibit 2 and let me know what you recognize that to be.

A Exhibit 2 is the life care plan I prepared for Mr. Peterson, my CV, my list of testimony and the fee schedule of The Coordinating Center.

Q Thank you. Each of those reports is dated February 5, 2025; correct?

A Yes.

Q As we sit here today, those are the only life care plan reports that you've issued in connection with the Camp Lejeune water litigation; is that right?

A Yes.

Q Have you issued a supplemental report in Mr. McElhiney's case?

A No, I have not.

Q Do you plan to issue a supplemental report in Mr. McElhiney's case?

A I can't say yes or no at this point. It depends on if there is new information that becomes available and what I'm asked to do by the law firm that's retained me.

Q Have you issued a supplemental report in Mr. Peterson's case?

A No, I have not.

Q Do you plan to issue a supplemental report in Mr. Peterson's case?

A I can't answer yes or no. It depends on if new information becomes available and what I'm asked to do by the law office that's -- has retained me.

Q You agree that if new information has come available, that impacts the future care of one of these individuals that could potentially change the interventions outlined in your life care plans?

A If new information becomes available, that information would have to be reviewed and analyzed and determined if there is any impact on the life care plan.

Q I want to go over just a couple ground rules so we make sure we understand we're on the

same page today.

You understand that you took an oath as if you were testifying in court; right?

A Yes.

Q Is there anything preventing you from thinking clearly today?

A No.

Q Is there anything preventing you from testifying truthfully today?

A No.

Q I'm going to assume that if you answer one of my questions, that you understood it. Is that fair?

A Yes.

Q If you don't understand one of my questions, will you please tell me that you don't understand it?

A Yes.

Q Okay. If you need a break at any point throughout today's deposition, we will take that break with one exception. If there is a question pending, I will ask that you answer that question before we take our break.

Do you understand that?

A Yes.

Q Okay. Do me a favor and turn to appendix 1 in Exhibit 1. Let me know when you're there, please.

A Appendix 1, yes.

Q And appendix 1 is the first page of your life care plan in Mr. McElhiney's report; correct?

A Appendix 1 is the first page of the spreadsheet that talks about the supports and services that he will need.

Q And it is -- page 1 of your life care planning table; correct?

A Yes.

Q Let's take a step back and from a general sense, do both reports Exhibit 1 and Exhibit 2 follow the same general structure?

A Number one, I would ask you to clarify. And number two, these are both client-specific individualized reports.

Q Right. Substance aside, Plaintiff specifics aside, does the organization of both reports follow the same structure?

A Again, they are client specific and individualized reports.

Q Let's do this. Look at column 1 or the first column there, and it's titled

"SERVICE/RATIONALE." Correct?
A Yes.
Q And the next column is titled "BEGIN"; correct?
A Correct.
Q The next column is titled "DELETE"; right?
A Correct.
Q Then "DURABILITY"?
A Correct.
Q Then "PROVIDER"?
A Yes.
Q Then "ANNUAL COST"?
A Yes.
Q That structure is the same across Mr. McElhiney's report and Mr. Peterson's report; is that right?
A Yes.
Q Okay. What I want to do is I want to go through each of those columns that we just identified, and briefly can you explain to me what each one represents.
A Okay. Can you clarify where you want me to start?
Q Certainly. When you list "SERVICE/RATIONALE," explain to me the information

that falls under that column, in a general sense.
A Okay. In general, that indicates the service that is indicated for Mr. McElhiney and gives a brief description of why that service is indicated for him.
Q And what is rationale?
A The need or the indication for that service.
Q When you say "the need or the indication for that service," are you referring to an underlying recommendation from another professional?
A I'm sorry, can you repeat that?
Q Certainly. When you list a rationale next to a service, is the rationale coming from another medical provider?
A The rationale provided is an indication as to why that recommendation has been made for that individual.
Q And where would that recommendation come from?
A That recommendation can -- is going to be coming from a number of sources.
Q And what are those sources?
A It is coming -- I am making the recommendation, and I am providing the rationale or

the indication for that recommendation. And part of the information that I use in terms of providing that recommendation are the sources that I collaborate or input that I receive to help develop or identify the need for that recommendation.

Q So you provide the underlying recommendations for each of these line items that falls under service and rationale; is that right?

A I would ask you to explain that a little bit -- or clarify that a little bit more for me when you say I provide the underlying recommendation.

Q Well, as I understand your testimony, and please tell me if I'm incorrect, you just testified that you supply the recommendation; right?

A Yes.

Q Let's move to begin, the column entitled "BEGIN." Is that the year in which the future service recommendation is indicated to start?

A For the purposes of the life care plan, the services that are recommended would begin in 2025.

Q In this example?

A Yes.

Q And what does the column "DELETE" stand for?

A Delete indicates when that service would end.

Q For example, if we look at the first item there, it lists "Primary Care," correct, under "PHYSICIAN" and "MEDICAL"?

A Yes.

Q And under the "DELETE" column, it lists "L.E."; correct?

A Yes.

Q And does L.E. stand for life expectancy?

A Yes.

Q The next column there is "DURABILITY"; right?

A Yes.

Q Can you explain to me what the "DURABILITY" column represents?

A The "DURABILITY" column represents how frequently that item is indicated for the individual.

Q So if I refer to frequency throughout today's deposition with respect to the "DURABILITY" column, will you understand what I'm talking about?

A Yes.

Q The next column is the "PROVIDER" column; is that right?

A Yes.
Q Is this the costing source information identified under that "PROVIDER" column?
A Yes.
Q In other words, if a physician's name appears under that "PROVIDER" column, that does not mean that that physician recommended the service; is that right?
A Can you -- I'm sorry, just to clarify, in the "PROVIDER" column -- say that again, please.
Q Certainly. In the "PROVIDER" column, if a physician's name appears, that does not mean that that physician recommended the underlying service; is that right?
A Correct.
Q Okay. The next column is "UNIT COST"; correct?
A Yes.
Q What does the "UNIT COST" column represent?
A It represents one episode of service.
Q When you say "one episode of service," you just mean the cost of one episode of service; right?
A To clarify, for a visit or a session, yes.
Q And lastly, what does the "ANNUAL COST"

column represent?
A The annual cost represents the total cost for visits or sessions or as otherwise indicated over one year.
Q That structure and those definitions that we just discussed, that would be the same across both of your reports in this litigation; right?
A Typically. There may be instances where it's otherwise indicated.
Q Okay. In other words, it would be indicated in your report if there was any difference; right?
A Yes.
(Government Exhibit 3 identified.)
BY MR. CARPENITO:
Q I'm going to introduce what will be marked as Exhibit 3.
Ms. Hairston, have you seen this document before?
A Yes.
Q This is your notice of deposition with an accompanying subpoena and a document request; correct?
A Correct.
Q Have you produced everything listed in

attachment A, which falls after the subpoena there?
A I'm sorry. Yes.
(Government Exhibit 4 identified.)
BY MR. CARPENITO:
Q I'm going to introduce what will be marked as Exhibit 4.
A I'm sorry, did you mean for me to have two copies of that?
Q Thank you.
A Okay.
Q Take a look at Exhibit 4 and let me know, please, what you recognize this to be.
A This is my CV.
Q And keeping that CV, Exhibit 4, in front of you, if you would also turn to your CV that is attached to the back of Exhibit 1 and let me know when you have those in front of you.
A Yes.
Q Now, Exhibit 4 is an updated CV when compared to the CV attached to Exhibit 1; correct?
A Yes.
Q Tell me if I am incorrect, but my understanding is that the only update is listed under "Professional Experience" where you list "Life Care Planner/Consultant 2025 to Present"; is that

right?
A Yes.
Q Are there any other updates to your CV since you provided the CV attached to your reports in this case?
A No.
Q Who is the position with with respect to this most recent update to your CV?
A I'm sorry, can you clarify what you're referring to?
Q Well, we just identified that the update is life care planner/consultant; correct?
A Okay. Thank you, yes.
Q Who is that position with?
A I am an individual contractor, a 1099.
Q Thank you.
Are you still with The Coordinating Center for Home and Community Care, Inc.?
A I do contract work for The Coordinating Center.
Q Understood. So if I refer to The Coordinating Center for Home and Community Care, Inc. as The Coordinating Center throughout today's deposition, will you understand who I'm referring to?

A Yes.
Q Let's take a step back and just generally speaking, approximately how many life care plans have you prepared?
A Okay. Just for clarification, several of the life care plans that I prepare, some I do individually and some life care plans I do jointly with other life care plans, okay. And so just for clarification, are you referring to plans that I've done individually or plans that I've done jointly with another life care plan?
Q Let's walk through both. Let's start with individually. How many life care plans have you individually prepared?
A I am going to say between 25 to 50.
Q And then life care plans that you work on with others, how many of those have you prepared?
A 100 to 200.
Q What would be the reason or some of the reasons in which you would work on a life care plan with somebody else?
A For clarification, when I say work on a life care plan with someone else, I work -- I prepare life care plans with other life care planners in my position, in my former position at

the medical-legal department at The Coordinating Center. Often, we prepare plans jointly because we bring different areas of expertise and experience and skills to the life care plan and we can collaborate together.

Q Of the 25 to 50 life care plans that you have prepared individually, have any of those life care plans related to someone with Parkinson's disease other than the two that you have offered in this case?

A Not that I recall at this time.

Q Of the 100 to 200 life care plans in which you've worked with other life care planners, have any of those life care plans that you've worked on related to someone with Parkinson's disease, again other than the two that you've offered in this case?

A Yes.

Q How many approximately?

A Approximately five.

Q Do you recall when you would have worked on those five life care plans?

A No, I can't recall.

Q Would it have been in the last five years?

A I can't actually recall.

Q You can't say if it would have been more

or less than five years ago?

A I can say between five and 10 years.

Q Okay. If you can recall, what was the nature in which those five life care plans that related to someone with Parkinson's disease arose? How did they come about?

A At this time, I can't recall the specifics of the cases.

Q How involved were you in preparing those five life care plans?

A In preparing life care plans jointly, I am involved from the beginning of assessment of the life care plan until completion of the life care plan. With clarification, in those cases, I was not the designated expert and I did not provide testimony.

Q When you are creating a life care plan individually or jointly, do you typically conduct an interview with the person who is the subject of the life care plan?

A During my assessment of the individual, typically that includes an interview with the individual, yes.

Q Do you typically conduct those interviews in person?

A No, it's not typical. It depends on the circumstance.

Q What are some of those things that it depends on?

A Well -- I'm sorry. During COVID, a lot changed, and there may -- so for assessment and interviews, we moved to a virtual platform for many assessment and interviews. And if individuals do not live in the same particular area, it's, you know, out of a 30-, 40-, 50-mile region, interviews can be done assessment.

So it depends on the situation how best to determine to interview and get the assessment information from that individual.

Q Understood. What topics do you typically cover in these interviews?

A Can you be more specific?

Q What is the reason for conducting the interview in the first place?

A The interview is -- it's part of the assessment to identify the needs of the individual. I do use an assessment or interview tool to make sure that I capture pieces of information. But there may be pieces of information that I identify in addition to what's in the assessment tool.

Q When you are referring to an assessment tool, are you referring to some kind of like standard form?

A Yes.

Q How long do these interviews typically last?

A Can I clarify?

Q Please.

A Okay. So as I'm developing the life care plan, typically, there is an initial interview with the client, which may last two to three hours. But during the course of the interview, if there are additional pieces of information that I need to obtain from the client or clarify, I may be in touch with him at additional times as well.

So every piece of information that is used to develop the life care plan may not be contained in that initial assessment piece.

Q Thank you for that clarification.

Do you typically administer any tests during the interviews?

A Well, can you clarify what type of test are you referring to?

Q When you work as a life care planner, do you administer any kinds of tests when you prepare

life care plans?

A If there is a specific test that you're referring to, that would be helpful.

I typically use my assessment form for the interview.

Q Do you typically take notes during these interviews?

A It depends on -- it depends on the interview. There may be times all of the information I capture, I'm able to put on the assessment form. And there may be times, if there's additional pieces of information, I supplement them, you know, with notes.

Q When you interview an individual who is the subject of a life care plan, is that interview typically conducted by themselves? In other words, they're answering the questions by themselves?

A Oh, it's very individualized. It depends on each specific case. And -- it depends on each specific case.

Q So are there instances in which family members may join an interview?

A Oh, yes.

Q Are there instances in which anybody else other than an individual's family members would

join?

A There are instances where an individual may want a very close friend or -- it's specific to that individual, who they feel comfortable with sharing information and who they feel like is helpful in terms of communicating their needs.

Q When you conduct an interview, do you typically conduct that interview on your own?

A Again, it's client specific and individualized.

If I am working with another life care planner, that other life care planner may participate in that interview.

Q What would be some of the reasons in which another life care planner would join that interview with you?

A So just to clarify, at the -- working at The Coordinating Center as a contractor with The Coordinating Center, it is -- many of the cases that we work on, there are two life care planners who bring many skills, sets of experience and expertise. And so there are several cases where we will both participate in an interview to listen to what the individual has to say.

Q Is it common, when there is more than one

life care planner on an interview in the work that you do, for both life care planners to take notes during the interview?

A It's individualized and depends on what information is communicated during that interview.

Q I want to go back to my question about administering tests.

Has there ever been any point in your career when you have administered any kind of standardized test to an individual so that you can build out a life care plan?

A At this time, I don't recall a specific -- well, I'm sorry, let me back up and say that.

For clarification, you're talking about a standardized, formalized test. At this point, I don't recall that there has been any formalized, standardized test that I have administered to an individual.

Q Do you remember earlier I asked you about a form given during the interviews?

A Can you clarify? I don't typically give a form to clients. I use an assessment form as part of the interview process.

(Government Exhibit 5 identified.)

BY MR. CARPENITO:

Q I'm going to introduce what will be marked as Exhibit 5.

Ms. Hairston, will you please take a look at Exhibit 5 and let me know what you recognize that to be.

A Yes, this is the assessment tool that I have used during interviews with individuals.

Q Did you use this assessment tool during your interview with Mr. McElhiney?

A Yes.

Q Did you use this assessment tool during your interview with Mr. Peterson?

A Yes.

Q Do you still have both assessment tools with respect to the interviews that you conducted of Mr. McElhiney and Mr. Peterson?

A Can you clarify -- I'm sorry, repeat the question.

Q Well, my understanding is that you just testified that you utilized this assessment tool in your interviews with respect to Mr. McElhiney and Mr. Peterson; correct?

A Correct.

Q Do you still have possession of those filled-out assessment tools with respect to their

interviews?
A I have assessment tools that I have used in the interview, and I have, to the best that I produced to you, the documents that were requested.
Q I'm talking about the completed assessment tool.
A Yes.
Q Do you still have possession of those?
A Yes.
Q Have you provided them to Plaintiffs' attorneys in this case?
A I have provided the documents as requested of me.
Q I don't think that quite answers my question, and you can probably understand why.
I'm talking specifically about this assessment tool that have been completed with respect to Mr. McElhiney and Mr. Peterson's interviews, have you provided those to Plaintiffs' counsel in this case?
A I have provided the documents that were requested of me.
Q Were those documents, the completed assessment tools, requested of you?
A I provided this assessment tool.

Q That one there?
A Yes.
Q That one is not filled out; correct?
A This is not filled out.
Q And you have just testified you have two completed assessment tools; correct?
A Yes.
Q Okay. Where are those?
A They are not with me today. I have provided the documents that were requested of me.
Q Was one of those documents or two of those documents that you provided the filled-out assessment tools?
A I have provided the assessment tool as indicated here.
Q The blank one?
A Yes.
Q But you did not provide the filled-out assessment tools; correct?
A I have provided the assessment -- the documents that were requested of me.
Q Do you typically speak with a patient's physician when you draft a life care plan?
A Each life care plan is client specific and individualized, so it will depend on the information

that's obtained from the client and what is needed to develop the life care plan.

Q Okay. Are you aware that the United States asked for any notes associated with any of the calls that you had with Mr. McElhiney or Mr. Peterson?

A I'm sorry, say that again.

Q Yes, ma'am.

A Uh-huh.

Q Are you aware that the United States requested any notes taken during any of your calls with Mr. McElhiney and Mr. Peterson?

A I provided -- I have provided the documents that were requested of me.

Q That wasn't my question.

A Okay.

Q Is it fair to say that you're aware that the United States asked for any notes that you may have taken during your calls with either of the Plaintiffs?

A That's fair to say.

Q Would you consider a filled-out assessment tool form notes?

A This is an assessment tool.

Q Right.

A Separately I also take notes that are handwritten that are documentation of phone calls or communication I have with the individuals.

Q Okay. And when you complete one of these assessment tools, your input into the tool, would you consider that your own notations?

A I would consider that it is information that I have filled out on the assessment tool.

Q Okay. Taking another step back here with respect to your professional experience, is most of your case management experience for children or working with children?

A No.

Q Okay.

A I'm sorry, can I clarify?

Q Please.

A I have provided case management services to individuals throughout the lifespan from infants to teenagers to young adults, adults and to the elderly.

Q So when I say "children," I'm talking about anybody less than 18 years old.

Do you understand that?

A Yes.

Q Okay. If I refer to pediatric patients,

you understand that I'm referring to anyone less than 18 years old?

A Yes.

Q And if I refer to adults, you understand that I'm referring to anyone from 18 years old onward?

A Yes, we can.

Q What percentage of your case management work, approximately, has involved pediatric patients compared to adult patients? Would you like to look at your CV?

A Oh, no, I don't need to look at my CV, I'm sorry.

For the number of years that I have provided case management services to individuals, which has been for over 25 years, it has been through individuals completely throughout the lifespan, from infants all the way up to the elderly.

So I cannot say that it has been more heavily toward a particular age group. It has been through every -- through every age group.

Q Do you recall earlier you testified that individually, you have prepared somewhere between 25 to 50 life care plans?

A Yes.
Q And you also testified that when working with other life care plans, you have prepared or worked on somewhere between 100 to 200 life care plans?
A Yes.
Q Of the life care plans, those 25 to 50 that you've prepared individually, how many of those were related to adult patients?
A Honestly, I don't recall.
Q Do you recall how many of the 25 to 50 life care plans that you prepared individually related to pediatric patients?
A I don't recall, but I also want to -- again, as a certified nurse life care planner, I have worked with individuals throughout the life span, from infants to the elderly. And I cannot say that it leans any more heavily toward one particular age group.
And then I'm sorry, can we take a quick break, please?
MR. CARPENITO: Sure.
VIDEO OPERATOR: We are going off the video record. The time is approximately 9:55 a.m.
(Recess.)

VIDEO OPERATOR: We are back on the video record. The time is approximately 9:58 a.m.

BY MR. CARPENITO:

Q Ms. Hairston, would you agree that the medical management of Parkinson's Disease is typically directed by a movement disorder specialist, such as a neurologist?

A No, I am not going to agree or disagree. It's individualized, and it depends on that particular individual who is directing their care.

Q Are you aware of the title of some of the medical professionals that may direct the care, using your phrase of direct the care, for an individual with Parkinson's Disease?

A I'm aware of the titles of physicians who may be involved with individuals with Parkinson's Disease.

Q What are those titles?

A It can be a neurologist, a neurologist, yes.

Q Any others?

A Well, it depends. It's client specific, and it depends on who that individual and their primary care have determined needed to be involved in their care.

Q Outside of a neurologist and a primary care physician treating an individual with Parkinson's Disease, are there any other medical professionals that you've seen direct care for an individual with Parkinson's Disease?

A It can be any number of individuals or providers who are involved in the care of an individual with Parkinson's Disease.

Q And that's what I'm asking you. Who are some of those any number of individuals?

A Well, it is going to be individualized. There are -- for some Parkinson's individuals, there could be providers of neurology, neurosurgery, rehab providers. Again, any number of providers. I may not be recalling them all at the time. Any number of providers may be involved in the care.

Q You've mentioned a couple times now that you're a certified nurse life care planner; right?

A Yes.

Q Can you just describe for me, when you're telling me that you're a certified nurse life care planner, what does that mean? What does that entail?

A Okay. It involves the fact that I have taken an exam that identifies me as a certified life

care planner. In order to sit for that exam, I had to have been a registered nurse for three years. I had to have worked in a role preparing long-term care plans for individuals for two years. But as I did, I took a course in life care planning, 120 hours in training and life care planning, and then I sat for an exam.

Q How many years working as a registered nurse did you have in terms of years of experience before you became a certified nurse life care planner?

A I have worked as a registered nurse for over 35 years, working with individuals across the life span and in a number of settings, hospital settings, inpatient settings, outpatient settings, clinics facilities.

I am utilizing the nursing process as I continue to work as a life care planner.

Q When did you receive your RN?

A I'm sorry, I received my RN and my -- in 1984.

Q Did you receive your RN and your BSN at the same time?

A Just for clarification, when you say "at the same time," I completed my BSN program and then

sat for the exam. So it was within a six-month time period.

Q Okay. And that was done at the University of Oklahoma; correct?

A Correct.

Q And so you received a bachelor of science of nursing in 1984?

A Correct.

Q And then you sat for the exam in which you passed and obtained your RN?

A Correct.

Q Would that have also been in 1984?

A Correct.

Q Or about?

A About.

Q And then you became a certified nurse life care planner in 2011; right?

A Yes.

Q As it relates to Parkinson's Disease patients, have you ever heard of a deep brain stimulator?

A Yes.

Q Or referred to as a DBS; right?

A Yes.

Q So if I refer to DBS throughout today's

deposition, you'll understand I'm referring to deep brain stimulator?

A Yes.

Q What is your understanding of what a deep brain stimulator is?

A A deep brain stimulator is going to be a tool to help the individual manage some of the movements that they have. I'm sorry, let me clarify, some of the abnormal movements that they are exhibiting.

Q Do you agree that DBS is a surgical intervention used to improve certain symptoms associated with Parkinson's Disease?

A I'm sorry, repeat that again.

Q Would you agree that DBS is a surgical intervention that is used to attempt to improve certain symptoms that are associated with Parkinson's Disease?

A DBS is going to be used for -- on an individual basis, and the use of that device is going to have to be managed to determine how it is going to impact the movement on that individual.

Q In other words, if the DBS was thought to have no meaningful impact on an individual's Parkinson's Disease symptoms, would there be any

reason for them to attempt placement of a DBS in the first place?

MR. ROMANO: Objection to the form of the question.

Go ahead.

THE WITNESS: I mean, that's up to an individual and their physician if they're going to determine the need for placement of DBS.

BY MR. CARPENITO:

Q Right. And I'm not asking about the physician. I'm asking about what is your understanding of why a DBS would be placed in an individual.

A The DBS is going to be used for that individual, and it is going -- the individual, with their physician, will determine if it -- how it impacts their movement.

Q You've never programmed a DBS device before yourself, have you?

A No.

Q You do not manage DBS stimulation parameters; correct?

A No.

Q No, that's not correct or no, you do not do that?

A No, I do not -- I'm sorry, repeat the question.

Q You do not manage DBS stimulation parameters; is that correct?

A I do not manage the parameters.

Q Thank you, Ms. Hairston.

Do you have any understanding of how often a DBS is recommended for a Parkinson's Disease patient?

A That's a little general for me. Can you clarify what you're asking?

Q Well, earlier, you testified that you've worked on -- with other life care planners, five life care plans in which the individual who was the subject of that life care plan had Parkinson's Disease; right?

A Correct.

Q In those five life care plans, have any of those individuals who had Parkinson's Disease had a DBS?

A I don't recall the specifics of those cases.

Q Have you ever worked with a patient at any point in your career who had a DBS?

A Over the years, I have worked with an

individual with DBS. I don't remember the specifics of the case.

Q How many individuals?

A One to two.

Q Have you ever performed or prepared a life care plan for a patient where a DBS was implanted?

A At this time, I don't recall that I have.

Q Okay. Will you turn back to -- if you could turn to the first page of Exhibit 1, please. That's Mr. --

MR. ROMANO: The first page of Exhibit 1?

MR. CARPENITO: Yes, sir.

BY MR. CARPENITO:

Q Do you see in the top left-hand corner it lists "MEDICAL LEGAL SERVICES," underneath, "A Division of The Coordinating Center"?

A Yes.

Q At The Coordinating Center, are all of your life care plans for the medical-legal services division?

A Yes.

Q What is the medical-legal services division of The Coordinating Center?

A The medical-legal services division is a smaller unit of The Coordinating Center. Can I just

talk a little bit about The Coordinating Center?

Q Please, yeah.

A The Coordinating Center is a nonprofit agency located in Maryland that provides case management in care coordination to individuals with special healthcare needs and disabilities across the life care span. The Coordinating Center employs about 300 individuals who provide care case management and care coordination services through various contracts and programs throughout the state of Maryland.

The medical-legal service is a smaller division within The Coordinating Center.

Q Understood.

What are the differences, if any, in the medical-legal services division compared to The Coordinating Center at large?

A The Coordinating Center at large provides case management care coordination services. The medical-legal division provides life care plan planning and case management services.

Q The life care plans that you prepare in connection with the medical-legal services division of The Coordinating Center are for lawsuits; correct?

A I'm sorry, life care plans prepared can be used in the course of litigation, but life care plans can also be prepared for the elderly or individuals with special healthcare needs.

Q I am asking specifically about life care plans that you prepare in the medical-legal services division of The Coordinating Center.

A Uh-huh.

Q Are those life care plans prepared for litigation?

A Not all of the life care plans are prepared for litigation. We have also prepared life care plans at the request of someone who needs them for -- elderly or someone with special health needs.

Q And so in those instances in which they are not prepared for litigation, why would the medical-legal services division of The Coordinating Center prepare that life care plan?

A It is still -- it is still a medical life care plan.

Q Do you draft life care plans and prepare life care plans outside of use for litigation?

A I'm sorry, are you asking me personally?

Q Yes, ma'am.

A Or are you asking about The Coordinating

Center?

Q I'm asking you personally.

A In my work at The Coordinating Center, I prepare plans for litigation. I am also a case -- I also continue to provide case management services to individuals.

Q I'm sorry, I did not mean to cut you off.

A Yeah, within my role as my work at the life care -- at The Coordinating Center and as a contractor.

Q When you say "case management work," how does that differ, if at all, from work when you prepare life care plans in litigation?

A As a case manager, I am actively working with an individual to help them locate, monitor, and coordinate medical and community services that they need.

Q Do you prepare life care plans outside of litigation?

A I'm sorry, can you give me a time frame?

Q With The Coordinating Center, do you prepare life care plans for use outside of litigation?

A And can I ask, are you asking me personally? Are you asking if the medical-legal

department at The Coordinating Center has prepared life care plans; yeah?

Q I am asking you, Ms. Hairston, do you prepare life care plans for use outside of litigation?

A I have not prepared life care plans outside the use of litigation, outside for the use of litigation.

Q Let's go back to Exhibit 4, which is your updated CV. Let's work backwards, so let's go to the second page first, please.

Do you see Children's Memorial Hospital listed there?

A Yes.

Q In your role with Children's Memorial Hospital, did you regularly attend to patients with Parkinson's Disease?

A No.

Q In your role at Malcolm Grow Medical Center Andrews Air Force Base, did you regularly attend to patients with Parkinson's Disease?

A I don't recall that I attended -- well, I'm sorry.

Can you clarify when you say "attended"? I should have asked you that.

Q Did you provide care to patients with Parkinson's Disease during your time with Malcolm Grow Medical Center, Andrews Air Force Base?

A I don't recall that I provided care to individuals with Parkinson's Disease.

Q When you say you don't recall, does that mean you don't remember or you don't believe that you have?

A I don't recall all of the diagnoses of the individuals that I provided care to at that facility.

Q Was there anything that would help you remember?

A No.

Q During your time at Children's Memorial Hospital, going back down --

A Yes.

Q -- was there ever a time in which you recall providing care to a patient with Parkinson's Disease?

A No.

Q During your time with Children's Home Care, listed at the top there, was there ever a time that you recall providing care to a patient with Parkinson's Disease?

A Not that I recall.
Q During your time with Holy Cross Hospital, was there ever a time that you provided care to an individual with Parkinson's Disease?
A I don't recall the specific diagnoses of all of the individuals I provided care to while employed at Holy Cross Hospital.
Q Is there anything that would help you recall?
A No.
Q At Union Labor Life Insurance Company, first can you just explain generally what your roles there were?
A Yes. As a utilization nurse reviewer, I was asked to review information relative to inpatient hospitalizations and identify the medical necessity.
Q The medical necessity of what?
A Of the need for inpatient hospitalization.
Q Did you ever determine the medical necessity for medications?
A Not medications specific.
Q What was your role as a case manager at Union Labor Life Insurance Company?
A As a case manager, I provided case

management, again to individuals throughout the life span to help them access the medical and community services that they needed.

Q When you were the utilization nurse reviewer at Union Labor Life Insurance Company, did you ever make the medical necessity determination with respect to treatment for a Parkinson's Disease patient?

A I don't recall.

Q When you say you don't recall, do you say you don't remember or you don't believe that you have?

A I don't recall all of the diagnoses for the individuals that I worked with in that role.

Q Okay. Is there anything that would help you remember that?

A Not at this time that I can identify.

Q Okay. Let's start and go to your work with The Coordinating Center. It lists from 2001 to 2011, you were a clinical care coordinator; right?

A Yes.

Q In that role during that time, did you ever care for any patients with Parkinson's Disease?

A Not that I recall.

Q And from 2011 to 2025 with The

Coordinating Center, it lists you were a life care planner and care manager; right?

A Yes.

Q The five cases that you testified earlier you have worked on with another life care planner that involved an individual with Parkinson's Disease, would those five cases have taken place in that time period?

A Yes.

Q Okay. You've never given an expert opinion in an environmental exposure case before, have you?

A Can you clarify, please?

Q What's your understanding of environmental exposure?

A I just want to make sure I understand what you're asking. Can you repeat the question?

Q Yes, ma'am. You have never given an opinion as an expert witness in an environmental exposure case before; is that correct?

MR. ROMANO: I'll object to the form of the question.

Please answer.

THE WITNESS: I have not.

BY MR. CARPENITO:

Q Your prior expert opinions have been in the medical malpractice context; is that right?
A Repeat the question and let me go -- can you repeat the question, please?
Q Your prior expert opinions have been in the medical malpractice context; is that right? You can look at your testimony.
A No, I --
Q It would be attached to Exhibit 1.
A Yeah, thank you.
Q Yes, ma'am.
A I have testified in the cases as indicated here on my testimony.
Q That's right. And that does not answer my question. Do you agree with me that you've never given -- or your prior expert opinions have been in the medical malpractice context?
A Based on the information provided here, yes.
Q Any of these prior cases that you have listed here attached to Exhibit 1, did any of them involve Parkinson's Disease?
A No.
Q Do you recall what injuries they involved?
A Not at this time. I don't recall all of

the injuries.

Q Okay. But you do recall that they did not involve Parkinson's Disease; right?

A I do not recall that they involved Parkinson's Disease.

Q And what do you mean when you say that you do not recall that?

A These were not Parkinson's Disease cases to the best that I recall.

Q When being hired as an expert, you've never testified for a defendant before; is that right?

A Not that I recall.

Q In your professional capacity, have you ever published anything related to Parkinson's Disease?

A No.

Q In your professional capacity, have you ever published anything on care related to neurological disorders?

A No.

Q In your professional capacity, have you ever had any speaking engagements related to Parkinson's Disease?

A No.

Q Have you in your professional capacity ever had any speaking engagements related to neurological disorders?

A No.

Q You have a presentation listed on the second page of your updated CV. My question to you is, are there any other presentations that you've given outside of that one listed there?

A No.

Q Do you have any graduate training, Ms. Hairston?

A Can you clarify?

Q Outside of receiving your BSN from the University of Oklahoma, do you have any other graduate training or degrees?

A I completed a certification course in nurse life care planning, setting the standards in life care planning.

Q And that's listed at the top of the first page of your updated CV, which is Exhibit 4, which occurred in 2011; right?

A Yes.

Q Okay. Ms. Hairston, you are not a physician; correct?

A No, I am not a physician. I am an

experienced case manager, life care planner, registered nurse with many years of education, experience, clinical skills and expertise.

Q You are not an MD; correct?

A I am not an MD.

Q You've never attended medical school; right?

A I have not attended medical school.

Q You don't diagnose patients; correct?

A I do not provide medical diagnoses.

Q You do not diagnose Parkinson's Disease; right?

A I have not diagnosed Parkinson's Disease.

Q And you don't prescribe medications; correct?

A I do not prescribe medications.

Q Before we move on, I just want to ask you to turn back to the certification that you received in 2011, setting the standards in life care planning.

A Yes.

Q Was that online or in person?

A That was a virtual course.

Q And how did that work?

A I'm sorry?

Q Well, you stated it was a virtual course. So you completed the scholastic component online?

A It was -- it was with a -- it was a course with -- I don't want to say video, a teleconference course.

Q Did you have an instructor?

A Yes.

Q In your work as a life care planner, you do not make medical diagnoses; right?

A I do not make medical diagnoses.

Q In your work as a life care planner, you do not render any medical prognosis; right?

A The recommendations I make are based on the individual's response to the injury that they have.

Q Ms. Hairston, I appreciate that. That does not answer my question.

In your work as a life care planner, do you agree with me that you do not render medical prognosis?

A In my role as a life care planner, I work with providers of care as needed to identify the needs, the supports and services of an individual based on the response that they have had to their injury.

Q What would be one of the reasons that you need to work with a provider of care?

A I work with a provider of care, collaborate to obtain input on the anticipated needs of an individual based on the response that they have had to their injury.

Q And why do you need to work with a provider to obtain the needs with respect to a particular individual?

A It is a source of information that helps in the development of the life care plan.

Q In your work as a life care planner, you don't prescribe medications; correct?

A I do not prescribe medications.

Q In your work as a life care planner, you do not prescribe medical treatment; right?

A In my work as a life care planner, I provide recommendations to meet the needs of an individual based on the response that they have had to an injury.

Q So, for example, if a Parkinson's Disease patient needs to meet with a neurosurgeon, are you testifying that you are the one who makes that recommendation?

A I'm sorry, can you clarify? Am I -- can

you clarify?

Q Certainly. Let's turn to appendix 1 of Exhibit 1. Look at the fifth service on appendix 1 is listed as "Neurology"; right?

A I'm sorry, yes. "Neurology."

Q Underneath it lists "Specialty care"; correct?

A Correct.

Q Who is making the recommendation for neurology?

A For this particular instance, this recommendation was made by both Dr. Sherwood and Dr. Huffnagle.

Q Okay. Their names are not listed there. Do you agree with that?

A I agree with that.

Q So how would a reader of your life care plan determine that Drs. Huffnagle and Sherwood provided that recommendation?

A I would agree it is not listed here. I have documentation that Dr. Huffnagle and Dr. Sherwood provided the recommendation for the neurology care.

Q What is that documentation? Is it the questionnaires that you sent to them?

A Yes.
Q Okay. We'll get to those in a little bit.
Let's go back to some other questions. When you prepare a life care plan, you rely on medical doctors to identify what medical intervention should be included in the life care plan; correct?
A During the development of the life care plan, I -- one of the resources I use are input from providers of care to identify the services and support that an individual would need.
Q What are some of the other sources?
A I'm sorry, are you asking in general or is there -- are you referring to specific --
Q If I'm asking about particularized medical interventions listed throughout your life care plans, you're telling me that physicians or medical doctors are one of the sources that you use.
And so my question to you is, what are some of the other sources, if any?
A In general, there may be other providers of care, there may be clinical guidelines, research data. I may not be naming everything, but there may be other resources in addition to the physician that is going to provide input into the support and

services that the individual needs.

Q If a medical doctor does not recommend a particular intervention with respect to an individual in their life care plan, would you still put it in your life care plan?

A I need clarification on that. When you say "does not recommend."

Q What clarification do you need with respect to that?

A Well, are you asking have they said no, they don't need it, or is it just that they haven't provided any input on that particular recommendation?

Q Let's address both. Let's first address the example in which they say no, they don't need it. Would you still include it in your life care plan in that example?

A Well, it's very individualized and client specific, so I don't know -- again, I would need more information. I don't know if you're talking about one particular physician and their recommendation.

When I look at the life care plan and develop the life care plan, I look in total about what have all the providers of care recommended and

all of the sources -- I'm sorry, and all of the sources of information that have been used to develop the life care plan.

Q What are the other sources outside of medical providers?

A Sources of information could be clinical practice guidelines, databases, you know, published research.

Q Now let's address the example if a particular provider just hasn't addressed a specific intervention. How would you treat that situation with respect to making the decision about whether or not to include something in your life care plan?

A I'm sorry, I don't mean to be -- I would need a specific example of what you're referring to. I can't give a generalized statement like that.

Q Well, I just gave you an example when we looked at appendix 1.

A Exhibit 1? I'm sorry.

Q Yes, excuse me. Appendix 1 of Exhibit 1. If you turn back there, we can talk about that page for a moment.

So I want to compare two different services on this page. Let's first take a look at "Primary Care," and underneath it lists "Parkinson's

Disease related conditions, per Drs. Huffnagle and Sherwood."

Do you see that?

A Yes.

Q And then if we go back down to "Neurology," there's no provider listed under there; right?

A Under "Neurology."

Q Do you agree with me that there's no provider's name listed underneath that?

A There is not a specific provider listed under that.

Q And under "Neurosurgery," there is also not a specific provider's name listed underneath that?

A Correct.

Q Nor is there for "Analysis and Programming of the DBS"; right?

A Correct.

Q Or for "Battery Replacement for DBS"?

A Correct. And can I just clarify that for "Neurology," "Analysis" and "Battery Replacement," those are all indicated as to be determined.

Q Right. So for example, if a provider had not addressed one of those topics that we just

talked about but you believe it should be included in the life care plan, how would you handle that situation?

A Are you referring to this specific entry?

Q Sure --

A Which specific entry are you referring to?

Q Just by way of example, we'll take "Neurology."

A Yes, okay.

Q And if the providers had not addressed neurology in your work-up of a patient with respect to their life care plan, but you, Ms. Hairston, believed that it should still be included in the life care plan, how would you address that situation?

A For this particular situation, this neurology service was addressed by Drs. Huffnagle and Sherwood. It is not indicated on this specific entry.

Q Right. And the example that I'm asking about is, if it was not indicated by a provider and you still believed that it needed to be included in a life care plan, how would you handle that situation?

A Well, I'm sorry, that's a theoretical

situation. It's very individualized. So I would have to identify the specifics for that particular situation, and it would be -- it would be handled very individualized based on that case.

I can't give a generalized answer as how that I would -- how it would be included in the report.

Q If you disagreed with respect to something that a medical provider believed should not be included in a life care plan, do you believe that you are qualified to make medical recommendation that should be included in a life care plan?

MR. ROMANO: I'll object to the form of the question.

THE WITNESS: When I develop life care plans, I develop them with consideration with the input and information I receive from the resources that are utilized for that life care plan.

BY MR. CARPENITO:

Q Ms. Hairston, you agree with me that didn't answer my question; right?

A I can't agree with that.

Q If a medical doctor's recommendations change that you relied on for a life care plan and a medical doctor's recommendations changed after

submission of the life care plan, do you agree that your plan would need to change?

A If a provider's recommendation changed, I would need to see that information and review it and analyze it and determine its impact on the life care plan.

Q When two doctors give materially different projections about the future care required for the same patient, you can't determine which one is medically correct. Do you agree with that?

A I'm sorry, I can't agree with that whole statement. It's too general for me.

Q Okay. Well, then explain in a way in which you can answer it.

A Ask the question again, please.

Q Okay. If Dr. A says patient needs medication for five years, but Dr. B says patient needs medication for 10 years, you, as a certified nurse life care planner, can't determine whether Dr. A or Dr. B is medically correct. Do you agree with that?

A That statement is too generalized. Each case is very individualized. I have to look at all of the information together. I can't give a specific answer on that situation.

Q If a Parkinson's Disease patient undergoes DBS placement surgery after you prepare a life care plan, that would represent a material change in treatment; right?

A If new information came -- becomes available after a life care plan is issued, that information would need to be reviewed and analyzed and determined how it would impact the life care plan.

Q If a patient had a DBS placement surgery after you provided a life care plan, that's information that you would want to review; correct?

A If I am being asked to review that information, that would be information that would want to be reviewed to determine if it has any impact on the life care plan.

MR. CARPENITO: Can we go off?

VIDEO OPERATOR: Sure. We're going off the record. The time is approximately 10:41 a.m. This is the end of media number 1.

(Recess.)

VIDEO OPERATOR: We are back on the video record. The time is approximately 10:53 a.m. This is the beginning of media number 2.

BY MR. CARPENITO:

Q Ms. Hairston, earlier we talked about cases in which you have provided testimony in the past.

Do you recall that?

A Yes.

Q How many meetings with attorneys do you usually have when you prepare to give testimony?

A Well, number one, when you say "meetings," what are you referring to? Can you just clarify that question a little bit, please?

Q Ms. Hairston, what do you understand a meeting to be?

A I understand a meeting. I want to make sure I'm understanding what you're asking. Are you referring to a telephone conversation, a meeting? How many --

Q Any of the above.

A And I can't give a specific number. It's individualized based on the case.

Q How many meetings did you have with attorneys prior to your deposition today in preparation of your deposition today?

A To the best I recall, one meeting.

Q Okay. Do not tell me the substance of those conversations.

How long did those meetings last?

A To the best that I can recall, between 45 minutes to an hour.

Q And is my understanding correct that you had one meeting that lasted 45 minutes to an hour to discuss your deposition today?

A Correct.

Q Who was present?

A At that meeting, John was present and Leslie was present. I'm sorry, it was a virtual meeting.

Q Outside of that one meeting with John and Leslie that lasted for 45 minutes to an hour, did you have any other types of meetings with attorneys to prepare for today's deposition?

A Schedule for depo preparation, that was the meeting that we had.

Q Any other phone calls?

A I don't recall at this time what other phone calls I had.

Q Before today's deposition and preparing for it, did you review any videos on depositions?

A I'm sorry, can you -- did I look at other videos? Can you clarify what you're asking, please?

Q Did you review videos about giving

deposition testimony in preparation for your deposition today?

A No, I did not.

Q Did you review any audio recordings on how to provide deposition testimony in preparing for your deposition today?

A I did not.

Q Before we took the break, we were discussing DBS.

Do you remember that?

A Yes.

Q Okay. If a patient's Parkinson's Disease symptoms improve following the placement of a DBS, that would reduce the severity of their functional limitations; correct?

A That would be very individualized. I can't answer that question.

Q But it's a possibility; right? It could happen?

A Again, it's very individualized, client specific. I don't -- it would have to be determined how that DBS is impacting that individual.

Q Right. And that doesn't answer my question.

My question was it could happen that a

patient's symptoms related to Parkinson's Disease could improve following the placement of a DBS; right?

A A patient's -- following placement of a DBS, a patient's symptoms could change.

Q Do you agree that functional limitations with respect to an individual who has Parkinson's Disease can drive many of the projected services in a life care plan?

A Can you repeat the question, please? Can you repeat the question?

Q Do you agree that if an individual has functional limitations with respect to their Parkinson's Disease, it could drive many of the projected services in a life care plan?

A That would have to be reviewed on an individual basis.

Q Going back to our example, assuming that a patient's Parkinson's Disease symptoms improve following the placement of a DBS, that improvement could impact the patient's future care needs; right?

A Following placement of a DBS stimulator -- a DBS, if there were changes in function for a patient, it would have to be examined at that time and determined what their needs are.

Q And I'm asking you about the example that we just talked about in which there was a possibility discussed that a patient's symptoms could improve following DBS.

Do you remember that?

A Yes.

Q Okay. Assuming that has happened in a patient, that could change their future care interventions in a life care plan; correct?

A Assuming there were changes -- I'm sorry, I don't like to assume anything. That's theoretical.

Whatever -- whatever the status is of that individual, it would have to be reviewed and determined what their needs are at that time.

Q And assuming a patient's symptoms improved following placement of a DBS, could that affect the frequency of certain life care plan interventions?

A I'm sorry, that's a little too general for me. I don't know what life care plan interventions.

Again, whatever impact that DBS has on the individual, it would need to be reviewed and determined what their needs are at that time.

Q Do you agree that DBS can alleviate symptoms for at least 15 years?

A That's a generalized statement. I can't agree with that.

(Government Exhibit 6 identified.)

BY MR. CARPENITO:

Q I'm going to introduce Exhibit 6.

Ms. Hairston, I'd represent to you that this is a small portion of the deposition transcript of Dr. Richard Barbano, who is one of Plaintiffs' retained experts in this litigation. I'll ask that you turn to the last page. Let me know when you're there.

A Okay.

Q Do you see, I'm going to read into the record lines 20 through 23, and it starts with a question, and I quote, "Would you agree that a patient's improvements from DBS surgery can last at least 15 years?"

Dr. Barbano's answer, "Yes."

Did I read that correctly?

A You read that correctly.

Q Do you have any reason to disagree with Dr. Barbano at this point?

MR. ROMANO: I'll object to the form of the question and this entire line of questioning about disagreeing with a physician.

Go ahead.

THE WITNESS: What I would say is this is not the type of setting for me to read information that is just being introduced to me and analyze it and make any type of comment on it.

BY MR. CARPENITO:

Q You're aware that Dr. Barbano is one of the Parkinson's Disease experts hired by Plaintiffs attorneys in this litigation; right?

A I am not familiar with Dr. Barbano.

Q Can you look -- turn to page -- the second cover page of Exhibits 1 and 2, please. And if you look at the second paragraph of both of those exhibits, they discuss that you received input from Mr. McElhiney's treating providers and Mr. Peterson's treating providers.

Do you see that?

A Yes.

Q Are there any other treating providers in either case that you received input from in formulating your life care plans in these cases that are not listed here?

A Not that I recall. I don't have any information from any other treating providers.

Q If you did, it would be listed in your

report; right?
A It would be.
Q And you obtained at least some of that input by sending written questionnaires to certain providers; correct?
A Correct.
Q And some of those providers completed and returned questionnaires to you; right?
A Well, I'm sorry, when you say "some of those providers," I don't --
Q Did you provide questionnaires to all of them?
A I have identified the providers of care that I reached out to and what I received from them.
Q Did you send a written questionnaire to every provider identified on the second page of each of these reports?
A Let me look at them individually.
And so just for clarification, for Mr. McElhiney, I sent questionnaires to Dr. Huffnagle and Dr. Sherwood. For Mr. Peterson, I sent questionnaires to Dr. Kumar. I had conversations with the other providers.
Q And the other providers would be the speech therapist Ms. Celia Lyons; correct?

A The speech therapist and the physical therapist.
Q Ms. Ellen Markwell; right?
A Yes.
Q Did you send any type of questionnaire to Mr. Eric Anderson?
A No.
Q So I'm just trying to understand the process here. So we'll take Mr. McElhiney, for example.
You sent questionnaires to Drs. Huffnagle and Sherwood; correct?
A Yes.
Q And then they completed those questionnaires and sent them back to you; right?
A Yes.
Q Did you at any point in time send a draft of your life care plan back to those providers after you received their answers to the questionnaires?
A No.
Q Okay. And would that process have been the same with respect to Mr. Peterson's report?
A The question being did I --
Q After you received input from the individuals listed in the second paragraph on the

second cover page of your report in Mr. Peterson's case, did you at any point after receiving that input send your life care plan back to those providers or other individuals to receive their confirmation of the life care plan?

A No, I did not send the life care plan. But may I clarify, please?

Q Yes.

A With Dr. Huffnagle, I did require some clarification on questions, so there was a second questionnaire that was sent out. And with Dr. Kumar, I provided him a summary of the conversation and asked him to review that and provide any additional commentary.

Q Right. But I'm saying the life care plan specifically, none of those individuals reviewed it after you received their input?

A I did not send it to them.

Q In your life care plans that you work on, are you ever the source of the underlying recommendation or service for daily care from CNA services?

A Can you repeat the question?

Q Yes. Let's go to appendix 1 of Mr. McElhiney's report, which is Exhibit 1. And I

think I told you appendix 1, but we should turn to appendix 8, I'm sorry.

A Okay.

Q Ms. Hairston, before we look at that I should ask, going back to the line of questions that we were just discussing with respect to whether or not you sent your life care plan back to those individuals after receiving their input. Do you remember us discussing that?

A Yes.

Q Was there anybody else who would have sent your life care plan back to those people after you received their input?

A Not within my organization.

Q Okay. Are you -- okay.

Are you aware of anybody else?

A I am not aware of anyone else.

Q Okay. Looking at appendix 8 of Exhibit 1, do you see listed under "DAILY CARE," there is a service of "CNA"?

A Yes.

Q Are you ever the source of the recommendation of that CNA care when you prepare a life care plan?

A Again, each individualized -- each life

care plan is individualized, so depending on the information that has been obtained, I utilize input that I have received from resources involved in the -- of the plan of care along with my experience, expertise, and knowledge of the area.

Q How did you first hear about the Camp Lejeune water litigation?

A I'm sorry, in this particular litigation? Which -- I'm sorry, can you be a little bit more specific?

Q The Camp Lejeune water litigation.

A I mean, I've seen about it on TV.

Q Okay. How did you first hear about Mr. McElhiney and Mr. Peterson's case?

A While as an employee at The Coordinating Center, my medical director presented the information to these cases to me and asked if I would like to work on the case.

Q When did that occur?

A Quite honestly, I don't know the exact date that that occurred.

Q It would have been sometime before February 5 of 2025; right?

A Yes.

Q Would you agree that it probably occurred

sometime in 2024?

A Yes.

Q Okay. Who, without telling me the substance, who contacted you from Plaintiffs counsel?

A I'm sorry, I was just -- are you referring to about the case initially?

Q Yes, about these two cases.

A Again, my work typically I am -- agree to or identify work that I'm going to work on after conversations with the medical-legal director of the med legal department at The Coordinating Center. So at what point in time she spoke with the attorneys office, I don't exactly know. I get the information from her, and we've talked about it.

From there, I begin work on the case.

Q So your assignment came from that individual at The Coordinating Center? Am I understanding that correctly?

A Yes.

Q Your assignment didn't come directly from the attorneys?

A She initially communicated with the attorneys about the case.

Q And then she informed you of what she

thought the project should be?

A And then we've talked -- we talked about is this a case, Kay, you would like to work on.

Q Did you -- again, do not tell me the substance.

Did you ever speak with them about your understanding of what they were asking you to do?

A Oh, yes. After the case was assigned to me, then I began communications with the law office, okay.

Q What did they -- what was the assignment that you were asked to do?

A I was asked to prepare a life care plan to identify the supports and services that the individuals need based on their response to the injury.

Q Do you have any understanding as to why you were assigned two cases that dealt with Parkinson's Disease?

A I'm sorry?

MR. ROMANO: Without revealing any communications with the attorney.

THE WITNESS: I'm sorry, are you asking, for clarification, a communication -- how the cases came to The Coordinating Center, how the cases came

to my medical director?

BY MR. CARPENITO:

Q I'm asking if you have an understanding, without disclosing any conversations, substance of that, that you may have had with attorneys, do you have an understanding as to why you were asked to work on two cases that dealt with Parkinson's Disease?

A I was asked to work on two cases to provide a life care plan and identify the supports and services that these individuals needed now relative to the Parkinson's Disease.

Q So is the answer to my question no, you don't have an understanding as to why?

A That is what I was asked to do for these cases.

Q Do you have an understanding as to why you were asked specifically to work on Mr. Peterson's case?

A I was asked to work with Mr. Peterson to identify the supports and services that he needed and develop a life care plan.

Q Is that the same with respect to Mr. McElhiney?

A Yes.

Q Did you ever have questions about your assignment or what you were asked to do?

A Can you be more specific, please? I'm sorry.

Q Did you ever questions about what the attorneys were asking you to do with respect to your expert work in this litigation?

A Well, I was asked to prepare a life care plan for both of these individuals that speaks to supports and services that they need relative to the response they have had to their injuries.

Q I'm not asking what you were asked to do. I'm asking if you ever asked the attorneys questions about the scope of your assignment.

MR. ROMANO: Objection. That would all be attorney-client privileged.

BY MR. CARPENITO:

Q Are you going to take your counsel's instruction?

A Right now I would have to ask you to repeat the question so --

Q Without telling me the substance of any questions, if any, my question was did you ever have any questions about the assignment that the attorneys asked you to provide in this litigation?

A I was asked to develop a life care plan that speaks to the supports and services that these -- that Mr. McElhiney and Mr. Peterson need relative to their injuries associated with the Parkinson's Disease.

Q Did you agree to serve as an expert before reviewing any documentation with respect to Mr. McElhiney or Mr. Peterson?

A I'm looking like that, I'm sorry.

Again, I work on cases as my medical director and I agree that, you know, is it appropriate or if I would like to work on the case. So I don't have an answer to that question.

Q You don't remember if you reviewed any documentation with respect to Mr. Peterson or Mr. McElhiney before you agreed to serve as an expert witness?

A I don't believe I -- there was any -- I'm sorry. What documentation are you referring to?

Q Any documentation with respect to either of the Plaintiffs.

A I don't recall there was any specific documentation presented to me about the cases other than you're being asked to prepare a life care plan.

Q If we can look at the first cover page of

Exhibit 1, please. The first sentence of that first paragraph reads, "Enclosed you will find The Coordinating Center's preliminary life care plan on behalf of your client, Gary McElhiney."

Did I read that correctly?

A Correct.

Q Was there anyone else involved outside of employees from The Coordinating Center that worked on this life care plan?

A As identified in the report, the resources that were used in development of the life care plan are identified. Outside of individuals at The Coordinating Center, there was no one else involved in the development of the life care plan.

Q It says that this is a preliminary life care plan; correct?

A Correct.

Q Is this not a final version?

A This is a plan that is based on the information available up until the time the report was issued. Should there become additional information available or if the case continues on to trial, if there is any new information available, you know, the plan -- that would be reviewed and determined if there would be any supplement to the

plan.

Q Okay. In other words, this is not a final life care plan; is that right?

A This is a preliminary life care plan.

Q The third sentence of that first paragraph reads, "This plan was developed consistent with published standards of practice and with my regular practice in life care planning."

Did I read that correctly?

A Correct.

Q What published standards -- let me back up.

What publications are you referring to?

A At the American Association of Nurse Life Care Planning Scope and Standards of Practice, along with the methods that are consistently used within my life care planning practice.

Q What are the standards that you're referring to in that paragraph?

A The standards -- American Association of Nurse Life Care Planning Scope and Standards of Practice, which is a publication.

Q You also state that your plan reflects your regular practice in life care planning; correct?

A Yes.
Q When you use the phrase "regular practice," that does not mean Parkinson's Disease specific practice, does it?
A It means -- it indicates the methods that are used in my practice to develop a life care plan.
Q Ms. Hairston, I'm going to ask you to answer my question.
When you use the phrase "regular practice," that does not mean Parkinson's Disease specific practice; correct?
A It does not -- it includes -- it is referring to the recommendations that an individual needs based on the response to the injury that they have had.
Q Do you remember earlier we talked about individually when you've prepared life care plans, the number of those life care plans was between 25 to 50; right?
A Correct.
Q When you work on life care plans of other life care planners, you approximated that number of life care plans was 100 to 200; correct?
A Correct.
Q So you would agree, then, that we are

somewhere between total, whether it's individually you creating a life care plan or together, 125 to 250 life care plans that you have either created or worked on; right?

A Yes.

Q Okay. And you also testified that of that 125 to 250 life care plans, only five dealt with somebody with Parkinson's Disease; correct?

A Yes.

Q Okay. So my question to you, when you state that this reflects your regular practice, your regular practice does not mean Parkinson's Disease specific practice. Would you agree with that?

A It is not only Parkinson's Disease clients, yes.

Q It does not mean neurology-focused practice; right?

A Well, it's individualized. It depends on if a -- you know, an individual's response that they have had to the injury and what service is indicated for them.

Q Do you agree that this plan applies the same general life care planning framework that you use in all your cases, regardless of the diagnosis?

A It is individualized and client specific.

Q Do you use the same methodology that you use in other life care plans?
A Yes.
Q We'll turn to the second page, second cover page there on Exhibit 1. Thank you. The first paragraph, last sentence there reads, "As part of the evaluation process, medical records provided by the law office were reviewed and are listed at the conclusion of the narrative portion of this evaluation."
Did I read that correctly?
A Yes.
Q Did you ask for any medical records besides what Plaintiffs counsel provided to you?
A At this time, not that I can recall.
Q In other words, you did not ask for medical records besides what Plaintiffs counsel provided to you; is that right?
A At this time, not that I can recall.
Q Do you agree with me that you did not ask for additional medical records besides what the Plaintiffs attorneys provided to you?
A At this time, not that I can recall.
Q Were there any records that you didn't have but wanted access to?

A Not that I can recall.
Q For either case?
A Not that I can recall.
Q Is there anything that would help you recall?
A Not at this time.
Q Let's look at both Exhibits 1 and 2, and we're going to turn to page 17 of those.
This is your section entitled "Records Reviewed." Correct?
A Correct.
Q And you don't identify the Bates number for these records on these pages; right?
A Correct.
Q Looking at your report on Mr. McElhiney specifically, your report states that you reviewed records from Dixon Medical Association from February 11, 2016, to March 11, 2024; right?
A As listed there, yes.
Q Have you received any records from Dixon medical associates after March 11, 2024?
A Not that I recall.
Q Looking at the same page, you have Department of Veterans Affairs records beginning August 9 of 1999; correct?

A Yes.
Q Are you aware that Mr. McElhiney's VA records predate 1999?
A At this time, I would have to respond it's what's listed here on this records review. I don't recall any other time frames.
Q In other words, you didn't request any VA records related to Mr. McElhiney that predate 1999?
A Not that I recall at this time.
Q And you did not note in your report that VA records with respect to Mr. McElhiney predating 1999 were unavailable to you, did you?
A At this time, not that I recall.
Q Are you aware that Mr. McElhiney also has medical records from his time with the United States Marine Corps that predate 1999?
A At this time I'd have to defer to the records review as listed in the report.
Q You did not request Mr. McElhiney's records from his time at the United States Marine Corps that predate 1999, did you?
A I did not request them.
Q Did anybody request them from Plaintiffs counsel and provide them to you?
A I'm not aware of -- the records that I'm

aware of, I have to defer to what's listed here in the records review at this time.

Q Will you turn to page 5 of Exhibit 1. Let me know when you're there.

A Page 5, yes.

Q Could you look at the last paragraph on that page. The first sentence reads "Mr. McElhiney acknowledged that prior to his Parkinson's disease, he experienced low back pain."

Did I read that correctly?

A Correct.

Q If those VA records that predate 1999 relate to the back pain Mr. McElhiney has now, would those records have been relevant to your analysis?

A Can you repeat the whole question again, please?

Q You recall we were just talking about Mr. McElhiney's VA records; right?

A Correct.

Q Okay. If those VA records that predate 1999 relate to Mr. McElhiney's back pain, would those records have been relevant to your analysis in his case?

A Well, it's -- records would need to be reviewed on an individual basis and analyzed and

determine the impact on the development of the life care plan.

Q That doesn't answer my question.

A Okay. Would you like to ask again?

Q Yes. If those VA records that we just discussed that predate 1999 relate to Mr. McElhiney's back pain, would those records have been relevant to your analysis in this case?

A Any information available can be reviewed and analyzed and determined how they would impact or be involved in the development of the life care plan.

Q If Mr. McElhiney's medical records from the United States Marine Corps that predate 1999 also relate to Mr. McElhiney's back pain, would those records have been relevant to your analysis in this case?

MR. ROMANO: Objection to the form of the question.

Go ahead.

THE WITNESS: Information that is available to review would be reviewed and analyzed and determined how it would impact the development of the life care plan.

BY MR. CARPENITO:

Q That's right. So you would need to review those records to make that determination; right?

A If there are records available, records could be -- records would be reviewed and analyzed and determined if they would be -- impact the development of the life care plan.

Q Would you need to review the two sets of records that I've just asked you multiple questions about to determine whether they would be relevant to your analysis in Mr. McElhiney's case?

MR. ROMANO: Objection to the form of the question.

THE WITNESS: I -- if there are records available -- is there something specific that we're talking about in the medical records or --

BY MR. CARPENITO:

Q My question stated to you was if they related to his low back pain.

A So relative to his back pain, I mean, it's talked about in the report that he acknowledged that he's had low back pain, and with the appropriate medical interventions and management, he maintained an independent lifestyle.

Q For life care plans that you author, is it important -- is it an important part of your

analysis to consider a patient's historical consumption of medical services?

A That's a very generalized question. I would need something more specific as it relates to the development of the life care plan.

Q So when I say a patient's historical consumption of medical services, I'm talking about whether or not they have utilized a particular medical service in the past.

Do you understand that?

A Yes.

Q For life care plans that you author, is it important for you to consider the patient's historical consumption of medical services, yes or no?

MR. ROMANO: Objection to the form of the question.

THE WITNESS: Medical services, I would need something more specific. Medical services specific to what? I mean, that's a very generalized.

BY MR. CARPENITO:

Q Let's take therapy, for example. If you recommended one session of therapy a week for an individual, would you also want to know historically

has this individual gone to therapy one time a week?

A Again, that is very generalized. There are multiple factors that would need to be looked at in terms of reviewing when they had therapy, how much therapy they had, the outcomes of the therapy and how it's relevant to the response that they're having to the injury at the time the report is developed, and other factors that I might not be mentioning at this time.

Q If a patient has never historically utilized a particular intervention, is that something that you would want to account for before projecting it into the future?

A It depends on what that -- I would need something more specific. That's very general.

Q That's fine. In life care planning, it's common for pricing data to be reported by percentile; right?

A That's very general. I don't know what you're --

Q In other words, life care planners typically cost out within a certain percentile range; right?

A That's extremely general. I would need to --

Q Do you as a life care planner cost out your sources within a particular percentile?

A It depends on the service that I'm looking at, and that's still a very general statement. I cannot say that there is a particular percentage that I typically use in the development of the life care plan.

Q Can you identify the percentile that you used in these life care plans?

A Well, can you please refer to the specific service that you're talking about?

Q So is your opinion that the percentage used changes depending on the particular line item in your life care plan?

A No, I'm not going to agree to that either. I would need to ask what particular service are you referring to.

Q Let's go to appendix 1.

A For which exhibit?

Q Great question. Exhibit 1, Mr. McElhiney.

MR. ROMANO: The front of the appendix?

MR. CARPENITO: Yes, sir, appendix 1.

BY MR. CARPENITO:

Q So let's take primary care listed there. And your unit cost is listed as $291; right?

A Correct.
Q What percentage did you use in costing out primary care?
A That is the actual cost of the service.
Q Right. But when you use a percentile-based price, it allows the reader of the life care plan to understand where within the market the pricing falls; right?
A Uh-huh.
Q My question is, what is the percentages that you used in your reports in these cases?
A Okay. For that particular cost, it is not reflected as a percentage cost. My -- our -- my methodology is to contact the provider that is providing services and asking what is the cost for him to come and visit you.
Q So you call Dixon Medical Associates and say what does it cost Mr. McElhiney to come and have a primary care physician visit with you; is that right?
A Yes.
Q Okay. Turn to appendix 2, please. Do you see podiatry listed about halfway down the page?
A Yes.
Q You see the unit cost is 60 to $199?

A Yes.
Q What percentage did you use there?
A Again, in my practice, if an individual does not have a particular provider, we survey providers within close proximity to that individual and identify the cost for him to come in and receive treatment.
Q Right. And based on those costs, what are the percentages that you used?
A These are the actual costs, so it is a range of the actual cost of the providers from the lowest cost that was obtained to the highest cost that was obtained.
Q I see, okay. For any line item where you used a range of providers, how many providers are you contacting?
A Typically in my practice, we will contact at least three providers to get the range of costs. If there are three providers available in that area.
Q What if there's not three providers available?
A If there's not three providers within proximity for this individual to travel to, we use the costs for the providers that are available to that individual.

Q What if there are more than three providers available?

A What is consistently done in my practice is we will contact three providers.

Q How do you choose those three providers?

A Typically, we look at the proximity of the providers to the individual and will contact three providers that he can get to within at least 30 minutes.

Q Do you do any type of analysis to compare to other providers in close proximity in a situation where there's more than three available to compare pricing to see if there are lower prices available?

A Typically, we will -- I will -- and the individuals will identify three providers. I will look at the pricing for those three providers. If it does not appear reasonable or with a typical range for that service area, it is analyzed, but --

Q How do you determine what's reasonable?

A Look at the cost.

Q And what are some of the things that you're looking for when looking at the cost?

A Typically in my practice, we are going to look at three providers that are within close proximity to the individual.

Q In other words, there is no discrimination of the criteria that you used to choose one provider over the other in your report; right?

A As what is typically done consistently in my practice is we are going to identify providers who can provide the service indicated and are within proximity for the individual to travel within 30 minutes or less.

Q Other than proximity, there's no methodology anywhere, anywhere in either of these reports, in which you state how you choose the providers; correct?

A Typically, we're going to identify three providers that are within the service area of the individual.

Q Your reports don't explain the number of providers that are identified for each of the line items in which there is a range of costs; right?

A I'm sorry, say that again.

Q Do your reports anywhere explain the number of providers that you contact to provide your range of costs?

A It is not indicated on this report.

Q It's not indicated in Mr. Peterson's report either, is it?

A Let me look. He has range of local providers as well.

Q And so in Mr. Peterson's report, you also agree that your reports don't explain how many providers were contacted to generate a range?

A So let me clarify.

For each line item, there may be a range of local providers and other -- and on other line items, there are specific providers identified.

Q I understand that. We've been talking about the line items in which there is a range of pricing identified.

A Yes.

Q And those examples, across both reports, your reports do not explain how many providers were contacted to generate the range of cost; correct?

A It is not reflected on the report. It is typical in my practice that three providers will be contacted.

Q Turn to appendix 2 of Mr. McElhiney's report, which is Exhibit 1.

A Appendix 2?

Q Yes, ma'am. And you see at least three of those line items list a range of providers; right?

A Yes.

Q And those same three line items list a range of unit costs; right?
A Yes.
Q And the title of appendix 2 is "PHYSICIAN/MEDICAL CONT."; correct?
A Correct.
Q If you will please then flip to page 18 in Mr. McElhiney's report.
A I'm sorry, page?
Q 18.
A Page 18.
Q Yes, ma'am. This is your resources page; right?
A Correct.
Q And these are some of the providers that you contacted in the process of filling out your life care plan; correct?
A Yes.
Q I count under "Physician/Medical" 14 different providers listed there.
Do you see that?
A Okay. Yes.
Q Do you agree with that number?
A Yes.
Q And if you turn back to appendix 2, your

report does not tell us which of those providers were contacted to generate the range of which you provided.

Do you agree with that?

A Yes.

Q Okay. And the same would be true in a similar example for Mr. Peterson's report; correct?

A Well, if I can clarify.

Q Yes, ma'am.

A The resources that were contacted are listed in the report. They have not been identified specific to each line item.

Q So how is a reader of your life care plan supposed to understand which resources were contacted to generate these ranges?

A Yes, the resources are listed in the report. They are not specifically identified per line item on the appendix.

Q But you agree that you just testified that your typical practice is to contact three of them; right?

A Typical practice, when available, we'll contact three providers within close proximity.

Q Yes, ma'am. And you just testified that there's 14 providers there listed under

"Physician/Medical"; right?
A Yes.
Q So are you telling the reader of the life care plan to call every single one of those 14 providers to figure out how you calculated your range?
A Well, the resources are listed in the report.
Q Your report does not factor in whether insurance or Medicare would cover any of these costs; right?
A The costs listed are the prices obtained from the providers that were contacted.
Q So is the answer to my question no, it does not consider that?
A It is -- it reflects the costs that are charged by the providers of care.
Q Before insurance or Medicare would cover costs; right?
A These are the -- this is what is charged by the providers.
Q Did you take into account whether Mr. McElhiney's or Mr. Peterson's services anywhere in either of these reports have previously been covered by insurance or Medicare?

A When -- as I develop reports, I never have any indication that an individual will continue to be eligible for a particular type of medical coverage, nor will that particular coverage exist for whatever time period. And the costs that are reflected in the report are the costs that are charged by that provider.

MR. CARPENITO: Understood. Ms. Hairston, why don't we take a break.

VIDEO OPERATOR: We are going off the video record. The time is approximately 11:52 a.m. This is the end of media number 2.

(Recess.)

(Whereupon, at 11:52 a.m., the deposition was recessed, to be reconvened at 12:45 p.m. this same day.)

AFTERNOON SESSION (12:45 p.m.)

Whereupon,

KAY FRANCES SEARS HAIRSTON

resumed the stand and, having been previously duly sworn, was examined and testified further as follows:

VIDEO OPERATOR: We are back on the video record. The time is approximately 12:45 p.m. This is the beginning of media number 3.

EXAMINATION (Continued)

BY MR. CARPENITO:

Q Ms. Hairston, if you will grab Exhibit 1 again and turn to appendix 2.

A Yes.

Q Do you recall before the break, we were talking about these line items on appendix 2 where you have a range of unit costs listed?

A Yes.

Q And next to "PROVIDER," you have a range of local providers listed; correct?

A Yes.

Q Did you conduct any research to determine, in instances in either report where you have a range of local providers and a range of unit costs, did you conduct any research to determine whether the

pricing was representative of the broader market?

A Can you explain or clarify when you say "broader market"?

Q Did you compare the prices from the providers that you identified to any other providers in the market in the locale in which either of the Plaintiffs reside?

A As indicated previously and as is typical in my practice, we identified the cost of providers that were in close proximity to the individual.

Q So is the answer to my question that you did not conduct any research to determine whether the providers that you list on your resources page was representative of the broader market?

A I don't know how you -- again, that's a general statement. I don't know how you define broader market in comparison to identifying three providers that were identified within range of a close proximity of the individual.

Q Your resources list does not identify which specific provider supplied which specific cost in your life care plan; correct?

A For some of the resources identified in the report, the names of the providers are listed and can be correlated with some of the line items on

the spread.

Q I'm asking specifically in instances across either report where you use a range of local providers, your resources list or your life care plan table does not identify which specific provider supplied which specific cost; correct?

A The list of the resources are listed in the report, and they are not identified on each line item.

Q Okay. So, for example, let's look at appendix 2. Do you see podiatry listed on appendix 2 of Exhibit 1?

A I do.

Q Do you see range of local providers there?

A Yes.

Q Do you see the cost -- the unit cost range of 60 to $199?

A Yes.

Q And if you'll turn to page 18, on your resources, please tell me which of those resources listed under "Physician/Medical" correlates to the range of costs that you have for podiatry on your appendix 2.

A Based on the information provided to me for podiatry, the costs would be Advanced Foot &

Ankle Care centers and Ankle & Foot Centers of America.

Q Okay. Is there any identification in appendix 2 that those are the providers where that cost comes from?

A No.

Q Are you familiar with Context for Health?

A The name -- I've heard of the name, yes.

Q What do you understand Context for Health to be, the organization?

A My understanding, Context for Health compiles data, statistics and analysis.

Q With respect to what type of information?

A Medical services.

Q Billing costs?

A I am not -- I am not familiar with all the specifics of the data provided by that source.

Q Have you ever heard of Physicians Fee Reference?

A I have heard of it, yes.

Q What is your understanding of what Physicians Fee Reference is?

A Again, they provide data, statistics and analysis of costs of services.

Q What about FAIR Health?

A FAIR Health provides data, statistics and analysis of medical services based on a vast number of claims.

Q Do you agree that Context for Health is a reliable costing source used in the field of life care planning?

A Context for Health is a good source of information.

Q For costing sources in the field of life care planning; correct?

A For costing services.

Q In the field of life care planning?

A The resources that I have identified in my report are the resources that I typically use when developing a plan of care.

Q I understand that. But I want to talk about these three.

A Okay.

Q So do you agree that Context for Health is a reliable costing source in the field of life care planning?

A It is a cost that is used. I have not used it frequently.

Q Do you agree that Physicians Fee Reference is a reliable costing source in the field of life

care planning?

A It is also a resource that is used in the field of life care planning.

Q And for FAIR Health, would you agree that that is also a costing source in the field of life care planning?

A It is a resource used in the field of life care planning.

Q Turn to appendix 1 in Exhibit 1, please.

Looking at appendix 1, the provider listed for the neurology service, you have FAIR Health and VA Vanderbilt; correct?

A Correct.

Q If you turn to appendix 2, you have FAIR Health listed as the provider for associated physicians fee; correct?

A Correct.

Q Other than those entries on appendices 1 and 2 in Exhibit 1, you do not list FAIR Health anywhere else in Mr. McElhiney's life care plan tables. Would you agree with that?

A I would agree with that. Yes.

Q Do you agree that you do not list Context for Health anywhere in Mr. McElhiney's life care plan tables?

A I do not list Context for Health in the tables.

Q Do you agree that you do not list Physicians Fee Reference anywhere in Mr. McElhiney's life care plan tables?

A I do not list Physicians Fee Reference in Mr. McElhiney's life care planning tables.

Q If you will turn to appendix 1 of Exhibit 2, which is your report in Mr. Peterson's case.

A I'm sorry, appendix -- which appendix?

Q Appendix 1, please.

Do you see Physicians Fee listed as the provider for the battery replacement for DBS service?

A Yes.

Q Other than that entry in Mr. Peterson's case, you do not list Physicians Fee anywhere else in this life care plan; correct?

A So I'm sorry, just for clarification, when you're referring to Physicians Fee, what is your definition or what are you using as Physicians Fee?

Q Is Physicians Fee the same thing as Physicians Fee Reference?

A No.

Q Okay. So in other words, you don't list

Physicians Fee Reference anywhere in your life care plan for Mr. Peterson?

A No.

Q And it's also true that you do not list Context for Health anywhere in Mr. Peterson's life care plan; correct?

A I do not.

Q And you do not list FAIR Health anywhere in Mr. Peterson's life care plan; correct?

A I have not used FAIR Health in Mr. Peterson's life care plan.

Q Are you aware that Plaintiffs counsel retained another life care planner in this litigation?

A No, I'm not aware.

Q You're not aware that Plaintiffs retained Mr. Michael Fryar in this litigation?

A No.

Q So is it safe for me to assume, then, that you have not had any calls with Mr. Fryar?

A I have not had any calls with Mr. Fryar.

Q Do you -- you also would not know that Mr. Fryar uses Context for Health?

A I am not familiar with what Mr. Fryar uses.

Q He also uses Physicians Fee Reference as a costing source in his life care plans. Did you know that?

A I am not familiar with what Mr. Fryar uses.

Q And Mr. Fryar uses FAIR Health. You also didn't know that; is that right?

A I'm not familiar with that.

Q So you would agree that if Mr. Fryar uses a different costing source than you do, that you two could prepare life care plans for the exact same individual and it's possible that the projected cost of those plans for that same individual would be different?

A They're going to be individualized. Yes, they may be different.

Q Let's talk about the "SERVICE" and "RATIONALE" columns in your plans.

A I'm sorry, can I make a clarification on the previous question?

Q Sure.

A Yeah, they're individualized. And yes, they may be different based on the information and resources that were used in the development of the life care plans.

Q If you will turn to appendix -- we can look at appendix 1 of Exhibit 1.
A Appendix 1?
Q Yes, ma'am. So looking at the "SERVICE" and "RATIONALE" column, that column, at least in part, is intended to explain the service that is included in the life care plan; right?
A Yes.
Q And that service could be primary care visits; correct?
A Yes.
Q That service could be cardiology; right?
A Yes.
Q That service could be neurology?
A Yes.
Q The "SERVICE" and "RATIONALE" column also at times provides who recommended the underlying service; right?
A Yes.
Q For example, in "Primary Care," it says "per Drs. Huffnagle and Sherwood"; right?
A Yes.
Q And when you include the provider's name there, you're signaling to the reader that the recommendation comes from that provider; right?

A It signals that that provider provided input into the recommendation, yes.

Q And we touched on this briefly earlier, but I need to make sure that I understand.

For other service line items in that same column, there are times throughout both reports in which there's no doctor's name listed. You would agree with that; right?

A I would agree. I would also want to refer to the specific service that you're talking about.

Q Well, earlier we used as an example neurology. If you look at that, you agree with me that there's no doctor's name listed under "Neurology"; right?

A There is no doctor's name listed under "Neurology."

Q Right. And when you compare that with "Primary Care," where "per Drs. Huffnagle and Sherwood is listed," my question to you is, how is a reader of your life care plan supposed to distinguish when there is a provider recommending the underlying service and when there is not?

A In most of the line items, the input that was received in terms of identifying that recommendation, the physicians are noted. There may

be a line item where that physician or -- who provided input or the source that provided into that recommendation is not noted.

Q So if a physician's name is not explicitly listed for a particular service, does that mean that the underlying recommendation did not come from another individual?

A I will -- it is not always consistent in each category. If I could just say, for instance, under "MEDICATIONS" and "SUPPLIES" --

Q What appendix are you on?

A I'm sorry, under appendix 3.

Q Yes, ma'am.

A Under the "SERVICE/RATIONALE," "MEDICATIONS" and "SUPPLIES," a physician is not listed under the rationale for each one of those recommendations. But the recommendations did come from the physicians as these are the prescribed medications that Mr. McElhiney is receiving.

Q But where is that information so that a reader of your life care plan can go and point to and go, okay, on appendix 3, I know that midodrine is coming from this underlying physician?

MR. ROMANO: Objection to the form of the question.

THE WITNESS: There is a question. For clarification, someone can ask me. But it is not the particular physician or source of who provided input into that recommendation is not listed on each and every line item.

BY MR. CARPENITO:

Q Is there any service recommended in either of these reports where you, Ms. Kay Hairston, are the one recommending the service, aside from a physician or other medical professional recommending that service?

A Well, I can go by line item and identify -- are you referring to any particular item?

Q I'm referring to any line item in either of these reports in which there is not a physician's name listed next to the service or under the service.

A And for clarification, you're asking if a particular physician or provider of care has provided input into that recommendation?

Q Turn to appendix 8 of Exhibit 1, please. Do you see "CNA" there?

A Yes.

Q And there's no physician's name listed

under "CNA"; correct?
A There is not a physician's name listed under "CNA."
Q There is not any medical professional's name listed under "CNA"; correct?
A Correct.
Q And do you see "Skilled Nursing"?
A Yes.
Q And there is no medical professional's name listed under "Skilled Nursing"?
A It is not listed on the tables.
Q And you see "Respite Care"?
A Yes.
Q There is not a medical professional's name listed under "Respite Care"?
A Correct.
Q And if you see "Companion Care" there too?
A Correct.
Q There is not a medical professional's name listed under "Companion Care," is there?
A There is not.
Q Are you the source or the rationale for the recommendations of CNA, skilled nursing, respite care and companion care?
A In collaboration with Drs. Huffnagle and

Dr. Sherwood, as well as my experience, education and expertise, the level of care or the indication for CNA was identified as a recommendation.

Q Right. And I want to turn to -- I'm going to introduce what's going to be marked as Exhibit 7.

(Government Exhibit 7 identified.)

BY MR. CARPENITO:

Q Ms. Hairston, can you take a look at that and let me know what you recognize it to be.

A This is the questionnaire that was sent to Dr. Huffnagle.

(Government Exhibit 8 identified.)

BY MR. CARPENITO:

Q I'm going to introduce what will be marked as Exhibit 8. Take a look and let me know what you recognize that to be.

A These are the follow-up questions to Dr. Huffnagle.

(Government Exhibit 9 identified.)

BY MR. CARPENITO:

Q And lastly for now, I will introduce what's been marked as Exhibit 9. Can you also let me know what you recognize Exhibit 9 to be.

A These are the questions to Dr. Sherwood, the questionnaire to Dr. Sherwood.

Q First I should ask, have there been any other questionnaires besides those exhibits that you have sent to Dr. Huffnagle or Dr. Sherwood?

A No.

Q Let's look at the questionnaire to Dr. Huffnagle, the initial questionnaire to Dr. Huffnagle, and the questionnaire to Dr. Sherwood. And turn to of Dr. Huffnagle's questionnaire, which is Exhibit 7, turn to page 5, please. And with Dr. Sherwood's questionnaire, which is Exhibit 9, turn to page 5.

Question 22, which is the same question with respect to each Plaintiff on page 5 of both of these exhibits, reads, and I will use the example from Mr. McElhiney's case, and I quote, "With his evident dyskinesia, upper extremities, impairments and gait and balance dysfunction, Mr. McElhiney reports that he has difficulty reaching, bending, stooping, and standing for any length of time to complete chores and tasks around his home. Is it reasonable to include services in the plan to assist Mr. McElhiney with activities of daily living, personal care and tasks and chores?"

Did I read that correctly?

A Yes.

Q And then you ask both doctors the same question with respect to Mr. McElhiney; right?
A Correct.
Q And my understanding is that question 22 relates to the daily care services listed in appendix 8 of your life care plan for Mr. McElhiney; right?
A It was information that provided input in terms of identifying what the appropriate recommendations are in the life care plan.
Q These questionnaires, though, to either of these physicians do not list CNA as a specific service; correct?
A Not in the -- it does not in the question.
Q The questionnaires to either doctor also do not list skilled nursing; right?
A It does not list skilled nursing.
Q The questionnaires do not list respite care; correct?
A It does not list respite care.
Q Or companion care; right?
A It does not list companion care.
Q Nor do the questionnaires to either physician ask about the durability; right?
A If I can clarify, the questions do not ask

about durability, but the questionnaires do ask about Mr. McElhiney's functional abilities as he continues to age with his impairments.

Q I'm asking about if either of these providers are the ones who recommended, for example, CNA care for eight hours per day.

A No. Their input was used in terms of identifying the level of care and the amount of care that Mr. McElhiney needed.

Q Well, this to me, and tell me if I'm interpreting this incorrectly, the level of care and type of care to me could be interpreted as CNA for eight hours per day?

MR. ROMANO: Objection to the form.

BY MR. CARPENITO:

Q And you just testified that that information is not coming from the physicians; right?

MR. ROMANO: Objection to the form of the question.

THE WITNESS: The information obtained from Dr. Huffnagle and Dr. Sherwood was used to identify the recommendations that were appropriate for Mr. McElhiney in the life care plan.

BY MR. CARPENITO:

Q Ms. Hairston, can you point me to anywhere where Drs. Huffnagle or Sherwood recommended 24 hours per day CNA care for Mr. McElhiney?
A Doctor --
Q What page are you reading from?
A I'm sorry.
Q That's okay.
A Let me take a minute, please.
Q Of course, yeah.
A Again, the report identifies the time frames at which Mr. McElhiney will require the level of care that he needs. The information that was obtained from Dr. Huffnagle and Dr. Sherwood was used in identifying -- analyzing that information, putting everything together and making a recommendation in the life care plan as to the level of care and the amount of care that would be appropriate for him at that time.
Q That did not answer my question.
Can you point me to anywhere in your report where either Drs. Huffnagle or Sherwood identifies, for example, 24 hours per day of CNA care?
A They have -- their input was used to develop the recommendations indicated in the report

for Mr. McElhiney.

Q In other words, there is nowhere in this report where Drs. Huffnagle or Sherwood recommended 24 hours per day of CNA care; right?

A Dr. Huffnagle and Sherwood provided information and I used that information along with all of the other information I gained through the assessment pieces and my experience, expertise as a registered nurse, as a licensed life care planner and a case manager, to identify the level of care that Mr. McElhiney will need to continue -- for him to remain in the home and community setting.

Q So you determined that Mr. McElhiney needed, for example, 24 hours per day of CNA care; right?

A I used the input and information from Dr. McElhiney -- from Dr. Huffnagle and Sherwood to identify the level of care that is indicated for Mr. McElhiney.

And I'm sorry, can I also add that I utilized the information that was given to me as to what his function will be as he continues to age with his impairments to identify the level of care for Mr. McElhiney.

Q What information in your report from the

doctors did you base these frequencies and these services on listed in appendix 8?

A The information that they provided in the questionnaire indicating that he would require services to assist him on a day-to-day basis, as well as what his functional limitations will be as he continues to age with his impairments. That combined with all of the other information that was obtained in terms of assessment and development in the report and putting that together with my experience as a nurse, a case manager and a life care planner.

Q Question 22 asked whether it would be reasonable to include services in the plan to assist Mr. McElhiney with activities of daily living, personal care and tasks and chores; right? Did I --

A For which --

Q Both questions.

A Yes.

Q It doesn't ask Drs. Huffnagle or Sherwood to agree to 24 hours per day of CNA care, does it?

A That is not in the question.

Q It does not ask Drs. Huffnagle or Sherwood to agree to one to two times per month of skilled nursing care, does it?

A That is not in the question.
Q It does not ask Drs. Huffnagle or Sherwood to agree to 336 hours per year per 24 hours per day per 14 days per year for respite care, that's it?
A The information that was provided by Dr. Huffnagle and Sherwood was used in combination with the information that was obtained through the assessment and identification of the activities that Mr. McElhiney is no longer able to carry out at home in combination with those activities that he will not be able to carry out as he continues to age with his impairments as well as identifying the caregivers in his area who could provide care to individuals like him in the home setting.
Q That did not answer my question and I'll ask it again.
The questionnaires do not ask Drs. Huffnagle or Sherwood with the specific durability of 336 hours per year for 24 hours per day for 14 days per year of respite care, does it?
A That is not in the questions to Dr. Huffnagle and Dr. Sherwood that was identified as to the need for the services for Mr. McElhiney based on his need for services and who was available to provide services to him and identifying that his

wife is not going to be available to provide all of the care giving services to him.

Q And the questionnaire also does not ask Drs. Huffnagle or Sherwood to agree to three four-hour trips per week for companion care; correct?

A That is not in the question. It is based on the need for him to get out in the community and maintain care with his providers in the community as well as doing other tasks and chores that he may need to do out in the community.

Q If you will turn to appendix 9, please.

A Sorry.

Q That's okay.

A Appendix 9 on --

Q Exhibit 1. Do you see "DAILY CARE CONT." in Mr. McElhiney's report?

A Yes.

Q Do you agree with me that the questionnaire that you sent to Drs. Huffnagle and Sherwood also does not ask those doctors to agree to 21 hours weekly of replacement services; right?

A The questionnaire refers to task and chores, and that information from the doctors was used to -- used in combination with the information

that was obtained that Mr. McElhiney, due to his impairments, is no longer able to carry out the tasks and chores to maintain his house and property and used to identify the replacement services that would be needed to do that.

Q Ms. Hairston, point me to where in question 2 of either of these exhibits you asked these doctors whether they agree to 21 hours weekly of replacement services.

A Okay. And for clarification, I think you might have said question -- did you say question 2 or question 22?

Q Question 22.

A The information that was obtained from input from Drs. Huffnagle and Sherwood was used in combination with several other pieces of information to identify the replacement services that are provided to Mr. McElhiney in the appendix 9.

Q In other words, a request to either doctor of 21 hours weekly of replacement services is not listed in either questionnaire?

A Specific 21 hours is not in the questionnaire. Their input was used to identify the replacement services that Mr. McElhiney would need.

Q And that's because the questionnaires only

contain asking for general agreement that assistance with these activities would be reasonable; right?

A The questionnaires are -- come back to me with input which I am able to utilize in collaboration with other resources and my experience, expertise working with individuals with these type of injuries and identifying the services that they need because they are no longer able to carry out those services due to their impairments.

Q Do you remember earlier you testified that after you provided the questionnaires and the doctors sent them back to you, you did not send a draft back with your life care plan to the providers; right?

A Correct.

Q So it's possible, then, that Drs. Huffnagle and Sherwood would disagree with you on any of the specifics which you did not ask them about in either of these questionnaires?

MR. ROMANO: Object to the form of the question.

THE WITNESS: I don't know what they would do.

BY MR. CARPENITO:

Q And I think -- strike that.

If we could look at Dr. Huffnagle's questionnaire, I believe that's Exhibit 7. If you will turn to the first page, I just want to talk generally about these questions that are asked.

Did you draft the questions in this questionnaire?

A Yes.

Q Did you draft the questions in the questionnaire that was sent to Dr. Sherwood?

A Yes.

Q So if we look at Dr. Huffnagle's questionnaire, question 1 contains a prewritten list of diagnoses; right?

A Yes.

Q That list was written by you before the questionnaire was sent to Dr. Huffnagle; right?

A Yes.

Q In other words, Dr. Huffnagle was not asked to create this list; correct?

A I sent the questionnaire to Dr. Huffnagle.

Q And you agree that Dr. Huffnagle's role was limited to either checking in this instance or not checking those predetermined items on that list; right?

A And there is space for her to provide

additional information. There's a question that says "Other" in terms of the diagnoses.

Q Dr. Huffnagle's check mark does not reflect when the Parkinson's Disease diagnosis was made; correct?

A Not -- no.

Q It does not reflect whether the condition requires future treatment; right?

A What was the second question, I'm sorry?

Q With respect to question 1, his check mark next to "Parkinson's disease" does not reflect whether that condition requires future treatment?

A I wouldn't agree with that.

Q Why not?

A It does not reflect if he requires future treatment? Is that what you said?

Q I'm just trying to understand what the check mark here next to "Parkinson's disease" means with respect to question 1.

A Oh, okay. I'm sorry.

It is confirmation of the diagnosis.

Q If we can look at question 2 on that questionnaire.

A Exhibit 7?

Q Yes, ma'am. Question 2 reflects the last

time that Dr. Huffnagle saw Mr. McElhiney; correct?

A Yes.

Q Question 2 reflects that Dr. Huffnagle at least at the time that he filled out this questionnaire, last time he saw Mr. McElhiney was in September of 2024; right?

A Based on the information on this questionnaire, yes.

Q So all of Dr. Huffnagle's answers in this questionnaire are based on Mr. McElhiney's condition as of September 17, 2024; correct?

A I wouldn't agree with that. The question asks the last time Mr. McElhiney was examined. I don't know if since that time there was any other communication -- I mean, I can't agree or disagree. The question asks when was the last time Mr. McElhiney was examined.

Q Right. And he answers that it was September 17, 2024; correct?

A Correct.

Q And for purposes of information that he filled out in this questionnaire, that information is based on Mr. McElhiney's condition as Dr. Huffnagle knows it as of September 17, 2024. Do you agree with that?

A I'm not going to completely agree with that. They may have had other communication between this date and the time that the report -- the questionnaire was completed. I mean, I don't know. This says he was examined on September 17, 2024.

Q Would you agree that information in this questionnaire from Dr. Huffnagle relies on Mr. McElhiney's condition from the year 2024?

A Dr. Huffnagle indicated that Mr. McElhiney was examined on September 17, 2024. I don't know what other information the doctor may have relied on in terms of completing this questionnaire.

Q Well, if Dr. Huffnagle had seen Mr. McElhiney after this date at the time that he completed this questionnaire, do you agree that it's at least possible that he would have listed that date; right?

A It is possible.

Q In question 2 Dr. Huffnagle recommends follow-up at Vanderbilt for placement of deep brain stimulator; correct?

A Yes.

Q Your life care plan for Mr. McElhiney does not assume that deep brain stimulator placement successfully occurs before any future services

begin; right?

A Deep brain stimulator is listed in the report as to be determined, yes.

Q Right. Instead, your life care plan for Mr. McElhiney assumed ongoing and increasing care needs without accounting for the DBS outcome; right?

A The life care plan is developed based on the response that Mr. McElhiney was having to his injury at that time and based on the information obtained from the physicians on what his aging -- how he would age with his impairments.

Q When you say based at that time, that time was before Mr. McElhiney had his DBS placed; right?

A If there is new information about medical treatment or interventions that Mr. McElhiney has received, I don't have that information.

Q Would you want to review any information related to Mr. McElhiney's condition post placement of his DBS?

A Any information would need to be reviewed and analyzed and determine how that's impacting his response to his injury and the life care plan.

Q Are you aware that Mr. McElhiney underwent a deep brain stimulator placement surgery?

A I'm not aware that the -- I'm sorry.

The plan says it was to be determined. I have not had any follow-up to identify if indeed he had the deep brain stimulator and how it's functioning.

(Government Exhibit 10 identified.)

BY MR. CARPENITO:

Q I'm going to introduce what will be marked as Exhibit 10.

A Okay. I think I have two -- is that okay? Just a second copy?

Q I'll keep that, sorry.

If you look at the top left, do you see Mr. Gary McElhiney listed?

A Yes.

Q Do you see it's an office visit from March 6, 2025?

A Yes.

Q Do you see a provider name there listed Daniel Sherwood, MD?

A Yes.

Q And Dr. Sherwood is Mr. McElhiney's primary care physician; right?

A Correct.

Q In fact, you sent a questionnaire to Dr. Sherwood; right?

A Correct.

Q Your life care plan for Mr. McElhiney does not incorporate these records into what you reviewed in preparing your report in this case; right?

A I am not familiar with these records, but let me just say, based on this very brief review at this point in time.

Q Understood. If you will look at this first page here, and I'm going to reference these Bates numbers here down in the bottom right-hand corner so we all know where we are, okay?

We're on Bates number 448. I'm going to read this first paragraph. "Gary, a patient with a history of Parkinson's disease, presents for a follow-up visit after undergoing Deep Brain Stimulation (DBS) surgery. The patient reports a significant improvement in his symptoms following the surgery, which is performed in three stages.

"Despite the discomfort and swelling associated with the recovery process, the patient describes the outcome as," and I quote, "'astronomical' and feels that the procedure has restored much of his dignity."

Did I read that correctly?

A Correct.

Q The third paragraph there reads, "The patient's medication regimen has been adjusted following his DBS surgery. He is currently in the process of deescalating his Sinemet dosage, with the goal of reducing the frequency to three times a day. He has also discontinued metoprolol, a beta blocker, as per Vanderbilt's recommendation."

Did I read that correctly?

A Yes.

Q Outside of what I'm sure was a mispronunciation of that medication.

If you will turn to the next page, which is Bates ending in 449, do you see "Neurological" listed down about a quarter of the way down the page?

A Yes.

Q And there's a "Comments" section, and it reads, "Parkinsonian facial expression is no longer present! No tremor no cogwheeling no rigidity. Slightly wide-based gait."

Did I read that correctly?

A Yes.

Q This documents improvements in Mr. McElhiney's symptoms following the placement of his DBS device; correct?

A This document is a visit to Dr. Sherwood and on March 6, 2025.

Q What is your interpretation of Mr. McElhiney's symptoms as it relates to Parkinson's based on this document following the placement of his DBS device?

MR. ROMANO: Objection to the form of the question.

THE WITNESS: With all due respect, this is not the type of setting for me to -- I don't know if this is one clinic note, multiple clinic notes. This is not the setting for me to review records and analyze them and provide any type of commentary.

BY MR. CARPENITO:

Q What would be the proper setting?

A When they are appropriately provided to me, typically when I receive records, they're in some sort of context. I am in my office setting. I have a chance to read them, I have a chance to put them in context with all of the other medical records, whatever plan has already been developed.

I mean, there are several factors, but this is not the setting for me to look at this note. I'm not agreeing or disagreeing with you. This is just not the setting for me to review these notes.

Q Ms. Hairston, are you refusing to review this record?

A This is not the setting. I can read it, but this is not the setting for me to analyze it and to provides any commentary on it.

Q Would you have wanted to review this record if it was available to you at the time you were formulating your life care plan?

A Typically, if there are records available to me --

Q I'm talking about this specific record.

A Typically, records -- medical records are going to be resources that are going to be used to provide input and assist in the development of a life care plan. I don't know when this record became available.

Q You agree that any of the information contained in this medical record was not incorporated into the development of your life care plan for Mr. McElhiney; correct?

A This is a record that I have not reviewed and have not used it in the development of the life care plan.

Q Do you agree with me that the answers provided in Dr. Huffnagle and Sherwood's

questionnaires do not incorporate the information contained in this record; right?

A I have the dates that the questionnaires were sent to them and the date on this medical record. So the questionnaires were provided prior to the date of this medical record.

Q And based on that information, you would agree with me that the answers from Drs. Huffnagle and Sherwood and the questionnaires that you provided to them would not have contained information from this medical record in Exhibit 10; right?

A I had not reviewed this medical record when these questions were developed.

Q Can you turn to Bates number 452 in Exhibit 10.

A 45 -- I'm sorry.

Q 452.

MR. ROMANO: Number 452?

MR. CARPENITO: Yes, sir.

THE WITNESS: Okay.

BY MR. CARPENITO:

Q If you look under "Assessment & Plan" about three fourths down the page, it reads "Parkinson's Disease, DBS surgery significantly

improved motor symptoms. Sinemet dosage reduced. Metoprolol discontinued due to interaction with midodrine. Battery replacement needed every 3-5 years."

Did I read that correctly?

A Correct.

Q Do you agree that based on this record that Dr. Sherwood notes that the DBS surgery significantly improved Mr. McElhiney's motor symptoms?

A That's what I'm reading in the medical record.

Q In other words, it does not document Mr. McElhiney's symptoms getting worse. Would you agree with that?

A I don't see that here in this medical record.

Q Could this information require you to reassess the future needs of Mr. McElhiney?

A Based on -- any new information that is received, it would have to be considered and determined do I need to go back to the individual, get an update, providers of care and get an update. And all of that information would have to be reviewed and reconsidered to be determined if there

would be any changes in the plan of care.

In answering that question, I may have left off other resources that would need to be re-reviewed and updated.

Q Let's turn to Bates number 456. Do you see the "Instructions" section up at the top, top list a list of instructions?

A Okay. 456?

Q Yes, ma'am.

A Yes.

Q Underneath that it says "Follow up with Daniel Sherwood, MD in about 6 months (around 9/6/2025)." Right?

A Yes.

Q And a follow-up with Dr. Sherwood would be a follow-up with Mr. McElhiney's primary care physician; right?

A Based on the information on this record.

Q Well, and based on the information in the questionnaire that you sent to Dr. Sherwood; right?

A I'm sorry. For clarification, what's your question again? I'm sorry.

Q Dr. Sherwood is Mr. McElhiney's primary care physician; right?

A Yes.

Q Every six months, Mr. McElhiney is seeing Dr. Sherwood, would add up to Mr. McElhiney having two follow-up visits with his primary care physician per year; right?

A Yes.

Q And if you turn to appendix 1 of your report in Mr. McElhiney's life care plan, do you see that you have a frequency noted under the durability section of Mr. McElhiney receiving four to eight times per year for primary care physician visits?

A Yes.

Q That's more than double what Dr. Sherwood recommends in this medical record; correct?

A It's more than what is listed on this medical record.

Q Will you turn to -- let's go back to Exhibit 7 and 9. And with respect to each exhibit, I want us to look at -- give me one moment.

On page 1 of both exhibits, but we're on different question numbers. But they're asking the same question.

So when we're looking at Exhibit 9, which is Dr. Sherwood's questionnaire, we're looking at question 3. And when we're looking at Exhibit 10, excuse me, Exhibit 7, it's Dr. Huffnagle's

questionnaire, we're looking at question 4.

So are you there with me?

A Yes.

Q Each question is asking whether the physician anticipates Mr. McElhiney requiring more than the usual number of visits to his primary care physician related to his Parkinson's Disease; right?

A Correct.

Q Does this question first identify historically how many times Mr. McElhiney has seen his primary care physician related to his Parkinson's Disease?

A And are you talking about the question in both exhibits or --

Q Yeah, either question. Either questionnaire, excuse me.

A There's not a specific number of visits indicated in the question.

Q Dr. Huffnagle checks yes, and he says, how many extra visits, in response to that question he answers eight visits per year; right?

A Correct.

Q Dr. Sherwood checks yes, and he doesn't provide a number; right?

A There's not a number there.

Q He answers "Eventually perhaps double # of visits"; right?
A Yes.
Q Dr. Sherwood's response does not state, again, a precise number of visits that Mr. McElhiney may require with his primary care physician; right?
A It does not state a specific number of visits.
Q Despite that, your life care plan provides a frequency of four to eight times per year for primary care physician visits; right?
A It does.
Q And at least part of that assumption is based on Mr. McElhiney's neurologist, Dr. Huffnagle; right?
A Dr. Huffnagle provided some input into that recommendation, yes.
Q But you agree that based on that medical record we were looking at earlier, that Dr. Huffnagle's response is likely no longer accurate?
A I would say if there was new information that was available, that information could be reviewed and the information analyzed in context of all of the other information that has been gathered

in reference to Mr. McElhiney's needs and determining what is appropriate for the plan, for the life care plan.

Q Will you turn to page 2 of Exhibit 7, which is Dr. Huffnagle's questionnaire. Under question 5, one of the parts there you ask "How often do you anticipate his DBS will require replacement as indicated below." Correct?

A Correct.

Q Dr. Huffnagle at least in part answers a battery change one time per five years; right?

A Yes.

Q And then if you look at appendix 1 of your life care plan, for Mr. McElhiney. If you'll let me know when you're there?

A I'm sorry, yes. I am here at appendix 1.

Q Under "Battery Replacement For DBS," which is the last line item on that page, you have the durability listed as to be determined.

My question to you is Dr. Huffnagle provided this information to you in the questionnaire. Why is this listed as to be determined?

A Yes, if you could give me just a minute, please.

As indicated in the report, what I've identified is that if the writing --

Q What page are you reading from?

A I'm sorry.

Q That's okay.

A This is page 11 on Exhibit 1. "Mr. McElhiney was undergoing the staged procedures for placement of the deep brain stimulator. While Dr. Huffnagle provided guidelines for management of the device, the life care plan assumes once the device has been inserted and is functioning properly, ongoing management of the device and associated care will be confirmed."

Q So are you testifying, then, that you were picking and choosing when to incorporate Dr. Huffnagle's recommendations and when not to? I'm just trying to understand here how you made the decision of what to include in your life care plan and what not to include.

MR. ROMANO: Objection to the form of the question.

THE WITNESS: Dr. Huffnagle provided some information regarding the DBS, but in looking at the full life care planning and -- life care plan, and understand, there was also a provider that was

involved with the deep brain stimulator. Additional information could be obtained specific to the provider and the -- who placed the deep brain stimulator and the associated care.

MR. CARPENITO: Can we go off the record?

VIDEO OPERATOR: Sure thing. One second. We are going off the record. The time is approximately 1:55 p.m. This is the end of media number 3.

(Recess.)

VIDEO OPERATOR: We are back on the video record.

The time is approximately 2:06 p.m. This is the beginning of media number 4.

BY MR. CARPENITO:

Q Ms. Hairston, if we can continue looking at Exhibit 7, and I want to turn to question 6 and look at Exhibit 9 and turn to question 6 as well. Let me know when you're there for both.

A Page 6, you said?

Q No, ma'am, question 6.

A Question 6.

Q It's on page 2 of both the questionnaires.

A Oh, okay. Okay.

Q Question 6 asks "How often do you

anticipate that Mr. McElhiney will require surveillance by the following specialists related to his Parkinson's disease and associated impairments?"

Did I read that correctly?

A Yes.

Q And then it lists a variety of specialties; right?

A Yes.

Q One being, in Dr. Huffnagle's questionnaire, "Neurosurgery"; right?

A Yes.

Q And "Cardiology"; right?

A Yes.

Q And then "Podiatry"; correct?

A Yes.

Q Okay. Dr. Sherwood's questionnaire asks the same question and includes those same subspecialties; right?

A Yes.

Q Question 6 does not ask whether a cardiologist would recommend fewer visits than what Dr. Huffnagle has indicated; correct?

A I'm sorry, say that again, please.

Q Question 6 is not directed at a cardiologist; right? In other words, Dr. Huffnagle

is not a cardiologist. Would you agree with that?
A Agree.
Q Would you agree that Dr. Sherwood is not a cardiologist?
A He is not a cardiologist. He's a primary care physician who often directs individuals toward their treatment.
Q Looking at the "Cardiology" line specifically in both questionnaires, Dr. Huffnagle recommends "4 times per year for 20 years"; right?
A Yes.
Q And Dr. Sherwood recommends cardiology one times per year for what he notes as indefinite years; right?
A Yes.
Q If you look and compare that to appendix -- appendix 1 in your report on Mr. McElhiney, you have cardiology listed there as four times per year; right?
A Yes.
Q Is it fair to assume that you adopted Dr. Huffnagle's recommendation of four times per year cardiology follow-up visits?
A Dr. Huffnagle's input was used in the recommendation for this specific item, yes, for this

item.

Q And you agree that Dr. Sherwood recommended a lower frequency with respect to cardiology visits; correct?

A Dr. Sherwood indicated a different frequency than Dr. Huffnagle.

Q And you chose to adopt the higher frequency provided by Dr. Huffnagle; correct?

A Dr. Huffnagle's input was used in the recommendation of this particular item.

Q Next if you look at question 8 on each questionnaire. Let me know when you're there.

A Okay. Question 8. Okay.

Q Asks "What diagnostic testing, if any, will Mr. McElhiney require related to his Parkinson's disease and associated impairments?" Right?

A Correct.

Q And you asked that question of both providers in each of their respective questionnaires; right?

A Yes.

Q Dr. Huffnagle recommends one MRI per year for 20 years, right, if DBS not placed?

A Correct.

Q Dr. Huffnagle recommends serum studies 12 times per year and he does not indicate the number of years; right? In that questionnaire, he does not indicate the number of years; correct?

A Correct.

Q In response to the same question, Dr. Sherwood responded "Nothing specific that I am aware of." Correct?

A Correct.

Q If you go to appendix 2, your life care plan for Mr. McElhiney.

A Yes.

Q There is a serum studies is the first service there listed, and you list the durability as 12 times per year; correct?

A Yes.

Q So you chose to adopt the higher frequency recommended by Dr. Huffnagle; right?

A I used the input that was provided by Dr. Huffnagle in terms of the recommendation that's included in the life care plan.

Q But Dr. Sherwood, Mr. McElhiney's primary care physician, said that there was nothing specific that he was aware of; right?

A He said that he was not aware of anything.

Dr. Huffnagle indicated what she was aware of.

Q Right. And that's why I'm asking. How did you make the determination as to which one to include in your life care plan?

A Dr. Sherwood said he wasn't aware of anything. Dr. Huffnagle indicated she was aware of something.

Q I understand what their responses are.

My question to you is, Dr. Sherwood, in response to a question asking what diagnostic testing, if any, Mr. McElhiney will need, responds, "Nothing specific that I'm aware of." But Dr. Huffnagle responds with the frequencies identified in his questionnaire. How do you as a life care planner make the determination as to which one of those recommendations you're going to go with?

A Based -- for this particular question, I'm going to say it's individualized because I have to look at each question, Dr. Sherwood again said nothing that he was aware of. Dr. Huffnagle identified the tests that she felt were appropriate.

Q You agree with me, based on Dr. Sherwood's questionnaire, that an option was to include nothing with respect to serum studies, right, based on

Dr. Sherwood's response to the questionnaire?

A In developing the life care plan, I review all of the information together.

Q Ms. Hairston, that doesn't answer my question.

A Okay. Go ahead.

Q So I'm asking you, wasn't it a possibility when you were preparing this life care plan and you got Dr. Sherwood's questionnaire back and you looked at his response to question 8, that you could have not included serum studies on appendix 2 of your life care plan for Mr. McElhiney, based on Dr. Sherwood's response to that question?

A In developing the life care plan, I had Dr. Sherwood -- Dr. Sherwood's response and Dr. Huffnagle's response, and I look at everything together.

Q And you chose Dr. Huffnagle's recommended frequencies; correct?

A Dr. Huffnagle provided a -- provided input for that particular question. Dr. Sherwood said "Nothing specific that I'm aware of."

Q Why did you choose to follow Dr. Huffnagle's recommendation?

A Dr. Huffnagle had a recommendation --

provided input.

Q Can you explain the methodology behind how you go about choosing what recommendation to provide when two treating physicians for a particular individual on which you are preparing a life care plan disagree about a particular intervention?

MR. ROMANO: I'll object to the form of the question.

THE WITNESS: So I would have to say that, to begin with, I don't think their answers disagree. Dr. Sherwood said nothing specific, and Dr. Huffnagle provided something more specific in terms of providing input.

BY MR. CARPENITO:

Q In a situation, let's assume this situation, where two providers disagree on the same question in a questionnaire that you send to them with respect to the same person on which you're preparing the life care plan, what is the methodology that you follow in making the decision about which one of those recommendations you will adopt in that life care plan?

A I have to look at all of the information that is received with respect to the information that I have for the individual, could possibly

looking at all of the resources available, medical records, any information I have received from any other treating providers of care.

And I may go back to any one of the physicians to ask for clarification. But there's not one specific route in terms of determining if there are -- that answers from two different physicians do not match exactly.

I have to consider how to -- the context of each of those questions for each individual case.

Q But in this case, you didn't go back to the providers to ask for clarification, did you?

A Not on question 8.

Q On any question did you?

A Well, for Dr. Huffnagle, I went back and asked for some clarification.

Q And we'll address that question in a few minutes.

Outside of the additional questionnaire that you sent to Dr. Huffnagle that is marked as Exhibit 8, was there any other point in time in which you sought clarification from either of these providers when preparing your life care plan for Mr. McElhiney?

A No.

Q Question 9, if we can look at that, asks whether Mr. McElhiney will demonstrate improvement in his functional abilities beyond his current level.

Did I read that correctly?

A Yes.

Q Dr. Huffnagle checks no; correct?

A Correct.

Q Dr. Sherwood checks yes, correct, and explains DBS may provide some -- what I think he's saying is improvement.

Do you agree with that?

A Yes.

Q Do you agree that the response from Dr. Sherwood reflects the possibility of functional improvement; right?

A He indicated that, yes, Mr. McElhiney may demonstrate improvement.

Q And, in fact, based on the medical records that we reviewed earlier, the DBS did provide some support with respect to Mr. McElhiney's functional abilities; right?

A The records are what they are. I have not had a chance to review and digest all of that information.

Q Did your life care plan for Mr. McElhiney assume functional improvement, or did your life care plan for Mr. McElhiney assume a decline in his functional abilities?

MR. ROMANO: Objection to the form of the question.

THE WITNESS: In developing the life care plan, I reviewed and obtained input from resources as well as Dr. Huffnagle and Dr. Sherwood to identify what was going to be anticipated in his functional level as he continued to age with his impairments.

BY MR. CARPENITO:

Q And if we look at appendix 8, Mr. McElhiney's life care plan --

A Appendix --

Q 8.

A 8?

Q Yes, ma'am.

The durability for CNA care increases from eight hours for 2025 to 2029 to 16 hours for the years 2030 to 2032; correct?

A Correct.

Q And then from years 2033 through life expectancy, the CNA care increases to 24 hours per

day; correct?

A Correct.

Q And so my question to you is, where does that escalation of services come from? Did you assume that Mr. McElhiney's functional abilities would continue to decline?

A Based on the information obtained from Dr. Sherwood and Dr. Huffnagle indicating how -- or identifying how they anticipated he would decline as he ages, and understanding the general progression of Parkinson's disease, all of that was used to identify the level of care that he would need as he aged, and during those time periods.

Q You did not create an alternative projection scenario based on DBS improving Mr. McElhiney's condition, did you?

A There is only one life care plan.

Q You did not reduce any future care needs based on the potential of the benefit gained from DBS with respect to Mr. McElhiney, did you?

A There is only one life care plan.

Q Would your answer to my question be no?

A There -- the care that's reflected in the life care plan is the care that's projected for Mr. McElhiney.

Q And that care that's projected for Mr. McElhiney does not reduce future care needs based on potential DBS benefits for Mr. McElhiney; right?

A If there is additional information for Mr. McElhiney discussing any other interventions that he's had, including the DBS and the outcomes of that DBS, that would need to be reviewed, analyzed, to determine how it would impact the life care plan.

Q Lastly on these questionnaires, I want to look at questions 11 and 12, both questionnaires, so we can start with question 11, and let me know when you're there. Are you there?

A Yes. I'm sorry, yes.

Q That's okay. Question 11 asks about "annual re-evaluation services from the following disciplines for the purpose of updating Mr. McElhiney's home exercise program and/or maintaining his physical function"; right?

A Yes.

Q And Dr. Sherwood lists one to two times per year for reevaluation of physical therapy, occupational therapy and speech therapy; right?

A Yes.

Q Dr. Huffnagle for those same reevaluations

lists two years for physical therapy; correct? Two times per year for physical therapy?

A Yes.

Q Two times per year for occupational therapy; right?

A Yes.

Q And four times per year for speech therapy; correct?

A Yes.

Q And then if you look at question 12.

A Okay. I'm there.

Q Question 12 reads, "What services do you anticipate he will require now and in the future to improve and/or maintain his functional mobility?" Correct?

A Yes.

Q Okay. For physical therapy treatment Dr. Sherwood responds "1-2 times per year"; right?

A Yes.

Q Dr. Huffnagle responds "two times per year"; right?

A Yes.

Q Moving down to "Speech Therapy treatment," Dr. Sherwood responds "1" time "per year"; correct?

A Yes.

Q Dr. Huffnagle responds "4 times per year"; right?
A Yes.
Q If you look at appendix 5 of Exhibit 1, if you look at the speech therapy listed there, the durability is listed as four times per year; right?
A Yes.
Q In other words, you chose the higher frequency recommended by Dr. Huffnagle; correct?
A I utilized the input from both Dr. Sherwood and Huffnagle in terms of identifying the recommendation for Mr. McElhiney.
Q Well, Dr. Sherwood's recommendation is one time per year for speech therapy; right?
A He does, yes.
Q And Dr. Huffnagle recommends four times per year for speech therapy; right?
A Yes.
Q So you agree with me that you did not adopt Dr. Sherwood's recommendation at least with respect to speech therapy treatment and the frequency thereof?
A They were both utilized -- input from Dr. Huffnagle and Sherwood, along with other information, including the fact that Mr. McElhiney

is having issues swallowing and with his speech.

Q You agree that there are some instances in which Drs. Huffnagle and Sherwood disagree with respect to the frequency for a particular item that you asked about in the questionnaire?

A I would not say they disagree. They both provided their input into what they felt like the needs were for Mr. McElhiney.

Q And that input that they provided is not always the same; correct?

A It is not always the same.

Q Let's take a look at appendix 8 of Mr. McElhiney's life care plan. Appendix 8 onto the top of appendix 9 are the daily care services portion of your life care plan for Mr. McElhiney; right?

A Yes.

Q I want to look at the descriptions that you have underneath each of those and talk about that. Under CNA you write that the services include assistance with personal hygiene, HEP, meal prep, assistance with tasks for household management, community mobility.

Did I read that correctly?

A Yes.

Q You agree that Ms. McElhiney has been providing at least some of these services to Mr. McElhiney; right?

A I'm sorry, state that again, I'm sorry.

Q Do you agree that Mr. McElhiney's wife, Ms. McElhiney --

A Okay.

Q -- has been providing at least some of these services to Mr. McElhiney?

A Yes.

Q And beginning in 2025, you project eight hours per day of CNA care; right?

A Yes.

Q And then you increase that, starting in the year 2033, to CNA care for 24 hours a day; right?

A Yes.

Q Now, let's look at "Respite Care" below that, and that reads underneath "Respite Care," short-term relief for Ms. McElhiney for rest, renewal, attend to personal affairs; correct?

A Yes.

Q If a CNA is present for eight hours per day, that means for those eight hours Ms. McElhiney is not providing sole supervision of Mr. McElhiney;

right?

A Yes.

Q If the CNA is present for 16 hours per day, that means for those 16 hours Ms. McElhiney is not providing sole supervision to Mr. McElhiney; correct?

A She is not providing sole supervision. Ms. McElhiney is still available and still present to supervise, monitor and assist in Mr. McElhiney's care.

Q If a CNA is present for 24 hours per day, that means for those 24 hours Mrs. McElhiney is not providing sole supervision of Mr. McElhiney; correct?

A Correct.

Q During the times in which a CNA is present, whether it's for eight, 16, 24, hours per day, Mrs. McElhiney could leave the house; right?

A There would be some times, depending on the agency providing care, that Ms. McElhiney would be able to leave the house.

Q And during the times in which a CNA is present, Mrs. McElhiney could take a nap, for example; right?

A Mrs. McElhiney -- there would be times

when Mrs. McElhiney could attend to those things that she needs to take care of for herself and household and out in the community.

Q Right. She could attend appointments; right?

A Perhaps.

Q She could grocery-shop?

A Perhaps.

Q In other words, the CNA services include some of the same types of tasks that respite care is intended to relieve; right?

A There is some overlap. The respite care is included in the plan to provide for extended periods so that Mrs. McElhiney can go beyond the time frame that the CNA would be at the home or to attend to, again, her personal affairs or even relax and have some recreation, without having to rush back to the house.

Q Well, how many waking hours per day are you assuming that Mr. McElhiney has per day?

A Well, I'm sorry, can you rephrase that?

Q How many hours per day are you assuming that Mr. McElhiney is awake? Do you note that assumption anywhere in your report?

A I guess my question is --

Q No, no, no, Ms. Hairston. I just want you to answer my question.

A Go ahead, I'm sorry.

Q My question is, how many hours, if any, are you assuming that Mr. McElhiney is awake per day?

A And I am asking, in relationship to you asking questions about the CNA and the skilled nursing and the respite care, if you could put that all together for me.

Q If Mr. McElhiney -- let's envision a scenario, Mr. McElhiney is awake for eight hours per day, and there's a CNA at the house for eight hours per day. During that time, Ms. McElhiney could leave the house and attend to her needs; right?

A There could be some times she could leave the house and attend to her needs.

Q Let's look at "Companion Care," which is on appendix 8, that's the last line item. And that service includes "Driving the van, community mobility, access to medical appointments, therapeutic exercise"; right?

A Correct.

Q Before we go to "Companion Care," I do just want to confirm, on page 12 of your report, you

actually acknowledge that Mrs. McElhiney already leaves Mr. McElhiney at home for short periods of time; right?

A And that is absolutely not the safe and ideal scenario for them. She does it because they have no other choice.

Q You project companion care at 12 hours per week; right?

A Three four-hour trips per week, yes.

Q Under "CNA" Services, you already included the description as "community mobility"; correct?

A There is description of "community mobility" there.

Q And under "Companion Care," there's a description of "community mobility"; correct?

A Yes. So the companion would actually be driving the van to all of these different venues or areas in the community. The CNA would actually be there to physically assist Mr. McElhiney getting in and out of the vehicle, into and out of the venue, and to whatever appointments or tasks needed to be completed while he is at the venue.

Q Can the CNA drive the van?

A No, they can't.

Q Why?

A In contacting agencies in that area, in general, the CNAs were not allowed to drive the van.

Q Could Mrs. McElhiney drive the van?

A Well, she can drive a van, but we -- the services provided in this are to make sure Mr. McElhiney can get to all of the services that he needs and at the same time not completely wear Mrs. McElhiney out, relieve her of some of the caregiving chores and services and let her return to being a wife and the things that she did around the home.

Q Right. But we just discussed, and tell me if you disagree, but we agreed that some of the respite care was relief by what was included in the CNA care. And so my question to you is, if Mrs. McElhiney is able to be relieved by the mere fact of the CNA being present, couldn't she then drive the van for Mr. McElhiney?

A So some of the relief provision of the CNA is to make sure someone is there with Mr. McElhiney because he has a syncope episodes, to make sure that if he does have one of these episodes, emergency services can be contacted right away.

The respite care provides -- again, this is 14 days per year, so that's time that allows

Mrs. McElhiney to have extended time out of the house if she needs to.

The companion is there to drive the van. The companion is not going to do the hands-on -- the same hands-on care that the CNA is going to do.

Q Do you agree that some of the functions of companion care could be performed by the CNA that's already included in your life care plan; right?

A Well, the CNA is not able to drive the van, and the CNA is not able to drive the van and take care of the needs of Mr. McElhiney at the same time. Go ahead, I'm sorry.

Q No, I didn't want to cut you off.

A No, go ahead.

Q I'm not asking about driving the van.

A Okay.

Q I'm asking specifically about community mobility. I see it listed twice there.

And so my question to you is, you agree that at least some of the functions of companion care could also be performed by the CNA that's already included in your life care plan; right?

A Well, no, I disagree with that.

The CNA is there to provide hands-on -- care to Mr. McElhiney. The companion is there to

drive the van and to make sure the CNA and Mr. McElhiney are able to get to the venues in the community that he needs to get to and allow the CNA to just exclusively provide the care to Mr. McElhiney that he needs.

Q Where in your report does it document that the CNA cannot drive the van?

A Give me just a second.

Q Okay.

A It is not specifically listed in the report. It is my recollection from speaking with the research assistants who contacted the agencies who provide CNA care.

Q When you say research assistants, who are you referring to?

A Assistants -- research assistants, individuals who work in the Coordinating Center in the medical-legal division who provide research in terms of identifying services in the community.

Q So your research assistants are the ones who reach out to the providers listed on your resources page in these reports?

A Yes.

Q You yourself don't reach out to those resources?

A I am not -- it depends on the resources. We -- there are several people who work on the development on life care plan, so some of the resources I may contact directly, and I may have some research assistants who also contact some of the resources.

Q What kind of quality control, if any, do you have over that process? What if one of your research assistants makes an error in collecting the costing information? How do you control for that type of situation?

MR. ROMANO: Objection to the form of the question.

THE WITNESS: You would have to ask something a little bit more specific. These are research assistants who have worked consistently in the medical-legal department for a number of years. We all work very closely together, and we all have an understanding of the process in terms of reaching out to providers of care and obtaining costs.

BY MR. CARPENITO:

Q But how would you become aware if they made an error in obtaining any of the types of costing information that you've used to source the unit costs in your life care plan?

A We work closely together, and all of the information is reviewed as the life care plan is being developed.

Q That doesn't answer my question.

MR. ROMANO: Well, object to counsel's statement.

Wait until there's a question.

BY MR. CARPENITO:

Q So let's go back to page 18 of Mr. McElhiney's report. Just looking under the "Physician/Medical" as an example as we did earlier, there's 14 different costing sources listed there; right?

A Yes.

Q Your research assistants are the ones who reach out to those costing sources, and then they provide you the costs; right?

A There's a format that the research assistants use to document who they have contacted and the information that they have obtained.

Q My question to you is, how do you control for the potential of one of your research assistants inaccurately notating the costing that they obtain from any of these sources listed here?

A Well, that's a very general question.

Again, all the information is obtained using a consistent process and one that we all understand we use, and all of the information is reviewed during the development of the life care plan.

Q You noted a consistent process. What is that consistent process?

A Well, as I've discussed before, they -- typically, if we're looking for a resource, three providers will be contacted, and, during the development of the life care plan, we are all in communication and can identify the specific service that is indicated for the individual and the needs associated with that service.

Q Let's turn back to appendix 8 of Mr. McElhiney report. If you look at -- excuse me, appendix 9, which is the daily care continued, top portion of that page.

A Yes.

Q Do you see "Replacement Services"?

A Yes.

Q "Household for tasks including heavy cleaning, laundry, household simple maintenance, repairs," and "lawn care"; right?

A Yes.

Q And under "CNA," you have "Assistance with personal hygiene," "meal prep, assistance with tasks and household management, community mobility."

And so it's the same question that you can likely expect, Ms. Hairston, some of the services covered in the CNA service in this life care plan overlap with the services that replacement services covers as well; right?

A No.

Q So what is the difference, then, for household tasks, including heavy cleaning, laundry, household simple maintenance and assistance with tasks for household management?

A The CNA is going to assist with tasks for household management as they relate to assisting Mr. McElhiney with carrying out his activities of daily living.

Q Okay.

A So if they are helping him eat a meal, they are going to prepare the meal, they are going to monitor and supervise him eating, and then they're going to clean up the meal.

If they help him with his personal hygiene, they are going to help him in the bathroom, they are going to clean up the bathroom and they are

going to pick up the towels. They may throw a load of clothes in the washing machine. So they're going to help him with those tasks that are associated directly with his activities of daily living.

The replacement services are going to replace those services that Mr. McElhiney -- the tasks and chores that he did to maintain his home and property prior to his injuries. So that's mowing the lawn, cleaning the gutters, getting up on ladders, managing the maintenance for the cars, moving the furniture so someone can vacuum behind it, shoveling snow, and any number of other tasks.

Q Can you turn to page 14 for both Exhibit 1 and Exhibit 2, please.

A Page 14?

Q Yes, ma'am. And in the -- on both of those pages, pages 14 in both reports, the third full paragraph, second sentence reads, "The life care plan provides," insert the Plaintiff's name, "with homemaking services to carry out the many tasks and chores that he previously completed in his home."

Correct?

A I'm sorry, which paragraph are you reading from?

Q Third full paragraph there.
A Okay. Go ahead.
Q Let's just look at Mr. McElhiney's report. It reads, "The life care plan provides Mr. McElhiney with homemaking services to carry out the many tasks and chores that he previously completed in his home." Correct?
A Yes.
Q And then it says the same thing in Mr. Peterson's report, but with respect to Mr. Peterson; right?
A Yes.
Q It then goes on to discuss that "The hours of homemaking services were derived from the publication, Dollar Value of a Day (DVD)" in parentheses; correct?
A Yes.
Q And you utilized the Dollar Value of a Day for the hours of homemaking services in both reports; right?
A Yes.
Q Dollar Value of a Day is a statistical publication; right?
A It provides data, yes.
Q It is not an individualized assessment of

Mr. McElhiney personally; right?

A Dollar Value of a Day provides the information that is provided for Mr. McElhiney and for Mr. Peterson, it was individualized in that specific tables were used for each individual.

Q What tables?

A Those are actually reflected on the spreadsheets.

So for Mr. McElhiney, on appendix 9, under "Replacement Services," underneath that table, the average -- the specific tables that were used for Mr. McElhiney are indicated, and the same for Mr. Peterson.

Q Right. And I think that's what I'm trying to understand. Dollar Value of a Day reflects average household production for a particular individual; right? Or a particular category of individual?

A It -- there are categories reflected, yes.

Q It does not measure whether either Mr. McElhiney or Mr. Peterson actually -- what they actually did in their home before any of their alleged limitations related to Parkinson's Disease; right?

A During my assessment and development of

the life care plans, the information that I obtained identifies the tasks and chores that an individual performed prior to their injuries, and using that information along with the information, that data that's published with the Dollar Value of a Day, I identify those categories under which those tasks fall and use that to identify the number of hours to be provided to replace the services that the individual can no longer perform.

Q Did you document how many hours per week either Plaintiff spent performing household tasks before progression of their Parkinson's Disease?

A I'm sorry, Mr. McElhiney's -- I'm sorry.

The Dollar Value of a Day was used to identify the number of hours for age ranges for these individuals for the market estimate of the time, or the costs to support or replace the services that they are no longer able to perform.

Q I'm not asking about Dollar Value of a Day now. I'm asking about you, Ms. Kay Hairston, did not document how many hours per week each Plaintiff spent performing household tasks, did you?

A I do not have specific hours noted for each individual.

Q You did not obtain any logs of actual

household activity for either Plaintiff?

A I do not have logs. In preparing the report, I used the data that was published in Dollar Value of a Day.

Q Did you obtain any calendars reflecting actual household activities for either Plaintiff?

A I do not have a calendar for each individual.

Q Did you reduce in any way the numbers derived from the DVD to account for any existing outside support that either Plaintiff may have in their life, for example, their spouse and/or a friend coming to help with cutting the grass?

A The services that are provided in the plan are reflective of what is indicated to provide that service. It does not -- you know, if the wife or someone is doing it out of generosity, it provides the costs to replace those services so those people don't have to do it out of generosity or he does not have to pay for them.

And can we take a quick break?

MR. CARPENITO: Yes, ma'am.

VIDEO OPERATOR: We are going off the video record. The time is approximately 2:59 p.m.

(Recess.)

VIDEO OPERATOR: We are back on the video record. The time is approximately 3:06 p.m.

BY MR. CARPENITO:

Q Ms. Hairston, I want to turn to the second page of both Exhibits 1 and 2. When I say "the second page," I mean the second cover page.

A I'm sorry, the second --

Q Cover page of Exhibits 1 and 2. Let's start with Mr. McElhiney. The second paragraph on that page of Mr. McElhiney's report says "In addition to review of records, the life care planner met with Mr. McElhiney and his wife, Mrs. Simonne McElhiney, on August 8, 2024, by means of videoconference."

MR. ROMANO: Excuse me one second. Can you let Leslie back in? I just got a text that she needs to reenter the Zoom.

VIDEO OPERATOR: Sure thing.

She's in.

MS. LA MACCHIA: Thank you.

MR. ROMANO: There you go.

Sorry about that.

MR. CARPENITO: That's all right.

BY MR. CARPENITO:

Q Ms. Hairston, you had an interview with

Mr. and Mrs. McElhiney on August 8, 2024; correct?
A Correct.
Q And it was conducted via videoconference; right?
A Yes.
Q How long was your interview of the McElhineys?
A I -- actually, I can't give you the exact time right now. I mean -- I'm sorry, I don't mean to say -- I can give you a range. I don't have --
Q That's fine.
A -- the information that gives the exact time.
Q Approximately.
A Between two to three hours.
Q Okay. And did Mr. McElhiney answer questions on his own during that two to three hours?
A He was able to answer questions. And Mrs. McElhiney was there -- I'm sorry, give me a second.
Q Yes, ma'am.
A As I have written in the report.
Together Mr. and Mrs. McElhiney were able to appropriately answer all questions.
Q And so is it fair to assume that

Mrs. McElhiney provided the answers to some of your questions?

A Yes.

Q Is that common, in these interviews in which you're preparing a life care plan for an individual, for their spouse or another person attending the interview to answer for the individual who is the subject for the life care plan?

A It is individualized, but, yes, that happens -- it does happen on many occasions where a close family member is there during the course of the interview to assist with answering questions and providing more specific details.

Q Do you recall any of the topics that were discussed in which Mrs. McElhiney provided an answer as opposed to Mr. McElhiney?

A I don't remember all of the specific topics.

Q Are there any -- is there anything that would help you recall that?

A Not at this time.

Q Did you take notes during that videoconference on August 8, 2024?

A I am not sure if there were additional notes. All of my work regarding that

videoconference were submitted.

Q Submitted where?

A They were provided as directed.

Q Provided to who?

A Well, they were provided with all of the documents that I provided to the law office in response to the deposition. And I'm sorry, I don't mean to be evasive. I don't --

Q That's okay.

A -- recall if I had handwritten notes with this visit. They would have been provided as directed.

(Government Exhibit 11 identified.)

BY MR. CARPENITO:

Q I'm going to introduce what will be marked as Exhibit 11. And I'm going to ask you to turn to Bates number 46. These are some of the documents that Mr. McElhiney's attorneys produced to the United States in response to the document requests that we sent relating to your deposition.

A Okay.

Q Are these notes that you took during the videoconference that is referenced on the second page of your report in Mr. McElhiney's case?

A Yes.

Q Are these the only notes that you have from that call?

A To the best that I can recall at this time, yes.

Q Okay. The second paragraph on that page of Mr. McElhiney's report, page 2 there, says "Also on the videoconference was Ms. Nancy J. Bond, a certified life care planner." Right?

A Yes.

Q Who is Ms. Nancy J. Bond?

A Nancy J. Bond is a life care planner, a colleague also employed, or previously employed, at the Coordinating Center.

Q She was actually on both of the videoconferences with Mr. Peterson and Mr. McElhiney; right?

A Correct.

Q Why was she on those calls?

A As I previously mentioned, as may often occur, as we are developing life care plans at the Coordinating Center, there will be two life care planners who are present during assessment and other pieces of development of the life care plan as we both bring -- or both of the life care planners bring different -- or bring vast amount of

experiences, education, skills and expertise.

Q What differences in experience does Ms. Nancy J. Bond have that you may or may not have?

A Nancy bond has a significant background in special education and rehabilitation services.

Q So how does her experience in special education provide the context for which she would be included in these videoconferences?

A As we often do at the Coordinating Center, if two life care planners are on the call, they're both hearing the information. During the development of my life care plan or a life care plan, I may consult with another life care planner or we may talk about different aspects of the life care plan. And if someone else has been on the call, that's another source of information that's helpful or can provide input in developing the life care plan.

Q Was there any particular portion of either life care plan in which you found Ms. Nancy J. Bond's input necessary?

A I can't identify any specific portion of the plan.

Q Did Ms. Nancy J. Bond in any way help you write either of your reports offered in this case?

A Can you clarify help write the report?
Q Well, what kind of input did she provide?
A At this point, I don't recall what input she provided.
Q Ms. Hairston, are you testifying that you don't recall whether Ms. Nancy J. Bond helped you to write either of these reports in this case?
A What I'm saying is Nancy J. Bond -- I wrote the report, okay. At this point in time, I don't recall if I had any conversations or questions or ran anything past Nancy bond.
Q Would there have been any reason for Ms. Nancy J. Bond to write any portion of either of these reports?
A No.
Q If she did, would it have been noted in the respective report?
A Nancy J. Bond did not write any portion of these reports.
Q To your knowledge, has Ms. Nancy J. Bond been retained as an expert in this case?
A To my knowledge, she has not been retained as an expert in this case.
Q And either of the videoconferences for Mr. Peterson or Mr. McElhiney, did Ms. Bond take any

notes?

A I have produced, based on the work that I have done on the case, I have produced that documentation as directed.

Q So is it possible that Ms. Bond also has notes from either of these calls?

A There may be a possibility.

Q Okay. If you wanted to figure out whether Ms. Bond had notes related to these calls, how would you go about doing that? Would you just ask her?

A I could just ask her. I could ask her.

Q Okay. Were there attorneys present during either of these videoconferences for Mr. Peterson or Mr. McElhiney?

A No.

Q Was either videoconference for Mr. Peterson or Mr. McElhiney recorded by anybody?

A No.

Q Let's turn to Mr. Peterson now specifically and the videoconference. That one was also conducted via videoconference; right?

A I'm sorry, let me catch up.

Q Yes, ma'am.

A Yes.

Q Do you recall, and an approximation is

fine, how long that interview lasted?

A With Mr. Peterson, approximately between two to three hours, if I recall correctly.

Q Were there any questions in which -- I should take a step back.

Did Mr. Peterson answer questions on his own?

A I'm sorry, I wanted to make sure I accurately reflected the interview.

Mr. Peterson appeared to understand the questions, although he had difficulty clearly verbalizing his answers.

Q Go ahead. No, please.

A No. Mr. Peterson typed some of his answers on a computer, which Mrs. Peterson read to the interviewers.

Q How much did Mrs. Peterson answer versus Mr. Peterson?

A I can't approximate.

Q So just to confirm my understanding of the videoconference, you would ask Mr. Peterson a question; right?

A Correct.

Q And then Mr. Peterson would type his answer on a computer; right?

A Yes.
Q And then Mrs. Peterson would read that typed answer to you; right?
A Yes.
Q Okay.
A And just to be clear, Mrs. Peterson was also able to answer questions posed regarding Mr. Peterson's former and current healthcare needs. She was able to assist with clarifying Mr. Peterson's verbal responses. Stop, I'm done.
Q Did you confirm Mrs. Peterson's answers with Mr. Peterson?
A Mr. Peterson was there sitting next to Mrs. Peterson.
Q My question is, did you explicitly confirm any of Mrs. Peterson's answers with Mr. Peterson?
A I don't recall that I did.
Q Did you offer Mr. Peterson the opportunity to add to any of Mrs. Peterson's responses?
A The interview is an open interview. Yes, if he wished to -- I'm sorry.
I can't be specific. I don't know every specific question and answer, if he came back and typed more. He was there doing the interview. It was open for him to offer any additional

information.

Q You also had additional calls with the Plaintiffs and their spouses beyond the interviews that are referenced in your report; right?

A Yes.

Q And you took notes during those calls; right?

A Yes.

Q And those notes reflect information that you obtained directly from the Plaintiffs, Mr. Peterson and Mr. McElhiney, or their spouses; right?

A Yes.

Q On Exhibit 11 -- and I'm just going to walk through these dates to make sure that we have the full universe here. Bates number 47.

A Okay. Bates 47.

Q Yes, ma'am. That reflects notes from a call that you had with Mr. McElhiney on December 9, 2024; right?

A Yes.

Q Bates number 48 reflects notes from a call that you had with Mr. and Mrs. Peterson on December 19, 2024; right?

A Yes.

Q Bates number 49 reflects notes from a call that you had with Mr. McElhiney on December 23, 2024; correct?

A Yes.

Q Bates number 50 reflects notes from a call that you had with Ms. Peterson on December 4, 2024; correct?

A Yes.

Q How common is it for you to have calls with only the spouse of an individual for whom you are preparing a life care plan?

A Again, it is individualized, but it happens. If the -- if I know this is an individual who is familiar with the care and the needs of the individual for whom the report is being prepared.

Q If you'll turn to Bates number 60. Are you there?

A Yes.

Q That reflects notes from a call that you had with Mr. McElhiney on January 9, 2025; right?

A Yes.

Q The next page, Bates number 61, reflects notes from a call that you had with Ms. Peterson on January 9, 2025; correct?

A Yes.

Q Bates number 62 reflects notes from a call that you had with Ms. Peterson on July 2, 2024; right?

A Yes.

Q Bates number 63 through 64 reflect notes from a call you had with Mr. and Mrs. Peterson on July 22, 2024; correct?

A Yes.

Q And finally, Bates number 65 reflects notes from a November 7, 2024 call with Mr. and Mrs. Peterson; right?

A Yes.

Q Okay. Those calls, at least in part, discussed the Plaintiffs' medical conditions; right?

A The information provided updates on the care that they were receiving, yes.

Q But your report refers generally to one interview for each Plaintiff; right?

A The initial interview is listed in the report, yes.

Q Your reports do not separately identify each of those additional calls as sources of information; right?

A It does not list all of the -- each additional call.

Q There's no section of your report listing these calls as materials considered; is that right?
A So can you clarify what you're asking?
Q There is no section of your report that lists these calls as materials considered; correct?
A It's not listed in the report.
Q Did you use information obtained during these calls in preparing portions of these reports?
A The information in the calls was used to help clarify details in terms of developing the report.
Q Does the information in the narrative section of your reports in these cases come from what the Plaintiffs or their spouses told you during these calls?
A I'm sorry, just repeat the question.
Q Yes, ma'am.
Does the information in the narrative section of your reports come from what the Plaintiff or the spouses told you during these calls?
A Information obtained during the calls, some of that information provided clarification that was used in developing the report and preparing the narrative.
Q A reader of your reports would not know

from reading the report alone that multiple follow-up calls occurred. You agree with that?

A It's not specifically indicated in the report.

Q Your report does not distinguish which information came from treating providers versus what came from these additional phone calls; right?

A I would have to ask you to be specific on that, what information came -- what information from treating providers.

Q Okay. We can go back to that in a moment.

The report does not explain which information in your reports were informed by which call; right?

A It does not detail areas of clarification or details that were specified in the report.

Q The notes that we just reviewed, are those the only written documentations of those additional calls?

A Yes.

Q Was Ms. Nancy J. Bond with you during these calls?

A No.

Q Outside of all the calls that we just referenced in walking through these notes, did you

have any additional calls with either of the Plaintiffs, their spouses or their friends?

A Not that I can recall. To the best that I can, I document when I have additional conversations with the individuals.

Q Are there any audio recordings of the calls that we just reviewed?

A None that I took.

Q There's no verbatim transcripts of those calls?

A No.

Q Was anyone else on the call besides yourself and the Plaintiff or their spouse?

A I documented the individuals who I understood were on the phone calls.

Q Do you recall when you provided this documentation in Exhibit 11 to Plaintiffs' counsel?

A I'm sorry, are you asking for the exact date?

I'm sorry. If I recall, the e-mail requested that I provide the documents by a specific date, and whatever that date was, my goal was to get the information to them by that date.

Q In other words -- we'll use Bates number 48, for example. There are notes there on December

19, 2024, you had a call with Mr. and Mrs. Peterson; correct?

A Correct.

Q Would it have been your normal practice after completing these notes to send these notes to Plaintiffs' counsel immediately or in the near future?

A Typically, when I document these notes, I maintain them in my file until I'm asked to produce them.

Q And you provided them to Plaintiffs' counsel in response to the document requests that we sent to you; right?

A Yes.

Q Let's turn to Mr. Peterson's report, and let's turn to appendix 8 of Mr. Peterson's report.

A Yes, I'm sorry. I'm there.

Q We're going to jump around here for a moment. Appendix A for Mr. Peterson's life care plan you have a service listed of home adaptation; right?

A Yes.

Q The unit cost is listed as $318,977; correct?

A Yes.

Q The annual cost is the same as the unit cost reflected as a one-time-only cost; right?

A Yes.

Q If you will turn to page 15 of your report on Mr. Peterson, do you see the housing and transportation section listed down towards the bottom of page 15?

A Yes.

Q In that paragraph, you discuss that, flipping to page 16 the last sentence in that paragraph, you state, "The reader is referred to Mr. Anderson's full report of December 16, 2024, for details regarding his recommendations and the basis of those recommendations."

Did I read that correctly?

A Yes.

Q Are you relying on Mr. Eric Anderson for the home adaptations service listed in your life care plan for Mr. Peterson?

A Relative to the home modifications, Mr. Anderson's report was used to provide that recommendation.

Q You did not independently design any of the proposed home modifications for the Petersons' home yourself; correct?

A No, I did not.
Q You did not independently propose any of the home modifications to the Petersons' home yourself; right?
A I did not.
(Government Exhibit 12 identified.)
BY MR. CARPENITO:
Q I will introduce what's going to be marked as Exhibit 12.
I would represent to you, Ms. Hairston, that Exhibit 12 is a copy of Mr. Eric Anderson's housing report for Mr. Edgar Peterson. Would you agree with that?
A Yes.
Q And it's a report dated December 16, 2024; right?
A Yes.
Q The costs associated with the home adaptation costs listed in appendix 8 of your report are taken directly from Mr. Anderson's December 16, 2024 report; correct?
A Yes.
Q Ms. Hairston, you're not a licensed contractor; right?
A I am not a licensed contractor.

Q You are not licensed to perform construction work; right?

A I am not licensed to perform construction work.

Q You are not licensed to estimate construction work; right?

A I am not licensed to estimate construction work.

Q You did not independently verify Mr. Anderson's costs, did you?

A I -- his report -- Mr. Anderson's report is his report.

Q If Mr. Anderson's pricing changes, the costs for home adaptations listed in appendix 8 of your life care plan would need to change as well; right?

A If new information was introduced as to the cost for home modifications, that information would need to be reviewed and analyzed to determine how it would apply to the life care plan.

Q If Mr. Anderson's pricing contains errors, the cost for home adaptation listed in appendix 8 of your life care plan would also contain those same errors; right?

A My information came from Mr. Anderson's

report.

Q Did you ever meet with Mr. Anderson?

A I'm sorry, during the course of the -- I don't recall meeting with him.

Q But you did refer this case to him; right?

A Yes.

Q You called Mr. Anderson and left a voicemail explaining that you had a referral for him; right?

A I don't remember the details of the referral, quite honestly.

(Government Exhibit 13 identified.)

BY MR. CARPENITO:

Q Exhibit 13. Ms. Hairston, I represent to you that Exhibit 13 is a copy of Mr. Eric Anderson's January 28, 2026, deposition transcript in this litigation. And I'll ask that you turn to page 28.

I'm going to read --

MR. ROMANO: Just a second.

MR. CARPENITO: Of course.

BY MR. CARPENITO:

Q Ms. Hairston, I'll read page 28, line 16, through page 29, line 7.

"Question: How did you first learn about the matter with Mr. Peterson?

"Answer: I received a phone call, a voice message from Kay Peterson [sic] explaining that she had a referral for me and that's how I learned this.

"Question: And was Kay Peterson the first person who contacted you about working on this matter?

"Answer: Yes.

"Question: When you were contacted, were you asked to do anything specifically for this case?

"Answer: No. Just to assess the house.

"Question: And at that time, what information were you provided with?

"Answer: Kay Hairston just left a message saying that she had a referral and provided the attorney information."

Did I read that correctly?

A Yes, you read that correctly.

Q You were the first person to call Mr. Anderson about working on this case; right?

A According to the deposition. I -- again, I may have called him. I mean, I don't agree or disagree.

Q According to Mr. Anderson, you were the first person to call him about the Petersons; right?

A Okay. Okay. Yes.

Q I'm asking if you agree.
A I don't remember the specifics of the phone call. I don't remember the day I called him, I don't remember what we talked about.
Q Do you understand that Mr. Eric Anderson never personally inspected the Peterson residence?
A I don't know all of the details of how Mr. Anderson prepared his report.
Q Okay. If you will turn to page 39 of this deposition transcript, let me know when you're there.
A Okay.
Q I'm going to read lines 8 through 10 on page 39. The question to Mr. Eric Anderson, "And in the case of Mr. Peterson, did you request to physically tour his property?
"Answer: No."
Would you have a reason to dispute what Mr. Anderson testified to with respect to him visiting the Petersons' home?
A This is the first time I am looking at the deposition, but I don't have a reason to dispute what he says.
Q And page 18 through -- excuse me.
Page 39, same page, lines 18 through 21.

"Question: And just so it's clear, as of today, you have not been physically present inside Mr. Peterson's home; correct?

"Answer: Correct."

Did I read that correctly?

A Yes.

Q Are you aware that the scanning of the Petersons' residence was done by somebody other than Mr. Anderson?

A I am not going to comment on the details of how Mr. Anderson performs his assessment or prepares his report.

Q You didn't meet with the third party who conducted the scanning of the Peterson residence, did you?

A If that was done -- I haven't met with anybody regarding the assessment of Mr. Peterson's home.

Q You never personally conducted on-site evaluation of the Petersons' residence; right?

A Correct.

Q You never personally conducted a virtual evaluation of the Peters' residence; right?

A When you -- can you clarify, what do you mean virtual?

Q I mean a virtual tour of their home.
A I don't know if there's a specific name for the virtual tour of their home. During the videoconference call with Mr. and Mrs. Peterson, they showed different areas of the home during the virtual call.
Q What areas?
A I'd have to look in my -- I don't know that I have that information in the report.
I recall they did go to another room of the home. I did not -- I did not see all of the home, so that's why I'm asking for clarification, what you say, did I do a virtual tour of the home.
Q How many other rooms did they show you during the virtual -- the videoconference that you had with the Petersons?
A One to two.
Q Are you aware that Mr. Anderson testified in his deposition that at least 20 percent of the total cost that's reflected for these home modifications or adaptations represents contingencies?
A I'm not aware of what he testified to.
Q Would you agree roughly 20 percent of 318,000 is approximately 60,000?

A I don't have a calculator. If that's the numbers that you're telling me right now, I'm going to defer to your math.

Q Let's look at page 56 of that deposition transcript and look at the very bottom of page 56 onto page 57. I'm going to read starting with line 24 on page 56.

"Question: So, Mr. Anderson, then is it fair to say that when we look at the 10 percent contingency and the 10 percent additional contingency that at least 20 percent of the projected cost of this project is uncertain to occur as of today?"

Mr. Anderson's answer, "Correct."

So do you have any reason to dispute that Mr. Anderson takes the position that at least 20 percent of the projected costs of the project related to the Petersons' home is uncertain to occur?

A I can defer to what is written in the -- what is being presented to me in the deposition.

Q If those contingencies never materialize, do you agree that the relevant portion of your life care plan in appendix 8 for Mr. Peterson would overstate the actual costs?

A If there is additional information regarding the cost of the home modifications and a modification in Mr. Anderson's report, that information would need to be reviewed and analyzed, and determine how it would apply to the life care plan.

Q And if the additional information given to you is that the contingencies never materialize and $60,000 roughly of the home adaptation costs is then decreased, then that cost in your life care plan for Mr. Peterson would need to be reduced; right?

A Any new information would need to be reviewed and analyzed and determined how it would apply to the life care plan.

Q You note in your narrative section for Mr. Peterson's report that their home is located in a historic district; right?

A Yes.

Q And let's turn to page 16.

A One-six?

Q Yes, ma'am.

A Of the Peterson report?

Q Yes, ma'am.

A Okay. Yes, I'm there.

Q That paragraph at the top of the page,

about halfway to three fourths down that paragraph, there is a sentence that starts with the word "Briefly."

Do you see that?

A Yes.

Q It reads, "Briefly, Mr. Anderson indicated that the Peterson home is located in Central Gardens National Historical District. All modifications to the house must comply with the architectural guidelines of the Central Garden Association and the Memphis Landmarks Commissions."

Did I read that correctly?

A Yes.

Q Are you aware that at the time of his January 28, 2026, deposition Mr. Anderson had not communicated with either housing authority about these proposed modifications to the Peterson home?

A I don't know the details of what he did when preparing his report.

Q Is that something you would have wanted to know before including that in your life care plan?

A All of that is information that would be considered in terms of developing the life care plan.

Q But you didn't have that information, did

you?
A I am not aware of that information.
Q You didn't personally review the guidelines of either of those governing bodies; right?
A The governing bodies of?
Q The Central Gardens National Historical District or the Memphis Landmarks Commission.
A I did not.
Q Will you turn to page 81 of the deposition transcript?
A Are you still on Exhibit --
MR. TUBIN: 13.
THE WITNESS: 13?
BY MR. CARPENITO:
Q Yes, ma'am.
A Okay. I'm there.
Q And I'm going to read lines 3 through 16 on page 81 of Exhibit 13.
"Question: Have you submitted a proposal with the CGA Landmarks committee as of today?
"Answer: No.
"Question: And your report also contains drawings of Mr. Peterson's property; correct?
"Answer: Yes.

"Question: And did you schedule a preliminary review with the Memphis Landmarks Commission staff prior to creating the drawings of Mr. Peterson's property?

"Answer: No.

"Question: Has anyone with the Memphis Landmarks Commission reviewed your drawings?

"Answer: No."

Did I read that correctly?

A Yes.

Q You agree that, as of the time of his deposition, not a single person with the Memphis Landmarks Commission reviewed Mr. Anderson's proposed drawings of the Peterson home; right?

A I'm reading along with you what's in the deposition.

Q If the relevant housing authorities that we've just discussed deny Mr. Anderson's proposals, that would impact appendix 8 in Mr. Peterson's life care plan; right?

MR. ROMANO: Just one second. I'm going to object to the form of the question. I'm going to object to any of the testimony and questioning having to do with somebody else's deposition, another expert's deposition under these

circumstances.

Go ahead.

THE WITNESS: I'm sorry, can you ask the question again?

BY MR. CARPENITO:

Q Yes. If the relevant housing authorities that we've discussed today, and that you have noted in your report, if they deny Mr. Anderson's proposals, that would impact appendix 8 in your life care plan; right?

MR. ROMANO: Object to the form of the question.

THE WITNESS: That is all having to do with Mr. Anderson's report. All I can say is if there is new information provided to me, that information would have to be reviewed and analyzed and determined how it would impact the report.

BY MR. CARPENITO:

Q Ms. Hairston, you testified that you relied on Mr. Anderson's report for the costs in your life care plan; right?

A I used his report to provide the costs for the home modifications.

Q Right. So you can see kind of my thought process here, like if either of these housing

authorities says, no, Mr. Anderson, we're denying your proposal, that line item in your life care plan would need to be removed; right?

MR. ROMANO: Objection to the form of the question.

THE WITNESS: I can't answer how that would impact his report, how that would impact his report. And so once all of that information is -- whatever scenario plays out, once that scenario -- once that information is provided, I would have to review the information and determine if it impacts the report.

BY MR. CARPENITO:

Q Are you aware that the Central Gardens has architectural design guidelines that have been approved by the Memphis Landmarks Commission?

A I am not familiar with --

MR. ROMANO: Same objections.

(Government Exhibit 14 identified.)

BY MR. CARPENITO:

Q I am going to introduce what will be marked as Exhibit 14.

Ms. Hairston, I would represent to you that these are the "Central Gardens Historic Zoning: Architectural Design Guidelines and Users Guide."

Do you see that on the first page?

A Yes.

MR. ROMANO: Let me interject an objection to any question about -- asking a life care planner to now start interpreting historic zoning guidelines. So I'll make that a continuing objection.

MR. CARPENITO: That's fine.

MR. ROMANO: As it would be like asking her to start looking at a surgical textbook talking about surgery.

BY MR. CARPENITO:

Q I'm going to ask that you turn to page 4.

A Where are you seeing page numbers? Oh, I see it. There it is.

Q Down in the bottom in the black box. Do you see at the top of page 4 it says "The Design Review Process"?

A Yes.

Q And if you skip to page 5, skip down to step 6, I'm going to read step 6 here. It talks about "Prepare and submit a complete application packet for" "review. An application packet should be prepared and submitted to the City for projects subject to review. Adequate documentation is

essential to provide complete understanding of the work proposed. Applicants are encouraged, and may be required, to submit the following documentation."

And then the last two bullet points there list "Site plan (drawn to scale)," "Proposed building elevations (to scale) with materials and dimensions specified."

Did I read that correctly?

A You read that correctly.

MR. ROMANO: Objection to the form of the question and to this entire line of questioning.

BY MR. CARPENITO:

Q Now keeping that in front of you and in mind, let's turn back to Mr. Anderson's report, on which you state you rely for appendix 8 in your life care plan. And turn to what is marked as page 1 in the bottom right-hand corner, but it is technically the fourth page of Mr. Anderson's report.

Do you see down there in all caps it says "NOT TO SCALE - ILLUSTRATION PURPOSE"?

MR. ROMANO: Continuing, same objections.

MR. CARPENITO: John, the deposition protocol in this case states that you can't have speaking objections. I noted your continuing objection. It's on the record.

THE WITNESS: I don't know if I'm on the same page as you.

BY MR. CARPENITO:

Q Does it say page 1 in the bottom right-hand corner?

A "NOT TO SCALE," I see that.

Q If you flip the page, do you see "NOT TO SCALE"?

A Yes.

Q Do you see page 3, "NOT TO SCALE"?

A Yes, I see that.

Q And page 4 it says "NOT TO SCALE"?

A Yes.

Q And page 5 it says "NOT TO SCALE"?

A Yes.

Q Page 6 says "NOT TO SCALE"?

A That's what it says.

Q Page 7 says "NOT TO SCALE"?

A Yes.

Q And page 8 says "NOT TO SCALE"?

A Yes.

Q As does page 9?

A Yes.

Q And page 10?

A Okay.

Q And page 11. As written, Mr. Anderson's drawings do not satisfy at least one submission requirement under the relevant guidelines; right?

MR. ROMANO: Objection to the form of the question.

THE WITNESS: I can't comment on the details of his report. I just don't have any comment on it.

BY MR. CARPENITO:

Q Would you agree that the approximately $318,000 line item listed in appendix 8 of your life care plan for Mr. Peterson is not tied to any approved scope of work submitted by Mr. Anderson?

MR. ROMANO: Objection to the form of the question.

THE WITNESS: I can't comment on that. I don't know those details.

BY MR. CARPENITO:

Q The specific home adaptations in Mr. Anderson's report come from Mr. Anderson; right?

MR. ROMANO: Objection to the form of the question.

THE WITNESS: The information that I used in development of the life care plan, I used input from the report of Mr. Anderson.

BY MR. CARPENITO:

Q What I'm trying to understand is the specific home adaptations in Mr. Anderson's report don't come from any of Mr. Peterson's treating medical providers; right?

A I can't speak to the details of Mr. Anderson's report.

Q Did any of Mr. Peterson's treating medical providers discuss with you any home adaptations?

A They have not discussed with me home adaptations.

Q Instead, you relied on a licensed contractor to determine if these home modifications were medically necessary; is that right?

A I disagree with the way you've worded the questions. In developing the life care plan, I used input from the report of Mr. Anderson to identify the home modifications that were appropriate for Mr. Peterson, for him to remain at his home and the community.

Q Are you aware that Mr. Peterson has been diagnosed with Parkinson's disease for more than 20 years?

A He has had Parkinson's disease for quite a while.

Q During those 20 years, him and Mrs. Peterson have lived in the same home; right?

A It is my understanding they have resided in the same home.

Q Are you aware of the Petersons ever undertaking structural accessibility renovations to their home at any point in the past?

A I do not have all of the information as to what -- modifications or accessibility features that have been identified for their home.

MR. CARPENITO: Why don't we take a short break.

VIDEO OPERATOR: We are going off the video record. The time is approximately 4:02 p.m. This is the end of media 4.

(Recess.)

VIDEO OPERATOR: We are back on the video record. The time is approximately 4:12 p.m. This is the beginning of media 5.

BY MR. CARPENITO:

Q Ms. Hairston, if you will turn to the second cover page of Mr. Peterson's report, please. And on that page, it states that "Input into the life care plan was sought and received from Mr. Peterson's treating providers of care including

neurologist, Dr. Vishad Kumar; licensed speech therapist, Ms. Celia Lyons; and licensed physical therapist, Ms. Ellen Markwell"; correct?

A Yes.

Q Outside of those individuals listed there and outside of Mr. Anderson, is there anyone else that you sought and received input from when preparing Mr. Peterson's life care plan?

A No, not that I recall.

Q How did you determine which treating providers you would seek input from for Mr. Peterson's life care plan?

A I reviewed the medical records and after speaking with Mr. Peterson and obtaining information on those providers who were involved in his care, I determined that these were the individuals who could provide appropriate information as to the supports and services that he needs.

Q Were there any other treating providers that you wanted to talk to but were unable to?

A I did not reach out to any other physicians or providers.

Q Were there any others that you wanted to talk to?

A Those were the providers of care that I

identified who could assist, and provide input into the life care plan.

Q What criteria did you use in deciding which providers' input was necessary versus which was not?

A Can you be more specific, please?

Q Yes, ma'am. Was there any criteria that you used in deciding which providers you would seek input from versus which providers you would not seek input from?

A Again, after the assessment, speaking with Mr. Peterson, and having -- reviewing the medical records, I identified the providers who were involved in his care and could identify the supports and services that he needed.

(Government Exhibit 15 identified.)

BY MR. CARPENITO:

Q I'm going to introduce what will be marked as Exhibit 15. This is a copy of the questionnaire that you sent to Dr. Kumar.

A Yes.

Q Dr. Kumar is Mr. Peterson's neurologist; right?

A Correct.

Q If you'll turn to question 2 on page 1, do

you agree with me that question 2 indicates that the last time Mr. Peterson was examined by Dr. Kumar, at least at the point in which he filled out this questionnaire, was July 30, 2024; right?

A Yes, that's what's indicated in the questionnaire.

Q And would you also agree that Dr. Kumar's responses then would be based on his assessment of Mr. Edgar Peterson up and to the point of July 30, 2024?

A I would say that he examined Mr. Peterson on July 30, 2024. I can't say that there were other opportunities for him to communicate or have information about Mr. Peterson's condition after July 30.

Q Based on Dr. Kumar's response to this questionnaire, none of the information reflected in his answers in this questionnaire would be based on Mr. Peterson's condition after July 30, 2024; right?

A Well, I can't say that.

Q Well, the date listed here is July 30, 2024 for the last time that Dr. Kumar examined Mr. Peterson; right?

A Yes, he examined Mr. Peterson -- he indicated that he examined Mr. Peterson on July 30.

Q And your life care plan relies on this questionnaire at least in part; correct?
A Yes, it was used -- the input was used in development of the life care plan.
Q Your life care plan is dated February 5, 2025; right?
A Yes.
Q You don't have an updated questionnaire from Dr. Kumar, do you?
A I have the questionnaire that is dated as here reflected on this document.
Q And that's what I've just handed you as Exhibit 15; correct?
A Correct.
Q Any changes in Mr. Peterson's condition after July 30, 2024 would not be reflected in Dr. Kumar's responses; right?
A Well, that's a general statement. Can you say that again, please?
Q Any changes in Mr. Peterson's condition after July 30, 2024 would not be reflected in Dr. Kumar's responses in this questionnaire at Exhibit 15?
A The date that I have on Dr. Kumar's responses are August 7, 2024.

Q If we look at question 4, "Do you anticipate that Mr. Peterson will require more than the usual number of visits to his primary care physician related to his Parkinson's disease and related impairments?" First, did I read that correctly?

A Yes.

Q Dr. Kumar's response is no; right?

A Correct.

Q And if we look at appendix 1 of your life care plan for Mr. Peterson, do you see "Primary Care" there listed?

A Yes.

Q Do you see for "DURABILITY" it states "As indicated"?

A Yes.

Q What is as indicated?

A That is going to be based on Mr. Peterson and his relationship with his primary care physician and however often his primary care physician wants him to come in to see him.

Q Who is his primary care physician?

A Dr. Allen.

Q Why didn't you receive input for Mr. Peterson's life care plan from Dr. Allen?

A Again, after reviewing the records, and talking with Mr. Peterson and reviewing all of the information, I determined that I would reach out to Dr. Kumar for input into the life care plan.

Q But you received input from Mr. McElhiney's primary care physician; right?

A Yes.

Q But you didn't receive input from Mr. Peterson's primary care physician; correct?

A These are both individualized, client-specific plans, and for each plan I look at the information available to me, and determine how best -- appropriate to that individual to develop the life care plan.

Q And they're both individuals with Parkinson's disease; right?

A Yes, they are.

Q So why did you make the decision to rely on the primary care physician, at least in part, for one of them and not the other?

A It was based on the information that was available to me and in determining the physicians that could provide input into the life care plan.

Q And Dr. Allen could not provide input into the life care plan? Is that what you're saying?

A I did not reach out to Dr. Allen.
Q Why?
A Based on the information -- after review of the information, the medical records, speaking to the Petersons, all of the information was considered, and for Mr. Peterson I contacted Dr. Kumar for input into developing the life care plan.
Q What if Dr. Allen has information that could have been relevant to your analysis of this life care plan?
A As I developed the life care plan, I determined that Dr. Kumar could provide input appropriate to the development of the life care plan. If there's any new information available, that information will be reviewed and analyzed and determined if it impacts the life care plan.
Q Can we turn to question 11, please, in Exhibit 15. If you look at question 11, it asks, "Do you recommend annual re-evaluation services from the following disciplines for the purpose of updating Mr. Peterson's home exercise program and/or maintaining his physical function?"
Did I read that correctly?
A Yes.

Q And then question 12, excuse me, asks separately what treatment services Dr. Kumar anticipates Mr. Peterson will require? Right?
A Question 12?
Q Yes, ma'am.
A Yes.
Q It asks about physical therapy; right?
A Yes.
Q Occupational therapy?
A Yes.
Q And speech therapy?
A Yes.
Q Now, if you turn to appendix 4 of your life care plan, your life care plan includes separate line items for a "Physical Therapy Evaluation"; right?
A Yes.
Q And then "Physical Therapy," is that treatment?
A Yes.
Q And then a separate line item for "Occupational Therapy Evaluation"; right?
A Yes.
Q And then "Occupational Therapy" treatment?
A Yes.

Q And then lastly, "Speech Therapy Evaluation"; correct?
A Yes.
Q And a separate line item for "Speech Therapy" treatment; right?
A Yes.
Q A reevaluation is simply a therapy appointment where the relevant therapist is reassessing progress; right?
A I'm sorry, say that again?
Q An evaluation, or reevaluation, is simply a therapy appointment where the relevant therapist is reassessing the patient's progress; right?
A No, I'm not going to define it as simply as that.
Q Could it occur during a regularly scheduled therapy visit?
A There are evaluations for therapy, and there are actually therapy sessions where they are actually providing treatment.
Q But physical therapy evaluation is listed three times per year here; right?
A Yes.
Q And Mr. Peterson in his life care plan that you've drafted also has physical therapy

listed, 24 to 30 visits per year; right?
A Yes.
Q And so what I'm asking you is, those three physical therapy evaluations, could they not occur at the same time as a physical therapy treatment?
A If I can get to all of my information -- can I get just a minute, please?
Q Of course.
A Okay. Well, simply, I'm not sure if I can find the exact document. Those recommendations come from the physical therapist.
Q Can you -- did you ever ask them, those therapists, whether the evaluation could occur during a therapy treatment session?
A What is identified in the report is what was recommended from the physical therapist.
Q And you didn't request clarification with respect to this topic; is that right?
A To the best that I can recall, the physical therapist indicated that these evaluations would be separate from the actual sessions of physical therapy.
Q Do you recall why they said that was needed?
A This is the information that was provided

to me by the therapist who was treating him -- treating him at the time.

Q Did they provide you any requirement that states that the evaluation must be completely separate?

A I don't remember those details of the conversation.

Q Okay. Is there anything that would help you remember?

A Not at this time.

Q Now, let's look at the "PROVIDER" column in appendix 4.

A Okay.

Q For physical therapy, occupational therapy and speech therapy, in the accompanying evaluation, your provider lists one single provider; right?

A Correct.

Q And I'm not going to attempt to pronounce that, but it is -- can you explain what this provider is and where it is?

A This provider -- during the development of the life care plan, Mr. Peterson began active participation in therapy services at this facility. And this facility was specifically contacted and questioned about the cost of therapy services

relative to Mr. Peterson.

Q In other words, for each of these therapies on appendix 4, other than the access to adaptive gym, you list only one costing provider; right?

A Yes.

Q You did not obtain pricing from multiple physical therapy providers in Mr. Peterson's geographic area; is that right?

A As is consistent with my practice, if an individual is -- has received services from a specific provider, that's where they like to receive services, or as in this case is actively being treated as the life care plan is developed, then that is the cost of services that will be reflected in the life care plan.

Q Ms. Hairston, my question to you was whether or not you agree that you did not obtain pricing from multiple physical therapy providers in Mr. Peterson's geographic area.

A No. I obtained pricing -- as consistent with my practice, I obtained pricing from the provider for which he was receiving services from.

Q You did not obtain pricing from multiple occupational therapists providers in Mr. Peterson's

geographic area; is that right?

A As consistent with my practice, I obtained pricing from the provider for which he was receiving services from.

Q You did not obtain pricing from multiple speech therapy providers in Mr. Peterson's geographic area; correct?

A As is consistent with my practice, I received pricing from the provider for which he was receiving services.

Q You didn't identify the lowest available market rate for comparable services with respect to any of these therapies; right?

A As consistent with my practice, I obtained pricing from the provider for which he was receiving services.

Q Ms. Hairston, I'm going to ask my question again.

You did not identify the lowest available market rate for comparable services with respect to these -- physical therapy, occupational therapy or speech therapy?

A So I -- I don't know any of the way to say it except to say I take issue with the question.

I don't go out and ask for the lowest

price for a service provider.

As is typical with my practice, I have identified the price for services for the provider from which he was receiving services at the time during -- as the report was being developed.

Q You didn't perform any type of market survey to determine whether other providers charge less, did you?

A I obtained the cost from the provider that was providing services to Mr. Peterson at the time.

Q Earlier you testified that sometimes your practice is to identify three providers; right?

A And consistent with my practice, if an individual does not have a particular provider for services, then the cost for three providers will be obtained.

Consistent with my practice, if a provider -- if an individual is receiving services from a specific provider, the costs from that provider will be used.

Q Your life care plan on this page lists physical therapy visits for 24 to 30 visits per year; right?

A Correct.

Q Is Ms. Markwell the rationale of that

service?
A I spoke with Ms. Markwell, and she provided input as to the frequency of services for Mr. Peterson.
Q Did you send her a questionnaire?
A I'm sorry, let me -- I'm sorry, give me just a second, please. Why do I not see Mr. Peterson's report? Oh, sorry.
Q That's okay.
A I'm sorry, can you repeat the last question, please?
Q Did you send Ms. Markwell a written questionnaire like you did with Mr. Kumar?
A No, I did not send her a written questionnaire. I had a phone conversation with Ms. Markwell.
Q How many phone conversations did you have with Ms. Markwell?
A To the best I recall it was only one.
Q Do you have notes from that call?
A Yes.
Q Okay. Have you provided those notes to the United States?
A I believe that I did.
Q Okay. Page 15 of -- actually, strike

that.

Do you recall how many pages those notes were reflecting your call with Ms. Markwell?

A I believe it was one page.

Q Did you provide those notes to Mr. Peterson's attorneys?

A I believe I produced the documents as requested.

Q So your frequency numbers are based on your understanding of a phone call with Ms. Markwell; right?

A Are based on the input following the conversation with Ms. Markwell, yes.

Q If we look at the occupational therapy service on appendix 4.

A I'm sorry, yes.

Q That's okay.

Your life care plan recommends occupational therapy evaluation; right?

A Yes.

Q And then an occupational therapy of four to eight times per year; right?

A Yes.

Q You attribute the occupational therapy service to Ms. Markwell; correct?

A Yes.
Q Ms. Markwell is a physical therapist; right?
A Yes.
Q In fact, you identify her in your report as a physical therapist; right?
A Yes.
Q Ms. Markwell is not an occupational therapist, is she?
A Ms. Markwell is a physical therapist.
Q Do you agree with me that Ms. Markwell is not an occupational therapist?
A To the best that I know, Ms. Markwell is not an occupational therapist. She works in rehabilitation services.
Q So you obtained a recommendation from an occupational therapist supporting -- excuse me.
You did not obtain a recommendation from an occupational therapist supporting four to eight visits per year for occupational therapy?
A As Ms. Markwell works in rehabilitation services and we discussed occupational therapy for Mr. Peterson, she indicated that an occupational therapy visit every few weeks is reasonable for Mr. Peterson to identify adaptive equipment and work

on his activities of daily living.

And with the consideration for the benefit of occupational therapy, there was also information that was obtained from the Parkinson's Foundation, and considering those two pieces of information together, as well as my experience, expertise, working with individuals with these type of injuries, this was what is reflected in the life care plan.

Q Well, your experience working with these individuals with these types of injuries, you testified earlier that you've only worked on, with others, five life care plans for people who had Parkinson's disease, between the 125 to 250 life care plans that you've worked on; right?

A I did. But I have also worked with many individuals who have had the same response to their injury, which is -- are gait impairments and functional limitations.

Q And you didn't quite answer my question earlier, so I'm going to ask it again.

You did agree with me that Ms. Markwell is not an occupational therapist; right?

MR. ROMANO: Objection to the form of the question.

BY MR. CARPENITO:

Q You can answer.

A To the best that I know, she is a physical therapist.

Q You did not obtain a recommendation from an occupational therapist supporting this occupational therapy line item in your appendix 4 of Mr. Peterson's report; right?

A I did not speak to an occupational therapist.

Q Your life care plan lists 16 to 18 speech therapy visits per year; right?

A Yes.

Q And that came from Ms. Lyons?

A Yes.

Q Has Mr. Peterson historically required 16 to 18 speech therapy visits per year?

A Can I go back to -- you're using the word "required" speech therapy. I would say it needs to be considered whether or not he's had the ability to get to 16 to 18 speech therapy visits a year.

Q I'm not sure I understand. What do you mean by that?

A Well, you know, one of the issues is his ability to get out of the house and for someone to

take him to all of the medical appointments and therapy that he requires.

Q Right. And so I'm asking you, has Mr. Peterson historically utilized 16 to 18 speech therapy visits per year?

A I don't know if he's utilized them. Ms. Lyons indicated that is what he needs now.

Q Would it be important for you to consider whether Mr. Peterson had utilized 16 to 18 speech therapy visits per year in the past?

A Well, what he needs now is 16 to 18 visits per year, and with implementation of all of the services in the life care plan he would be able to get to those appointments.

Q And you had a telephone consultation with Ms. Lyons; right?

A Correct.

Q Did you take notes during that call?

A Yes.

Q Okay. Did you produce those notes from that call to the United States?

A I believe that I did.

Q Okay. Did you only have one call with Ms. Lyons?

A To the best that I recall, it was one

call.

Q Okay. Did you send Ms. Lyons a questionnaire like you did with Dr. Kumar?

A No.

Q So as it relates to Ms. Lyons and Ms. Markwell, why did you decide to have a phone call with them as opposed to sending them a questionnaire?

A Well, number one, I have to look at all of the information together and identify what's the best way to contact them. And if I recall, when I contacted the therapy department, they both said they were available to talk to me. It is also helpful in terms of getting input from the therapists in developing the life care plan to talk to them about the goals of therapy, what they're working on, the outcome, the number of visits.

So for this particular situation, they were available to talk to me by telephone, and that's how I was able to obtain input into the life care plan.

Again, it's individualized, and it can depend on the situation to determine what's the best way to get the information from the provider of care.

Q So why didn't you submit them a questionnaire?

A Again, as -- it was identified to me these were the therapists, this is where they work, and if I recall, in contacting the rehabilitation departments to identify the best way to contact them, I was informed they were available to talk by phone. And if someone is available to talk to me by phone, I will talk to them and we can discuss and get input to develop the life care plan.

Again, it's individualized, client-specific. So every situation has to be worked out for each individual person.

Q Will you turn to appendix 7, please, of your report in Mr. Peterson's case.

A Yes. I'm there. Did you hear me?

Q Yes, ma'am.

A Okay. Sorry.

Q No, that's okay.

Do you remember earlier when we were looking at the similar page in Mr. McElhiney's case related to daily care, I was asking you some questions about whether there was overlap in some of these services? Do you remember that?

A Yes.

Q Would you agree that that same overlap can occur with the services listed on the daily care appendix 7 page in your Mr. Peterson report?

A Can you please identify the overlap that you're referring to?

Q Well, certified nursing assistant is listed here as 24 hours per day; right?

A Correct.

Q And one of the things that they are asked to do -- excuse me.

"Replacement Services." Looking at "Replacement Services" and "Certified Nursing Assistant," they both deal with household tasks; right?

A They deal with different type of household tasks.

Q Are there any household tasks that a certified nursing assistant would do that somebody with replacement services would also conduct?

A Certified nursing assistant is going to carry out those tasks that are associated with the activities of daily living that they are assisting the individual with. It is not within their scope of practice to carry out tasks around the home and property to maintain the home and property.

They're not going to do lawn care. They're not -- they're not going to clean the gutters. They're going to do some very basic laundry. They're not going to do -- you know, they're not going to change light bulbs, they're not going to do simple repairs.

The tasks that the CNA and the replacement services do are going to be two different categories of services.

Q What of these services is Mrs. Peterson helping with?

A What's your question? Can you be more specific, please?

Q Well, there are a variety of different services listed underneath each service here.

A Uh-huh.

Q And would you agree first, as it relates to the services listed under certified nursing assistant, that Mrs. Peterson helps Mr. Peterson with his personal hygiene?

A It is my understanding currently she helps him.

Q Does she help with meal prep?

A She is his wife. It is generous of her to be a caregiver. But based on the injury that he has

had, it was not anticipated that she was going to be -- have to be his caregiver.

Q Does she help with meal prep?

A Currently, she helps with meal prep. But that -- someone else should be in the house to help with meal prep so she can turn to the role of being a wife.

Q Does she help with assistance for tasks of household management?

A She does share in those tasks.

Q Does she drive Mr. Peterson to appointments?

A Currently, she is the -- it is my understanding she is the only person available to drive him to appointments.

Q Are you aware of who conducted the heavy cleaning in the house before Mr. Peterson's Parkinson's disease progressed?

A I don't have the information in -- I don't have the information. It is -- if I list these here, it would mean that he shared in those tasks prior to his injury.

Q Do you have any documentation that notates how much Mr. Peterson shared in these services with Mrs. Peterson prior to his injury?

A It is my understanding he shared in the services. I don't have specific documentation.

Q So let's look at, then, your cost summary 1, and let's look at the daily care column there. The total is listed as just over $3.8 million; right?

A Where are you?

Q On cost summary 1 in Mr. Peterson's report, if you look under the "DAILY CARE" column, the total is listed for $3.8 million; is that right?

A Yes.

Q And you're telling me that you don't have any documentation that shows the hours that Mr. Peterson spent on these household tasks before his Parkinson's disease?

A Okay. And I -- in order to identify the number of hours of replacement services, I have used data that was obtained from Dollar Value of a Day as a reference to identify the number of replacement hours.

Q Can you turn to page 6 of the questionnaire that you sent to Dr. Kumar, please. It's the last page of that questionnaire.

A Page 6?

Q Yes, ma'am.

A Yes.
Q Do you see question 22 there?
A Yes.
Q That is the question related to daily care services; right?
A Yes.
Q Okay. That question there, question 22, does not list CNA as a specific intervention; right?
A It is not in that question.
Q Nor does it list 24 hours per day as the durability; right?
A Not in that question.
Q That questionnaire does not specifically identify replacement services; correct?
A Well, it does. The question asks about tasks and chores.
Q Can you identify for me where in that question it identifies the durability of 19.36 hours weekly coming from Dr. Kumar?
A That information was -- let me double-check. What are you referring to, information from where?
Q Well, the durability listed for replacement services on appendix 7 is 19.36 hours; right?

A Yes.
Q I'm asking you if question 22, to Dr. Kumar -- does it identify the frequency of replacement services, in asking your question to Dr. Kumar?
A That information or the replacement hours was obtained from data from Dollar Value of a Day.
Q Does question 22 to Dr. Kumar specifically identify companion care?
A The daily care services that are indicated for Mr. Peterson were obtained based on information from Dr. Kumar, along with all of the information which identified his functional limitations, his impairments, his ability to carry out his activities of daily living, his inability to complete the tasks and chores that he previously performed.
And putting all of that information together, along with my experience and expertise and clinical skills and identifying the appropriate services that he needs now.
Q Dr. Kumar did not select specifically any of these services; right? Can you slide your microphone up a little bit?
A Oh, sorry.
Q That's okay. So my question was,

Dr. Kumar did not identify specifically any of these services outside of a couple of the replacement services; right?

A He provided input which was used to identify the appropriate services to provide care to Mr. Peterson so he could remain in the home and community setting.

Q You didn't conduct an in-home observation of Mr. Peterson, did you?

A Can you define or clarify what you --

Q Did you go to the Petersons' house and conduct an observation of how long it took Mr. Peterson to complete a task?

A I did not go to his house. Mr. Peterson, as indicated in the report, did -- he was observed during the video call.

Q In your narrative section of this report on page 13, and you can turn there if you would like, you state in the third paragraph, "Mr. Peterson requires a caregiver throughout his waking hours and an individual to be available to him during the nighttime hours."

Do you see that?

A Yes.

Q Did I read it correctly?

A Yes.

Q How many waking hours did you assume per day for Mr. Peterson?

A I can't say that I calculate a specific number of waking hours. Mr. -- my report indicates, you know, the hours that Mr. Peterson typically sleeps. I'm sorry, give me just a minute, please.

In my report, it indicates that by p.m. Mr. Peterson is in bed for the night, and he indicated that, during the day, he does not rise until 11:00 or 12:00. During the night, he does -- he has -- he rises multiple times during the night to travel to the bathroom to urinate. And he also wears a diaper to help maintain urine leakage or incontinence.

Q So when taking the assumption of his waking hours, did you have to input that number that you assumed he's awake per day into the Dollar Value of a Day?

A And that's -- so the Dollar Value of a Day provides the time or cost for the services that would need to support or replace the services that Mr. Peterson previously performed around his home and property to maintain his home and property.

Q I see. Did you work in the assumption of

how many hours Mr. Peterson was awake per day into the services listed in appendix 7 in your report?

A Which specific services are you referring to?

Q CNA.

A The CNA is provided 24 hours per day.

Q Right. And that's what I'm asking you. Why does he need a CNA when he's asleep?

A As indicated in my report, Mr. Peterson experiences -- he has -- frequently gets up to urinate at night. It is not safe for him to be getting up by himself. He can experience falls, he experiences falls very frequently. It is very difficult for him to travel to the bathroom. It is an arduous task for him to cleanse himself after he urinates and clean up his surroundings.

So there is a caregiver day and night, particularly at night, to ensure that if he does need to get up and go to the bathroom, someone is there to ensure that -- his safety and that he does not fall.

Q Is Ms. Peterson ever with him when he goes to the restroom in the middle of the night?

A It is my understanding that he attempts this task at night. It is not safe for him to do

it. It is absolutely not an ideal situation.

He should not be getting up by himself at night.

Q Ms. Hairston, I'm asking you if his wife helps him to the restroom in the middle of the night.

A I do not know all of the circumstances of how they carry out his care at night.

Q That would have been very important to know when you were assigning 24 hours per day of CNA services; right?

A He needs 24 hours of care now. That -- it doesn't matter whether -- if she's helping him or not. That's what he needs now. It is not safe for him to get up at night and go to the bathroom by himself.

If and when she helps him now, it is not a task that she should be continuing to do every single night. He needs a caregiver to be with him.

Q Do you think it could have been reasonable for Ms. Peterson to help some nights and not others? In other words, maybe have a CNA present 24 hours per day half of the week and have Ms. Peterson there to help the other half of the week?

A Well, Ms. Peterson also indicated that she

has concerns about being smaller than Mr. Peterson and being physically able to help him.

And so there needs to be a competent CNA in the house who can safely help him, sorry, get up to the bathroom, whether that's two times a night, four times a night, or six times a night.

And Mrs. Peterson should not have to get up, if he needs to get up six times a night, help him to the bathroom, change his clothes, change his diaper and change the linen on the bed.

Q You state in your report that CNAs do not administer medication under Tennessee rules; right?

A That's my understanding based on the rules at the time this report was issued.

Q A CNA can only remind Mr. Peterson to take his medications; right?

A That's my understanding.

Q And then you also include an automatic pill dispenser in the life care plan; right?

A Yes.

Q And you have a skilled nurse listed here. Is that for medication management?

A Let me -- yes.

Q Is there any evidence anywhere in your report that Mr. Peterson has mismanaged medications

to the point of medical injury?

A Can you be more specific with the question?

Q Has Mr. Peterson ever mismanaged any of his medications?

A Well, when you say "mismanaged," what do you mean by that?

Q What do you understand mismanaged to mean?

A Well, I'm asking you what do you mean in the question. I may have a different meaning of it than you.

Q How does Mr. Peterson -- right now, currently when you were preparing your life care plan, how was he being reminded of when his medications were due, to be taken?

A As indicated in the report --

Q What page is that?

A I'm sorry.

Q That's okay.

A On page 13, Mr. Peterson understands his medication regimen. However, with his dyskinesia, he has diminished ability to properly sort and dispense his medications.

Q So are you -- are you listing the skilled nurse there just to get the medication out of the

pill dispenser, and give it to Mr. Peterson?

A No. Actually, I'm not. This was very conservative. I did not include the skilled nurse to come in on a daily basis and administer his medication.

The skilled nurse is included one to two times per month.

Q Yes, ma'am.

A And that's why the pill dispenser is included in the life care plan. The skilled nurse would have to come in and fill that pill dispenser and make sure that, you know, the right medications are in there to be dispensed at the right time.

Q Could Mrs. Peterson fill the pill dispenser?

A Again, these services are provided in the plan so that whether -- if Ms. Peterson is able to do that -- again, she has done it out of the generosity -- out of her generosity for years, for the years that she has done it. And this is to make sure that those pills are -- a conservative amount of skilled nursing visits, one to two times a month, to make sure that the medication is appropriately placed in the pill dispenser.

And that skilled nurse will also provide

assessment. She can also come in and just make sure Mr. Peterson is taking his medications as prescribed, and doing a general assessment of his condition, and determining if there are some other needs that he had.

MR. CARPENITO: I'm in a good place to take a break.

VIDEO OPERATOR: We are going off the video record. The time is approximately 5:00 p.m.

(Recess.)

VIDEO OPERATOR: We are back on the video record. The time is approximately 5:16 p.m.

BY MR. CARPENITO:

Q Ms. Hairston, I have just a few remaining questions for you. If you will look at Exhibit 8, which is the additional questionnaire that you sent to Dr. Huffnagle. And if you'll also look at, with that beside it, Exhibit 11, which is the notes and other documents that you produced to the United States in response to the document request.

And on Exhibit 11, if you'll turn to Bates number 49.

A Bates 49?

Q Yes, ma'am, in the bottom right-hand corner.

A Okay. Okay.

Q So I want to first look at a question on Dr. Huffnagle's additional questionnaire, it is question 2. And it reads, "For clarification, you previously indicated that the medication Entacapone was not prescribed for management of Parkinson's disease. Can you please explain why this medication is prescribed for Mr. McElhiney?"

Did I read that right?

A Yes.

Q And Dr. Huffnagle responds that Mr. McElhiney was "prescribed this med by an outside neurologist, but stopped 11.3.24 by our records."

Right?

A Correct.

Q And then if you look at Bates number 49, you had a December 23, 2024 call with Mr. McElhiney; right?

A Yes.

Q And that would have been four days after this additional questionnaire was received or dated by Dr. Huffnagle; right?

A Yes.

Q And if you look down there in the second paragraph on Bates number 49, it states, "For the

Entacapone, it has not been discontinued. Still taking it at 200 milligrams 4 times per day."

Right?

A Correct.

Q And then if you look at appendix 3 of your life care plan for Mr. McElhiney, you have that medication listed at one tab four times per day; right?

A Correct.

Q Are you aware of whether or not Mr. McElhiney is still taking this medication?

A As of now, I don't know if he's still taking it or not.

MR. CARPENITO: Okay. Ms. Hairston, those are all the questions I have today, thank you.

MR. ROMANO: I do have some questions.

EXAMINATION

BY MR. ROMANO:

Q You said earlier in the deposition that you are a member of the American Association of Nurse Life Care Planners; is that right?

A I am a member, yes.

Q What is that organization? What is its purpose, its function?

A It is the organization for -- it is one

organization for life care planners, but specifically for -- nurse life care planners have formed an organization to identify curriculum and scope and standards of practice that are consistent among nurse life care planners.

Also associated, but not the exact same thing, the board for certification for nurse life care planners is also affiliated with the American Association of Nurse Life Care Planners.

Q You said the organization has or publishes what it refers to as standards of practice for creation and development of life care plans?

A For nurse life -- the Scope and Standards of Practice for Nurse Life Care Planning.

Q Over the years, have you read, become familiar, with those standards of practice by the organization?

A Yes.

Q And did you incorporate the standards of practice of the association into your creation and development of the life care plans in both the Peterson matter and the McElhiney matter?

MR. CARPENITO: Object to form.

THE WITNESS: Yes. In developing the life care plan, the nursing process was used to guide and

develop the development of the life care plans.

BY MR. ROMANO:

Q When you actually commence your work in order to create and develop a life care plan, would you walk us through the steps you take to put that life care plan together?

A Yes. Utilizing the nurse process, typically, as identified, there are going to be medical records that are provided. So as the life care plan is developed, medical records are read, depositions are read, assessment pieces are completed, which include interview with the individual, and if, as indicated, if they have a family member with them.

Again, input is sought from providers of care who are involved in the individual's treatment. And as indicated in the report, there are numerous other resources that would be contacted in preparing the life care plan, as well as utilizing my years of education, experience, expertise and skills as a registered nurse, a certified case manager and a certified life care planner.

Q When you develop a life care plan and you rely upon input from physicians who are medical doctors, is it necessary for you to be a physician

or an MD?

MR. CARPENITO: Object to form.

THE WITNESS: I'm sorry, it's necessary for me to be a physician or an MD to --

BY MR. ROMANO:

Q Right. In other words, when you as a nurse life care planner develop the life care plan and you receive input from a doctor, true, it's not necessary for you to be a doctor?

A Oh, as a -- as a nurse life care planner, I have the training and skills to take the information that's received, interpret it and put it in context with all of the other information that is received in terms of developing a life care plan and identifying how this impacts the supports and services that are indicated for the individual.

Q When you reach out to a physician to obtain his or her input, what is the reason you are doing that as a life care planner?

A As a life care planner, I am -- want to identify appropriate sources of information that can provide input and provide basis for my opinion in the life care plan.

Q In this instance, there were a number of questions about Eric Anderson, who is the specialist

who made the assessments regarding home renovation needs. True, you are not a home renovation needs specialist who assesses buildings and renovations; correct?

MR. CARPENITO: Object to form.

THE WITNESS: Correct.

BY MR. ROMANO:

Q All right. In a case such as this for Mr. Peterson, do you then reach out to a specialist like Eric Anderson, allow him to do his work, and then you consider that input as a part of your life care plan?

MR. CARPENITO: Object to form.

THE WITNESS: For -- it's individualized and client-specific, and because the Petersons indicated, you know, they live in an historic home, when I reach out to individuals such as Mr. Anderson, I consider the information that is provided in the report, is it consistent and reasonable with information I am familiar with in terms of home modifications.

You know, I look at the information.

BY MR. ROMANO:

Q Have you ever served on active duty yourself in any branch of the United States Armed

Forces?

A Yes, I have.

Q What branch did you serve in?

A I served in the United States Air Force.

Q Were you on active duty for a period of time?

A Yes.

Q How long were you on active duty?

A A little -- a little more than 3-1/2 years.

Q And what was your MOS or military occupational specialty?

A I was a -- I'm sorry, I was a nurse in the United States Air Force Nurse Corps stationed in the area at Malcolm Grow Medical Center.

Q Very briefly, what type or kind of nursing were you engaged in while you were on active duty in the Air Force?

A It was a wide variety. I worked -- I may have been assigned to a particular unit in a hospital. At one point, I was on a pediatric unit, and at another point, I was assigned to a medical surgical unit.

But as the need arose, I could have been temporarily or for that shift gone to work anywhere

in the hospital, which I did, which was, you know, IC -- intensive care unit, cardiac care unit, any one of the orthopedic floors, the surgical floors, the medical floors. Basically, you know, we serve in the hospital as needed.

Q And regarding your active duty service, what year did you go on active duty and what year were you discharged from active duty?

A 1985 I went in and discharged, honorable discharge, in 1989.

Q And at the time you were discharged with an honorable discharge, what was your rank?

A First lieutenant.

Q You had stated earlier that it was your typical procedure and your practice to contact three providers.

Would you walk us through when you utilized the three-provider method of contacting professionals for input for your life care plan.

A So typically, if a particular service or support has been identified, if an individual has received services from a provider in the past, you know, for a length of time, or they have even indicated, you know, last year I went to physical therapy at this particular service, or, you know,

this is the physician that I see, then it is typical that we would obtain the cost from that particular service.

If it is a service or support that they have never received, or they have not received it in years, it is a new intervention or service that is being recommended for them, and we have no, you know, billing costs for them, no history of charges, then we do seek providers in the community, and typically identify three providers that the individual can reach within a 30-minute drive.

Q You also mentioned earlier in the deposition that it was important for you to consider the entire picture when making an assessment for a given patient for whom you are developing a life care plan.

Why is it important to have a grasp of that big picture?

A Right. Well, there are going to be multiple sources that are -- that you're receiving information in to identify what are the most appropriate supports and services for that individual. You know, it's very client-specific and individualized, you know, who is providing their care, where they are receiving their care, what

their -- what their response to the injury is, what their specific response to the injury is, what their functional limitations are, who -- what their age is.

There are just so many factors to consider that it's not -- that, you know, although the methodology is the same, you have to -- there were different points where you have to identify variances based on the individual.

MR. ROMANO: That's all the questions I have.

MR. CARPENITO: I don't have any additional questions.

VIDEO OPERATOR: One moment. We are going off the record. The time is now 5:32 p.m. This is concludes today's testimony of Kay Hairston.

MR. ROMANO: We'll have her read and sign.

COURT REPORTER: Does anybody need a rough draft?

MR. CARPENITO: Yes, ma'am. I think we have a standing with you guys.

MR. ROMANO: Standing order. We'll take the rough.

(Whereupon, at 5:33 p.m., the deposition was concluded.)

I HEREBY CERTIFY that I have read this transcript of my deposition and that this transcript accurately states the testimony given by me, with the changes or corrections, if any, as noted.

X

Subscribed and sworn to before me this day of , 20 .

X
Notary Public

My commission expires: .

CERTIFICATE OF NOTARY PUBLIC & REPORTER

I, CARMEN SMITH, the officer before whom the foregoing deposition was taken, do hereby certify that the witness whose testimony appears in the foregoing deposition was duly sworn; that the testimony of said witness was taken in shorthand and thereafter reduced to typewriting by me or under my direction; that said deposition is a true record of the testimony given by said witness; that I am neither counsel for, related to, nor employed by any of the parties to the action in which this deposition was taken; and, further, that I am not a relative or employee of any attorney or counsel employed by the parties hereto, nor financially or otherwise interested in the outcome of this action.

<%2009,Signature%>
CARMEN SMITH
Notary Public in and for the
District of Columbia

My Commission Expires: MARCH 31, 2028

&

& 108:25 109:1 141:23 267:1

0

0000000029 5:17
0000000065 5:17
0000000448 5:14
0000000484 5:15

1

1 4:12 8:22,25 9:2 12:2,2,4,5,7 12:10,14,24 19:16,20 43:9 43:11 52:9,21 58:2,3,3 61:18 61:19,20,20 66:20 73:12 76:24,25 77:1 77:18 84:1 88:5 89:7 91:3 96:18 96:20,22 101:21 106:12 108:12 111:9,9 111:10,18,19 112:8,11 115:2 115:2,3 118:22 128:16 131:12 132:10,19 144:6,19 147:13,16 148:6 151:17 162:24 163:4 177:13 182:5,8 215:16 216:4 221:25 224:10 245:4,8
1-2 162:18
1/28/26 5:20
10 5:13 23:2 65:18 136:5,8 141:11,16 144:24 204:13 207:9,10 216:24
100 21:18 22:12 35:4 86:23
1099 20:15
10:41 66:19
10:53 66:23
11 2:20 5:16 89:18,18,21 148:6 161:11 161:12,15 185:13,16 192:14 197:17 217:1 226:18 226:19 255:18 255:21
11.3.24 256:13
11:00 249:11
11:52 105:11,14
12 5:18 153:1 153:15 161:11 162:10,12 168:25 169:7 200:6,9,11 227:1,4
120 5:8,10,12 38:5
125 87:2,7 237:14
12:00 249:11
12:45 105:15 106:1,8
13 5:20 202:12 202:14,15 210:13,14,19 248:18 253:20
1300 2:4 6:8
136 5:15
14 5:22 102:19 103:25 104:4 127:4,20 170:25 174:12 177:13,15,17 213:19,22
15 5:24 71:25 72:17 199:4,7 221:16,19 223:13,23 226:19 234:25
16 159:21 166:3 166:4,17 199:10,12 200:15,20 202:22 208:19 210:18 238:11 238:16,21 239:4,9,11
1650 6:14
17 89:8 133:11 133:19,24 134:5,10
18 4:23 33:22 34:2,5 102:7,10 102:11 108:19 174:9 204:24 204:25 238:11 238:17,21 239:4,9,11
185 5:17
19 4:24 192:24 198:1
19.36 246:18,24
19103 6:16
1984 38:21 39:7 39:12
1985 263:9
1989 263:10
199 97:25 108:17
1999 89:25 90:3 90:8,12,16,21 91:12,21 92:6 92:14
1:55 149:8

2

2 4:17 8:22,25 9:10,12 12:14 66:24 73:12 89:7 97:22

101:20,22
102:4,25
105:12 106:13
106:16 108:11
108:12,23
109:4 111:14
111:19 112:9
129:7,11
132:22,25
133:3 134:19
147:4 149:23
153:10 155:11
177:14 182:5,8
186:6 194:2
221:25 222:1
256:4
20 72:14 151:10
152:24 206:19
206:24 207:11
207:16 218:22
219:1 266:12
200 5:19 21:18
22:12 35:4
86:23 257:2
20005 2:21
2001 50:19
2009 267:20
2011 39:17
50:20,25 54:21
55:19
2016 89:18
202 5:21
2024 79:1 89:18
89:21 133:6,11
133:19,24
134:5,8,10
182:13 183:1
184:23 192:20
192:24 193:3,6
194:2,7,10
198:1 199:12
200:15,21
222:4,10,12,19
222:22 223:16
223:21,25
256:17
2025 9:16 15:21
19:25 50:25
78:23 136:16
139:2 159:21
165:11 193:20
193:24 223:6
2026 1:14 2:3
6:11 202:16
209:15
2028 267:25
2029 159:21
2030 159:22
2032 159:22
2033 159:24
165:15
21 128:22 129:8
129:20,22
204:25
213 5:23
219 3:12
22 121:12 122:4
126:13 129:12
129:13 194:7
246:2,7 247:2,8
221 5:25
23 72:14 193:2
256:17
24 124:2,22
125:4,14
126:21 127:3
127:19 159:25
165:15 166:11
166:12,17
207:7 229:1
233:22 242:7
246:10 250:6
251:10,12,22
25 21:15 22:6
34:16,24 35:7
35:11 86:18
250 87:3,7
237:14
257 4:6
27 1:14 2:3 6:11
2701 3:5
27601 2:13
28 5:4 202:16
202:17,22
209:15
29 202:23
291 96:25
29440 3:13
2:06 149:13
2:59 181:24
2nd 2:4

3

3 4:21 18:14,17
106:9 117:12
117:22 144:24
149:9 210:18
216:10 257:5
3-1/2 262:9
3-5 142:3
3.8 245:5,10
30 24:10 99:8
100:7 222:4,9
222:12,15,19
222:21,25
223:16,21
229:1 233:22
264:11
300 44:8
31 267:25
310 2:12
318,000 206:25
217:11
318,977 198:23
33409 3:6
336 127:3,19
35 38:13
39 204:9,14,25
3:06 182:2

4

4 4:24 19:3,6,11
19:14,19 47:9
54:20 145:1
149:14 151:10
163:1 193:6

214:13,17 216:12 219:15 224:1 227:13 230:12 231:3 235:15 238:7 257:2
40 24:10
448 137:12
449 138:13
45 68:2,5,13 141:17
452 141:15,18 141:19
456 143:5,8
46 185:17
47 192:16,17
48 192:22 197:25
49 193:1 255:22 255:23 256:16 256:25
4:02 219:14
4:12 219:18

5

5 5:3 9:16 28:24 29:2,4 78:23 91:3,5 121:9,11 121:13 147:6 163:4 214:20 216:14 219:19 223:5
50 21:15 22:6 24:10 34:25 35:7,11 86:19 193:5
5150 6:15
56 207:4,5,7
57 207:6
5:00 255:9
5:16 255:12
5:32 265:15
5:33 265:24

6

6 5:5 72:3,5 136:16 139:2 143:12 149:17 149:18,20,21 149:22,25 150:20,24 214:21,21 216:16 245:21 245:24
60 97:25 108:17 193:16
60,000 206:25 208:9
61 193:22
62 194:1
63 194:5
64 194:5
65 194:9

7

7 4:5 5:7 120:5 120:6 121:9 131:2 132:24 144:17,25 147:4 149:17 194:10 202:23 216:18 223:25 241:14 242:3 246:24 250:2
72 5:6

8

8 4:16,20 5:9 77:2,18 118:22 120:12,15 122:6 126:2 152:11,13 155:10 157:13 157:21 159:14 159:17,18 164:12,13 168:19 175:15 182:13 183:1 184:23 198:16 200:19 201:14 201:22 204:13 207:24 211:19 212:9 215:15 216:20 217:11 255:15
81 210:10,19

9

9 5:11 89:25 120:19,22,23 121:11 128:12 128:15 129:18 144:17,22 149:18 158:1 164:14 175:17 179:9 192:19 193:20,24 216:22
9/6/2025 143:13
9:02 2:5
9:02:00 6:10
9:03 7:6
9:13 7:10
9:55 35:24
9:58 36:2

a

a.m. 2:5 6:10 7:6,10 35:24 36:2 66:19,23 105:11,14
abilities 123:2 158:3,22 159:4 160:5
ability 238:20 238:25 247:14 253:22
able 26:10 127:9,11 129:2 130:4,8 166:21 170:16 171:9 171:10 172:2 180:18 183:18 183:23 191:7,9 239:13 240:20 252:2 254:17
abnormal 40:9
above 67:17
absolutely 169:4 251:1

access 50:2 88:25 168:21 231:3
accessibility 219:6,9
accompanying 4:22 18:22 230:15
account 95:12 104:22 181:10
accounting 135:6
accurate 146:21
accurately 190:9 266:3
acknowledge 169:1
acknowledged 91:8 93:20
action 267:12 267:16
active 230:22 261:24 262:5,8 262:17 263:6,7 263:8
actively 46:14 231:13
activities 121:22 126:15 127:8,10 130:2 176:16 177:4 181:6 237:1 242:22 247:14
activity 181:1
actual 97:4 98:10,11 180:25 181:6 207:25 229:21
actually 22:24 169:1,16,18 179:7,21,22 183:8 186:14 228:19,20 234:25 254:2 259:3
adaptation 198:20 200:19 201:22 208:9
adaptations 199:18 201:14 206:21 217:19 218:3,9,11
adaptive 231:4 236:25
add 125:20 144:2 191:19
addition 24:25 59:24 182:11
additional 3:1 25:13,15 26:12 76:14 84:21 88:21 132:1 149:1 157:19 161:5 184:24 191:25 192:2 194:22,25 196:7,18 197:1 197:4 207:10 208:1,7 255:16 256:3,21 265:13
address 60:14 60:14 61:9 63:14 157:17
addressed 61:10 62:25 63:10,17
adequate 214:25
adjusted 138:2
administer 25:20,25 252:12 254:4
administered 28:9,17
administering 28:7
adopt 152:7 153:17 156:22 163:20
adopted 151:21
adult 34:10 35:9
adults 33:19,19 34:4
advanced 108:25
affairs 89:24 165:21 167:16
affect 71:17
affiliated 258:8
afternoon 106:1
age 34:21,22 35:19 123:3 125:22 126:7 127:11 135:11 159:11 180:15 265:3
aged 160:13
agencies 170:1 172:12
agency 44:4 166:20
ages 160:10
aging 135:10
ago 23:1
agree 10:16 36:4,8 40:11,15 52:15 56:19 58:15,16,20 62:9 64:20,22 65:1,10,11,20 70:6,12 71:24 72:2,15 78:25 79:9 83:6,11 86:25 87:13,22 88:20 96:15 101:4 102:23 103:4,19 110:4 110:19,24 111:4,21,22,23 112:3 114:9 116:8,9,12

126:21,24 127:3 128:4,19 128:21 129:8 131:21 132:13 133:12,15,25 134:1,6,15 140:17,24 141:8 142:7,15 146:18 151:1,2 151:3 152:2 154:23 158:12 158:14 163:19 164:2 165:1,5 171:6,19 196:2 200:13 203:21 204:1 206:24 207:23 211:11 217:10 222:1,7 231:18 236:11 237:22 242:1 243:17
agreed 83:16 170:13
agreeing 139:24
agreement 130:1
ahead 8:24 41:5 73:1 92:20 155:6 168:3 171:12,14 178:2 190:13 212:2
air 47:20 48:3 262:4,14,18
alleged 179:23
allen 224:23,25 225:24 226:1,9
alleviate 71:24
allow 172:3 261:10
allowed 170:2
allows 97:6 170:25
alternative 160:14
america 2:15 2:22 109:2
american 85:14 85:20 257:20 258:8
amount 123:8 124:17 186:25 254:21
analysis 62:17 62:22 91:14,22 92:8,16 93:10 94:1 99:10 109:12,24 110:2 226:10
analyze 65:5 73:4 139:13 140:4
analyzed 10:21 66:7 91:25 92:10,22 93:4 99:18 135:21 146:24 161:8 201:19 208:4 208:13 212:16 226:16
analyzing 124:14
anderson 5:18 5:20 75:6 199:17 202:2,7 203:19,23 204:5,8,14,19 205:9,11 206:18 207:8 207:16 209:6 209:15 213:1 217:13,20,25 218:17 220:6 260:25 261:10 261:18
anderson's 199:12,21 200:11,20 201:10,11,13 201:21,25 202:15 207:14 208:3 211:13 211:18 212:8 212:14,20 215:14,18 217:1,20 218:3 218:7
andrews 47:20 48:3
ankle 109:1,1
annual 13:12 17:25 18:2 161:16 199:1 226:20
answer 10:12 11:11,22 51:23 52:14 56:17 64:5,21 65:14 65:25 69:17,23 72:18 81:13 83:13 86:8 92:3 104:14 107:11 124:19 127:15 155:4 160:22 168:2 174:4 183:16,18,24 184:7,15 190:6 190:17,25 191:3,7,23 203:1,7,10,13 204:17 205:4 207:14 210:22 210:25 211:5,8 213:6 237:20 238:2
answering 26:17 143:2 184:12
answers 30:14 75:19 133:9,18 140:24 141:8 145:21 146:1 147:10 156:10

157:7 184:1 190:12,15 191:11,16 222:18
anticipate 147:7 150:1 162:13 224:2
anticipated 57:4 159:10 160:9 244:1
anticipates 145:5 227:3
anybody 26:24 33:22 77:11,16 90:23 189:17 205:17 265:18
appear 99:17
appearances 3:1
appeared 190:10
appears 17:6 17:12 267:5
appendices 111:18
appendix 12:1 12:4,5,7 58:2,3 61:18,20 76:24 77:1,2,18 96:18 96:21,22 97:22 101:20,22 102:4,25 103:18 106:13 106:16 108:11
108:11,23 109:4 111:9,10 111:14 112:8 112:10,10,11 115:1,2,3 117:11,12,22 118:22 122:6 126:2 128:12 128:15 129:18 144:6 147:13 147:16 151:17 151:17 153:10 155:11 159:14 159:16 163:4 164:12,13,14 168:19 175:15 175:17 179:9 198:16,19 200:19 201:14 201:22 207:24 211:19 212:9 215:15 217:11 224:10 227:13 230:12 231:3 235:15 238:7 241:14 242:3 246:24 250:2 257:5
applicants 215:2
application 214:22,23
applies 87:22
apply 201:20 208:5,14
appointment 228:8,12
appointments 167:4 168:21 169:21 239:1 239:14 244:12 244:15
appreciate 56:16
appropriate 83:12 93:21 122:9 123:23 124:18 147:2 154:22 218:18 220:17 225:13 226:14 247:19 248:5 260:21 264:22
appropriately 139:16 183:24 254:23
approved 213:16 217:13
approximate 190:19
approximated 86:22
approximately 6:10 7:6,10 21:3 22:18,19 34:9 35:24 36:2 66:19,23
105:11 106:8 149:8,13 181:24 182:2 183:14 190:2 206:25 217:10 219:14,18 255:9,12
approximation 189:25
architectural 209:9 213:15 213:25
arduous 250:15
area 24:9 78:5 98:19 99:18 100:14 127:13 170:1 231:9,20 232:1,7 262:15
areas 22:3 169:18 196:15 206:5,7
armed 261:25
arose 23:5 262:24
aside 12:19,20 118:9
asked 7:23 8:7 10:5,14 28:19 32:4,18 47:25 49:15 66:13 76:13 78:17 80:12,13 81:6,9 81:15,18,20 82:2,8,12,13,25

83:1,24 93:8 126:13 129:7 131:4,19 152:19 157:16 164:5 198:9 203:9 242:9
asking 37:9 41:10,11 42:11 45:5,23,25 46:2 46:24,25 47:3 51:17 59:13,15 60:10 63:20 67:14 68:24 71:1 80:7,23 81:3 82:6,12,13 97:15 108:2 118:19 123:4 130:1 144:20 145:4 154:2,10 155:7 168:7,8 171:15,17 180:19,20 195:3 197:18 204:1 206:12 214:4,9 229:3 239:3 241:22 247:2,4 250:7 251:4 253:9
asks 133:13,16 149:25 150:16 152:14 158:1 161:15 226:19 227:1,7 246:15
asleep 250:8
aspects 187:14
assess 203:10
assesses 261:3
assessment 5:3 23:12,21 24:6,8 24:11,13,21,22 24:25 25:1,18 26:4,11 28:22 29:6,8,11,14,20 29:25 30:2,5,17 30:24,25 31:6 31:13,14,19,20 32:22,24 33:5,8 125:8 126:9 127:8 141:23 178:25 179:25 186:22 205:11 205:17 221:11 222:8 255:1,3 259:11 264:14
assessments 261:1
assigned 80:8 80:18 262:20 262:22
assigning 251:10
assignment 79:17,21 80:11 82:2,14,24
assist 121:21 126:5,14 140:14 166:9 169:19 176:14 184:12 191:9 221:1
assistance 130:1 164:21 164:22 176:1,2 176:12 244:8
assistant 242:6 242:13,18,20 243:19
assistants 172:12,14,16 172:16,20 173:5,9,16 174:15,19,22
assisting 176:15 242:22
associated 32:4 40:13,17 83:4 111:15 137:20 148:13 149:4 150:3 152:16 175:14 177:3 200:18 242:21 258:6
associates 89:21 97:17
association 85:14,20 89:17 209:10 257:20 258:9,20
assume 11:11 71:11 113:19 134:24 151:21 156:15 159:2,3 160:5 183:25 249:2
assumed 135:5 249:18
assumes 148:10
assuming 70:18 71:7,10,16 167:20,22 168:5
assumption 146:13 167:24 249:16,25
astronomical 137:22
attached 19:16 19:20 20:4 52:9 52:21
attachment 19:1
attempt 40:16 41:1 230:18
attempts 250:24
attend 47:16,21 165:21 167:1,4 167:16 168:15 168:17
attended 47:22 47:24 55:6,8
attending 184:7
attorney 80:22 82:16 203:15 267:14

attorneys 30:11 67:6,21 68:14 73:9 79:13,22 79:24 81:5 82:6 82:13,25 88:22 185:18 189:12 235:6
attribute 235:24
audio 69:4 197:6
august 89:25 182:13 183:1 184:23 223:25
author 93:24 94:12
authorities 211:17 212:6 213:1
authority 209:16
automatic 252:18
available 10:5 10:13,17,20 66:6 84:20,22 84:23 92:9,22 93:3,14 98:19 98:21,24 99:2 99:12,13 103:22 127:24 128:1 140:7,9 140:16 146:23 157:1 166:8 225:12,22 226:15 232:11 232:19 240:13 240:19 241:7,8 244:14 248:21
avenue 2:12
average 179:11 179:16
awake 167:23 168:5,12 249:18 250:1
aware 32:3,10 32:17 36:11,15 73:7 77:16,17 90:2,14,25 91:1 113:12,15,16 135:23,25 153:8,24,25 154:1,5,6,12,21 155:22 173:22 205:7 206:18 206:23 209:14 210:2 213:14 218:21 219:5 244:16 257:10

b

b 4:10 5:1 65:17 65:20
bachelor 39:6
back 7:8 12:13 19:16 21:2 28:6 28:13 33:9 36:1 43:8 47:9 48:16 55:18 59:3 61:21 62:5 66:22 70:18 75:15,18 76:3 77:5,7,12 85:11 91:9,13,21 92:7 92:15 93:18,19 93:21 102:25 106:7 130:3,12 130:13 142:22 144:16 149:11 155:9 157:4,11 157:15 167:18 174:9 175:15 182:1,16 190:5 191:23 196:11 215:14 219:17 238:18 255:11
background 187:4
backwards 47:10
balance 121:17
barbano 5:6 72:8,22 73:7,10
barbano's 72:18
base 47:20 48:3 126:1
based 52:18 56:13,24 57:5 57:19 64:4 67:19 80:15 84:19 86:14 97:6 98:8 108:24 110:2 114:23 127:24 128:7 133:7,10 133:23 135:7,9 135:12 137:6 138:20 139:5 141:7 142:7,20 143:18,19 146:14,18 154:18,23,25 155:12 158:19 160:7,15,19 161:3 189:2 222:8,16,18 224:18 225:21 226:3 235:9,12 243:25 247:11 252:13 265:9
basic 243:3
basically 263:4
basis 40:20 70:17 91:25 126:5 199:13 254:4 260:22
bates 5:14,16 89:12 137:10 137:12 138:13 141:15 143:5 185:17 192:16 192:17,22 193:1,5,16,22 194:1,5,9 197:24 255:21 255:23 256:16

256:25
bathroom 176:24,25 249:13 250:14 250:19 251:15 252:5,9
battery 62:20 62:22 112:13 142:3 147:11 147:17
beach 3:6
bed 249:9 252:10
began 80:9 230:22
beginning 23:12 66:24 89:24 106:9 149:14 165:11 219:19
behalf 2:7,15 2:22 3:8,15 6:13,19,22,23 84:4
believe 48:7 50:11 63:1 64:10 83:18 131:2 234:24 235:4,7 239:22
believed 63:13 63:22 64:9
bell 3:11
belllegalgrou... 3:14
bending 121:18
benefit 160:19 237:2
benefits 161:3
bern 2:12
best 24:12 30:3 53:9 67:23 68:2 186:3 197:3 225:13 229:19 234:19 236:13 238:3 239:25 240:11,23 241:6
beta 138:6
beyond 158:3 167:14 192:3
big 264:18
billing 109:15 264:8
bit 15:10,10 44:1 59:2 67:10 78:9 173:15 247:23
black 214:16
blank 31:16
blocker 138:6
board 258:7
bodies 210:4,6
bond 186:7,10 186:11 187:3,4 187:24 188:6,8 188:11,13,18 188:20,25 189:5,9 196:21
bond's 187:21
bottom 137:10 199:7 207:5 214:16 215:17 216:4 255:24
boulevard 3:5
box 214:16
brain 39:20 40:2,5,6 134:20 134:24 135:2 135:24 136:3 137:15 148:8 149:1,3
branch 261:25 262:3
break 11:19,21 11:23 35:21 69:8 105:9 106:15 181:21 219:12 255:7
brief 14:4 137:6
briefly 13:20 116:3 209:3,6 262:16
bring 22:3 27:21 186:24 186:25,25
broader 107:1 107:3,14,17
bsn 38:22,25 54:13
build 28:11
building 215:6
buildings 261:3
bulbs 243:5
bullet 215:4

c

c 4:1 6:1
calculate 249:4
calculated 104:5
calculator 207:1
calendar 181:7
calendars 181:5
call 97:17 104:4 186:2 187:10 187:16 192:19 192:22 193:1,5 193:19,23 194:1,6,10,25 196:14 197:12 198:1 203:1,18 203:24 204:3 206:4,6 234:20 235:3,10 239:18,21,23 240:1,7 248:16 256:17
called 2:2 7:13 202:7 203:21 204:3
calls 32:5,11,19 33:2 68:18,20 113:20,21 186:18 189:6,9

192:2,6 193:9
194:13,22
195:2,5,8,9,15
195:20,21
196:2,7,19,22
196:24 197:1,7
197:10,15
camp 1:7 6:5
8:4 9:20 78:6
78:11
capacity 53:14
53:18,22 54:1
caps 215:19
capture 24:23
26:10
cardiac 263:2
cardiologist
150:21,25
151:1,4,5
cardiology
115:12 150:12
151:8,12,18,23
152:4
care 4:13,18
7:20 8:8,16,19
9:4,12,19 10:17
10:19,23 12:6
12:10 15:19
16:4 19:25
20:12,18,22
21:3,6,7,8,11
21:13,16,20,23
21:24,24 22:4,6
22:8,12,13,14
22:21 23:4,10
23:11,13,13,17
23:20 25:9,17
25:24 26:1,15
27:11,12,15,20
28:1,2,11 31:23
31:24 32:2
34:25 35:3,4,7
35:12,15 36:10
36:12,13,24,25
37:2,4,7,16,18
37:21 38:1,4,5
38:6,10,18
39:17 42:13,14
42:15,18 43:6
43:19 44:5,7,8
44:9,19,20,22
45:1,2,5,9,11
45:13,18,20,21
45:22 46:9,13
46:18,22 47:2,4
47:6 48:1,4,10
48:19,23,24
49:3,6 50:20,23
51:1,2,5 53:19
54:17,18 55:1
55:19 56:8,11
56:18,21,22
57:2,3,11,12,15
57:17 58:6,17
58:23 59:4,6,8
59:10,16,22
60:4,5,16,23,24
60:25 61:3,13
61:25 63:2,12
63:14,23 64:10
64:12,15,18,24
65:1,5,8,19
66:2,6,8,11,16
70:9,15,21 71:8
71:9,18,20
73:21 74:13
75:18 76:3,5,6
76:15,19,21
77:7,12,19,23
77:24 78:1,4
80:13 81:10,22
82:8 83:1,24
84:3,9,11,14,16
85:3,4,8,15,17
85:21,24 86:6
86:17,18,21,22
86:23 87:2,3,7
87:23 88:2 92:2
92:11,24 93:6
93:24 94:5,12
95:16,21 96:1,7
96:9,14,24 97:3
97:7,19 102:17
103:13 104:4
104:17 107:22
108:4 109:1
110:6,10,12,15
110:20 111:1,3
111:6,8,20,24
112:5,7,18
113:1,6,9,11,13
114:2,11,25
115:7,9,20
116:18,20
117:21 118:20
119:12,15,17
119:20,24,24
120:2 121:23
122:5,6,10,19
122:20,21,22
123:6,8,8,11,12
123:24 124:3
124:12,16,17
124:17,23
125:4,9,10,14
125:18,23
126:12,16,21
126:25 127:4
127:13,20
128:2,5,9,16
130:13 134:23
135:4,5,7,22
136:22 137:2
140:8,15,19,23
142:23 143:1
143:16,24
144:3,7,10
145:6,11 146:6
146:9,11 147:3
147:14 148:10
148:13,18,24
148:24 149:4
151:6 153:10
153:21,23
154:4,15 155:2
155:8,12,14

156:5,19,22
157:3,23 159:1
159:2,7,15,20
159:25 160:12
160:17,18,21
160:23,24,24
161:1,2,9
164:13,14,15
165:12,15,18
165:19 166:10
166:20 167:2
167:10,12
168:9,18,24
169:7,14
170:14,15,24
171:5,7,8,11,21
171:22,25
172:4,13 173:3
173:20,25
174:2 175:4,11
175:17,24
176:6 177:19
178:4 180:1
182:11 184:5,8
186:8,11,20,21
186:23,24
187:10,12,12
187:13,15,18
187:20 193:11
193:14 194:16
198:19 199:19
201:15,20,23
207:24 208:5
208:10,14
209:21,23
211:20 212:10
212:21 213:2
214:4 215:16
217:12,24
218:16 219:24
219:25 220:8
220:12,15,25
221:2,14 223:1
223:4,5 224:3
224:11,12,19
224:20,22,25
225:4,6,9,14,19
225:23,25
226:7,11,12,14
226:17 227:14
227:14 228:24
230:22 231:14
231:16 233:21
235:18 237:9
237:13,15
238:11 239:13
240:15,21,25
241:10,22
242:2 243:1
245:4,9 246:4
247:9,10 248:5
251:8,12
252:19 253:13
254:10 257:6
257:21 258:1,2
258:5,8,9,12,14
258:21,25
259:1,4,6,10,16
259:19,22,23
260:7,7,10,14
260:19,20,23
261:12 263:2,2
263:19 264:16
264:25,25
career 28:9
42:24
caregiver
243:25 244:2
248:20 250:17
251:19
caregivers
127:13
caregiving
170:9
carmen 1:18
2:5 6:12 267:3
267:21
carolina 1:2
2:13 3:13 6:7
carpenito 2:9
4:5 6:21,22 7:3
7:16 8:23 18:15
19:4 28:25
35:22 36:3 41:9
43:12,13 51:25
64:19 66:17,25
72:4 73:6 81:2
82:17 92:25
93:16 94:22
96:22,23 105:8
106:11 118:6
120:7,13,20
123:15,25
130:24 136:6
139:14 141:20
141:22 149:5
149:15 156:14
159:13 173:21
174:8 181:22
182:3,23,24
185:14 200:7
202:13,20,21
210:15 212:5
212:18 213:13
213:20 214:8
214:12 215:12
215:22 216:3
217:9,18 218:1
219:11,20
221:17 238:1
255:6,13
257:14 258:23
260:2 261:5,13
265:12,20
carry 127:9,11
129:2 130:9
177:20 178:5
242:21,24
247:14 251:8
carrying
176:16
cars 177:10
case 8:13,13
9:24 10:2,8,11
20:5 22:10,16
26:19,20 30:11

30:20 33:11,17 34:8,15 43:2 44:4,8,19,21 46:4,5,11,14 49:23,25,25 51:11,20 55:1 64:4 65:23 67:19 73:20 76:2 78:14,18 79:7,16,24 80:3 80:8 81:19 83:12 84:22 89:2 91:23 92:8 92:17 93:10 112:9,17 121:15 125:10 126:11 137:4 157:10,11 185:24 187:25 188:7,21,23 189:3 202:5 203:9,19 204:15 215:23 231:13 241:15 241:21 259:21 261:8

cases 8:10 23:8 23:14 27:19,22 42:22 51:4,7 52:12,20 53:8 67:2 73:21 78:17 79:8 80:18,24,25 81:7,9,16 83:10 83:23 87:24 97:11 195:13

catch 189:22

categories 179:19 180:6 243:8

category 117:9 179:17

celia 74:25 220:2

center 4:16,20 9:7,14 20:17,20 20:22,23 22:2 27:18,19 43:16 43:18,23,25 44:1,3,7,13,17 44:18,24 45:7 45:18 46:1,3,9 46:21 47:1,20 48:3 50:19 51:1 78:16 79:12,18 80:25 84:8,13 172:17 186:13 186:21 187:9 262:15

center's 84:3

centers 109:1,1

central 5:22 209:7,10 210:7 213:14,24

certain 40:12 40:17 71:18 74:4 95:22

certainly 13:24 14:13 17:11 58:2

certificate 267:1

certification 54:16 55:18 258:7

certified 7:20 35:15 37:18,21 37:25 38:10 39:16 65:18 186:8 242:6,12 242:18,20 243:18 259:21 259:22

certify 266:1 267:4

cga 210:21

chance 139:19 139:19 158:24

change 10:18 64:24 65:2 66:3 70:5 71:8 147:11 201:15 243:5 252:9,9 252:10

changed 24:6 64:25 65:3

changes 70:23 71:10 96:13 143:1 201:13 223:15,20 266:4

charge 233:7

charged 104:17 104:20 105:7

charges 264:8

check 132:3,10 132:18 246:21

checking 131:22,23

checks 145:19 145:23 158:7,9

children 33:11 33:12,21

children's 47:12,15 48:15 48:22

choice 169:6

choose 99:5 100:2,11 155:23

choosing 148:15 156:3

chores 121:20 121:23 126:16 128:10,24 129:3 170:9 177:7,21 178:6 180:2 246:16 247:16

chose 152:7 153:17 155:18 163:8

circumstance 24:2

circumstances 212:1 251:7
city 214:24
civil 2:11,19
claims 110:3
clarification 21:5,9,22 23:14 25:19 28:14 38:24 60:6,8 74:19 76:10 80:24 112:19 114:19 118:2 118:19 129:10 143:21 157:5 157:12,16,22 195:22 196:15 206:12 229:17 256:4
clarify 12:16 13:22 15:10 17:9,24 20:9 25:7,14,22 27:17 28:21 29:17 33:15 40:9 42:11 47:24 51:13 54:12 57:25 58:1 62:21 67:9 68:24 76:7 101:6 103:8 107:2 122:25 188:1 195:3,10 205:24 248:10
clarifying 191:9
clean 176:22,25 243:2 250:16
cleaning 175:23 176:11 177:9 244:17
cleanse 250:15
clear 191:6 205:1
clearly 11:6 190:11
client 12:17,22 25:11,14 27:9 31:24 32:1 36:22 60:18 69:20 82:16 84:4 87:25 225:11 241:12 261:15 264:23
clients 28:22 87:15
clinic 139:11,11
clinical 50:20 55:3 59:22 61:6 247:19
clinics 38:16
close 27:3 98:5 99:11,24 103:23 107:10 107:19 184:11
closely 173:18 174:1
clothes 177:2 252:9
cna 76:21 77:20 77:23 118:23 119:1,3,5,23 120:3 122:12 123:6,12 124:3 124:22 125:4 125:14 126:21 159:20,25 164:20 165:12 165:15,23 166:3,11,16,22 167:9,15 168:8 168:13 169:10 169:18,23 170:15,17,19 171:5,7,9,10,21 171:24 172:1,3 172:7,13 176:1 176:6,14 243:7 246:8 250:5,6,8 251:10,22 252:3,15
cnas 170:2 252:11
cogwheeling 138:19
collaborate 15:4 22:5 57:4
collaboration 119:25 130:5
colleague 186:12
collecting 173:9
columbia 2:6 267:23
column 12:24 12:25 13:3,6 14:1 15:16,24 16:7,12,16,17 16:22,24,24 17:3,6,10,11,16 17:19 18:1 115:5,5,16 116:6 230:11 245:4,9
columns 13:19 114:18
combination 127:6,10 128:25 129:16
combined 126:8
come 10:16 14:19 23:6 79:21 97:16,18 98:6 117:6,17 130:3 160:4 195:13,19 217:20 218:4 224:21 229:10 254:4,11 255:1
comes 109:5 115:25
comfortable 27:4

coming 14:14 14:22,24 117:23 123:17 181:13 246:19
commence 259:3
comment 73:5 205:10 217:6,8 217:16
commentary 76:14 139:13 140:5
comments 138:17
commission 210:8 211:3,7 211:13 213:16 266:21 267:25
commissions 209:11
committee 210:21
common 27:25 95:17 184:4 193:9
communicate 222:13
communicated 28:5 79:23 209:16
communicating 27:6
communication 33:3 80:24 133:15 134:2 175:12
communicati... 80:9,22
community 20:18,22 46:16 50:2 125:12 128:8,9,11 164:23 167:3 168:20 169:11 169:12,15,18 171:17 172:3 172:19 176:3 218:20 248:7 264:9
companion 119:17,20,24 122:21,22 128:5 168:18 168:24 169:7 169:14,16 171:3,4,7,20,25 247:9
company 49:11 49:24 50:5
comparable 232:12,20
compare 61:23 99:10,12 107:4 116:17 151:16
compared 19:20 34:10 44:16
comparison 107:17
competent 252:3
compiles 109:12
complete 33:4 121:20 214:22 215:1 247:15 248:13
completed 30:5 30:17,23 31:6 38:25 54:16 56:2 74:7 75:14 134:4,15 169:22 177:21 178:6 259:12
completely 34:17 134:1 170:7 230:4
completing 134:12 198:5
completion 23:13
comply 209:9
component 56:2
computer 190:15,25
concerns 252:1
concluded 265:25
concludes 265:16
conclusion 88:9
condition 132:7 132:12 133:10 133:23 134:8 135:18 160:16 222:14,19 223:15,20 255:4
conditions 62:1 194:14
conduct 23:18 23:24 27:7,8 106:22,25 107:12 242:19 248:8,12
conducted 26:16 29:15 183:3 189:21 205:14,19,22 244:16
conducting 24:18
confirm 168:25 190:20 191:11 191:15
confirmation 76:5 132:21
confirmed 148:13
connection 8:4 9:20 44:23
conservative 254:3,21

consider 32:22 33:6,7 94:1,13 104:15 157:9 239:8 261:11 261:18 264:13 265:5
consideration 64:16 237:2
considered 142:21 195:2,5 209:23 226:6 238:20
considering 237:5
consistent 85:6 117:8 175:2,6,7 231:10,21 232:2,8,14 233:13,17 258:4 261:19
consistently 85:16 99:3 100:4 173:16
construction 201:2,3,6,7
consult 187:13
consultant 19:25 20:12
consultation 239:15
consumption 94:2,7,14
cont 102:5 128:16
contact 97:14 98:17 99:4,7 100:21 103:20 103:23 173:4,5 240:11 241:6 263:15
contacted 79:4 101:5,16,19 102:16 103:2 103:10,15 104:13 170:23 172:12 174:19 175:10 203:5,8 226:6 230:24 240:12 259:18
contacting 98:16 170:1 241:5 263:18
contain 130:1 201:23
contained 25:17 140:18 141:2,10
containing 4:12 4:17
contains 9:4 131:12 201:21 210:23
context 52:2,6 52:17 109:7,9 109:11 110:4,7 110:19 111:23 112:1 113:5,23 139:18,20 146:24 157:9 187:7 260:13
contingencies 206:22 207:22 208:8
contingency 207:10,11
continue 38:18 46:5 105:2 125:11 149:16 160:6
continued 2:25 4:25 5:1 106:10 159:11 175:17
continues 84:22 123:3 125:22 126:7 127:11
continuing 214:6 215:21 215:24 251:18
contract 20:19
contractor 20:15 27:18 46:10 200:24 200:25 218:13
contracts 44:10
control 173:7 173:10 174:21
conversation 67:15 76:13 230:7 234:15 235:13
conversations 67:25 74:23 79:11 81:4 188:10 197:4 234:17
coordinate 46:16
coordinating 4:16,20 9:7,14 20:17,19,22,23 22:1 27:18,19 43:16,18,23,25 44:1,3,7,13,17 44:18,24 45:7 45:17,25 46:3,9 46:21 47:1 50:19 51:1 78:15 79:12,18 80:25 84:3,8,13 172:17 186:13 186:21 187:9
coordination 44:5,9,19
coordinator 50:20
copies 19:8
copy 5:18 136:10 200:11 202:15 221:19
corner 43:14 137:11 215:17 216:5 255:25
corps 90:16,21 92:14 262:14
correct 8:11,14 9:16 12:6,11

13:1,4,5,7,9 16:4,8 17:15,17 18:23,24 19:20 20:12 29:22,23 31:3,6,19 39:4 39:5,8,11,13 41:22,24 42:4 42:17 44:25 51:20 54:24 55:4,9,15 57:13 58:7,8 59:7 62:16,19,21 65:10,20 66:12 68:4,7 69:15 71:9 74:5,6,25 75:12 84:6,16 84:17 85:10,25 86:11,20,23,24 87:8 89:10,11 89:14,25 91:11 91:19 97:1 100:12 101:16 102:5,6,14,17 103:7 106:20 107:22 108:6 110:10 111:12 111:13,16,17 112:18 113:6,9 115:10 119:1,5 119:6,16,18 122:3,13,19 128:6 130:15 131:19 132:5 133:1,11,19,20 134:21 136:23 137:1,25 138:25 140:20 142:6 144:13 145:8,22 147:8 147:9 150:14 150:22 152:4,8 152:18,25 153:4,5,8,9,15 155:19 158:7,8 158:9 159:22 159:23 160:1,2 162:1,8,15,24 163:9 164:10 165:21 166:6 166:14,15 168:23 169:11 169:15 177:23 178:7,16 183:1 183:2 186:17 190:23 193:3,7 193:24 194:7 195:5 198:2,3 198:24 199:25 200:21 205:3,4 205:21 207:14 210:24 220:3 221:24 223:2 223:13,14 224:9 225:9 228:2 230:17 232:7 233:24 235:25 239:17 242:8 246:14 256:15 257:4,9 261:4,6

corrections 266:4

correctly 72:19 72:20 79:19 84:5 85:9 88:11 91:10 121:24 137:24 138:8 138:21 142:5 150:4 158:5 164:24 190:3 199:15 203:16 203:17 205:5 209:12 211:9 215:8,9 224:6 226:24 248:25

correlated 107:25

correlates 108:21

cost 13:12 17:16,19,23,25 18:2,2 95:22 96:1,25 97:4,12 97:13,15,18,25 98:6,11,12,12 99:20,22 101:16 107:9 107:21 108:6 108:16,16 109:5 110:22 114:12 198:23 199:1,2,2 201:18,22 206:20 207:12 208:2,10 230:25 231:15 233:9,15 245:3 245:8 249:21 264:2

costing 17:2 97:2 110:5,9,11 110:20,25 111:5 114:2,10 173:10,24 174:12,16,23 231:4

costs 98:8,10,18 98:24 100:18 100:22 102:2 104:11,12,16 104:19 105:5,6 106:17,24 108:22,25 109:15,24 173:20,25 174:17 180:17 181:18 200:18 200:19 201:10 201:14 207:17 207:25 208:9 212:20,22 233:19 264:8

counsel 6:17 8:3 30:20 79:5 88:14,17 90:24 113:12 197:17

198:6,12 267:11,14
counsel's 82:18 174:5
count 102:19
couple 10:24 37:17 248:2
course 25:12 38:5 45:2 54:16 55:23 56:1,3,5 124:9 184:11 202:3,20 229:8
court 1:1 6:6,12 11:3 265:18
cover 24:16 73:12 76:1 83:25 88:5 104:10,18 182:6,8 219:22
coverage 105:4 105:4
covered 104:25 176:6
covers 176:8
covid 24:5
create 131:19 160:14 259:4
created 87:3
creating 23:17 87:2 211:3
creation 258:12 258:20
criteria 100:2 221:3,7
cross 49:2,7
current 158:3 191:8
currently 138:3 243:21 244:4 244:13 253:13
curriculum 258:3
cut 46:7 171:13
cutting 181:13
cv 4:14,19,24 9:5,13 19:13,14 19:15,19,20 20:3,4,8 34:11 34:12 47:10 54:6,20

d

d 6:1
d.c. 6:9
daily 76:21 77:19 121:22 122:5 126:15 128:16 164:14 175:17 176:17 177:4 237:1 241:22 242:2 242:22 245:4,9 246:4 247:10 247:15 254:4
daniel 136:19 143:12
data 59:23 95:17 109:12 109:17,23 110:1 178:24 180:4 181:3 245:18 247:7
databases 61:7
date 6:10 78:21 134:3,14,17 141:4,6 197:19 197:22,22,23 222:21 223:24
dated 9:15 200:15 223:5 223:10 256:21
dates 141:3 192:15
day 105:16 123:6,13 124:3 124:22 125:4 125:14 126:5,5 126:21 127:3 127:20 138:5 160:1 165:12 165:15,24 166:4,11,18 167:19,20,22 168:6,13,14 178:15,18,22 179:2,15 180:5 180:14,19 181:4 204:3 242:7 245:18 246:10 247:7 249:3,10,18,19 249:20 250:1,6 250:17 251:10 251:23 257:2,7 266:11
days 127:4,20 170:25 256:20
dbs 39:23,25 40:11,15,19,23 41:1,8,12,14,18 41:21 42:3,8,20 42:24 43:1,6 62:18,20 66:2 66:10 69:9,13 69:22 70:2,5,20 70:22,23 71:4 71:17,21,24 72:16 112:13 135:6,13,19 137:16 138:3 138:25 139:6 141:25 142:8 147:7,17 148:23 152:24 158:10,20 160:15,20 161:3,7,8
dc 1:13 2:4,21
deal 242:13,15
dealt 80:18 81:7 87:7
december 192:19,23 193:2,6 197:25 199:12 200:15 200:20 256:17

decide 240:6
deciding 221:3 221:8
decision 61:12 148:18 156:20 225:18
decline 159:3 160:6,9
decreased 208:10
deep 39:20 40:1 40:4,6 134:20 134:24 135:2 135:24 136:3 137:15 148:8 149:1,3
deescalating 138:4
defendant 53:11
defer 90:17 91:1 207:3,20
define 107:16 228:14 248:10
definition 112:21
definitions 18:5
degrees 54:15
delete 13:6 15:24 16:1,7
demonstrate 158:2,18
deny 211:18 212:8
denying 213:1
department 2:10,18 22:1 47:1 79:12 89:24 173:17 240:12
departments 241:6
depend 31:25 240:23
depending 78:1 96:13 166:19
depends 10:4 10:12 24:1,4,12 26:8,8,18,19 28:4 36:9,22,23 87:18 95:14 96:3 173:1
depo 68:16
deposition 1:10 2:1,3 4:22 5:6 5:21 6:4,8 11:20 16:21 18:21 20:24 40:1 67:21,22 68:6,15,21 69:1 69:2,5,6 72:7 105:14 185:7 185:20 202:16 203:20 204:10 204:22 206:19 207:4,21 209:15 210:10 211:12,16,24 211:25 215:22 257:19 264:13 265:24 266:2 267:4,6,9,13
depositions 68:22 259:11
derived 178:14 181:10
describe 37:20
describes 137:21
description 14:4 169:11,12 169:15
descriptions 164:18
design 199:23 213:15,25 214:17
designated 23:15
despite 137:19 146:9
detail 196:15
details 184:13 195:10 196:16 199:13 202:10 204:7 205:10 209:18 217:7 217:17 218:6 230:6
determination 50:6 93:2 154:3 154:15
determine 24:13 40:21 41:8,16 49:20 58:18 65:5,9,19 66:15 92:1 93:9 99:19 106:22 106:25 107:12 135:21 161:9 201:19 208:5 213:11 218:13 220:10 225:12 233:7 240:23
determined 10:22 36:24 62:23 66:8 69:21 70:25 71:15,23 84:25 92:10,23 93:5 125:13 135:3 136:1 142:22 142:25 147:19 147:23 208:13 212:17 220:16 225:3 226:13 226:17
determining 147:2 157:6 225:22 255:4
develop 15:4 25:17 32:2 60:24 61:3 64:15,16 81:22 83:1 86:6 105:1 124:25 225:13

241:10 259:1,4 259:23 260:7
developed 85:6 95:8 135:7 139:21 141:14 174:3 226:12 231:14 233:5 259:10
developing 25:9 110:15 155:2 155:14 159:7 186:20 187:17 195:10,23 209:23 218:16 226:7 240:15 258:24 260:14 264:15
development 57:11 59:8 84:11,14 92:1 92:11,23 93:6 94:5 96:6 114:24 126:9 140:14,19,22 173:3 175:4,11 179:25 186:23 187:12 217:24 223:4 226:14 230:21 258:12 258:21 259:1
device 40:20 41:18 138:25 139:6 148:10 148:11,12
diagnose 55:9 55:11
diagnosed 7:25 55:13 218:22
diagnoses 48:9 49:5 50:13 55:10 56:9,10 131:13 132:2
diagnosis 87:24 132:4,21
diagnostic 152:14 154:10
diaper 249:14 252:10
differ 46:12
difference 18:12 176:10
differences 44:15 187:2
different 22:3 61:23 65:7 102:20 114:10 114:14,16,23 144:20 152:5 157:7 169:17 174:12 186:25 187:14 206:5 242:15 243:8 243:14 253:10 265:8
difficult 250:14
difficulty 121:18 190:11
digest 158:24
dignity 137:23
dimensions 215:7
diminished 253:22
direct 36:12,13 37:4
directed 36:6 150:24 185:3 185:12 189:4
directing 36:10
direction 267:9
directly 79:21 173:4 177:4 192:10 200:20
director 78:16 79:11 81:1 83:11
directs 151:6
disabilities 44:6
disagree 36:8 72:21 130:17 133:15 156:6 156:10,16 164:3,6 170:13 171:23 203:22 218:15
disagreed 64:8
disagreeing 72:25 139:24
discharge 263:10,12
discharged 263:8,9,11
disciplines 161:17 226:21
disclosing 81:4
discomfort 137:19
discontinued 138:6 142:2 257:1
discrimination 100:1
discuss 68:6 73:14 178:13 199:9 218:9 241:9
discussed 18:6 71:3 92:6 170:12 175:8 184:15 194:14 211:18 212:7 218:10 236:22
discussing 69:9 77:6,9 161:6
discussion 7:7
disease 7:25 22:9,15 23:5 36:5,14,17 37:3 37:5,8 39:19 40:13,18,25 42:8,16,19 47:17,21 48:2,5 48:20,25 49:4 50:7,23 51:7

52:22 53:3,5,8 53:16,24 55:11 55:13 57:21 62:1 66:1 69:12 70:1,8,14,19 73:8 80:19 81:8 81:12 83:5 86:3 86:10 87:8,12 87:14 91:8 132:4,11,18 137:14 141:25 145:7,12 150:3 152:16 160:11 179:23 180:12 218:22,24 224:4 225:16 237:14 244:18 245:15 256:7
disorder 36:6
disorders 53:20 54:3
dispense 253:23
dispensed 254:13
dispenser 252:19 254:1,9 254:11,15,24
dispute 204:18 204:22 207:15
distinguish 116:21 196:5
district 1:1,2 2:6 6:6,6 208:17 209:8 210:8 267:23
division 2:11,19 43:16,20,23,24 44:13,16,20,23 45:7,17 172:18
dixon 89:17,20 97:17
doctor 60:2 122:15 124:4 129:19 134:11 260:8,9
doctor's 64:23 64:25 116:7,13 116:15
doctors 59:5,18 65:7 122:1 126:1 128:21 128:24 129:8 130:12 259:25
document 4:12 4:17,23 9:4 18:18,22 139:1 139:5 142:13 172:6 174:19 180:10,21 185:19 197:4 198:8,12 223:11 229:10 255:20
documentation 33:2 58:21,24 83:7,15,19,20 83:23 189:4 197:17 214:25 215:3 244:23 245:2,13
documentatio... 196:18
documented 197:14
documents 30:4,12,21,23 31:10,11,12,21 32:14 138:23 185:6,17 197:21 235:7 255:19
doing 128:10 181:17 189:10 191:24 255:3 260:19
dollar 178:15 178:18,22 179:2,15 180:5 180:14,19 181:3 245:18 247:7 249:18 249:20
dosage 138:4 142:1
double 144:12 146:1 246:21
dr 5:6,8,10,11 5:25 58:12,13 58:21,22 65:16 65:17,20,20 72:8,18,22 73:7 73:10 74:21,21 74:22 76:9,12 120:1,11,18,24 120:25 121:3,3 121:6,7,8,8,10 123:22,22 124:13,13 125:5,17,17 127:6,22,22 131:1,9,11,16 131:18,20,21 132:3 133:1,3,9 133:24 134:7,9 134:13,19 136:21,25 139:1 140:25 142:8 143:15 143:20,23 144:2,12,23,25 145:19,23 146:4,14,16,20 147:5,10,20 148:9,16,22 150:9,16,22,25 151:3,9,12,22 151:24 152:2,5 152:6,8,9,23 153:1,7,18,20 153:22 154:1,5 154:6,9,13,20 154:21,23 155:1,9,13,15 155:15,16,18 155:20,21,24 155:25 156:11

156:12 157:15 157:20 158:7,9 158:15 159:9,9 160:8,8 161:21 161:25 162:18 162:20,24 163:1,9,11,13 163:16,20,24 220:1 221:20 221:22 222:2,7 222:16,22 223:9,17,22,24 224:8,23,25 225:4,24 226:1 226:7,9,13 227:2 240:3 245:22 246:19 247:3,5,8,12,21 248:1 255:17 256:3,11,22
draft 31:23 45:21 75:17 130:13 131:5,8 265:19
drafted 228:25
drawings 210:24 211:3,7 211:14 217:2
drawn 215:5
drive 70:8,14 169:23 170:2,3 170:4,18 171:3 171:9,10 172:1 172:7 244:11 244:15 264:11
driving 168:20 169:17 171:15
drs 58:18 62:1 63:17 75:11 115:21 116:18 119:25 124:2 124:21 125:3 126:20,23 127:2,18 128:4 128:20 129:15 130:17 141:8 164:3
due 129:1 130:9 139:9 142:2 253:15
duly 7:13 106:4 267:6
durability 13:8 16:12,16,17,21 122:24 123:1 127:19 144:8 147:19 153:14 159:20 163:6 224:14 246:11 246:18,23
duty 261:24 262:5,8,17 263:6,7,8
dvd 178:15 181:10
dysfunction 121:17
dyskinesia 121:16 253:21

e

e 4:1,10 5:1 6:1 6:1 197:20
earlier 28:19 34:23 42:12 51:4 67:1 86:16 116:3,11 130:10 146:19 158:20 174:11 233:11 237:12 237:21 241:20 257:19 263:14 264:12
eastern 1:2 6:6
eat 176:19
eating 176:21
edgar 5:19 200:12 222:9
education 55:2 120:1 187:1,5,7 259:20
eight 123:6,13 144:9 145:21 146:10 159:21 165:11,23,24 166:17 168:12 168:13 235:22 236:19
either 32:19 73:20 83:20 87:3 89:2 96:15 100:10,25 104:24 106:23 107:6 108:3 118:7,15 122:11,15,23 123:4 124:21 129:7,19,21 130:19 131:22 145:15,15 157:22 179:20 180:11 181:1,6 181:11 187:19 187:25 188:7 188:13,24 189:6,13,16 197:1 209:16 210:4 212:25
elderly 33:20 34:19 35:17 45:3,14
elevations 215:6
eligible 105:3
ellen 75:3 220:3
else's 211:24
emergency 170:22
employed 49:7 186:12,12 267:11,15
employee 78:15 267:14
employees 84:8
employs 44:7

enclosed 84:2
encouraged 215:2
engaged 262:17
engagements 53:23 54:2
ensure 250:18 250:20
entacapone 256:5 257:1
entail 37:23
entire 72:24 215:11 264:14
entitled 15:16 89:9
entries 111:18
entry 63:4,6,19 112:16
environmental 2:11,19 51:11 51:14,19
envision 168:11
episode 17:21 17:22,23
episodes 170:21 170:22
equipment 236:25
eric 5:18 75:6 199:17 200:11 202:15 204:5 204:14 260:25 261:10
error 173:9,23
errors 201:21 201:24
escalation 160:4
esq 2:9,17 3:3 3:10
essential 215:1
estimate 180:16 201:5,7
evaluation 88:7 88:10 161:16 205:20,23 226:20 227:16 227:22 228:2 228:11,21 229:13 230:4 230:15 235:19
evaluations 228:18 229:4 229:20
evasive 185:8
eventually 146:1
evidence 252:24
evident 121:16
exact 78:20 114:11 183:8 183:12 197:18 229:10 258:6
exactly 79:14 157:8
exam 37:25 38:1,7 39:1,9
examination 2:2 4:3 7:15 106:10 257:17
examined 7:14 70:24 106:5 133:13,17 134:5,10 222:2 222:11,22,24 222:25
example 15:22 16:3 57:21 60:15,17 61:9 61:15,17 62:24 63:7,20 70:18 71:1 75:10 94:23 103:7 108:10 115:20 116:11 121:14 123:5 124:22 125:14 166:24 174:11 181:12 197:25
examples 101:14
except 232:24
exception 11:21
exclusively 172:4
excuse 61:20 144:25 145:16 175:16 182:15 204:24 227:1
236:17 242:10
exercise 161:18 168:22 226:22
exhibit 4:11,12 4:17,21,24 5:2 5:3,5,7,9,11,13 5:16,18,20,22 5:24 8:25,25 9:2,10,12 12:2 12:14,14 18:14 18:17 19:3,6,11 19:14,16,19,20 28:24 29:2,4 43:9,11 47:9 52:9,21 54:20 58:3 61:19,20 72:3,5 76:25 77:18 84:1 88:5 91:3 96:19,20 101:21 106:12 108:12 111:9 111:19 112:8 115:2 118:22 120:5,6,12,15 120:19,22,23 121:9,11 128:16 131:2 132:24 136:5,8 141:11,16 144:17,17,22 144:24,25 147:4 148:6 149:17,18 157:21 163:4

177:13,14 185:13,16 192:14 197:17 200:6,9,11 202:12,14,15 210:12,19 213:19,22 221:16,19 223:13,23 226:19 255:15 255:18,21
exhibiting 40:10
exhibits 8:22 73:12,14 89:7 121:2,14 129:7 144:19 145:14 182:5,8
exist 105:4
existing 181:10
expect 176:5
expectancy 16:10 159:25
experience 19:24 22:3 27:21 33:10,11 38:9 55:3 78:4 120:1 125:8 126:11 130:6 187:2,6 237:6 237:10 247:18 250:12 259:20
experienced 55:1 91:9
experiences 187:1 250:10 250:13
expert 23:15 51:10,19 52:1,5 52:16 53:10 82:7 83:6,17 188:21,23
expert's 211:25
expertise 22:3 27:21 55:3 78:5 120:2 125:8 130:6 187:1 237:6 247:18 259:20
experts 72:9 73:8
expires 266:21 267:25
explain 13:20 13:25 15:9 16:15 49:12 65:13 100:16 100:20 101:4 101:15 107:2 115:6 156:2 196:12 230:19 256:7
explaining 202:8 203:2
explains 158:10
explicitly 117:4 191:15
exposure 51:11 51:15,20
expression 138:18
extended 167:13 171:1
extra 145:20
extremely 95:24
extremities 121:16

f

f 3:3
facial 138:18
facilities 38:16
facility 48:11 230:23,24
fact 37:24 136:24 158:19 163:25 170:17 236:5
factor 104:9
factors 95:3,8 139:22 265:5
fair 11:13 32:17 32:21 109:25 110:1 111:4,11 111:14,19 113:8,10 114:6 151:21 183:25 207:9
fall 180:7 250:21
falls 14:1 15:8 19:1 97:8 250:12,13
familiar 73:10 109:7,16 113:24 114:4,8 137:5 193:14 213:17 258:16 261:20
family 26:21,25 184:11 259:14
favor 12:1
features 219:9
february 1:14 2:3 6:11 9:16 78:23 89:17 223:5
fee 4:15,20 9:6 9:14 109:18,22 110:24 111:16 112:4,6,12,17 112:20,21,22 112:23 113:1 114:1
feel 27:4,5
feels 137:22
felt 154:22 164:7
fewer 150:21
field 110:5,9,12 110:20,25 111:3,5,7
fifth 58:3

figure 104:5 189:8
file 198:9
fill 254:11,14
filled 29:25 31:3,4,12,18 32:22 33:8 133:4,22 222:3
filling 102:16
final 84:18 85:2
finally 194:9
financially 267:15
find 84:2 229:10
fine 95:16 183:11 190:1 214:8
firm 10:5
first 7:13 12:5,7 12:25 16:3 24:19 41:2 43:9 43:11 47:11 49:12 54:19 60:14 61:24 78:6,13 83:25 84:1,1 85:5 88:6 91:7 121:1 131:3 137:9,13 145:9 153:13 202:24 203:4 203:18,24 204:21 214:1 224:5 243:17 256:2 263:13
five 22:19,21,23 23:1,2,4,10 42:13,18 51:4,7 65:17 87:7 147:11 237:13
flip 102:7 216:7
flipping 199:10
floor 2:4
floors 263:3,3,4
florida 3:6
flowers 6:14
focused 87:16
follow 5:9 12:15,21 120:17 134:20 136:2 137:15 143:11,15,16 144:3 151:23 155:23 156:20 196:2
following 69:13 70:2,4,20,22 71:4,17 137:17 138:3,24 139:5 150:2 161:16 215:3 226:21 235:12
follows 7:14 106:6
foot 108:25 109:1
force 47:20 48:3 262:4,14 262:18
forces 262:1
foregoing 267:4 267:6
form 25:3 26:4 26:11 28:20,22 28:22 32:23 41:3 51:21 64:13 72:23 92:18 93:11 94:16 117:24 123:14,19 130:20 139:7 148:20 156:7 159:5 173:12 211:22 212:11 213:4 215:10 217:4,14,21 237:24 258:23 260:2 261:5,13
formalized 28:15,16
format 174:18
formed 258:3
former 21:25 191:8
formulating 73:21 140:8
found 187:20
foundation 237:4
four 128:5 144:9 146:10 151:19,22 162:7 163:6,16 169:9 235:21 236:19 252:6 256:20 257:7
fourth 215:18
fourths 141:24 209:1
frame 46:20 167:15
frames 90:6 124:11
framework 87:23
frances 1:10 2:1 4:4 7:12,18 106:3
frequencies 126:1 154:13 155:19
frequency 16:20 71:18 138:5 144:8 146:10 152:3,6 152:8 153:17 163:9,22 164:4 234:3 235:9 247:3
frequently 16:18 110:23 250:10,13
friday 1:14 2:3
friend 27:3 181:13

friends 197:2
front 19:14,17 96:21 215:13
fryar 113:17,20 113:21,23,24 114:4,6,9
full 7:17 148:24 177:18 178:1 192:16 199:12
function 70:23 125:22 161:19 226:23 257:24
functional 69:14 70:6,13 123:2 126:6 158:3,15,21 159:2,4,11 160:5 162:14 237:19 247:13 265:3
functioning 136:4 148:11
functions 171:6 171:20
furniture 177:11
further 106:5 267:13
future 10:17 15:17 65:8 70:21 71:8 95:13 132:8,12 132:15 134:25 142:19 160:18 161:2 162:13 198:7

g

g 2:9 6:1
gained 125:7 160:19
gait 121:17 138:20 237:18
garden 209:10
gardens 5:22 209:7 210:7 213:14,24
gary 5:13 84:4 136:13 137:13
gathered 146:25
general 12:13 12:15 14:1,2 42:10 59:13,21 65:12 71:19 87:23 95:15,19 95:24 96:4 107:16 130:1 160:10 170:2 174:25 223:18 255:3
generalized 61:16 64:5 65:22 72:1 94:3 94:21 95:2
generally 21:2 49:12 131:4 194:17
generate 101:5 101:16 103:2 103:15
generosity 181:17,19 254:19,19
generous 243:24
geographic 231:9,20 232:1 232:7
georgetown 3:13
getting 142:14 169:19 177:9 240:14 250:12 251:2
give 28:21 46:20 61:16 64:5 65:7,24 67:7,18 144:18 147:24 172:8 183:8,10,19 234:6 249:7 254:1
given 28:20 51:10,18 52:16 54:8 125:21 208:7 264:15 266:3 267:10
gives 14:4 183:12
giving 68:25 128:2
go 7:2,3 8:24 10:24 13:18 28:6 41:5 47:9 47:10 50:18 52:3 59:3 62:5 66:17 73:1 76:24 92:20 96:18 117:21 117:22 118:12 142:22 144:16 149:5 153:10 154:16 155:6 156:3 157:4,11 167:14 168:3 168:24 171:12 171:14 174:9 178:2 182:21 189:10 190:13 196:11 206:10 212:2 232:25 238:18 248:11 248:14 250:19 251:15 263:7
goal 138:5 197:22
goals 240:16
goes 178:13 250:22
going 7:4 8:24 11:11 14:21 18:16 19:5 21:15 29:1 35:23 36:8 37:11 40:6,19

40:21,22 41:7 41:14,15 48:16 59:25 66:18 70:18 72:5,13 77:5 79:10 82:18 86:7 89:8 96:15 99:23 100:5,13 105:10 114:15 120:4,5,14 128:1 134:1 136:7 137:9,12 140:13,13 149:7 154:16 154:19 159:10 171:4,5 176:14 176:20,20,22 176:24,25 177:1,2,5 181:23 185:15 185:16 192:14 198:18 200:8 202:18 204:13 205:10 207:2,6 210:18 211:21 211:22 213:21 214:13,21 219:13 221:18 224:18 228:14 230:18 232:17 237:21 242:20 243:1,2,3,4,5,6 243:8 244:1 255:8 259:8 264:19 265:14

golkow 6:13,14

good 6:2,21 110:7 255:6

governing 210:4,6

government 4:12,17,21,24 5:3,5,7,9,11,13 5:16,18,20,22 5:24 8:22 18:14 19:3 28:24 72:3 120:6,12,19 136:5 185:13 200:6 202:12 213:19 221:16

grab 106:12

graduate 54:10 54:15

grasp 264:17

grass 181:13

great 96:20

grocery 167:7

ground 10:24

group 3:4,11 34:21,22 35:19

grow 47:19 48:3 262:15

guess 167:25

guide 5:23 213:25 258:25

guidelines 5:23 59:22 61:7 148:9 209:10 210:4 213:15 213:25 214:6 217:3

gutters 177:9 243:3

guys 265:21

gym 231:4

h

h 4:10 5:1

hairston 1:10 2:1 4:4,14,19 4:21,24 5:4 6:4 7:12,18,19 9:1 18:18 29:3 36:4 42:6 47:3 54:11 54:23 56:16 63:12 64:20 67:1,11 72:6 77:4 86:7 105:8 106:3,12 118:8 120:8 124:1 129:6 140:1 149:16 155:4 168:1 176:5 180:20 182:4 182:25 188:5 200:10,23 202:14,22 203:13 212:19 213:23 219:21 231:17 232:17 251:4 255:14 257:14 265:16

half 251:23,24

halfway 97:23 209:1

hand 43:14 137:10 215:17 216:5 255:24

handed 9:2 223:12

handle 63:2,23

handled 64:3

hands 171:4,5 171:24

handwritten 33:2 185:10

happen 69:19 69:25 184:10

happened 71:7

happens 184:10 193:13

health 45:14 109:7,9,11,25 110:1,4,7,19 111:4,11,15,19 111:24 112:1 113:5,8,10,23 114:6

healthcare 44:6 45:4 191:8

hear 78:6,13 241:16

heard 39:20 109:8,18,20

hearing 187:11

heavily 34:21 35:18
heavy 175:22 176:11 244:16
help 15:4 40:7 46:15 48:12 49:8 50:2,15 89:4 176:23,24 177:3 181:13 184:20 187:24 188:1 195:10 230:8 243:23 244:3,5,8 249:14 251:21 251:24 252:2,4 252:8
helped 188:6
helpful 26:3 27:6 187:17 240:14
helping 176:19 243:11 251:13
helps 57:10 243:19,21 244:4 251:5,17
hep 164:21
hereto 267:15
higher 152:7 153:17 163:8
highest 98:12
hired 53:10 73:8
historic 208:17 213:24 214:5 261:16
historical 94:1 94:6,14 209:8 210:7
historically 94:25 95:10 145:10 238:16 239:4
history 137:14 264:8
holy 49:2,7
home 20:18,22 48:22 121:20 125:12 127:9 127:14 161:18 167:15 169:2 170:11 177:7 177:22 178:7 179:22 198:20 199:18,20,24 199:25 200:3,3 200:18 201:14 201:18,22 204:20 205:3 205:18 206:1,3 206:5,11,12,13 206:20 207:18 208:2,9,16 209:7,17 211:14 212:23 217:19 218:3,9 218:10,13,18 218:19 219:2,4 219:7,10 226:22 242:24 242:25 248:6,8 249:23,24 261:1,2,16,21
homemaking 177:20 178:5 178:14,19
honestly 35:10 78:20 202:11
honorable 263:9,12
hospital 38:14 47:12,16 48:16 49:2,7 262:21 263:1,5
hospitalization 49:19
hospitalizations 49:16
hour 68:3,5,13 128:5 169:9
hours 25:11 38:6 123:6,13 124:3,22 125:4 125:14 126:21 127:3,3,19,19 128:22 129:8 129:20,22 159:21,21,25 165:12,15,23 165:24 166:3,4 166:11,12,17 167:19,22 168:4,12,13 169:7 178:13 178:19 180:7 180:10,15,21 180:23 183:15 183:17 190:3 242:7 245:13 245:17,20 246:10,18,24 247:6 248:21 248:22 249:2,5 249:6,17 250:1 250:6 251:10 251:12,22
house 129:3 166:18,21 167:18 168:13 168:15,17 171:2 203:10 209:9 238:25 244:5,17 248:11,14 252:4
household 164:22 167:3 175:22,23 176:3,11,12,13 176:15 179:16 180:11,22 181:1,6 242:13 242:15,17 244:9 245:14
housing 5:19 199:5 200:12 209:16 211:17

212:6,25
huffnagle 5:8 5:10 58:13,18 58:21 62:1 63:17 74:21 75:11 76:9 115:21 116:18 119:25 120:11 120:18 121:3,6 121:7 123:22 124:2,13,21 125:3,5,17 126:20,23 127:2,6,18,22 128:4,20 129:15 130:17 131:16,18,20 133:1,3,24 134:7,9,13,19 140:25 141:8 145:19 146:14 146:16 147:10 147:20 148:9 148:22 150:22 150:25 151:9 152:6,8,23 153:1,18,20 154:1,6,13,21 155:20,25 156:12 157:15 157:20 158:7 159:9 160:8 161:25 162:20 163:1,9,11,16 163:24 164:3 255:17 256:11 256:22
huffnagle's 121:8 131:1,11 131:21 132:3 133:9 144:25 146:20 147:5 148:16 150:9 151:22,24 152:9 155:16 155:18,24 256:3
huh 32:9 45:8 97:9 243:16
hygiene 164:21 176:2,24 243:20

i

ic 263:2
ideal 169:5 251:1
identification 109:3 127:8
identified 4:11 5:2 8:22 13:20 17:3 18:14 19:3 20:11 28:24 72:3 74:13,16 84:10,12 100:17 101:9 101:12 103:11 103:17 107:5,9 107:18,23 108:8 110:13 120:3,6,12,19 127:22 136:5 148:2 154:14 154:22 185:13 200:6 202:12 213:19 219:10 221:1,13,16 229:15 233:3 241:3 247:13 259:8 263:21
identifies 37:25 124:10,22 180:2 246:18
identify 6:17 7:25 15:5 24:21 24:24 49:16 50:17 56:22 59:5,10 64:2 79:10 80:14 81:10,21 89:12 96:8 98:6 99:15 100:5,13 107:20 108:5 118:13 123:23 125:10,18,23 129:4,17,23 136:2 145:9 159:10 160:12 175:12 180:6,7 180:15 187:22 194:21 218:17 221:14 232:11 232:19 233:12 236:5,25 240:10 241:6 242:4 245:16 245:19 246:14 246:17 247:3,9 248:1,5 258:3 260:21 264:10 264:21 265:8
identifying 107:17 116:24 122:9 123:8 124:14 127:12 127:25 130:7 160:9 163:11 172:19 247:19 260:15
illustration 215:20
immediately 198:6
impact 10:22 40:22,24 65:5 66:8,16 70:21 71:21 92:1,10 92:23 93:5 161:9 211:19 212:9,17 213:7 213:7
impacting 69:22 135:21
impacts 10:17 41:17 213:11 226:17 260:15

impairments 121:16 123:3 125:23 126:7 127:12 129:2 130:9 135:11 150:3 152:16 159:12 224:5 237:18 247:14
implanted 43:6
implementation 239:12
important 93:25,25 94:13 239:8 251:9 264:13,17
improve 40:12 40:16 69:13 70:2,19 71:4 162:14
improved 71:16 142:1,9
improvement 70:20 137:17 158:2,11,16,18 159:2
improvements 72:16 138:23
improving 160:15
inability 247:15
inaccurately 174:23
include 60:16 61:13 115:23 121:21 126:14 148:18,19 154:4,24 164:20 167:9 252:18 254:3 259:12
included 59:6 63:1,13,22 64:6 64:10,12 115:7 153:21 155:11 167:13 169:10 170:14 171:8 171:22 187:8 254:6,10
includes 23:22 86:12 150:17 168:20 227:14
including 161:7 163:25 175:22 176:11 209:21 219:25
incontinence 249:15
incorporate 137:3 141:1 148:15 258:19
incorporated 140:19
incorrect 15:13 19:22
incorrectly 123:11
increase 165:14
increases 159:20,25
increasing 135:5
indefinite 151:13
independent 93:23
independently 199:23 200:2 201:9
indicate 153:2 153:4
indicated 14:3 14:5 15:18 16:18 18:3,9,11 31:15 52:12 62:23 63:18,21 87:20 100:6,23 100:24 107:8 124:25 125:18 134:9 145:18 147:8 148:1 150:22 152:5 154:1,6 158:17 175:13 179:12 181:15 196:3 209:6 222:5,25 224:15,17 229:20 236:23 239:7 247:10 248:15 249:10 250:9 251:25 253:16 256:5 259:13,17 260:16 261:16 263:24
indicates 14:2 16:1 86:5 222:1 249:5,8
indicating 126:4 160:8
indication 14:7 14:9,16 15:1 105:2 120:2
individual 14:18 16:19 20:15 23:21,23 24:14,21 26:14 27:2,4,24 28:10 28:18 36:10,14 36:23 37:2,5,8 40:7,20,22 41:7 41:13,15,15 42:14 43:1 46:15 49:4 51:6 56:23 57:5,9,19 59:11 60:1,4 69:22 70:7,12 70:17 71:14,22 79:18 86:13 91:25 94:25 95:1 98:3,5,23 98:25 99:7,25 100:7,15 105:2 107:10,19 114:12,13 117:7 142:22

156:5,25
157:10 175:13
179:5,17,18
180:2,9,24
181:8 184:6,7
193:10,13,15
225:13 231:11
233:14,18
241:13 242:23
248:21 259:13
260:16 263:21
264:11,23
265:9
individual's
26:25 40:24
56:14 87:19
259:16
individualized
12:18,23 26:18
27:10 28:4
31:25 36:9
37:11 60:18
64:1,4 65:23
67:19 69:16,20
77:25 78:1
87:18,25
114:15,22
154:19 178:25
179:4 184:9
193:12 225:10
240:22 241:11
261:14 264:24
individually
21:7,10,13,14
22:7 23:18
34:24 35:8,12
74:18 86:17
87:1
individuals
7:24 10:18 24:8
29:7 33:3,18
34:15,17 35:16
36:16 37:6,10
37:12 38:4,13
42:19 43:3 44:5
44:8 45:4 46:6
48:5,10 49:6
50:1,14 75:25
76:4,16 77:8
80:15 81:11
82:9 84:12
99:15 127:14
130:6 151:6
172:17 180:16
197:5,14 220:5
220:16 225:15
237:7,11,17
261:17
infants 33:18
34:18 35:17
information
10:4,13,16,20
10:21 13:25
15:2 17:2 24:14
24:23,24 25:13
25:16 26:10,12
27:5 28:5 31:25
33:7 49:15
52:18 57:10
60:20 61:2,6
64:17 65:4,24
66:5,7,12,14,14
73:3,24 78:2,17
79:14 84:20,22
84:23 92:9,21
108:24 109:13
110:8 114:23
117:20 122:8
123:17,21
124:12,14
125:6,6,7,16,21
125:25 126:3,8
127:5,7 128:24
128:25 129:14
129:16 132:1
133:7,21,22
134:6,11 135:9
135:14,16,17
135:20 140:17
141:1,7,11
142:18,20,24
143:18,19
146:22,23,24
146:25 147:21
148:23 149:2
155:3 156:23
156:24 157:2
158:25 160:7
161:5 163:25
173:10,24
174:2,20 175:1
175:3 179:3
180:1,4,4
183:12 187:11
187:16 192:1,9
194:15,23
195:7,9,12,18
195:21,22
196:6,9,9,13
197:23 201:17
201:18,25
203:12,15
206:9 208:1,4,7
208:12 209:22
209:25 210:2
212:15,16
213:8,10,11
217:23 219:8
220:14,17
222:14,17
225:3,12,21
226:3,4,5,9,15
226:16 229:6
229:25 237:3,5
240:10,24
244:19,20
246:20,22
247:6,11,12,17
260:12,13,21
261:18,20,22
264:21
informed 79:25
196:13 241:7
initial 25:10,18
121:6 194:19

initially 79:7,23
injuries 8:2 52:24 53:1 82:11 83:4 130:7 177:8 180:3 237:8,11
injury 56:14,25 57:6,20 80:16 86:14 87:20 95:7 135:9,22 237:18 243:25 244:22,25 253:1 265:1,2
inpatient 38:15 49:16,19
input 15:4 33:5 57:4 59:9,25 60:12 64:17 73:14,20 74:4 75:24 76:3,17 77:8,13 78:2 116:2,23 117:2 118:4,21 122:8 123:7 124:24 125:16 129:15 129:23 130:4 140:14 146:16 151:24 152:9 153:19 155:20 156:1,13 159:8 163:10,23 164:7,9 187:17 187:21 188:2,3 217:24 218:17 219:23 220:7 220:11 221:1,4 221:9,10 223:3 224:24 225:4,5 225:8,23,24 226:7,13 234:3 235:12 240:14 240:20 241:10 248:4 249:17 259:15,24 260:8,18,22 261:11 263:19
insert 177:19
inserted 148:11
inside 205:2
inspected 204:6
instance 58:11 117:9 131:22 260:24
instances 18:8 26:21,24 27:2 45:15 106:23 108:2 164:2
instruction 82:19
instructions 143:6,7
instructor 56:6
insurance 49:11,24 50:5 104:10,18,25
intended 115:6 167:11
intensive 263:2
interaction 142:2
interested 267:16
interject 214:3
interpret 260:12
interpretation 139:3
interpreted 123:12
interpreting 123:11 214:5
intervention 40:12,16 59:6 60:3 61:11 95:11 156:6 246:8 264:6
interventions 10:19 59:16 71:9,18,20 93:22 135:15 161:6
interview 23:19 23:22 24:13,19 24:20,22 25:10 25:12 26:5,9,14 26:15,22 27:7,8 27:13,15,23 28:1,3,5,23 29:9,12 30:3 182:25 183:6 184:7,12 190:1 190:9 191:20 191:20,24 194:18,19 259:12
interviewers 190:16
interviews 5:4 23:24 24:7,8,10 24:16 25:5,21 26:7 28:20 29:7 29:15,21 30:1 30:19 184:4 192:3
introduce 8:24 18:16 19:5 29:1 72:5 120:5,14 120:21 136:7 185:15 200:8 213:21 221:18
introduced 73:4 201:17
involve 52:22 53:3
involved 23:9 23:12 34:9 36:16,24 37:7 37:16 51:6 52:24 53:4 78:3 84:7,13 92:11 149:1 220:15 221:14 259:16
involves 37:24
issue 10:1,10 232:24

issued 9:19,23 10:7 66:6 84:21 252:14
issues 164:1 238:24
item 16:3,18 96:13 98:14 101:7 103:12 103:18 108:9 117:1 118:5,12 118:14,15 147:18 151:25 152:1,10 164:4 168:19 213:2 217:11 227:21 228:4 238:7
items 15:7 100:18 101:9 101:11,24 102:1 106:16 107:25 116:5 116:23 131:23 227:15

j

j 186:7,10,11 187:3,20,24 188:6,8,13,18 188:20 196:21
january 193:20 193:24 202:16 209:15
john 3:3,7 6:19 68:9,12 215:22
join 26:22 27:1 27:15
jointly 21:7,10 22:2 23:11,18
joshua 2:9 6:21
joshua.g.carp... 2:14
july 194:2,7 222:4,9,12,15 222:19,21,25 223:16,21
jump 198:18
justice 2:10,18

k

kay 1:10 2:1 4:4 6:4 7:12,18 80:3 106:3 118:8 180:20 203:2,4,13 265:16
keep 136:11
keeping 19:14 215:13
kind 25:2 28:9 173:7 188:2 212:24 262:16
kinds 25:25
know 9:2,10 12:2 19:11,16 24:10 26:13 29:4 60:19,20 61:7 71:20 72:10 78:20 79:14 83:11 84:24 87:19 91:4 94:25 95:19 107:15 107:16 113:22 114:2,7 117:22 120:9,15,23 130:22 133:14 134:4,10 137:11 139:10 140:15 147:15 149:19 152:12 161:12 181:16 191:22 193:13 195:25 204:7 204:10 206:2,8 209:18,21 216:1 217:17 232:23 236:13 238:3,24 239:6 243:4 249:6 251:7,10 254:12 257:12 261:16,22 263:1,4,23,24 263:25 264:8 264:23,24 265:6
knowledge 78:5 188:20,22
knows 133:24
kumar 5:25 74:22 76:12 220:1 221:20 221:22 222:2 222:22 223:9 225:4 226:7,13 227:2 234:13 240:3 245:22 246:19 247:3,5 247:8,12,21 248:1
kumar's 222:7 222:16 223:17 223:22,24 224:8

l

l 2:4,20 6:8
l.e. 16:8,10
la 3:10 6:25 182:20
labor 49:11,24 50:5
ladders 177:10
lamacchia 7:1
landmarks 209:11 210:8 210:21 211:2,7 211:13 213:16
large 44:17,18
larry 6:14
lasted 68:5,13 190:1
lastly 17:25 120:21 161:10 228:1
laundry 175:23 176:11 243:4

law 3:4 10:5,14 80:9 88:8 185:6
lawn 175:24 177:9 243:1
lawsuits 44:24
leakage 249:14
leans 35:18
learn 202:24
learned 203:3
leave 166:18,21 168:15,16
leaves 169:2
left 43:14 136:12 143:3 202:7 203:13
legal 3:11 22:1 43:15,19,22,24 44:12,16,20,23 45:6,17 46:25 79:11,12 172:18 173:17
lejeune 1:7 6:5 8:4 9:20 78:7 78:11
length 121:19 263:23
leslie 3:10 6:25 68:10,13 182:16
level 120:2 123:8,11 124:11,16 125:10,18,23 158:4 159:11 160:12
licensed 125:9 200:23,25 201:1,3,5,7 218:12 220:1,2
lieutenant 263:13
life 4:13,18 7:20 8:7,16,19 9:4,12,19 10:19 10:22 12:6,10 15:19 16:10 19:24 20:12 21:3,6,7,8,11 21:13,16,20,23 21:24,24 22:4,6 22:7,12,13,14 22:21 23:4,10 23:11,13,13,17 23:20 25:9,17 25:24 26:1,15 27:11,12,15,20 28:1,2,11 31:23 31:24 32:2 34:25 35:3,4,7 35:12,15,16 37:18,21,25 38:5,6,10,14,18 39:16 42:13,14 42:15,18 43:5 43:19 44:7,20 44:22 45:1,2,5 45:9,11,12,18 45:19,21,22 46:9,13,18,22 47:2,4,6 49:11 49:24 50:1,5 51:1,5 54:17,18 55:1,19 56:8,11 56:18,21 57:11 57:12,15,17 58:17 59:4,6,8 59:16 60:4,5,16 60:23,24 61:3 61:13 63:2,12 63:14,23 64:10 64:12,15,18,24 65:1,5,19 66:2 66:6,8,11,16 70:9,15 71:9,18 71:20 73:21 75:18 76:3,5,6 76:15,19 77:7 77:12,24,25 80:13 81:10,22 82:8 83:1,24 84:3,9,11,14,15 85:3,4,8,14,17 85:21,24 86:6 86:17,18,21,22 86:23 87:2,3,7 87:23 88:2 92:1 92:11,24 93:6 93:24 94:5,12 95:16,21 96:1,6 96:9,14 97:7 102:17 103:13 104:3 107:22 108:4 110:5,9 110:12,20,25 111:3,5,7,20,24 112:5,7,18 113:1,5,9,11,13 114:2,11,25 115:7 116:20 117:21 122:6 122:10 123:24 124:16 125:9 126:11 130:13 134:23 135:4,7 135:22 137:2 140:8,15,19,22 144:7 146:9 147:3,14 148:10,18,24 148:24 153:10 153:21 154:4 154:15 155:2,8 155:12,14 156:5,19,22 157:23 159:1,2 159:7,15,24 160:17,21,24 161:9 164:13 164:15 171:8 171:22 173:3 173:25 174:2 175:4,11 176:6 177:18 178:4 180:1 181:12 182:11 184:5,8 186:8,11,20,21

186:23,24
187:10,12,12
187:13,14,17
187:20 193:11
198:19 199:18
201:15,20,23
207:23 208:5
208:10,14
209:21,23
211:19 212:9
212:21 213:2
214:4 215:15
217:11,24
218:16 219:24
220:8,12 221:2
223:1,4,5
224:10,25
225:4,14,23,25
226:7,11,12,14
226:17 227:14
227:14 228:24
230:22 231:14
231:16 233:21
235:18 237:8
237:13,14
238:11 239:13
240:15,20
241:10 252:19
253:13 254:10
257:6,21 258:1
258:2,5,7,9,12
258:13,14,21
258:24 259:1,4
259:6,9,19,22
259:23 260:7,7
260:10,14,19
260:20,23
261:11 263:19
264:15

lifespan 33:18
34:18

lifestyle 93:23

light 243:5

likely 146:20
176:5

limitations
69:15 70:6,13
126:6 179:23
237:19 247:13
265:3

limited 131:22

line 15:7 72:24
77:5 96:13
98:14 100:17
101:7,8,11,24
102:1 103:12
103:18 106:16
107:25 108:8
116:5,23 117:1
118:5,12,15
147:18 151:8
168:19 202:22
202:23 207:6
213:2 215:11
217:11 227:15
227:21 228:4
238:7

linen 252:10

lines 72:14
204:13,25
210:18

list 4:14,19 9:5
9:13 13:24
14:13 19:24
101:24 102:1
107:13,20
108:4,7 111:19
111:23 112:1,3
112:6,17,25
113:4,8 122:12
122:16,17,18
122:20,22
131:12,15,19
131:23 143:7,7
153:14 194:24
215:5 231:4
244:20 246:8
246:10

listed 18:25
19:23 47:13
48:23 52:21
54:5,8,19 58:4
58:14,20 59:16
62:6,10,11,14
73:22,25 75:25
77:19 88:8
89:19 90:5,18
91:1 96:24,25
97:23 102:20
103:11,16,25
104:7,12
106:17,20
107:24 108:7
108:11,21
111:10,15
112:12 116:7
116:13,15,19
117:5,16 118:4
118:17,25
119:2,5,10,11
119:15,20
122:5 126:2
129:21 134:16
135:2 136:13
136:18 138:14
144:14 147:19
147:22 151:18
153:14 163:5,6
171:18 172:10
172:21 174:12
174:24 194:19
195:6 198:20
198:23 199:6
199:18 200:19
201:14,22
217:11 220:5
222:21 224:12
228:21 229:1
242:2,7 243:15
243:18 245:5
245:10 246:23
250:2 252:21
257:7

listen 27:23

listing 195:1 253:24
lists 16:4,7 43:15 50:19 51:1 58:6 61:25 150:6 161:21 162:1 195:5 230:16 233:21 238:11
litigation 1:7 5:21 6:5 8:4,8 9:20 18:7 45:2 45:10,12,16,22 46:4,13,19,23 47:5,7,8 72:9 73:9 78:7,8,11 82:7,25 113:14 113:17 202:17
little 15:9,10 42:10 44:1 59:2 67:10 71:19 78:9 173:15 247:23 262:9,9
live 24:9 261:16
lived 219:2
living 7:19 121:22 126:15 176:17 177:4 237:1 242:22 247:15
llamacchia 3:14
load 177:1
local 101:1,8 106:20,24 108:3,14
locale 107:6
locate 46:15
located 44:4 208:16 209:7
logs 180:25 181:2
long 25:5 38:3 68:1 183:6 190:1 248:12 262:8
longer 127:9 129:2 130:8 138:18 146:20 180:9,18
look 9:1,9 12:24 16:3 19:11 29:3 34:10,12 52:7 58:3 60:23,24 61:24 65:23 68:23 73:11,13 74:18 77:4 83:25 89:7 91:6 99:6,16,20,24 101:1 108:10 115:2 116:12 120:8,15 121:5 131:1,11 132:22 136:12 137:8 139:23 141:23 144:18 147:13 149:18 151:16 152:11 154:20 155:16 156:23 158:1 159:14 161:11 162:10 163:4,5 164:12,18 165:18 168:18 175:16 178:3 206:8 207:4,5,9 224:1,10 225:11 226:19 230:11 235:14 240:9 245:3,4,9 255:15,17 256:2,16,24 257:5 261:22
looked 61:18 95:3 155:9
looking 77:18 83:9 89:15,23 96:3 99:22,22 111:10 115:4 144:22,23,24 145:1 146:19 148:23 149:16 151:8 157:1 174:10 175:9 204:21 214:10 241:21 242:11
lot 24:5
low 91:9 93:18 93:21
lower 99:13 152:3
lowest 98:12 232:11,19,25
lyons 74:25 220:2 238:14 239:7,16,24 240:2,5

m

ma'am 32:8 45:24 51:18 52:11 101:23 102:12 103:9 103:24 115:4 117:13 132:25 143:9 149:21 159:19 177:16 181:22 183:21 189:23 192:18 195:17 208:21 208:23 210:16 221:7 227:5 241:17 245:25 254:8 255:24 265:20
macchia 3:10 6:25 182:20
machine 177:2
made 14:17 58:12 132:5 148:17 173:23 261:1
mail 197:20
maintain 128:9 129:3 162:14 177:7 198:9

242:25 249:14 249:24
maintained 93:22
maintaining 161:19 226:23
maintenance 175:23 176:12 177:10
make 10:25 24:22 50:6 51:16 56:9,10 56:13 64:11 67:13 73:5 93:2 114:19 116:4 154:3,15 170:5 170:20,21 172:1 190:8 192:15 214:6 225:18 254:12 254:20,23 255:1
makes 57:23 173:9
making 14:24 58:9 61:12 124:15 156:20 264:14
malcolm 47:19 48:2 262:15
malpractice 52:2,6,17
manage 40:7 41:21 42:3,5
managed 40:21
management 33:11,17 34:8 34:15 36:5 44:5 44:9,19,21 46:5 46:11 50:1 93:22 148:9,12 164:22 176:3 176:13,15 244:9 252:22 256:6
manager 46:14 49:23,25 51:2 55:1 125:10 126:11 259:21
managing 177:10
march 89:18,21 136:15 139:2 267:25
marcus 2:17 6:23
marine 90:16 90:20 92:14
mark 132:3,10 132:18
marked 8:25 18:16 19:5 29:1 120:5,14,22 136:7 157:20 185:15 200:8 213:22 215:16 221:18
market 6:15 97:7 107:1,3,6 107:14,17 180:16 232:12 232:20 233:6
markwell 75:3 220:3 233:25 234:2,12,16,18 235:3,11,13,25 236:2,8,10,11 236:13,21 237:22 240:6
maryland 44:4 44:11
match 157:8
material 66:3
materialize 207:22 208:8
materially 65:7
materials 195:2 195:5 215:6
math 207:3
matter 202:25 203:6 251:13 258:22,22
mcelhiney 4:13 8:10,17 9:5 14:3 29:9,16,21 30:18 32:5,12 74:20 75:9 78:14 81:24 83:3,8,16 84:4 89:15 90:8,11 90:14 91:7,13 96:20 97:18 117:19 121:17 121:22 122:2,6 123:9,24 124:3 124:11 125:1 125:11,13,17 125:19,24 126:15 127:9 127:23 129:1 129:18,24 133:1,5,13,17 134:9,14,23 135:5,8,13,15 135:23 136:13 137:2 140:20 142:19 144:1,2 144:9 145:5,10 146:5 147:14 148:7 150:1 151:18 152:15 153:11 154:11 155:12 157:24 158:2,17 159:1 159:3 160:20 160:25 161:2,3 161:6 163:12 163:25 164:8 164:15 165:1,3 165:6,9,20,24 165:25 166:4,5 166:8,12,13,18 166:20,23,25 167:1,14,20,23 168:5,11,12,14

169:1,2,19
170:3,6,8,16,18
170:20 171:1
171:11,25
172:2,5 175:16
176:16 177:6
178:4 179:1,3,9
179:12,21
182:9,12,13
183:1,16,19,23
184:1,15,16
186:16 188:25
189:14,17
192:11,19
193:2,20 256:8
256:12,17
257:6,11
258:22
mcelhiney's
9:24 10:2 12:6
13:15 73:15
76:25 90:2,19
91:18,21 92:7
92:13,15 93:10
101:20 102:8
104:23 111:20
111:24 112:4,7
121:15 123:2
128:17 133:10
133:23 134:8
135:18 136:21
138:24 139:4
142:9,14
143:16,23
144:7 146:14
147:1 153:22
158:21 159:15
160:5,16
161:18 164:13
165:5 166:9
174:10 178:3
180:13 182:10
185:18,24
186:6 225:6
241:21
mcelhineys
183:7
mcelhiny 5:13
md 55:4,5
136:19 143:12
260:1,4
meal 164:21
176:2,19,20,22
243:23 244:3,4
244:6
mean 17:7,12
17:23 19:7
37:22 41:6 46:7
48:7 53:6 61:14
78:12 86:3,10
87:12,16 93:19
94:20 117:5
133:15 134:4
139:22 182:6
183:9,9 185:8
203:21 205:25
206:1 238:23
244:21 253:7,8
253:9
meaning
253:10
meaningful
40:24
means 86:5
132:18 165:24
166:4,12
182:13
measure
179:20
med 79:12
256:12
media 66:20,24
105:12 106:9
149:8,14
219:15,19
medical 5:13,16
14:15 16:5 22:1
36:5,12 37:3
43:15,19,22,24
44:12,16,20,23
45:6,17,19
46:16,25 47:19
48:3 49:16,18
49:20 50:2,6
52:2,6,17 55:6
55:8,10 56:9,10
56:12,19 57:16
59:5,5,15,17
60:2 61:5 64:9
64:11,23,25
78:16 79:11
81:1 83:10 88:7
88:13,17,21
89:17,21 90:15
92:13 93:15,22
94:2,7,9,14,18
94:19 97:17
102:5,19 104:1
105:3 108:21
109:14 110:2
118:10 119:4,9
119:14,19
135:14 139:20
140:12,18
141:4,6,11,13
142:11,16
144:13,15
146:18 157:1
158:19 168:21
172:18 173:17
174:11 194:14
218:5,8 220:13
221:12 226:4
239:1 253:1
259:9,10,24
262:15,22
263:4
medically
65:10,20
218:14
medicare
104:10,18,25
medication
65:17,18 138:2
138:11 252:12
252:22 253:21

253:25 254:5 254:23 256:5,7 257:7,11
medications 49:21,22 55:14 55:16 57:13,14 117:10,15,19 252:16,25 253:5,15,23 254:12 255:2
meet 57:18,22 202:2 205:13
meeting 67:12 67:13,15,23 68:5,9,11,12,17 202:4
meetings 67:6,8 67:20 68:1,14
member 184:11 257:20,22 259:14
members 26:22 26:25
memorial 47:12,15 48:15
memphis 209:11 210:8 211:2,6,12 213:16
mentioned 37:17 186:19 264:12
mentioning 95:9
mere 170:16
message 203:2 203:13
met 182:12 205:16
method 263:18
methodology 88:1 97:14 100:10 156:2 156:20 265:7
methods 85:16 86:5
metoprolol 138:6 142:2
michael 113:17
microphone 247:23
middle 250:23 251:5
midodrine 117:22 142:3
mile 24:10
military 262:11
milligrams 257:2
million 245:5 245:10
mind 215:14
minute 124:8 147:24 229:7 249:7 264:11
minutes 68:3,5 68:13 99:9 100:8 157:18
mismanaged 252:25 253:4,6 253:8
mispronuncia... 138:11
mobility 162:14 164:23 168:21 169:11,13,15 171:18 176:3
modification 208:3
modifications 199:20,24 200:3 201:18 206:21 208:2 209:8,17 212:23 218:13 218:18 219:9 261:21
moment 61:22 144:18 196:11 198:19 265:14
monitor 46:15 166:9 176:21
month 39:1 126:24 254:7 254:22
months 143:12 144:1
morning 6:2,21
mos 262:11
motor 142:1,9
move 15:16 55:17
moved 24:7
movement 36:6 40:22 41:17
movements 40:8,9
moving 162:23 177:11
mowing 177:9
mri 152:23
multiple 93:8 95:3 139:11 196:1 231:7,19 231:24 232:5 249:12 264:20

n

n 4:1,1 6:1
name 7:17 17:5 17:12 62:10,14 109:8,8 115:23 116:7,13,15 117:4 118:17 118:25 119:2,5 119:10,14,19 136:18 177:19 206:2
names 58:14 107:24
naming 59:23
nancy 186:7,10 186:11 187:3,4 187:20,24 188:6,8,11,13 188:18,20 196:21

nap 166:23
narrative 88:9 195:12,18,24 208:15 248:17
national 209:8 210:7
nature 23:4
near 198:6
necessary 187:21 218:14 221:4 259:25 260:3,9
necessity 49:17 49:18,21 50:6
need 8:1 11:19 12:9 14:7,9 15:5 25:13 34:12 41:8 46:17 49:19 57:2,7 59:11 60:6,8,11,15,19 61:15 65:2,4 66:7 71:22 80:15 82:10 83:3 91:24 93:1 93:7 94:4,19 95:3,14,24 96:16 116:4 125:11 127:23 127:24 128:8 128:11 129:24 130:8 135:20 142:22 143:3 154:11 160:12 161:8 201:15 201:19 208:4 208:11,12 213:3 249:22 250:8,19 262:24 265:18
needed 32:1 36:24 50:3 56:22 63:22 81:11,21 123:9 125:14 129:5 142:3 169:21 221:15 229:24 263:5
needs 24:21 27:6 44:6 45:4 45:13,14 56:23 57:4,8,18,22 60:1 65:16,18 70:21,25 71:15 71:23 86:14 124:12 135:6 142:19 147:1 160:18 161:2 164:8 167:2 168:15,17 170:7 171:2,11 172:3,5 175:13 182:17 191:8 193:14 220:18 238:19 239:7 239:11 247:20 251:12,14,19 252:3,8 255:5 261:2,2
neither 267:11
neurological 53:20 54:3 138:13
neurologist 36:7,19,19 37:1 146:14 220:1 221:22 256:13
neurology 37:13 58:4,5,10 58:23 62:6,8,22 63:8,11,17 87:16 111:11 115:14 116:12 116:14,16
neurosurgeon 57:22
neurosurgery 37:13 62:13 150:10
never 41:18 51:10,18 52:15 53:11 55:6 95:10 105:1 204:6 205:19 205:22 207:22 208:8 264:5
new 2:12 10:4 10:13,16,20 66:5 84:23 135:14 142:20 146:22 201:17 208:12 212:15 226:15 264:6
night 249:9,11 249:12 250:11 250:17,18,23 250:25 251:3,6 251:8,15,19 252:5,6,6,8
nights 251:21
nighttime 248:22
nonprofit 44:3
normal 198:4
north 1:2 2:13 6:7
northwest 6:9
notary 2:5 266:17 267:1 267:22
notates 244:23
notating 174:23
notations 33:6
note 90:10 139:11,23 167:23 208:15
noted 116:25 117:3 144:8 175:6 180:23 188:16 212:7 215:24 266:4
notes 5:14,16 26:6,13 28:2 32:4,11,18,23 33:1 139:11,25 142:8 151:13

184:22,25
185:10,22
186:1 189:1,6,9
192:6,9,18,22
193:1,5,19,23
194:1,5,10
196:17,25
197:25 198:5,5
198:8 234:20
234:22 235:2,5
239:18,20
255:18
notice 2:2 4:21
18:21
november
194:10
number 4:11
5:2 12:16,17
14:22 34:14
37:6,10,14,15
38:14 66:20,24
67:8,18 86:18
86:22 89:12
100:16,21
102:23 105:12
106:9 110:2
137:12 141:15
141:19 143:5
145:6,17,24,25
146:5,7 149:9
149:14 153:2,4
173:17 177:12
180:7,15
185:17 192:16
192:22 193:1,5
193:16,22
194:1,5,9
197:24 224:3
240:9,17
245:17,19
249:5,17
255:22 256:16
256:25 260:24
numbers
137:10 144:20
181:9 207:2
214:14 235:9
numerous
259:17
nurse 7:20
35:15 37:18,21
38:2,9,10,12
39:16 49:14
50:4 54:17 55:2
65:19 85:14,21
125:9 126:11
252:21 253:25
254:3,6,10,25
257:21 258:2,5
258:7,9,13,14
259:7,21 260:7
260:10 262:13
262:14
nursing 38:17
39:7 119:7,10
119:23 122:16
122:17 126:25
168:9 242:6,12
242:18,20
243:18 254:22
258:25 262:16
nw 2:4,20

o

o 4:1 6:1
oath 11:2
object 51:21
64:13 72:23
130:20 156:7
174:5 211:22
211:23 212:11
258:23 260:2
261:5,13
objection 41:3
82:15 92:18
93:11 94:16
117:24 123:14
123:19 139:7
148:20 159:5
173:12 213:4
214:3,7 215:10
215:25 217:4
217:14,21
237:24
objections
213:18 215:21
215:24
observation
248:8,12
observed
248:15
obtain 25:14
57:4,8 174:23
180:25 181:5
231:7,18,24
232:5 236:18
238:5 240:20
260:18 264:2
obtained 32:1
39:10 74:3 78:2
98:12,13
104:12 123:21
124:13 126:9
127:7 129:1,14
135:10 149:2
159:8 160:7
174:20 175:1
180:1 192:10
195:7,21
231:21,22
232:2,14 233:9
233:16 236:16
237:4 245:18
247:7,11
obtaining
173:20,23
220:14
occasions
184:10
occupational
161:23 162:4
227:9,22,24
230:14 231:25
232:21 235:14
235:19,21,24
236:8,12,14,17
236:19,20,22

236:23 237:3 237:23 238:6,7 238:9 262:12
occur 78:19 186:20 207:12 207:19 228:16 229:4,13 242:2
occurred 54:21 78:21,25 196:2
occurs 134:25
offer 191:18,25
offered 22:9,16 187:25
office 10:14 79:14 80:9 88:8 136:15 139:18 185:6
officer 267:3
oh 26:18,23 34:12 80:8 132:20 149:24 214:14 234:8 247:24 260:10
okay 11:19 12:1 13:18,22 14:2 17:16 18:10 19:10 20:13 21:5,8 23:3 25:9 31:8 32:3 32:16 33:4,9,14 33:25 37:24 39:3 43:8 50:15 50:18 51:10 53:2 54:23 58:14 59:2 63:9 65:13,16 67:24 69:12 71:7 72:12 75:21 77:3,15,15,18 78:13 79:3 80:10 85:2 87:6 87:10 91:20 92:4 97:12,22 98:14 102:22 103:6 108:10 109:3 110:18 112:25 117:22 124:7 128:14 129:10 132:20 136:9,9 137:11 141:21 143:8 148:5 149:24 149:24 150:16 152:13,13 155:6 161:15 162:11,17 165:7 171:16 172:9 176:18 178:2 183:16 185:9,21 186:5 188:9 189:8,12 191:5 192:17 194:13 196:11 203:25,25 204:9,12 208:24 210:17 216:25 229:9 230:8,13 234:9 234:22,25 235:17 239:20 239:23 240:2 241:18,19 245:16 246:7 247:25 253:19 256:1,1 257:14
okeechobee 3:5
oklahoma 39:4 54:14
old 33:22 34:2,5
once 148:10 213:8,9,10
ones 123:5 172:20 174:15
ongoing 135:5 148:12
online 55:22 56:2
onward 34:6
open 191:20,25
operator 6:2,13 7:2,4,8 35:23 36:1 66:18,22 105:10 106:7 149:6,11 181:23 182:1 182:18 219:13 219:17 255:8 255:11 265:14
opinion 51:11 51:19 96:12 260:22
opinions 52:1,5 52:16
opportunities 222:13
opportunity 191:18
opposed 184:16 240:7
option 154:24
order 38:1 245:16 259:4 265:22
organization 12:20 77:14 109:10 257:23 257:25 258:1,3 258:10,17
orthopedic 263:3
outcome 135:6 137:21 240:17 267:16
outcomes 95:5 161:7
outlined 10:19
outpatient 38:15
outside 37:1 45:22 46:18,22 47:4,7,7 54:8 54:13 61:4 68:12 84:7,12 138:10 157:19 181:11 196:24

220:5,6 248:2 256:12
overlap 167:12 176:7 241:23 242:1,4
overstate 207:25
own 27:8 33:6 183:17 190:7

p

p 6:1
p.m. 105:15 106:1,8 149:8 149:13 181:24 182:2 219:14 219:18 249:9 255:9,12 265:15,24
packet 214:23 214:23
page 11:1 12:5 12:7,10 43:9,11 47:11 54:6,20 61:21,24 72:10 73:11,12 74:16 76:1 83:25 88:4 88:5 89:8,23 91:3,5,7 97:23 102:7,9,11,12 107:13 108:19 121:9,11,13 124:5 131:3 137:9 138:12 138:15 141:24 144:19 147:4 147:18 148:3,6 149:20,23 168:25 172:22 174:9 175:18 177:13,15 182:5,6,6,8,10 185:24 186:5,6 193:22 199:4,7 199:10 202:17 202:22,23 204:9,14,24,25 204:25 207:4,5 207:6,7 208:19 208:25 210:10 210:19 214:1 214:13,14,17 214:20 215:16 215:18 216:2,4 216:7,10,12,14 216:16,18,20 216:22,24 217:1 219:22 219:23 221:25 233:21 234:25 235:4 241:21 242:3 245:21 245:23,24 248:18 253:17 253:20
pages 5:14,17 89:13 177:17 177:17 235:2
pain 91:9,13,21 92:7,15 93:18 93:19,21
palm 3:6
paragraph 73:13 75:25 84:2 85:5,19 88:6 91:6 137:13 138:1 177:18,24 178:1 182:9 186:5 199:9,11 208:25 209:1 248:19 256:25
parameters 41:22 42:4,5
parentheses 178:16
parkinson's 7:25 22:8,15 23:5 36:5,14,16 37:3,5,8,12 39:19 40:13,18 40:25 42:8,15 42:19 47:17,21 48:2,5,19,25 49:4 50:7,23 51:6 52:22 53:3 53:5,8,15,24 55:11,13 57:21 61:25 66:1 69:12 70:1,7,14 70:19 73:8 80:19 81:7,12 83:5 86:3,10 87:8,12,14 91:8 132:4,11,18 137:14 139:5 141:25 145:7 145:12 150:3 152:16 160:11 179:23 180:12 218:22,24 224:4 225:16 237:4,14 244:18 245:15 256:6
parkinsonian 138:18
part 15:1 24:20 28:22 88:6 93:25 115:6 146:13 147:10 194:13 223:2 225:19 261:11
participate 27:13,23
participation 230:23
particular 24:9 34:21 35:18 36:10 57:9 58:11 60:3,12 60:21 61:10 63:16 64:2 78:8 94:8 95:11 96:2 96:5,13,16 97:12 98:4

105:3,4 117:5 118:3,13,20 152:10 154:18 155:21 156:4,6 164:4 179:16 179:17 187:19 233:14 240:18 262:20 263:20 263:25 264:2
particularized 59:15
particularly 250:18
parties 2:7 267:12,15
parts 147:6
party 205:13
passed 39:10
past 67:3 94:9 188:11 219:7 239:10 263:22
patient 42:9,23 43:6 48:19,24 50:8 57:22 63:11 65:9,16 65:17 66:1,10 70:24 71:8 95:10 137:13 137:16,20 264:15
patient's 31:22 69:12 70:1,4,5 70:19,21 71:3 71:16 72:16 94:1,6,13 138:2 228:13
patients 33:25 34:9,10 35:9,13 39:20 47:16,21 48:1 50:23 55:9
pay 181:20
pediatric 33:25 34:9 35:13 262:21
pending 11:22
pennsylvania 6:16
people 77:12 173:2 181:18 237:13
percent 206:19 206:24 207:9 207:10,11,17
percentage 34:8 96:5,12 97:2,13 98:2
percentages 97:10 98:9
percentile 95:18,22 96:2,8 97:6
perform 180:9 180:18 201:1,3 233:6
performed 43:5 137:18 171:7 171:21 180:3 247:16 249:23
performing 180:11,22
performs 205:11
period 39:2 51:8 105:5 262:5
periods 160:13 167:14 169:2
person 23:19 23:25 55:22 156:18 184:6 203:5,18,24 211:12 241:13 244:14
personal 121:23 126:16 164:21 165:21 167:16 176:2 176:23 243:20
personally 45:23 46:2,25 179:1 204:6 205:19,22 210:3
peters 205:23
peterson 4:18 5:19 8:20 9:13 29:12,16,22 32:6,12 74:21 81:20 83:3,8,15 113:2 178:11 179:4,13,21 186:15 188:25 189:13,17,19 190:2,6,10,14 190:15,17,18 190:21,24 191:2,6,12,13 191:14,16,18 192:11,23 193:6,23 194:2 194:6,11 198:1 199:5,19 200:12 202:25 203:2,4 204:6 204:15 205:14 206:4 207:24 208:11,22 209:7,17 211:14 217:12 218:19,21 219:2 220:14 221:12 222:2,9 222:11,23,24 222:25 224:2 224:11,18 225:2 226:6 227:3 228:24 230:22 231:1 233:10 234:4 236:23,25 238:16 239:4,9 242:3 243:10 243:19,19 244:11,24,25 245:14 247:11 248:6,9,13,14

248:20 249:3,6 249:9,23 250:1 250:9,22 251:21,23,25 252:1,7,15,25 253:4,12,20 254:1,14,17 255:2 258:22 261:9
peterson's 8:13 10:8,11 13:15 30:18 73:16 75:22 76:1 78:14 81:18 100:24 101:3 103:7 104:23 112:9,16 113:5 113:9,11 178:10 191:8 191:10,11,16 191:19 198:15 198:16,19 205:3,17 208:16 210:24 211:4,19 218:4 218:8 219:22 219:25 220:8 220:12 221:22 222:14,19 223:15,20 224:25 225:9 226:22 231:8 231:20,25 232:6 234:8 235:6 238:8 241:15 244:17 245:8
petersons 199:24 200:3 203:24 204:20 205:8,20 206:16 207:18 219:5 226:5 248:11 261:15
philadelphia 6:15
phone 33:2 68:18,20 196:7 197:15 203:1 204:3 234:15 234:17 235:10 240:6 241:8,9
phrase 36:13 86:2,9
physical 75:1 161:19,22 162:1,2,17 220:2 226:23 227:7,15,18 228:21,25 229:4,5,11,16 229:20,22 230:14 231:8 231:19 232:21 233:22 236:2,6 236:10 238:3 263:24
physically 169:19 204:16 205:2 252:2
physician 16:5 17:7,13 31:23 37:2 41:7,11,16 54:24,25 59:24 60:21 72:25 97:19 102:5,19 104:1 108:21 117:1,15,23 118:3,10,20 122:24 136:22 143:17,24 144:3,10 145:5 145:7,11 146:6 146:11 151:6 153:23 174:11 224:4,19,20,22 225:6,9,19 259:25 260:4 260:17 264:1
physician's 17:5,12 117:4 118:16,25 119:2
physicians 36:15 59:17 109:18,22 110:24 111:16 112:4,6,12,17 112:20,21,22 112:23 113:1 114:1 116:25 117:18 122:12 123:17 135:10 156:4 157:5,8 220:22 225:22 259:24
pick 177:1
picking 148:15
picture 264:14 264:18
piece 25:16,18
pieces 24:23,24 25:13 26:12 125:8 129:16 186:23 237:5 259:11
pill 252:19 254:1,9,11,14 254:24
pills 254:21
place 24:19 41:2 51:7 255:6
placed 41:12 135:13 149:3 152:24 254:24
placement 41:1 41:8 66:2,10 69:13 70:2,4,20 70:22 71:17 134:20,24 135:18,24 138:24 139:6 148:8
plaintiff 12:19 121:13 180:11

180:21 181:1,6
181:11 194:18
195:19 197:13
plaintiff's
177:19
plaintiffs 3:8
3:15 6:20 8:3
30:10,19 32:20
72:8 73:8 79:4
83:21 88:14,17
88:22 90:23
107:7 113:12
113:16 192:3
192:10 194:14
195:14 197:2
197:17 198:6
198:11
plan 4:13,18
8:16,20 9:5,12
9:19 10:1,10,23
12:6 15:19
21:11,20,23
22:4 23:13,14
23:17,20 25:10
25:17 26:15
28:11 31:23,24
32:2 42:15 43:6
44:20 45:18,20
57:11 58:18
59:4,7,9 60:4,5
60:17,23,24
61:3,13 63:2,12
63:14,23 64:10
64:12,18,24
65:1,2,6 66:3,6
66:9,11,16 70:9
70:15 71:9,18
71:20 75:18
76:3,5,6,15
77:7,12,24 78:1
78:4 80:13
81:10,22 82:9
83:1,24 84:3,9
84:11,14,16,19
84:24 85:1,3,4
85:6,23 86:6
87:2,22 92:2,12
92:24 93:6 94:5
96:7,14 97:7
102:17 103:13
104:4 107:22
108:5 110:15
111:20,25
112:5,18 113:2
113:6,9,11
115:7 116:20
117:21 121:21
122:6,10
123:24 124:16
126:14 130:13
134:23 135:4,7
135:22 136:1
137:2 139:21
140:8,15,20,23
141:23 143:1
144:7 146:9
147:2,3,14
148:10,18,24
153:11,21
154:4 155:2,8
155:12,14
156:6,19,22
157:23 159:1,3
159:8,15
160:17,21,24
161:9 164:13
164:15 167:13
171:8,22 173:3
173:25 174:2
175:5,11 176:6
177:19 178:4
181:14 184:5,8
186:23 187:12
187:13,15,18
187:20,23
193:11 198:20
199:19 201:15
201:20,23
207:24 208:6
208:10,14
209:21,24
211:20 212:10
212:21 213:2
215:5,16
217:12,24
218:16 219:24
220:8,12 221:2
223:1,4,5
224:11,25
225:4,11,14,23
225:25 226:8
226:11,12,15
226:17 227:14
227:14 228:24
230:22 231:14
231:16 233:21
235:18 237:9
238:11 239:13
240:15,21
241:10 252:19
253:14 254:10
254:17 257:6
258:25 259:4,6
259:10,19,23
260:7,14,23
261:12 263:19
264:16
planner 7:20
19:25 20:12
25:24 27:12,12
27:15 28:1
35:15 37:18,22
38:1,11,18
39:17 51:2,5
55:1 56:8,11,18
56:21 57:12,15
57:17 65:19
96:1 113:13
125:9 126:12
154:15 182:11
186:8,11
187:13 214:4
259:22 260:7
260:10,19,20
planners 21:25
22:13 27:20

28:2 42:13 86:22 95:21 186:22,24 187:10 257:21 258:1,2,5,8,9
planning 12:11 38:5,6 44:21 54:17,18 55:20 85:8,15,17,21 85:24 87:23 95:16 110:6,10 110:12,21 111:1,3,6,8 112:7 148:24 258:14
plans 8:8 10:19 21:3,6,7,8,9,10 21:13,16,24 22:2,6,8,12,14 22:21 23:4,10 23:11 26:1 34:25 35:3,5,7 35:12 38:4 42:14,18 43:19 44:22 45:1,3,6 45:9,11,13,21 45:22 46:4,13 46:18,22 47:2,4 47:6 59:17 64:16 73:21 76:19 86:17,18 86:21,23 87:3,7 88:2 93:24 94:12 96:9 114:2,11,13,18 114:25 180:1 186:20 225:11 237:13,15 258:12,21 259:1
platform 24:7
plays 213:9
please 7:17 11:16 12:3 15:13 17:10 19:12 25:8 29:3 33:16 35:21 43:9 44:2 47:11 51:13,23 52:4 65:15 67:10 68:24 70:10 73:12 76:7 82:3 84:1 91:16 96:10 97:22 102:7 108:20 111:9 112:11 118:22 121:10 124:8 128:12 147:25 150:23 177:14 190:13 219:22 221:6 223:19 226:18 229:7 234:7,11 241:14 242:4 243:13 245:22 249:7 256:7
podiatry 97:23 108:11,22,25 150:14
point 10:3 11:19 28:8,15 42:24 72:22 75:17 76:2 79:13 117:21 124:1,20 129:6 137:7 157:21 188:3,9 219:7 222:3,9 253:1 262:21,22
points 215:4 265:8
portion 5:5 72:7 88:9 164:15 175:18 187:19,22 188:13,18 207:23
portions 195:8
posed 191:7
position 20:7 20:14 21:25,25 207:16
possession 29:24 30:8
possibility 69:18 71:3 155:7 158:15 189:7
possible 114:12 130:16 134:16 134:18 189:5
possibly 156:25
post 135:18
potential 160:19 161:3 174:22
potentially 10:18
practice 61:7 85:7,8,15,17,22 85:24 86:3,4,6 86:10,11 87:11 87:12,13,17 98:3,17 99:3,23 100:5 101:18 103:20,22 107:9 198:4 231:10,22 232:2,8,14 233:2,12,13,17 242:24 258:4 258:11,14,16 258:20 263:15
precise 146:5
predate 90:3,8 90:16,21 91:12 91:20 92:6,14
predating 90:11
predetermined 131:23
preliminary 84:3,15 85:4 211:2

prep 164:21 176:2 243:23 244:3,4,6
preparation 67:22 68:16 69:1
prepare 8:7,16 8:19 21:6,24 22:2 25:25 44:22 45:6,18 45:21 46:4,13 46:18,22 47:4 59:4 66:2 67:7 68:15 77:23 80:13 82:8 83:24 114:11 176:20 214:22
prepared 4:13 4:18 9:5,12 21:4,14,17 22:7 34:24 35:3,8,12 43:5 45:1,3,9 45:12,12,16 47:1,6 86:17 193:15 204:8 214:24
prepares 205:12
preparing 23:9 23:11 38:3 68:21 69:5 137:4 155:8 156:5,19 157:23 181:2 184:5 193:11 195:8,23 209:19 220:8 253:13 259:18
prescribe 55:14 55:16 57:13,14 57:16
prescribed 117:18 255:3 256:6,8,12
present 2:7 19:25 68:8,9,10 138:19 165:23 166:3,8,11,17 166:23 170:17 186:22 189:12 205:2 251:22
presentation 54:5
presentations 54:7
presented 78:16 83:23 207:21
presents 137:14
preventing 11:5,8
previous 114:20
previously 104:24 106:4 107:8 177:21 178:6 186:12 186:19 247:16 249:23 256:5
prewritten 131:12
price 97:6 233:1,3
prices 99:13 104:12 107:4
pricing 95:17 97:8 99:13,16 101:12 107:1 201:13,21 231:7,19,21,22 231:24 232:3,5 232:9,15
primary 16:4 36:24 37:1 61:25 96:24 97:3,19 115:9 115:20 116:18 136:22 143:16 143:23 144:3 144:10 145:6 145:11 146:6 146:11 151:5 153:22 224:3 224:11,19,20 224:22 225:6,9 225:19
prior 52:1,5,16 52:20 67:21 91:8 141:5 177:8 180:3 211:3 244:22 244:25
privileged 82:16
probably 30:15 78:25
procedure 137:22 263:15
procedures 148:7
process 28:23 38:17 75:9,21 88:7 102:16 137:20 138:4 173:8,19 175:2 175:6,7 212:25 214:18 258:25 259:7
produce 198:9 239:20
produced 18:25 30:4 185:18 189:2,3 235:7 255:19
production 179:16
professional 14:11 19:24 33:10 53:14,18 53:22 54:1 118:10
professional's 119:4,9,14,19
professionals 36:12 37:4 263:19

prognosis 56:12 56:20
program 38:25 161:18 226:22
programmed 41:18
programming 62:17
programs 44:10
progress 228:9 228:13
progressed 244:18
progression 160:10 180:12
project 80:1 165:11 169:7 207:12,17
projected 70:8 70:15 114:12 160:24 161:1 207:12,17
projecting 95:13
projection 160:15
projections 65:8
projects 214:24
pronounce 230:18
proper 139:15
properly 148:12 253:22
property 129:3 177:8 204:16 210:24 211:4 242:25,25 249:24,24
proposal 210:20 213:2
proposals 211:18 212:9
propose 200:2
proposed 199:24 209:17 211:14 215:2,5
protocol 215:23
provide 15:6,11 23:15 31:18 44:8 46:5 48:1 55:10 57:18 59:25 69:5 74:11 76:14 81:10 82:25 90:24 100:6,21 109:23 127:13 127:25 128:1 131:25 139:13 140:14 145:24 156:3 158:10 158:20 167:13 171:24 172:4 172:13,18 174:17 181:15 187:7,17 188:2 197:21 199:21 212:22 215:1 220:17 221:1 225:23,24 226:13 230:3 235:5 248:5 254:25 260:22 260:22
provided 14:16 20:4 30:10,12 30:19,21,25 31:10,12,14,20 32:13,13 33:17 34:15 48:4,10 49:3,6,25 52:18 58:19,22 60:12 66:11 67:2 76:12 88:7,14 88:18,22 103:3 108:24 109:17 116:1 117:2,2 118:3,21 122:8 125:5 126:3 127:5 129:18 130:11 139:16 140:25 141:5 141:10 146:16 147:21 148:9 148:22 152:8 153:19 155:20 155:20 156:1 156:12 164:7,9 170:5 179:3 180:8 181:14 184:1,15 185:3 185:4,5,6,11 188:4 194:15 195:22 197:16 198:11 203:12 203:14 212:15 213:10 229:25 234:3,22 248:4 250:6 254:16 259:9 261:19
provider 13:10 14:15 16:24 17:3,6,10,11 57:2,3,8 61:10 62:6,11,24 63:21 64:9 74:16 97:14 98:4 100:2 105:7 106:19 107:21 108:5 111:10,15 112:13 115:25 116:1,21 118:20 136:18 148:25 149:3 230:11,16,16 230:20,21 231:4,12,23 232:3,9,15 233:1,3,9,14,18 233:19,20 240:24 263:18 263:22

provider's 62:10,14 65:3 115:23
providers 37:7 37:13,14,14,16 56:22 59:10,21 60:25 61:5 63:10 73:15,16 73:19,24 74:5,7 74:10,13,23,24 75:18 76:4 98:5 98:11,15,15,18 98:19,20,22,24 99:2,4,5,7,8,11 99:15,16,24 100:5,12,14,17 100:21 101:2,5 101:8,9,15,18 101:24 102:15 102:20 103:1 103:23,25 104:5,13,17,21 106:20,24 107:5,5,9,13,18 107:24 108:4 108:14 109:4 123:5 128:9 130:14 142:23 152:20 156:16 157:3,12,23 172:21 173:20 175:10 196:6 196:10 218:5,9 219:25 220:11 220:15,19,22 220:25 221:4,8 221:9,13 231:8 231:19,25 232:6 233:7,12 233:15 259:15 263:16 264:9 264:10
provides 44:4 44:18,20 110:1 115:17 140:5 146:9 170:24 177:19 178:4 178:24 179:2 181:17 249:21
providing 14:25 15:2 48:19,24 97:15 156:13 165:2,8 165:25 166:5,7 166:13,20 184:13 228:20 233:10 264:24
provision 170:19
proximity 98:5 98:23 99:6,11 99:25 100:7,9 103:23 107:10 107:19
public 2:5 266:17 267:1 267:22
publication 85:22 178:15 178:23
publications 85:13
published 53:15,19 61:7 85:7,11 180:5 181:3
publishes 258:10
purpose 161:17 215:20 226:21 257:24
purposes 15:19 133:21
pursuant 2:2
put 7:1 26:10 60:5 139:19 168:9 259:5 260:12
putting 124:15 126:10 247:17

q

qualified 64:11
quality 173:7
quarter 138:14
question 11:21 11:22 28:6 29:18 30:15 32:15 41:4 42:2 51:17,22 52:3,4 52:15 54:6 56:17 59:19 64:14,21 65:15 67:10 69:17,24 69:25 70:10,11 72:15,24 75:23 76:23 81:13 82:21,23 83:13 86:8 87:10 91:15 92:3,19 93:12,17 94:3 94:17 96:20 97:10 104:14 107:11 114:20 116:19 117:25 118:1 121:12 121:12 122:2,4 122:14 123:20 124:19 126:13 126:22 127:1 127:15 128:7 129:7,11,11,12 129:13 130:21 131:12 132:1,9 132:10,19,22 132:25 133:3 133:12,16 134:19 139:8 143:2,22 144:20,21,24 145:1,4,9,13,15 145:18,20 147:6,20 148:21 149:17 149:18,21,22 149:25 150:17

150:20,24
152:11,13,19
153:6 154:9,10
154:18,20
155:5,10,13,21
156:8,17
157:13,14,17
158:1 159:6
160:3,22
161:12,15
162:10,12
167:25 168:2,4
170:15 171:19
173:13 174:4,7
174:21,25
176:4 190:22
191:15,23
195:16 202:24
203:4,8,11
204:14 205:1
207:8 210:20
210:23 211:1,6
211:22 212:4
212:12 213:5
214:4 215:11
217:5,15,22
221:25 222:1
224:1 226:18
226:19 227:1,4
231:17 232:17
232:24 234:11
237:20,25
243:12 246:2,4
246:7,7,9,12,15
246:18 247:2,4
247:8,25 253:3
253:10 256:2,4
questioned
230:25
questioning
72:24 211:23
215:11
questionnaire
5:7,11,24 74:15
75:5 76:11
120:10,25
121:5,6,7,9,10
126:4 128:3,20
128:23 129:21
129:23 131:2,6
131:9,12,16,20
132:23 133:5,8
133:10,22
134:4,7,12,15
136:24 143:20
144:23 145:1
145:16 147:5
147:22 150:10
150:16 152:12
153:3 154:14
154:24 155:1,9
156:17 157:19
164:5 221:19
222:4,6,17,18
223:2,8,10,22
234:5,13,15
240:3,8 241:2
245:22,23
246:13 255:16
256:3,21
questionnaires
58:25 74:4,8,11
74:20,22 75:11
75:15,19 121:2
122:11,15,18
122:23 123:1
127:17 129:25
130:3,11,19
141:1,3,5,9
149:23 151:9
152:21 161:10
161:11
questions 5:9
11:12,16 26:17
59:3 76:10 77:5
82:1,5,13,23,24
93:8 120:17,24
122:25 126:18
127:21 131:4,5
131:8 141:14
157:10 161:11
168:8 183:17
183:18,24
184:2,12
188:10 190:4,6
190:11 191:7
218:16 241:23
255:15 257:15
257:16 260:25
265:10,13
quick 35:20
181:21
quite 30:14
78:20 202:11
218:24 237:20
quote 72:15
121:15 137:21

r

r 6:1
raleigh 2:13
ran 188:11
range 95:23
98:11,15,18
99:18 100:18
100:22 101:1,5
101:7,11,16,24
102:2 103:2
104:6 106:17
106:19,23,24
107:18 108:3
108:14,16,22
183:10
ranges 103:15
180:15
rank 263:12
rate 232:12,20
rationale 13:1
13:25 14:6,13
14:14,16,25
15:8 114:18
115:5,16
117:14,16
119:22 233:25
reach 172:21
172:24 174:16
220:21 225:3

226:1 260:17 261:9,17 264:11
reached 74:14
reaching 121:18 173:19
read 72:13,19 72:20 73:3 84:5 85:9 88:11 91:10 121:24 137:13,24 138:8,21 139:19 140:3 142:5 150:4 158:5 164:24 190:15 191:2 199:15 202:18 202:22 203:16 203:17 204:13 205:5 207:6 209:12 210:18 211:9 214:21 215:8,9 224:5 226:24 248:25 256:9 258:15 259:10,11 265:17 266:1
reader 58:17 97:6 103:13 104:3 115:24 116:20 117:21 195:25 199:11
reading 124:5 142:11 148:3 177:24 196:1 211:15
reads 84:2 85:6 88:6 91:7 121:14 138:1 138:18 141:24 162:12 165:19 177:18 178:4 209:6 256:4
reason 21:19 24:18 41:1 72:21 188:12 204:18,22 207:15 260:18
reasonable 99:17,19 121:21 126:14 130:2 236:24 251:20 261:20
reasons 21:20 27:14 57:1
reassess 142:19
reassessing 228:9,13
recall 22:11,20 22:22,24 23:3,7 28:12,16 34:23 35:10,11,14 42:21 43:7 47:22 48:4,6,9 48:19,24 49:1,5 49:9 50:9,10,13 50:24 52:24,25 53:2,4,7,9,13 67:4,23 68:2,19 73:23 83:22 88:15,19,23 89:1,3,5,22 90:6,9,13 91:17 106:15 184:14 184:20 185:10 186:3 188:3,6 188:10 189:25 190:3 191:17 197:3,16,20 202:4 206:10 220:9 229:19 229:23 234:19 235:2 239:25 240:11 241:5
recalling 37:15
receive 15:4 38:19,22 64:17 76:4 98:6 139:17 224:24 225:8 231:12 260:8
received 38:20 39:6 55:18 73:14,20 74:14 75:19,24 76:17 77:13 78:3 89:20 116:24 135:16 142:21 156:24 157:2 203:1 219:24 220:7 225:5 231:11 232:9 256:21 260:12 260:14 263:22 264:5,5
receiving 54:13 76:2 77:8 117:19 144:9 194:16 231:23 232:3,10,15 233:4,18 264:20,25
recent 20:8
recess 35:25 66:21 105:13 149:10 181:25 219:16 255:10
recessed 105:15
recognize 9:3 9:10 19:12 29:4 120:9,16,23
recollection 172:11
recommend 60:2,7 150:21 226:20
recommendat... 14:11,17,19,21 14:25 15:1,3,5 15:11,14,18 57:24 58:9,12 58:19,22 60:13 60:22 64:11 65:3 76:21 77:23 115:25 116:2,25 117:3

117:6 118:4,21 120:3 124:16 138:7 146:17 151:22,25 152:10 153:20 155:24,25 156:3 163:12 163:13,20 199:22 236:16 236:18 238:5
recommendat... 15:7 56:13 57:18 64:23,25 86:13 117:17 117:17 119:23 122:10 123:23 124:25 148:16 154:16 156:21 199:13,14 229:10
recommended 15:20 17:7,13 42:8 60:25 94:24 115:17 118:7 123:5 124:2 125:3 152:3 153:18 155:18 163:9 229:16 264:7
recommending 116:21 118:9 118:10
recommends 134:19 144:13 151:10,12 152:23 153:1 163:16 235:18
reconsidered 142:25
reconvened 105:15
record 6:3 7:2 7:5,7,9 35:24 36:2 66:19,23 72:14 105:11 106:8 140:2,7 140:11,15,18 140:21 141:2,5 141:6,11,13 142:7,12,17 143:18 144:13 144:15 146:19 149:5,7,12 181:24 182:2 215:25 219:14 219:18 255:9 255:12 265:15 267:9
recorded 189:17
recordings 69:4 197:6
records 88:7,13 88:17,21,24 89:9,13,17,20 89:24 90:3,5,8 90:11,15,18,20 90:25 91:2,12 91:14,18,20,22 91:24 92:5,7,13 92:16 93:2,3,3 93:4,8,13,15 137:3,5 139:12 139:17,21 140:9,12,12 157:2 158:19 158:23 182:11 220:13 221:13 225:1 226:4 256:13 259:9 259:10
recovery 137:20
recreation 167:17
reduce 69:14 160:18 161:2 181:9
reduced 142:1 208:11 267:8
reducing 138:5
reenter 182:17
reevaluation 161:22 228:7 228:11
reevaluations 161:25
refer 16:20 20:21 33:25 34:4 39:25 96:10 116:9 202:5
reference 109:19,22 110:24 112:4,6 112:23 113:1 114:1 137:9 147:1 245:19
referenced 185:23 192:4 196:25
referral 202:8 202:11 203:3 203:14
referred 39:23 199:11
referring 14:10 20:10,24 21:9 25:1,2,23 26:3 34:1,5 40:1 59:14 61:15 63:4,6 67:9,15 79:6 83:19 85:13,19 86:13 96:17 112:20 118:13,15 172:15 242:5 246:21 250:3
refers 128:23 194:17 258:11
reflect 132:4,7 132:11,15 192:9 194:5
reflected 97:13 101:17 105:6 160:23 179:7

179:19 190:9 199:2 206:20 222:17 223:11 223:16,21 231:15 237:8
reflecting 181:5 235:3
reflective 181:15
reflects 85:23 87:11 104:16 132:25 133:3 158:15 179:15 192:18,22 193:1,5,19,22 194:1,9
refusing 140:1
regarding 148:23 184:25 191:7 199:13 205:17 208:2 261:1 263:6
regardless 87:24
regimen 138:2 253:21
region 24:10
registered 38:2 38:8,12 55:2 125:9 259:21
regular 85:7,24 86:2,9 87:11,12
regularly 47:16 47:20 228:16
rehab 37:13
rehabilitation 187:5 236:15 236:21 241:5
relate 91:13,21 92:6,15 176:15
related 22:8,15 23:5 35:9,13 53:15,19,23 54:2 62:1 70:1 90:8 93:18 135:18 145:7 145:11 150:2 152:15 179:23 189:9 207:18 224:4,5 241:22 246:4 267:11
relates 39:19 94:4 122:5 139:4 240:5 243:17
relating 185:20
relationship 168:7 224:19
relative 8:1 49:15 81:12 82:10 83:4 93:19 199:20 231:1 267:14
relax 167:16
relevant 91:14 91:22 92:8,16 93:9 95:6 207:23 211:17 212:6 217:3 226:10 228:8 228:12
reliable 110:5 110:20,25
relied 64:24 134:11 212:20 218:12
relief 165:20 170:14,19
relies 134:7 223:1
relieve 167:11 170:8
relieved 170:16
rely 59:4 215:15 225:18 259:24
relying 199:17
remain 125:12 218:19 248:6
remaining 255:14
remember 28:19 43:1 48:7 48:13 50:11,16 69:10 71:5 77:9 83:14 86:16 130:10 184:17 202:10 204:2,3 204:4 230:6,9 241:20,24
remind 252:15
reminded 253:14
remote 3:10
removed 213:3
render 56:12 56:19
renewal 165:21
renovation 261:1,2
renovations 219:6 261:3
repairs 175:24 243:6
repeat 14:12 29:17 40:14 42:1 51:17 52:3 52:4 70:10,11 76:23 82:21 91:15 195:16 234:10
rephrase 167:21
replace 177:6 180:8,17 181:18 249:22
replacement 62:20,22 112:13 128:22 129:4,9,17,20 129:24 142:3 147:8,17 175:20 176:7 177:5 179:10 242:11,12,19

243:7 245:17
245:19 246:14
246:24 247:4,6
248:2
report 5:19
9:23 10:1,7,10
12:6 13:15,15
18:11 64:7 74:1
75:22 76:1,25
84:10,20 89:15
89:16 90:10,18
93:20 95:7
100:3,23,25
101:3,17,21
102:8 103:1,7
103:11,17
104:8,9 105:6
106:23 107:24
108:3,8 110:14
112:9 124:10
124:21,25
125:3,25
126:10 128:17
134:3 135:3
137:4 144:7
148:1 151:17
167:24 168:25
172:6,11
174:10 175:16
178:3,10 181:3
182:10 183:22
185:24 186:6
188:1,9,17
192:4 193:15
194:17,20
195:1,4,6,11,23
196:1,4,5,12,16
198:15,16
199:4,12,21
200:12,15,19
200:21 201:11
201:11,12
202:1 204:8
205:12 206:9
208:3,16,22
209:19 210:23
212:8,14,17,20
212:22 213:7,8
213:12 215:14
215:18 217:7
217:20,25
218:3,7,17
219:22 229:15
233:5 234:8
236:5 238:8
241:15 242:3
245:9 248:15
248:17 249:5,8
250:2,9 252:11
252:14,25
253:16 259:17
261:19
reported 1:17
95:17
reporter 6:12
265:18 267:1
reports 9:15,19
12:14,18,21,23
18:7 20:4 74:17
97:11 100:11
100:16,20
101:4,14,15
104:24 105:1
116:6 118:8,16
121:18 137:16
172:22 177:17
178:20 187:25
188:7,14,19
194:21 195:8
195:13,19,25
196:13
represent 6:18
17:20 18:1 66:3
72:6 200:10
202:14 213:23
representative
107:1,14
represents
13:21 16:16,17
17:21 18:2
206:21
request 4:23
18:22 45:13
90:7,19,22,23
129:19 204:15
229:17 255:20
requested 30:4
30:12,22,24
31:10,21 32:11
32:14 197:21
235:8
requests 185:19
198:12
require 76:9
124:11 126:4
142:18 146:6
147:7 150:1
152:15 162:13
224:2 227:3
required 65:8
215:3 238:16
238:19
requirement
217:3 230:3
requires 132:8
132:12,15
239:2 248:20
requiring 145:5
research 59:22
61:8 106:22,25
107:12 172:12
172:14,16,18
172:20 173:5,9
173:16 174:15
174:18,22
reside 107:7
resided 219:3
residence 204:6
205:8,14,20,23
resource 111:2
111:7 175:9
resources 59:9
59:24 64:17
78:3 84:10
102:12 103:10

103:14,16 104:7 107:13 107:20,23 108:4,7,20,20 110:13,14 114:24 130:5 140:13 143:3 157:1 159:8 172:22,25 173:1,4,6 259:18
respect 16:21 20:7 29:15,21 29:25 30:18 33:10 50:7 57:8 60:3,9 61:12 63:11 64:8 70:7 70:13 75:22 77:6 81:23 82:6 83:7,15,20 90:11 109:13 121:13 122:2 132:10,19 139:9 144:17 152:3 154:25 156:18,24 158:21 160:20 163:21 164:4 178:10 204:19 229:18 232:12 232:20
respective 2:7 152:20 188:17
respite 119:12 119:15,23 122:18,20 127:4,20 165:18,19 167:10,12 168:9 170:14 170:24
respond 90:4
responded 153:7
responds 154:11,13 162:18,20,24 163:1 256:11
response 56:14 56:24 57:5,19 80:15 82:11 86:14 87:19 95:6 135:8,22 145:20 146:4 146:20 153:6 154:10 155:1 155:10,13,15 155:16 158:14 185:7,19 198:12 222:16 224:8 237:17 255:20 265:1,2
responses 154:8 191:10 191:19 222:8 223:17,22,25
rest 165:20
restored 137:23
restroom 250:23 251:5
resumed 106:4
retained 8:3 10:6,14 72:9 113:13,16 188:21,22
return 170:9
returned 74:8
revealing 80:21
review 49:15 65:4 66:12,13 68:22,25 69:4 76:13 90:5,18 91:2 92:22 93:1 93:7 135:17 137:6 139:12 139:25 140:1,6 155:2 158:24 182:11 210:3 211:2 213:11 214:18,23,25 226:3
reviewed 10:21 66:7,15 70:16 71:14,22 76:16 83:14 84:24 88:8 89:10,16 91:25 92:9,22 93:4 135:20 137:3 140:21 141:13 142:25 143:4 146:24 158:20 159:8 161:8 174:2 175:4 196:17 197:7 201:19 208:4,13 211:7 211:13 212:16 220:13 226:16
reviewer 49:14 50:5
reviewing 83:7 95:4 221:12 225:1,2
richard 5:6 72:8
ridge 3:12
right 8:5,8 9:21 11:3 12:19 13:6 13:16 15:8,14 16:13,25 17:8 17:14,23 18:7 18:12 20:1 32:25 37:18 39:17,23 41:10 42:16 50:20 51:2 52:2,6,14 53:3,12 54:21 55:7,12 56:9,12 57:16 58:4 62:7 62:18,24 63:20 64:21 66:4 69:18,23 70:3 70:21 73:9 74:1 74:8 75:3,15

76:15 78:23
82:20 85:3
86:19 87:4,17
88:18 89:13,18
91:18 93:1,2
95:18,23 96:25
97:5,8,20 98:8
100:3,18
101:24 102:2
102:13 103:21
104:1,11,19
114:7 115:7,12
115:18,21,25
116:8,14,17
120:4 122:2,7
122:16,21,24
123:18 125:4
125:15 126:16
128:22 130:2
130:14 131:13
131:16,24
132:8 133:6,18
134:17 135:1,4
135:6,13
136:22,25
137:4,10 141:2
141:12 143:13
143:17,20,24
144:4 145:7,21
145:24 146:2,6
146:11,15
147:11 150:7
150:10,12,18
150:25 151:10
151:14,19
152:17,21,24
153:3,18,24
154:2,25
158:16,22
161:4,19,23
162:5,18,21
163:2,6,14,17
164:16 165:3
165:12,16
166:1,18,24
167:4,5,11
168:15,22
169:3,8 170:12
170:23 171:8
171:22 174:13
174:17 175:24
176:8 178:11
178:20,23
179:1,14,17,24
182:23 183:4,9
186:8,16
189:21 190:22
190:25 191:3
192:4,7,12,20
192:24 193:20
194:3,11,14,18
194:23 195:2
196:7,14
198:13,21
199:2 200:4,16
200:24 201:2,6
201:16,24
202:5,9 203:19
203:24 205:20
205:23 207:2
208:11,17
210:5 211:14
211:20 212:10
212:21,24
213:3 215:17
216:5 217:3,20
218:5,14 219:2
221:23 222:4
222:19,23
223:6,17 224:8
225:6,16 227:3
227:7,16,22
228:5,9,13,22
229:1,18
230:16 231:5,9
232:1,13
233:12,23
235:11,19,22
236:3,6 237:15
237:23 238:8
238:12 239:3
239:16 242:7
242:14 245:6
245:10 246:5,8
246:11,25
247:22 248:3
250:7 251:11
252:12,16,19
253:12 254:12
254:13 255:24
256:9,14,18,22
257:3,8,21
260:6 261:8
264:19
rigidity 138:19
rise 249:10
rises 249:12
rn 38:19,20,22
39:10
role 38:3 46:8
47:15,19 49:23
50:14,22 56:21
131:21 244:6
roles 49:12
romano 3:3,4
4:6 6:19,19
41:3 43:11
51:21 64:13
72:23 80:21
82:15 92:18
93:11 94:16
96:21 117:24
123:14,19
130:20 139:7
141:19 148:20
156:7 159:5
173:12 174:5
182:15,21
202:19 211:21
212:11 213:4
213:18 214:3,9
215:10,21
217:4,14,21
237:24 257:16
257:18 259:2
260:5 261:7,23

265:10,17,22
romanolawgr... 3:7
room 206:10
rooms 206:14
rough 265:18 265:23
roughly 206:24 208:9
route 157:6
rules 10:25 252:12,13
rush 167:17

s

s 4:1,10 5:1 6:1
safe 113:19 169:4 250:11 250:25 251:14
safely 252:4
safety 250:20
sat 38:7 39:1,9
satisfy 217:2
saw 133:1,5
saying 76:15 158:11 188:8 203:14 225:25
says 65:16,17 84:15 115:20 132:2 134:5 136:1 143:11 145:19 178:9 182:10 186:6 204:23 213:1 214:17 215:19 216:12,14,16 216:17,18,20
scale 215:5,6,20 216:6,8,10,12 216:14,16,18 216:20
scanning 205:7 205:14
scenario 160:15 168:12 169:5 213:9,9
schedule 4:15 4:20 9:6,14 68:16 211:1
scheduled 228:17
scholastic 56:2
school 55:6,8
science 39:6
scope 82:14 85:15,21 217:13 242:23 258:4,13
sears 1:10 2:1 4:4 7:12,18 106:3
second 47:11 54:6 73:11,13 74:16 75:25 76:1,10 88:4,4 132:9 136:10 149:6 172:8 177:18 182:4,6 182:6,7,9,15 183:20 185:23 186:5 202:19 211:21 219:22 234:7 256:24
section 89:9 138:17 143:6 144:9 195:1,4 195:13,19 199:6 208:15 248:17
see 43:14 47:12 62:3 65:4 72:13 73:17 77:19 97:23,25 98:14 99:13 101:23 102:21 108:11 108:14,16 112:12 118:23 119:7,12,17 128:16 136:12 136:15,18 138:13 142:16 143:6 144:7 171:18 175:20 199:5 206:11 209:4 212:24 214:1,15,17 215:19 216:6,7 216:10,11 224:11,14,21 234:7 246:2 248:23 249:25 264:1
seeing 144:1 214:14
seek 220:11 221:8,9 264:9
seen 18:18 37:4 78:12 134:13 145:10
select 247:21
send 74:15 75:5 75:17 76:3,6,18 130:12 156:17 198:5 234:5,12 234:14 240:2
sending 74:4 240:7
sense 12:14 14:1
sent 5:8,24 58:25 74:20,22 75:11,15 76:11 77:7,11 120:10 121:3 128:20 130:12 131:9 131:16,20 136:24 141:4 143:20 157:20 185:20 198:13 221:20 245:22 255:16
sentence 84:1 85:5 88:6 91:7 177:18 199:10 209:2

separate 227:15,21 228:4 229:21 230:5
separately 33:1 194:21 227:2
september 133:6,11,19,24 134:5,10
serum 153:1,13 154:25 155:11
serve 83:6,16 262:3 263:4
served 261:24 262:4
service 13:1,25 14:3,4,8,10,14 15:8,18 16:1 17:7,13,21,22 17:23 44:12 58:3 63:17 76:21 77:20 87:20 94:9 96:3 96:11,16 97:4 99:18 100:6,14 111:11 112:14 114:17 115:4,6 115:9,12,14,16 115:18 116:5 116:10,22 117:5,14 118:7 118:9,11,17,18 122:13 153:14 168:20 175:12 175:14 176:6 181:16 198:20 199:18 233:1 234:1 235:15 235:25 243:15 263:6,20,25 264:3,4,6
services 8:1 12:9 15:20 33:17 34:15 43:15,19,22,24 44:9,16,19,21 44:23 45:6,17 46:5,16 50:3 56:23 59:10 60:1 61:24 70:8 70:15 76:22 80:14 81:11,21 82:10 83:2 94:2 94:7,14,18,19 97:15 104:23 109:14,24 110:2,11 121:21 122:5 126:2,5,14 127:23,24,25 128:2,22 129:4 129:9,17,20,24 130:7,9 134:25 160:4 161:16 162:12 164:14 164:20 165:2,9 167:9 169:10 170:5,6,9,23 172:19 175:20 176:5,7,7 177:5 177:6,20 178:5 178:14,19 179:10 180:8 180:18 181:14 181:18 187:5 220:18 221:15 226:20 227:2 230:23,25 231:11,13,15 231:23 232:4 232:10,12,16 232:20 233:3,4 233:10,15,18 234:3 236:15 236:22 239:13 241:24 242:2 242:11,12,19 243:8,9,10,15 243:18 244:24 245:2,17 246:5 246:14,24 247:4,10,20,22 248:2,3,5 249:21,22 250:2,3 251:11 254:16 260:16 263:22 264:22
session 17:24 94:24 106:1 229:14
sessions 18:3 228:19 229:21
sets 27:21 93:7
setting 54:17 55:19 73:3 125:12 127:14 139:10,12,15 139:18,23,25 140:3,4 248:7
settings 38:14 38:15,15,15
several 21:5 27:22 129:16 139:22 173:2
severity 69:14
share 244:10
shared 244:21 244:24 245:1
sharing 27:5
sherwood 5:12 58:12,18,22 62:2 63:18 74:21 75:12 115:21 116:19 120:1,24,25 121:3,8 123:22 124:2,13,21 125:3,5,17 126:20,23 127:2,6,18,22 128:4,21 129:15 130:17 131:9 136:19 136:21,25 139:1 141:9 142:8 143:12

143:15,20,23 144:2,12 145:23 151:3 151:12 152:2,5 153:7,22 154:5 154:9,20 155:15,21 156:11 158:9 158:15 159:9 160:8 161:21 162:18,24 163:11,24 164:3
sherwood's 121:10 140:25 144:23 146:4 150:16 154:23 155:1,9,13,15 163:13,20
shift 262:25
shop 167:7
short 165:20 169:2 219:11
shorthand 267:7
shoveling 177:12
show 206:14
showed 206:5
shows 245:13
sic 203:2
sign 265:17
signaling 115:24
signals 116:1
signature 267:20
significant 137:17 187:4
significantly 141:25 142:9
similar 103:7 241:21
simonne 182:12
simple 175:23 176:12 243:6
simply 228:7,11 228:14 229:9
sinemet 138:4 142:1
single 104:4 211:12 230:16 251:19
sir 43:12 96:22 141:20
sit 9:18 38:1
site 205:19 215:5
sitting 191:13
situation 24:12 61:11 63:3,15 63:16,24 64:1,3 65:25 99:11 156:15,16 173:11 240:18 240:23 241:12 251:1
six 39:1 144:1 208:20 252:6,8
skilled 119:7,10 119:23 122:16 122:17 126:24 168:8 252:21 253:24 254:3,6 254:10,22,25
skills 22:4 27:21 55:3 187:1 247:19 259:20 260:11
skip 214:20,20
sleeps 249:7
slide 247:22
slightly 138:20
small 5:5 72:7
smaller 43:25 44:12 252:1
smith 1:18 2:5 6:12 267:3,21
snow 177:12
sole 165:25 166:5,7,13
somebody 21:21 87:8 205:8 211:24 242:18
sorry 6:25 14:12 17:9 19:2 19:7 20:9 24:5 28:13 29:17 32:7 33:15 34:13 35:20 38:20 40:8,14 42:1 45:1,23 46:7,20 47:23 55:25 57:25 58:5 59:13 61:1 61:14,19 63:25 65:11 68:10,23 71:10,19 74:9 77:2 78:8,9 79:6 80:20,23 82:4 83:9,19 100:19 102:9 112:10,19 114:19 117:12 124:6 125:20 128:13 132:9 132:20 135:25 136:11 141:17 143:21,22 147:16 148:4 150:23 161:14 165:4,4 167:21 168:3 171:12 177:24 180:13 180:13 182:7 182:22 183:9 183:19 185:7 189:22 190:8 191:21 195:16 197:18,20 198:17 202:3 212:3 228:10 234:6,6,8,10 235:16 241:18

247:24 249:7 252:4 253:18 260:3 262:13
sort 139:18 253:22
sought 157:22 219:24 220:7 259:15
source 17:2 57:10 76:20 77:22 109:17 110:5,7,20,25 111:5 114:2,10 117:2 118:3 119:22 173:24 187:16
sources 14:22 14:23 15:3 59:12,18,20 61:1,2,4,6 96:2 110:9 174:12 174:16,24 194:22 260:21 264:20
south 3:13
space 131:25
span 35:17 38:14 44:7 50:2
speak 31:22 80:6 218:6 238:9
speaking 21:3 53:23 54:2 172:11 215:24 220:14 221:11 226:4
speaks 82:9 83:2
special 44:6 45:4,14 187:5,6
specialist 36:7 260:25 261:3,9
specialists 150:2
specialties 150:7
specialty 58:6 262:12
specific 12:17 12:22 24:17 26:2,19,20 27:3 27:9 28:12 31:24 36:22 49:5,22 59:14 60:19 61:10,15 62:11,14 63:4,6 63:18 65:25 67:18 69:21 78:10 82:3 83:22 86:4,11 87:13,25 93:14 94:4,19,20 95:15 96:10 101:9 103:12 107:21,21 108:5,6 116:10 122:12 127:18 129:22 140:11 145:17 146:7 149:2 151:25 153:7,23 154:12 155:22 156:11,12 157:6 173:15 175:12 179:5 179:11 180:23 184:13,17 187:22 191:22 191:23 196:8 197:21 206:2 217:19 218:3 221:6 225:11 231:12 233:19 241:12 243:13 245:2 246:8 249:4 250:3 253:2 261:15 264:23 265:2
specifically 30:16 45:5 76:16 81:18 89:16 103:17 108:2 151:9 171:17 172:10 189:20 196:3 203:9 230:24 246:13 247:8 247:21 248:1 258:2
specifics 12:20 23:7 42:21 43:1 64:2 109:17 130:18 204:2
specified 196:16 215:7
speech 74:25 75:1 161:23 162:7,23 163:5 163:14,17,21 164:1 220:1 227:11 228:1,4 230:15 232:6 232:22 238:11 238:17,19,21 239:4,9
spent 180:11,22 245:14
spoke 79:13 234:2
spouse 181:12 184:6 193:10 197:13
spouses 192:3 192:11 195:14 195:20 197:2
spread 108:1
spreadsheet 12:8
spreadsheets 179:8
staff 211:3
staged 148:7
stages 137:18
stamped 5:14 5:17

stand 15:24 16:10 106:4
standard 25:3
standardized 28:10,15,17
standards 54:17 55:19 85:7,11,15,18 85:20,21 258:4 258:11,13,16 258:19
standing 121:19 265:21 265:22
start 13:23 15:18 21:12 50:18 161:12 182:9 214:5,10
starting 165:14 207:6
starts 72:14 209:2
state 44:10 85:23 87:11 100:11 146:4,7 165:4 199:11 215:15 248:19 252:11
stated 56:1 93:17 263:14
statement 61:16 65:12,22 72:1 96:4 107:16 174:6 223:18
states 1:1 2:15 2:22 6:6,22,24 32:4,10,18 89:16 90:15,20 92:14 185:19 215:23 219:23 224:14 230:4 234:23 239:21 255:20 256:25 261:25 262:4 262:14 266:3
stationed 262:14
statistical 178:22
statistics 109:12,23 110:1
status 71:13
step 12:13 21:2 33:9 190:5 214:21,21
steps 259:5
stimulation 41:21 42:3 137:16
stimulator 39:21 40:2,5,6 70:22 134:21 134:24 135:2 135:24 136:3 148:8 149:1,4
stooping 121:19
stop 191:10
stopped 256:13
street 2:4,20 3:12 6:9,15
strike 130:25 234:25
structural 219:6
structure 12:15 12:21 13:14 18:5
studies 153:1 153:13 154:25 155:11
subject 23:19 26:15 42:15 184:8 214:25
submission 65:1 217:2
submit 214:22 215:3 241:1
submitted 185:1,2 210:20 214:24 217:13
subpoena 4:22 18:22 19:1
subscribed 266:11
subspecialties 150:18
substance 12:19 67:24 79:4 80:5 81:4 82:22
successfully 134:25
suite 6:15
summary 76:12 245:3,8
supervise 166:9 176:21
supervision 165:25 166:5,7 166:13
supplement 26:12 84:25
supplemental 9:23 10:1,7,10
supplied 107:21 108:6
supplies 117:10 117:15
supply 15:14
support 59:11 59:25 158:21 180:17 181:11 249:22 263:21 264:4
supporting 236:17,19 238:6
supports 8:1 12:8 56:23 80:14 81:10,21 82:10 83:2 220:17 221:14 260:15 264:22

supposed 103:14 116:20
sure 10:25 24:23 35:22 51:16 63:5 66:18 67:14 114:21 116:4 138:10 149:6 170:5,20,21 172:1 182:18 184:24 190:8 192:15 229:9 238:22 254:12 254:21,23 255:1
surgery 66:2,10 72:16 135:24 137:16,18 138:3 141:25 142:8 214:11
surgical 40:11 40:15 214:10 262:23 263:3
surroundings 250:16
surveillance 150:2
survey 98:4 233:7
swallowing 164:1
swelling 137:19
sworn 7:14 106:5 266:11 267:6
symptoms 40:12,17,25 69:13 70:1,5,19 71:3,16,25 137:17 138:24 139:4 142:1,10 142:14
syncope 170:21

t

t 4:1,1,10 5:1
tab 257:7
table 12:11 108:5 179:10
tables 111:21 111:25 112:2,5 112:7 119:11 179:5,6,11
take 9:1,9 11:20 11:23 12:13 19:11 21:2 26:6 28:2 29:3 33:1 35:20 61:24 63:7 75:9 82:18 94:23 96:24 104:22 105:9 120:8,15 124:8 164:12 166:23 167:2 171:11 181:21 184:22 188:25 190:5 219:11 232:24 239:1,18 252:15 255:7 259:5 260:11 265:22
taken 6:8 32:11 32:19 37:25 51:7 200:20 253:15 267:4,7 267:13
takes 207:16
talk 44:1 61:21 110:16 114:17 131:3 164:19 187:14 220:20 220:24 240:13 240:15,19 241:7,8,9
talked 63:1 67:1 71:2 79:15 80:2,2 86:16 93:20 204:4
talking 16:22 28:14 30:5,16 33:21 60:20 91:17 93:15 94:7 96:11 101:10 106:16 116:10 140:11 145:13 214:10 225:2
talks 12:8 214:21
task 128:23 248:13 250:15 250:25 251:18
tasks 121:20,23 126:16 128:10 129:3 164:22 167:10 169:21 175:22 176:2 176:11,13,14 177:3,7,12,21 178:5 180:2,6 180:11,22 242:13,16,17 242:21,24 243:7 244:8,10 244:21 245:14 246:16 247:15
technically 215:17
teenagers 33:19
teleconference 56:4
telephone 67:15 239:15 240:19
tell 7:17 11:16 15:13 19:22 67:24 80:4 103:1 108:20 123:10 170:12
telling 37:21 59:17 79:3 82:22 104:3 207:2 245:12
temporarily 262:25

tennessee 252:12
term 38:3 165:20
terms 15:2 27:6 38:9 95:4 116:24 122:9 123:7 126:9 132:2 134:12 153:20 156:13 157:6 163:11 172:19 173:19 195:10 209:23 240:14 260:14 261:21
test 25:22 26:2 28:10,15,17
testified 7:14 15:13 29:20 31:5 34:23 35:2 42:12 51:4 52:12 53:11 87:6 103:19,24 106:5 123:16 130:10 204:19 206:18,23 212:19 233:11 237:12
testifying 11:3 11:9 57:23 148:14 188:5
testimony 4:15 4:19 9:6,13 15:12 23:16 52:7,13 67:2,7 69:1,5 211:23 265:16 266:3 267:5,7,10
testing 152:14 154:11
tests 25:20,25 28:7 154:22
text 182:16
textbook 214:10
thank 9:8,15 19:9 20:13,16 25:19 42:6 52:10 88:5 182:20 257:15
theoretical 63:25 71:12
therapeutic 168:22
therapies 231:3 232:13
therapist 74:25 75:1,2 220:2,3 228:8,12 229:11,16,20 230:1 236:2,6,9 236:10,12,14 236:17,19 237:23 238:4,6 238:10
therapists 229:13 231:25 240:15 241:4
therapy 94:23 94:24 95:1,4,5 95:5 161:22,23 161:23 162:1,2 162:5,8,17,23 163:5,14,17,21 227:7,9,11,15 227:18,22,24 228:1,5,7,12,17 228:18,19,21 228:25 229:4,5 229:14,22 230:14,14,15 230:23,25 231:8,19 232:6 232:21,21,22 233:22 235:14 235:19,21,24 236:20,22,24 237:3 238:7,12 238:17,19,21 239:2,5,10 240:12,16 263:25
thereof 163:22
thing 112:22 149:6 178:9 182:18 258:7
things 24:3 99:21 167:1 170:10 242:9
think 30:14 77:1 129:10 130:25 136:9 156:10 158:10 179:14 251:20 265:20
thinking 11:6
third 85:5 138:1 177:17 178:1 205:13 248:19
thought 40:23 80:1 212:24
three 25:11 38:2 98:18,19 98:20,22 99:1,4 99:5,7,12,15,16 99:24 100:13 101:18,23 102:1 103:20 103:23 107:17 110:17 128:4 137:18 138:5 141:24 169:9 175:9 183:15 183:17 190:3 209:1 228:22 229:3 233:12 233:15 263:15 263:18 264:10
throw 177:1
tied 217:12
time 6:9 7:6,10 22:11 23:7 28:12 35:24 36:2 37:15 38:23,25 39:1

43:7 46:20 48:2 48:15,18,22,23 49:2,3 50:17,22 51:8 52:25 66:19,23 68:19 70:24 71:15,23 75:17 79:13 84:20 88:15,19 88:23 89:6 90:4 90:6,9,13,15,17 90:20 91:2 95:1 95:7,9 105:5,11 106:8 121:19 124:10,18 133:1,4,5,13,14 133:16 134:3 134:14 135:9 135:12,12 137:7 140:7 147:11 149:7 149:13 157:21 160:13 162:24 163:14 167:15 168:14 169:3 170:7,25 171:1 171:12 180:17 181:24 182:2 183:9,13 184:21 186:4 188:9 199:2 203:11 204:21 209:14 211:11 219:14,18 222:2,22 229:5 230:2,10 233:4 233:10 249:21 252:14 254:13 255:9,12 262:6 263:11,23 265:15

times 25:15 26:9,11 37:17 115:17 116:6 126:24 138:5 144:10 145:10 146:10 151:10 151:13,19,22 153:2,15 161:21 162:2,4 162:7,18,20 163:1,6,16 166:16,19,22 166:25 168:16 228:22 235:22 249:12 252:5,6 252:6,8 254:7 254:22 257:2,7

title 36:11 102:4

titled 12:25 13:3,6

titles 36:15,18

today 6:10 7:22 9:18 11:1,6,9 31:9 67:21,22 68:6 69:2,6 205:2 207:13 210:21 212:7 257:15

today's 11:20 16:21 20:23 39:25 68:15,21 265:16

together 22:5 65:24 87:2 124:15 126:10 155:3,17 168:10 173:18 174:1 183:23 237:6 240:10 247:18 259:6

told 77:1 195:14,20

took 11:2 38:5 69:8 185:22 192:6 197:8 248:12

tool 5:3 24:22 24:25 25:2 29:6 29:8,11,20 30:6 30:17,25 31:14 32:23,24 33:5,8 40:7

tools 29:14,25 30:2,24 31:6,13 31:19 33:5

top 43:14 48:23 54:19 136:12 143:6,6 164:14 175:17 208:25 214:17

topic 229:18

topics 24:15 62:25 184:14 184:18

torts 2:11,19

total 18:2 60:24 87:1 206:20 245:5,10

touch 25:14

touched 116:3

tour 204:16 206:1,3,13

toward 34:21 35:18 151:6

towards 199:6

towels 177:1

training 38:6 54:10,15 260:11

transcript 5:6 5:21 72:7 202:16 204:10 207:5 210:11 266:2,2

transcripts 197:9

transportation 199:6

travel 98:23 100:7 249:13 250:14

treat 61:11

treated 231:14

treating 37:2 73:15,16,19,24 156:4 157:3 196:6,10 218:4 218:8 219:25 220:10,19 230:1,2
treatment 50:7 57:16 66:4 98:7 132:8,12,16 135:15 151:7 162:17,23 163:21 227:2 227:19,24 228:5,20 229:5 229:14 259:16
tremor 138:19
trial 84:23
trips 128:5 169:9
true 103:6 113:4 260:8 261:2 267:9
truthfully 11:9
trying 75:8 132:17 148:17 179:14 218:2
tubin 2:17 6:23 6:23 210:13
turn 12:1 19:15 43:8,9 55:18 58:2 61:21 72:10 73:11 77:1 88:4 89:8 91:3 97:22 101:20 102:25 106:13 108:19 111:9,14 112:8 115:1 118:22 120:4 121:8,9 121:11 128:12 131:3 138:12 141:15 143:5 144:6,16 147:4 149:17,18 175:15 177:13 182:4 185:16 189:19 193:16 198:15,16 199:4 202:17 204:9 208:19 210:10 214:13 215:14,16 219:21 221:25 226:18 227:13 241:14 244:6 245:21 248:18 255:21
tv 78:12
twice 171:18
two 7:24 8:7 12:17 19:7 22:9 22:16 25:11 27:20 31:5,11 38:4 43:4 61:23 65:7 79:8 80:18 81:7,9 93:7 114:10 126:24 136:9 144:3 156:4,16 157:7 161:21 162:1,1 162:4,20 183:15,17 186:21 187:10 190:3 206:17 215:4 237:5 243:8 252:5 254:6,22
type 25:22 73:3 73:5 75:5 99:10 105:3 109:13 123:12 130:7 139:10,13 173:11 190:24 233:6 237:7 242:15 262:16
typed 190:14 191:3,24
types 68:14 167:10 173:23 237:11
typewriting 267:8
typical 24:1 99:17 101:18 103:20,22 107:8 233:2 263:15 264:1
typically 18:8 23:18,22,24 24:15 25:5,10 25:20 26:4,6,16 27:8 28:21 31:22 36:6 79:9 95:22 96:6 98:17 99:6,14 99:23 100:4,13 110:14 139:17 140:9,12 175:9 198:8 249:6 259:8 263:20 264:10

u

u.s. 2:10,18
uh 32:9 45:8 97:9 243:16
unable 220:20
unavailable 90:12
uncertain 207:12,18
under 14:1 15:8 16:4,7 17:3,6 19:24 62:6,8,12 62:13 77:19 102:19 103:25 108:21 116:13 116:15 117:10 117:12,14,16 118:17 119:1,3 119:5,10,15,20 141:23 144:8 147:5,17 164:20 169:10 169:14 174:10 176:1 179:9

180:6 211:25 217:3 243:18 245:9 252:12 267:8
undergoes 66:1
undergoing 137:15 148:7
underlying 14:11 15:6,11 17:13 76:20 115:17 116:22 117:6,23
underneath 43:15 58:6 61:25 62:10,14 143:11 164:19 165:19 179:10 243:15
understand 10:25 11:2,15 11:17,24 15:12 16:22 20:24 30:15 33:23 34:1,4 40:1 51:16 67:11,13 75:8 94:10 97:7 101:10 103:14 109:9 110:16 116:4 132:17 148:17,25 154:8 175:3 179:15 190:10 204:5 218:2 238:22 253:8
understanding 7:21,23 19:23 29:19 40:4 41:12 42:7 51:14 67:14 68:4 79:19 80:7 80:17 81:3,6,14 81:17 109:11 109:21 122:4 160:10 173:19 190:20 215:1 219:3 235:10 243:21 244:14 245:1 250:24 252:13,17
understands 253:20
understood 11:12 20:21 24:15 44:14 105:8 137:8 197:15
undertaking 219:6
underwent 135:23
union 49:11,24 50:5
unit 17:16,19 43:25 96:25 97:25 102:2 106:17,24 108:16 173:25 198:23 199:1
262:20,21,23 263:2,2
united 1:1 2:15 2:22 6:5,22,24 32:3,10,18 90:15,20 92:14 185:19 234:23 239:21 255:19 261:25 262:4 262:14
universe 192:16
university 39:3 54:14
update 19:23 20:8,11 142:23 142:23
updated 19:19 47:10 54:6,20 143:4 223:8
updates 20:3 194:15
updating 161:17 226:22
upper 121:16
urinate 249:13 250:11
urinates 250:16
urine 249:14
usdoj.gov 2:14
use 15:2 24:22 26:4 28:22 29:8 29:11 40:20 45:22 46:22 47:4,7,7 59:9 59:18 86:2,9 87:24 88:1,2 96:6 97:2,5 98:2,23 108:3 110:14 121:14 174:19 175:3 180:7 195:7 197:24 221:3
used 5:4 25:16 29:7 30:2 40:12 40:16,19 41:14 45:2 61:2 84:11 85:16 86:6 96:9 96:13 97:11 98:9,15 100:2 110:5,22,23 111:2,7 113:10 114:24 116:11 123:7,22 124:14,24 125:6,16 127:6 128:25,25 129:4,15,23 140:13,22 151:24 152:9 153:19 160:11 173:24 179:5 179:11 180:14 181:3 195:9,23 199:21 212:22 217:23,24 218:16 221:8 223:3,3 233:20

245:17 248:4 258:25
users 5:23 213:25
uses 113:23,25 114:1,5,6,9
using 36:13 112:21 175:2 180:3 238:18
usual 145:6 224:3
usually 67:7
utilization 49:14 50:4
utilize 78:2 130:4
utilized 29:20 64:18 94:8 95:11 125:21 163:10,23 178:18 239:4,6 239:9 263:18
utilizing 38:17 259:7,19

v

va 90:2,7,11 91:12,18,20 92:5 111:12
vacuum 177:11
value 178:15,18 178:22 179:2 179:15 180:5 180:14,19 181:4 245:18 247:7 249:18 249:20
van 168:20 169:17,23 170:2,3,4,18 171:3,10,10,15 172:1,7
vanderbilt 111:12 134:20
vanderbilt's 138:7
variances 265:9
variety 150:6 243:14 262:19
various 44:10
vast 110:2 186:25
vehicle 169:20
venue 169:20 169:22
venues 169:17 172:2
verbal 191:10
verbalizing 190:12
verbatim 197:9
verify 201:9
veritext 6:13,14
version 84:18
versus 190:17 196:6 221:4,9
veterans 89:24
video 1:10 2:1 6:2,13 7:1,2,4,8 7:8 35:23,24 36:1,1 56:4 66:18,22,22 105:10,11 106:7,7 149:6 149:11,11 181:23,24 182:1,1,18 219:13,14,17 219:17 248:16 255:8,9,11,11 265:14
videoconfere... 182:14 183:3 184:23 185:1 185:23 186:7 189:16,20,21 190:21 206:4 206:15
videoconfere... 186:15 187:8 188:24 189:13
videos 68:22,24 68:25
virtual 24:7 55:23 56:1 68:10 205:22 205:25 206:1,3 206:6,13,15
vishad 220:1
visit 17:24 97:16,19 136:15 137:15 139:1 185:11 228:17 236:24
visiting 204:20
visits 18:3 115:10 144:3 144:10 145:6 145:17,20,21 146:2,5,8,11 150:21 151:23 152:4 224:3 229:1 233:22 233:22 236:20 238:12,17,21 239:5,10,11 240:17 254:22
voice 203:1
voicemail 202:8

w

wait 174:7
waking 167:19 248:21 249:2,5 249:17
walk 21:12 192:15 259:5 263:17
walking 196:25
want 10:24 13:18,18,22 27:3 28:6 35:14 51:16 55:17 56:4 61:23 66:12,15 67:13 94:25 95:12 110:16 116:9 120:4 131:3

135:17 144:18 149:17 161:10 164:18 168:1 168:25 171:13 182:4 256:2 260:20
wanted 88:25 140:6 189:8 190:8 209:20 220:20,23
wants 224:20
washing 177:2
washington 1:13 2:4,21 6:9
water 1:7 6:5 8:4 9:20 78:7 78:11
way 34:18 63:7 65:13 138:14 181:9 187:24 218:15 232:23 240:11,24 241:6
we've 79:15 80:2 101:10 211:18 212:7
wear 170:7
wears 249:14
week 94:24 95:1 128:5 169:8,9 180:10 180:21 251:23 251:24
weekly 128:22 129:8,20 246:19
weeks 236:24
went 157:15 263:9,24
west 3:6
wide 138:20 262:19
wife 128:1 165:5 170:10 181:16 182:12 243:24 244:7 251:4
wished 191:21
witness 4:3 7:1 7:13 41:6 51:19 51:24 64:15 73:2 80:23 83:17 92:21 93:13 94:18 118:1 123:21 130:22 139:9 141:21 148:22 156:9 159:7 173:14 210:14 212:3,13 213:6 216:1 217:6,16 217:23 258:24 260:3 261:6,14 267:5,7,10
word 209:2 238:18
worded 218:15
words 17:5 18:10 26:16 40:23 85:2 88:16 90:7 95:21 100:1 112:25 125:2 129:19 131:18 142:13 150:25 163:8 167:9 197:24 231:2 251:22 260:6
work 7:24 20:19 21:16,20 21:22,23 25:24 27:20 28:1 34:9 38:18 46:3,8,11 46:12 47:10 50:18 55:24 56:8,11,18,21 57:2,3,7,12,15 57:17 63:11 76:19 78:18 79:9,10,10,16 80:3 81:7,9,18 81:20 82:7 83:10,12 86:21 172:17 173:2 173:18 174:1 184:25 189:2 201:2,4,6,8 215:2 217:13 236:25 241:4 249:25 259:3 261:10 262:25
worked 22:13 22:14,20 35:4 35:16 38:3,12 42:13,23,25 50:14 51:5 84:8 87:4 173:16 237:12,15,16 241:13 262:19
working 27:11 27:17 33:12 35:2 38:8,13 46:14 130:6 203:5,19 237:7 237:10 240:17
works 236:14 236:21
worse 142:14
write 164:20 187:25 188:1,7 188:13,18
writing 148:2
written 8:16,19 74:4,15 131:15 183:22 196:18 207:20 217:1 234:12,14
wrote 188:9

x

x 1:5,8 4:10 5:1 266:7,16

y

yeah 44:2 46:8 47:2 52:10 114:22 124:9 145:15
year 15:17 18:4 127:3,4,19,20 134:8 144:4,10 145:21 146:10 151:10,13,19 151:23 152:23 153:2,15 161:22 162:2,4 162:7,18,21,24 163:1,6,14,17 165:15 170:25 228:22 229:1 233:23 235:22 236:20 238:12 238:17,21 239:5,10,12 263:7,7,24
years 22:23 23:1,2 33:22 34:2,5,14,16 38:2,4,8,9,13 42:25 55:2 65:17,18 71:25 72:17 142:4 147:11 151:10 151:14 152:24 153:3,4 159:22 159:24 162:1 173:17 218:23 219:1 254:19 254:20 258:15 259:19 262:10 264:6
young 33:19

z

zoning 5:23 213:24 214:5
zoom 182:17

Exhibit 777

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF NORTH CAROLINA
SOUTHERN DIVISION

IN RE:	) NO. 7:23-CV-897
	)
CAMP LEJEUNE WATER LITIGATION	)
	)
This Document Relates to:	)
ALL CASES	)
_____	)

VIDEO DEPOSITION OF SYED HASEN M.D.
Los Angeles, California
Wednesday, February 4, 2026

Reported by:
Heidi Hummel-Grant
CSR No. 12556
Pages 1 - 121

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF NORTH CAROLINA
SOUTHERN DIVISION

IN RE:	) NO. 7:23-CV-897
	)
CAMP LEJEUNE WATER LITIGATION	)
	)
This Document Relates to:	)
ALL CASES	)
_____	)

Video deposition of SYED HASEN M.D., taken on behalf of Plaintiff, at 707 Wilshire Boulevard, Suite 3500, Los Angeles, California, beginning at 9:02 a.m. and ending at 12:33 p.m., on Wednesday, February 4, 2026, before Heidi Hummel-Grant, Certified Shorthand Reporter No. 12556.

APPEARANCES:

For Plaintiffs:
DAVIS BETHUNE JONES
BY: T.J. MALONE
TED RUZICKA, PRESENT VIA ZOOM
1100 Main Street,
Suite 2930
Kansas City, Missouri 64105
816.421.1600
tjmalone@dbjlaw.net

For Defendant UNITED STATES OF AMERICA:
U.S. DEPARTMENT OF JUSTICE
BY: MELANIE KONSTANTOPOULOS
DAVID ORTIZ
MICHAEL CROMWELL, PRESENT VIA ZOOM
JOEY TURNER, PRESENT VIA ZOOM
1100 L Street, NW
Washington, DC 20005
202.552.9843
konstantopoulosm@usdoj.gov

APPEARANCES (Continued):

Also present:

DARNELL BROWN, VIDEOGRAPHER

WHITNEY WALLACE

LESLIE MACCHIA

INDEX

Witness:
SYED HASEN M.D.

Examination:	Page
MR. MALONE	8

EXHIBITS

Number	Description	Page
Exhibit 1	SUBPOENA TO TESTIFY AT A DEPOSITION IN A CIVIL ACTION, SYED A. HASAN, M.D.,	10
Exhibit 2	12/02/2025 Vident Partners Invoice Number 7075, HASAN_USA_0000000010	13
Exhibit 3	Expert Report of Dr. Syed A. Hasan In Re Camp Lejeune Water Litigation, 7:23-CV-00897 (E.D.N.C.)	31
Exhibit 4	Materials Considered of Dr. Syed Hasan	39
Exhibit 5	Supplemental Materials Considered of Dr. Syed Hasan, January 28, 2026	40
Exhibit 6	Rebuttal Expert Opinion Report Marjorie Hackett-Wallace, RHIA, CHC, CFE, CPMA, CPC, CDEO, CPIP In Re: Camp Lejeune Water Litigation This Report Pertains to All Track 1 Bellwether Plaintiffs January 20, 2026, Corrected: January 27, 2026	79
Exhibit 7	Typewritten Notes, 01576_Peterson_0000003900	86

EXHIBITS (Continued):

		Page
Exhibit 8	Richard L.Barbano, MD, Ph.D., Diplomat of American Board of Psychiatry and Neurology, Diplomat of American Board of Electrodiagnostic Medicine, New York State License #188639, 01/12/2026 Letter, RE: Edgar Peterson	90
Exhibit 9	Hasan Appendix G Sparks Medical Bill Analysis.slxs	103
Exhibit 10	University of Rochester Medicine Center, School of Medicine and Dentistry, Department of Neurology, Heidi B. Schwarz, MD, FAAN, Professor of Clinical Neurology, January 9, 2025, Letter	108

^INSTRUCTED NOT TO ANSWER

Page	Line
22	17
70	7

Los Angeles, California

Wednesday, February 4, 2026, 9:02 a.m. - 12:33 p.m.

THE VIDEOGRAPHER: Good morning. We are now on the record.

My name is Darnell Brown and I'm the videographer with Golkow.

Today's date is February 4th, 2026, and the time is now 9:02 a.m. This video deposition is being held in Los Angeles, California, in the matter of Camp Lejeune Water Litigation, the United States District Court for the Eastern District of North Carolina. The deponent is Dr. Syed Hasan.

Counsel will be noted on the stenographic record.

The court reporter is Heidi Hummel-Grant, who will now swear in the witness.

SYED HASEN M.D.,

called as a witness by and on behalf of Plaintiff, having been first duly sworn by the Certified Shorthand Reporter, was examined and testifies as follows:

EXAMINATION

BY MR. MALONE:

Q Good morning, Doctor. Could you please state your full name for the record?

A Syed Ashraf Hasan.

Q And we briefly met before we had started, but my name is JT Malone, and I represent the plaintiffs in this case that you were retained in.

Do you understand that?

A Yes.

Q Okay.

You ever been deposed before?

A Yes.

Q Okay.

How many times have you been deposed?

A This would be the third time.

Q Okay.

So we're just going to cover a couple of ground rules first.

So obviously you were just sworn in. So you understand the testimony you're giving today is under the same oath you would take if you were testifying in court.

Do you understand that?

A Yes.
Q Okay.
If I ask you a question that you don't understand, just let me know and I'll try to rephrase it.
Is that fair?
A Yes.
Q If you tell me -- sorry.
If you don't tell me that you don't understand my question and you answer it, I'm going to assume that you know my question.
Is that fair?
A Yes.
Q Okay.
We can take a break at any time you need one -- I'll try to take a break, you know, about every hour for the court reporter and everyone -- but just let me know if you need a break. Okay?
A Okay.
Q Obviously we have a court reporter here who's taking a record of what we say. So let's try not to talk over each other. Let me finish answering the question before you get the answer, and I'll not to cut you off. It just makes it easier for record. All right?

A Yes.

Q Other thing: Verbal answers show up on the record, head nods and those kinds of things don't so let's just avoid uh-huhs and hums and head nods and just give verbal answers today. Okay?

A Yes.

Q Is there any reason you can't provide truthful and complete answers to my questions today?

A No.

MR. MALONE: Okay. Okay.

Doctor, I'm going to hand you what we are going to mark as Hasan Exhibit 1.

(Exhibit 1 was marked for identification by the Certified Shorthand Reporter, a copy of which is attached hereto.)

MR. MALONE:

Q Do you recognize this document?

A Yes.

Q Okay.

And what is this document?

A This is the subpoena to testify.

Q Okay.

So do you understand that you were requested to be here pursuant to this subpoena?

A Yes.

Q Okay.
And I will direct your attention to the second to last page. Let me know when you get there.
A Okay. Okay. I'm here.
Q Okay.
Do you see it says Schedule A up at the top?
A Yes.
Q Okay.
Did you review all of these requests and perform a search to ensure that you were providing responsive documents to this?
A Okay. Let me just read this.
Q Sure.
A Yes.
Q Okay.
Back at the top of page 1 of Schedule A we were looking at it says: Pursuant to the foregoing deposition subpoena respondent is requested to produce on or before January 28th, 2026, the documents requested herein.
Do you see that?
A Yes.
Q Okay.
When did you provide the responsive

documents to your attorneys?

MS. KONSTANTOPOULOS: Objection. To the extent that it calls for attorney-client privilege. I would instruct the witness not to answer.

Otherwise, you can answer the question posed.

MR. MALONE:

Q And let me just clarify -- and this list will be going forward today -- I am not going to ask for or try to get you to tell me any conversations or the contents of conversations between you and your attorneys. So to the extent that you can answer without discussing the contents of your discussions with your attorneys, I --

A You know, I don't remember the exact date that the information was submitted. The -- I don't remember how many days it was before January 28th. I just don't recall.

MR. MALONE: Okay.

I'm going to note for the record the subpoena issued to Dr. Hasan requested documents to be produced no latter than January 28th, 2026. The documents were not produced until the February 2nd, which is 48 hours prior to this deposition, and so the plaintiffs will reserve their right to hold this

deposition open given the untimely production of the responsive documents.

Q My next question for you, Doctor, what did you provide to your attorneys in response to the subpoena?

MS. KONSTANTOPOULOS: Objection to the extent it calls for attorney-client privilege and the substance of conversations.

Otherwise, you can the question.

THE WITNESS: I'm sorry, could you rephrase the question?

MR. MALONE:

Q Sure. What documents did you provide to your attorneys in response to this subpoena?

MS. KONSTANTOPOULOS: Same objection.

You can answer if you know.

THE WITNESS: Yeah, I created a report for the work I was asked to do. I had gave some of the basic information, my CV, those -- those were really the main -- the main items.

MR. MALONE: Okay.

Doctor I'm handing you what we will mark as Hasan 2.

(Exhibit 2 was marked for identification by the Certified Shorthand Reporter, a copy of which is

attached hereto.)

MR. MALONE: There should be three copies there. All right. There we go.

Q Do you recognize this document?

A No.

Q Okay.

What does it appear to be to you?

A It's an invoice for hours.

Q Okay.

Does this appear to be an invoice that was submitted for the work you've done in this case?

A Yes.

Q Okay.

And it is -- it appears to be for work performed in November of 2025; is that right?

A Correct.

Q Okay.

And down in to the bottom right corner, the total amount paid is $7,848.25; is that right?

MS. KONSTANTOPOULOS: Objection to form. Foundation.

You can answer.

THE WITNESS: Yes, that's the number that's in the corner.

MR. MALONE: Okay.

Q ,Doctor do you know who Vident Partners is?

A Yes.

Q Who is Vident Partners?

A It's an agency that does expert work. So they -- I've contracted with them and they bring forth cases that I might be eligible for.

Q Okay.

Doctor, if I represented to you -- but if you add up these hours here in the hours column it gets to 20.21 hours in this case.

Does that sound about right?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: I mean, I could -- if I add them up, yeah, that -- that seems right.

MR. MALONE: Okay.

Q And about midway down in the column Description of Services, it says Work Done By Registered Nurse -- Registered Nurse.

Do you know who the registered nurse is that's being referred to here?

A Yes.

Q Okay.

What is their name?

A Ani Mardyan.
Q Okay.
Could you spell the last name?
A Sure. M-A-R-D-Y-A-N.
Q And is it Miss Mardyan?
A Mrs.
Q Okay.
Is Mrs. Mardyan your employee?
A We -- we work together, not directly my employee.
Q Do you know who. Mrs. Mardyan's employer is?
A Yes.
Q Who is that?
A Regal Medical Group.
Q And it's your understanding that she's a registered nurse?
A Yes.
Q Okay.
Do you know any of her background qualifications beyond that?
A Yes. She is an intensive care unit nurse; she has extensive clinical training; she has worked at Regal Medical Group for approximately 13 years; she's well versed in prior authorization,

claims review, medical necessity. That's probably the main things that she's involved in.

Q Okay.

Do you know if she has any certifications related to medical coding?

A I do not know.

Q Okay.

Do you know if she's ever worked for CMS?

A I do not know.

Q Do you know if she's ever worked for the VA?

A I do not know.

Q Okay.

Did she write any portion of your expert review?

A No.

Q If you'll look back at the description of services column under that work done by registered nurse that we're talking about, the last one, two -- five entries are data analysis done by the registered nurse.

What data did she review?

A So she would review medical records to help justify or show aligned services that may or may not be related to the plaintiffs' medical

conditions for Parkinson's disease or related to medical conditions of that.

Q Okay.

Did you validate the accuracy of her analysis?

A Yes.

Q And when you say that she reviewed the medical records -- I'm just trying to get an understanding of the division of work here -- were there some records that you looked and some that she looked at or did you --

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: She -- there were some records she looked at, but I looked ultimately at all of the records. So she looked at a small portion, which I also reviewed, but there are records that she never reviewed that I did.

MR. MALONE: Okay.

Q What portion of the records did she review?

MS. KONSTANTOPOULOS: Objection to form.

You can answer if you know.

THE WITNESS: I -- I don't know.

MR. MALONE:

Q Did anyone besides the registered nurse perform work on this report?

A No.

Q Okay.

How many invoices have you submitted for your work in this case?

A One.

Q One. Okay.

And how much have you been paid so far for your work in this case?

A I haven't received any reimbursement yet.

Q Did you sign a retainer agreement for your work in this case?

A I have an agreement with Vident Partners -- I don't know if it's a retainer agreement -- I don't know the term, if it's a retainer agreement -- it seemed to me like a contract.

Q So did you sign a contract to work on this case?

A I signed a general contract to work on any case but it was not specifically for this case.

Q Okay.

Do you have a copy of the contract that you signed with Vident Partners that lets you work on this case?

A I -- I -- yeah, I probably have it in my email.

Q Okay.

And I would just ask that you provide that to your attorneys so it can be produced to us --

A Okay.

Q -- responsive to the subpoena. Thank you.

Doctor, what is your hourly rate for work in this case?

A $450.

Q Is that a flat rate for all services, or are there varying fee schedules?

A It's a flat hourly rate except for like court appearance. It's a -- it's a flat rate.

Q What is the rate for court appearances?

A I believe it's $4,000 for the day.

Q Would that information be in your contract with Vident?

A I believe so.

Q Okay.

Does Vident receive any portion of the fees

that you receive in this case?
A I don't know --
Q Okay.
A -- I don't know the arrangement.
Q What's your understanding of your agreement with Vident?
MS. KONSTANTOPOULOS: Objection to form.
You can answer.
THE WITNESS: I -- I'm sorry, can you clarify the question?
MR. MALONE:
Q Sure. When you -- I'll back up.
How did you come to be associated with Vident?
A The -- the individual there said he saw my experience on LinkedIn and reached out to me.
Q Okay.
So is it your understanding that Vident would connect you with opportunities for legal expert work?
MS. KONSTANTOPOULOS: Objection to form.
You can answer.
THE WITNESS: Yes.
MR. MALONE: Okay.
Q Is it your understanding that they would

be paid for that service?
MS. KONSTANTOPOULOS: Objection to form.
You can answer.
THE WITNESS: I -- I would assume so. I don't know.
MR. MALONE: Okay.
Q When were you first contacted about working on this case?
MS. KONSTANTOPOULOS: Objection to form.
You can answer.
THE WITNESS: It was approximately late September or early October of 2025.
MR. MALONE:
Q Have you ever worked with the Department of Justice before?
A No.
Q ^Do you know how the Department of Justice found you?
MS. KONSTANTOPOULOS: Objection. To the extent it calls for attorney-client privilege, I'm going to instruct you not to answer.
THE WITNESS: Okay.
MR. MALONE:
Q Do you have any personal connections with any other expert in this case?

A Can you --
MS. KONSTANTOPOULOS: Objection to form.
Sorry, you can answer.
THE WITNESS: Can you say -- just clarify personal connection?
MR. MALONE:
Q Do you know any of the other experts in this case on a personal level?
A I -- I -- yes, I do. We have Dr. Wang Ji.
Q And we spoke to him other day, you just mentioned that.
Do you have any connections with any attorney in this case on a personal level?
A No.
Q Okay.
What was the scope of work presented to you for your work in this case?
A I was -- I was asked to review the medical records and claims on basically three -- three particular areas: The first one is to assess the medical damages as asserted by the plaintiffs' expert Marjorie Hackett-Wallace to determine if those medical damages were or were not related to the patients' Parkinson's disease or conditions

stemming from it; the next thing I did was I reviewed the medical treatment that was rendered by the U.S. Government or an agency of the government to determine which treatments were given as related to the patients' Parkinson's disease or conditions stemming from it; and then thirdly I reviewed the veterans -- the disability -- service-related disabilities that were related to the plaintiffs' Parkinson's disease or conditions from it.

Q Okay.

Doctor, how many times have you been an expert a witness in a legal setting?

A Can you define leal setting?

Q Sure. So how many times have you either provided expert opinions, expert reviews or expert testimony in a legal case?

A Probably six times.

Q Can you describe generally the types of cases you've worked on in the past?

A Sure. So I work for group, Heritage Provider Network, and at times I would be asked to review medical records for our in-house attorneys and give my medical opinions on the specific questions they ask for those cases.

Q Have you ever worked on any other type

of case besides that you just described?

A No. I mean, the only other thing was if patients received services at the institutions and whether or not those medical bills, again, were related or appropriate to the care rendered.

Q Okay.

And so you mentioned earlier that you've been deposed twice before this --

A Ye.

Q -- is that right?

Were both of those cases related to the kind of disputes you just described?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Yes.

MR. MALONE: Okay.

Q Have you ever provided expert opinions on the value of past government health benefits?

A Yes.

Q When did you do that?

A About two years ago.

Q And who retained you in that case?

A Our in-house counsel for my -- for my employer.

Q Did you prepare an expert report in that

case?

A No, I did not need to.

Q Okay.

Were you deposed in that case?

A No.

Q And did you testify at trial in that case?

A No.

Q Okay.

Do you know how the case resolved?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: There was some kind of settlement amount -- I don't know how much or what -- between the institution that rendered services and our group.

MR. MALONE:

Q So this was a dispute between the institution that --

A Rendered services and our group that is the payor of those services.

Q Okay.

Have you ever provided expert opinions related to veterans benefits?

A No.

Q Have you ever worked for the VA?
A No.
Q Have you ever worked for CMS?
A No.
Q Have you ever worked for any government agency?
A No.
Q Okay.
Doctor, again with the caveat that I'm not seeking any communications between you and your attorneys, what did you do to prepare for today's deposition?
A I reviewed my -- my report thoroughly; I reviewed the reports of the plaintiffs' experts.
Q Anything else?
A No.
Q Did you have any meetings with your attorneys before this deposition today?
MS. KONSTANTOPOULOS: Objection. To the extent it calls for substance regarding those meetings, assert attorney-client privilege.
You can answer the question.
THE WITNESS: Yes.
MR. MALONE: Okay.
Q How many meetings did you have?

A Four.

Q Again, without revealing the substantive content of communications with your attorneys, what are the names of the attorneys you met with?

A Melanie Konstantopoulos, Manuel Ortiz, Joe Turner and Michael Cromwell.

Q Okay.

And was your nurse assistant present at these meetings?

A Not all of them. I don't recall which ones she was present at or not, but she wasn't present at all of them.

Q Okay.

Referring back to Exhibit 2, the invoice, there are -- it appears there are three line items in the description of services for services of Dr. Hasan and the RN assistant for TEAMS calls on November 10th, 2025, November 12th, 2025 and November 19th, 2025.

Were those TEAMS calls the meetings that you're referring to?

A Yes, I believe so.

Q I want to direct you a little further down in the section Work Done by Registered Nurse on 11-20-2025 there are 0.67 hours for TEAMS call with

DOJ.

Were you present for that meeting with the DOJ?

A I don't believe so.

Q Okay.

MS. KONSTANTOPOULOS: Counsel, for the record are you asking about meetings in preparation for the deposition for today or just any meetings?

MR. MALONE: I'm kind of referring to both of them right now.

MS. KONSTANTOPOULOS: Okay.

MR. MALONE:

Q But I will clarify. I appreciate that.

These -- these meetings on your invoices were not in preparation for your deposition; is that right?

A Correct.

Q Were these meetings in preparation for your report?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Not -- not necessarily. Sometimes it was --

MS. KONSTANTOPOULOS: Objection. To the extent it calls for attorney-client privilege, I

would instruct you not to answer regarding the substance of these meetings.

MR. MALONE: That's -- that's totally fine.

Q When were the meetings you had to prepare for this deposition?

MS. KONSTANTOPOULOS: Objection to form.

You can answer if you know.

THE WITNESS: I believe over the last two weeks --

MR. MALONE: Okay.

THE WITNESS: -- maybe three weeks.

MR. MALONE:

Q How many hours have you spent working on this case since November 2025?

A I'm not sure because I haven't tallied up all my hours.

Q What's your best estimate?

MS. KONSTANTOPOULOS: Objection to form.

You can answer if you know.

THE WITNESS: Maybe 80 to 100 hours.

MR. MALONE:

Q I believe it was your testimony earlier that you have not submitted those invoices for that time yet; is that correct?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Yes, I have not. I have not submitted it.

MR. MALONE:

Q Does that include the hours worked by your nurse?

A No, she -- she keeps her own tally of her hours.

Q Okay.

Do you review the invoices submitted by your nurse?

A No.

Q Okay.

You can set those aside.

A Okay.

MR. MALONE: Doctor I'm handing what we're going to mark Exhibit 3.

(Exhibit 3 was marked for identification by the Certified Shorthand Reporter, a copy of which is attached hereto.)

THE WITNESS: Okay. Sorry.

MR. MALONE:

Q Do you recognize this document?

A Yes.

Q And what is it?

A This is the report I prepared for this case.

Q Okay.

And we are going to start -- I'll ask you to turn to Appendix I.

MS. KONSTANTOPOULOS: Counsel, what page would that be on?

MR. MALONE: I am not sure if it is numbered.

THE WITNESS: 28?

MR. MALONE: Let's see here. Yeah, page 28, Appendix I.

Q Are you there?

A Yeah.

Q Okay.

And flipping to the next page, is this your current CV?

A Yes.

MS. KONSTANTOPOULOS: For the record, Counsel, a copy of his CV was provided in response to the subpoena. So I assume you have that.

MR. MALONE: Okay.

Q Doctor, if you could turn to page 4 of Appendix I and just let me know when you're there.

A Sure. I'm here.

Q Okay.
So you completed your bachelor's degree in 1993; is that correct?
A Yes.
Q And your received that MPH -- is that a master's in public health --
A Yes.
Q -- in 1996?
A Yes.
Q Okay.
Turning back to page 3, you completed medical school in the year 2000; is that right?
A Yes.
Q And you completed a residency in internal medicine in 2004; is that correct?
A Yes.
Q Did you complete any fellowships?
A No, I did not.
Q Okay.
Doctor, are you a neurologist?
A No, I am not.
Q Okay.
Do you have any specialized training of movement disorders?
MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: No, I do not.

MR. MALONE: Okay.

Q Moving up the page there, you were a hospitalist at Apollomed Hospitals from 2005 to 2006; is that right?

A Yes.

Q And what did you do as a hospitalist when you were at Apollomed?

A I would admit patients from the emergency department and care for them through the continuum until they discharged out of the hospital and go to home or to another facility.

Q And then just on page 1 of -- or it says Summary of Executive Experience.

You are currently the chief -- is it chief medical officer at Regal Medical Group?

A Yes.

Q Okay.

How do you describe what you do as chief medical officer?

A I have a whole lot of duties. So I oversee a clinical program for hospitalists and nurse practitioners; I oversee clinical coding in the institutional setting; I review institutional

claims and professional claims for primary review and appeal; I train medical directors; I train nurses and care coordinators, discharge planners; I train and clinically oversee our clinical team, new doctors, nurse practitioners; I am involved in contracting with institutional professional settings. That's -- that's probably --

Q Sure.

A -- most of my day.

Q And actually I wanted to kind of discuss a little bit about that.

So it sounds like you have quite a few duties.

What percentage of your day is spent treating patients?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: About 30 percent.

MR. MALONE: Okay.

Q And is Regal Medical Group, is that one hospital or are there multiple facilities?

A Regal Medical Group -- it's not a hospital; it's a managed care organization yeah.

Q What is a managed care organization?

A So the -- the group, our group,

contracts with health plans and patients that are aligned to different health plans, like HealthMed, Blue Cross Blue Shield -- there's 16 different health plans -- those patient lives are aligned to our group and we are responsible for all the care coordination of that patient along multiple disciplines.

Q So I guess my question: In what setting do you treat patients typically?

A Predominantly in the hospital.

Q Okay.

Where else?

A In a clinic, but that's just a very small percentage.

Q Do you see patients in a neurology clinic?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: No, I do not.

MR. MALONE:

Q Doctor, are you a certified professional medical auditor?

A No.

Q Are you a certified professional coder?

A No.

Q Are you a registered health information administrator?
A No.
Q Are you a certified fraud examiner?
A No.
Q Okay.
How much of your time is spent coding in the hospital?
A Probably about a third of my time.
Q Okay.
Are you familiar with the term miscoding?
A Yes.
Q What does miscoding mean?
A For our group miscoding is if a -- if a code is attached to a patient that does not correspond with the care they receive or the diagnosis they have.
Q Are you familiar with the term upcoding?
A Yes.
Q What does upcoding mean?
A Upcoding is charging for services at a higher rate -- generally speaking, a higher CPT code or rate than the services that were rendered.
Q How much of your time is spent auditing other providers' coding?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: I don't know if I can quantify the exact. But since I train and oversee the -- our physicians and nurse practitioners, I end up reading like all of their notes on a daily basis. So I don't know if I can tell you the exact timing of it. It would be several hours a day.

MR. MALONE: Okay.

THE WITNESS: Yeah.

MR. MALONE:

Q When you're actively seeing patients, does anyone assist you in your coding?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: No, no.

And just to clarify, when I -- we're practicing, we have to write notes, so we're practicing and writing notes and coding. It's all kind of simultaneous.

MR. MALONE: Okay.

Q Thank you for clarifying that. I appreciate that.

How much time do you spend doing legal expert work like this?

MS. KONSTANTOPOULOS: Objection to form.
You can answer.
THE WITNESS: Probably -- maybe less than two percent of all of my work. I'm very busy at my job.
MR. MALONE:
Q Have you ever worked for CMS?
A No.
Q Have you ever worked for VBA?
A No.
Q Have you ever worked for any government agency?
A No.
MS. KONSTANTOPOULOS: Objection to form. Asked and answered.
MR. MALONE: Doctor, I'm going to hand what we'll mark as Exhibit 4.
(Exhibit 4 was marked for identification by the Certified Shorthand Reporter, a copy of which is attached hereto.)
THE WITNESS: Okay.
MR. MALONE:
Q Do you recognize this document?
A Let me take a quick look. Yes.
Q What is this document?

A This is a list of materials considered for the report I put together.

MR. MALONE: Okay.

I will now hand you what we will mark as Exhibit 5.

(Exhibit 5 was marked for identification by the Certified Shorthand Reporter, a copy of which is attached hereto.)

MR. MALONE:

Q Do you recognize this document?

A Yes.

Q What is this document?

A This is the supplement to the original document for materials considered.

Q Okay.

So Exhibit 4 and Exhibit 5 are a list all the materials that you read and reviewed in forming your report and opinions in this case; is that right?

A Yes.

Q Did you read all of these documents?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Yes.

MR. MALONE:
Q In their entirety?
MS. KONSTANTOPOULOS: Objection to form.
You can answer.
THE WITNESS: Yes.
MR. MALONE:
Q Doctor, you can set those aside for right now --
A Okay.
Q -- and turn back to Exhibit 3, your report.
A Okay.
Q Can you turn to page 1 of your report?
A Okay.
Q At the bottom of the first paragraph you write --
MS. KONSTANTOPOULOS: Counsel, for the record, page 1 is the cover page. Are you referring to page 2?
MR. MALONE: Oh, thank you for clarifying that. Yes, it is page 2.
Q At the bottom of the first paragraph on page 2 you write: I was not retained and I have not been asked to provide any analysis as to whether any individual plaintiff's Parkinson's disease was

caused by the alleged respective exposure to the water at Camp Lejeune and I am not offering any opinion on this subject.

As we sit here, is that still true?

A Yes.

Q Just below that, the bullet points, you write: Specifically, I have been retained to provide independent expert analysis as to whether the past medical damages asserted by plaintiffs' expert Marjorie Hackett-Wallace to the extent applicable are or are not clinically related to each plaintiff's Parkinson's disease or any conditions stemming from their disease.

Did I read to right?

A Yes.

Q Okay.

How do you define clinically related?

A If the -- with a patient's Parkinson's disease they could have multiple other kind of comorbid conditions or conditions that could develop as a result of the Parkinson's disease. So when that occurs, I looked at those -- those medical conditions in the medical records, and then I determined whether or not it was related to the Parkinson's disease itself or associated with it.

Q Turn to page 3 of your report under the heading Methodology for Review.

Do you see that?

A Yes.

Q You write: My approach to reviewing the provided medical bills, invoices and governmental medical claims data is consistent with my work as a hospitalist and as a medical director for a managed care organization. I am often tasked with reviewing medical claims, bills and payments to determine the appropriateness of medical treatment.

Did I read that correctly?

A Yes.

Q Could you give me an example of when you were tasked with doing that?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Yes. So on a daily basis I review medical claims for my employer. I look at patients who like enter institutional facilities like hospitals and then the different services that were rendered during that hospitalization, whether or not they were appropriate to the primary diagnosis of the patient coming in; and I look at the services that were ordered, if they were

administered in a timely manner, were they related to the primary diagnosis coming in or they may have been extra or additive. So I do that on a daily basis.

MR. MALONE:

Q Is the appropriateness of medical treatment the same as the relatedness of treatment to a specific disagree?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: The -- it's a little bit different.

Appropriateness of medical treatment is -- is treating the core disease or the disease process or condition from it. Relatedness could be a medical condition that stems from it but may not meet the treatment necessarily at that time.

MR. MALONE: Okay.

Q I'll direct to the last page in that paragraph that we were discussing on page 3, you write: Using this experience and applicable standards, I reached my opinions for each of the plaintiffs regarding their claimed medical expense damages, past government medical offsets and service-connected disability as they're related to

their Parkinson's disease or any condition stemming from or clinically related to their Parkinson's disease.

Did I read that correctly?

A Yes.

Q What applicable standards did you use in this case?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Okay. Let me read this again.

The applicable standards are through my medical experience and understanding, knowing and treating thousands of patients with Parkinson's disease. So I'm familiar with their related illnesses.

So when I -- when I look at the patients or when I've treated patients with Parkinson's disease and understanding what those other clinical conditions are, that is the experience and -- that I actually apply to -- to the work that I brought forth here.

MR. MALONE: Okay.

Q So it's not necessarily a written set of standards; it's your experience dealing with these conditions?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: It's -- it's partly experience, and then the other part of it is standard treatment in the medical community and for patients with these conditions related conditions.

MR. MALONE: Okay.

Doctor, we've been going about hour. Would you like to take a five, ten-minute break here?

THE WITNESS: Yeah.

MR. MALONE: Okay.

THE VIDEOGRAPHER: The time is now 9:56. Going off the record.

(A recess is taken.)

THE VIDEOGRAPHER: The time is now 10:10. Back on the record.

MR. MALONE:

Q Dr. Hasan, we're back on record after a short break. I just have a couple of kind of follow-up questions on things we talked about already. Okay?

You said you have seen thousands of Parkinson's disease patients; is that right?

A Yes.

Q In what setting did you see or do you

see Parkinson's patients?

A Mostly hospital.

Q Where else do you see Parkinson's patients?

A A very small percentage in -- in like a clinic setting, continuity clinic setting.

Q What is a continuity clinic?

A When a patient leaves the hospital and they're continuing, we see them in a clinic to make sure they continue to improve, they're feeling better, they pick up their medications, really to take the plan from the discharge to make sure it's being effectuated when the patients actually leave the hospital.

Q So these are like follow-up visits after you visit the hospital?

A Yes.

Q So the Parkinson's patients that you treat are in the hospital for any reason?

A Correct.

Q And those patients have Parkinson's?

A Correct.

Q They're not necessarily there because or to get treatment for Parkinson's?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: It could be both.

MR. MALONE: Okay.

Q And you are not the treating neurologist for those Parkinson's disease patients; is that right?

A Correct.

Q I wanted to ask a question about -- forgive me, I've already forgotten the -- your nurse that you worked on in this case, what was her name?

A Ani Mardyan.

Q Thank you.

In what setting does Nurse Mardyan typically work?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: In the office.

MR. MALONE:

Q Does Nurse Mardyan -- strike that.

How often does Nurse Mardyan see patients?

A In the work I do with her, she -- she sees patients maybe 10 to 20 percent of the time.

Q So 80 to 90 percent of Nurse Mardyan's work would be administrative?

A Yes, administrative.

Just to clarify, she does care management. So even though there's administrative work, there's clinical aspects to that. So her team of nurses and discharge planners are reviewing medications, speaking to the patients about their clinical illnesses and the treatment plans set forth by the doctors.

Q Okay.

A She's not giving direct patient care, giving patients their medication themselves but all the care coordination associated with it. So there's some clinical and some administrative.

Q Got it. Okay.

Doctor, if you could turn back -- open Exhibit 3, which is your report, and turn to page 4. Let me know when you're there.

A Okay.

Q In the first sentence of the second paragraph you write: To determine what charges plaintiffs claimed as past medical damages, comma, I reviewed the plaintiffs' expert report prepared by Marjorie Hackett-Wallace and the corresponding charges that were listed in each of the five plaintiffs' amended demanded damages forms. I then reviewed the charges listed on the plaintiffs'

amended damages forms and the billing and medical records cited by Hackett-Wallace to support those charges to determine whether the charges were clinically related to the diagnoses.

Did I read that correctly?

A Yes.

MS. KONSTANTOPOULOS: Objection to the inclusion of the word comma, it's just a comma, just for the record.

MR. MALONE: Noted.

Q So you began with billing data and then looked at the corresponding medical records?

A No, no, not necessarily.

Q Okay.

A The -- some of the billing data was on spreadsheets that had billing information, but I looked at the services that were rendered and validated it by the medical records.

Q Okay.

In the last paragraph of page 4, I believe the second to last sentence, you write: In making my clinical determinations I relied on my training, education and years of clinical experience treating patients with the same conditions as the plaintiffs who are the subject of this report.

Did I read that correctly?

A Yes.

Q Okay.

Doctor, so neurologists and movement disorder specialists are the clinicians who typically massage and assess Parkinson's disease patients; is that right?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Yes.

MR. MALONE:

Q In this next sentence, the last sentence on page 4, you write: For issues related to the ICD-9 and ICD-10 codes referenced in the available document, I refer to and rely upon the CMS coding guidelines and follow the CMS standard conventions.

Did I read that right?

A Yes.

Q What issues did you identify relating to ICD-9 and ICD-10 codes?

A Can you be more specific?

Q I'm -- I'm just trying to understand what you mean when you say issues related to the ICD-9 and ICD-10 codes.

A Oh, okay. Sure. So ICD-9 and 10 codes

are diagnosis codes. So the diagnosis codes are sometimes listed as part of a medical record, they're often a part of the billing. Sometimes from the ICD-9 to 10, some of the codes have changed, some of them are omitted. So for anything that may have been under the prior coding from ICD-9 as it subsequently changed to 10, those are some of the things that don't always crossover so I had to use my experience and knowledge to see if the ICD-9 code and 10 code were more or less relevant, the same or the newer code that was maybe omitted or deleted in the prior -- in the ICD-9.

Q So you would not just simply rely on whatever the ICD code says without verifying it?

A Yes.

Just to clarify my answer, the -- the code -- the ICD-9 and 10 codes are just codes. So I actually looked at the medical record to determine that if the codes are documenting, is it substantiated in the medical reports. So that's the way to really actually put the right diagnosis code based on the -- what the patient is being seen for. So I relied on the medical records heavily, not just the code.

Q Doctor, if you can turn to page 5 of

Exhibit 3.

And in the first paragraph discussing the amounts charged versus what you call the negotiated rate, the third to last sentence reads: The allowed amount, also called the negotiated rate, is the maximum amount an insurance company will cover for a service based on its contract with the provider. This figure is often, but not always, reflective of the actual cost of rendering medical services. Sorry, of rendering the medical service.

Did I read that correctly.

A Yes.

Q Okay.

Would an uninsured patient have to pay the amount charged?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: I -- I don't -- I'm not familiar with what uninsured patients pay or don't pay. So I'm not sure what they would ultimately pay.

MR. MALONE:

Q Is it possible they could pay that amount?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: The whole amount or the total amount?

MR. MALONE:

Q Correct.

A I think it's possible.

Q In the third sentence of the first paragraph on page 5 referring to amount charged, you write: It is often an inflated figure that does not reflect the actual market value of what the provider expects to collect.

Did I read that correctly?

A Yes.

Q What do you mean by inflated?

A The -- the figure is higher than the provider expects to be reimbursed.

Q But these charges aren't fraudulent; correct?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: I -- I can't say specifically if they're fraudulent or not. The -- the provider offices set forth usually these retail prices, if you will, and -- and that's what they charge. But I wouldn't say it's fraudulent.

MR. MALONE: Okay.

Q Would you say that these retail prices have some rational basis in the cost of treatment?

MS. KONSTANTOPOULOS: Objection to form. Foundation.

You can answer.

THE WITNESS: No, I -- I'm not certain if it has any rate rational to it.

MR. MALONE: Okay.

Q Would you agree that the negotiated rates reflect the negotiating power of the payor --

MS. KONSTANTOPOULOS: Objection --

MR. MALONE:

Q -- in their contract with the provider?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Could you -- can you restate the question?

MR. MALONE:

Q Sure. I'll actually point you to page 6 of your report.

A Okay.

Q And this is the second to last paragraph, third sentence, and you say: By way of example only, charges for services provided by

medical providors to Medicare are generally significantly higher than the amounts that those medical providers are generally reimbursed.

So I guess I would ask with regards to that why are charges to Medicare generally higher than to other payors?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Again, I don't know if I'm following your question. Can you restate it?

MR. MALONE:

Q Sure. So -- and this was back on page 5 we were talking about in the first paragraph where you wrote: The allowed amount, also called the negotiated rate, is the maximum amount an insurance company will cover for a service based on its contract with the provider.

So what I'm asking is: Do some insurance companies and healthcare payors have more negotiating power in their contract negotiations with the provider in your experience as a medical director?

MS. KONSTANTOPOULOS: Objection form.

You can answer.

THE WITNESS: Yes, sometimes.

MR. MALONE:

Q Could you give me an example of that?

A Yes, the -- the payor will let the -- will negotiate a rate with the provider that would be, let's say, 95 percent of the Medicare -- the going Medicare rate but would also put in like a 5 or 10 percent quality metric if services are rendered timely or patient satisfaction is high aligned with quality metrics. So sometimes part of the reimbursement is slightly lower, but it's also made up in quality metrics so that the patients ultimately get good outcomes.

Q In the last sentence in the first paragraph of page 5 you write: The final payments are adjusted due to deductibles, copayments and other payments that may not be covered by insurance.

Did I read that correctly?

A Yes.

Q Would you agree that there are costs to the patient that wouldn't be captured in billing data alone?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: It -- it -- it is mostly caught or it is caught because most billing forms

also have an EOB or an explanation of benefit for patient portion versus the amount paid by insurance. So there are mailings that go out to patients and providers for -- for those amounts to cover the total cost of what was negotiated.

MR. MALONE:

Q Second paragraph of page 5, first sentence, you write: I am not offering an opinion regarding the validity of bill charges versus reimbursed payments in reflecting the cost of care of medical damages.

Did I read that correctly?

A Yes.

Q And is that, in fact, your opinion in this case?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Yes.

MR. MALONE:

Q Doctor, you're not an attorney; correct?

A No, I'm not attorney.

Q Turning down to the next section on page 5, Methodology for Reviewing Past Government Medical Offsets, the first sentence you write: To determine whether a past medical offset is

clinically related to the diagnosis -- diagnoses alleged by plaintiffs, I reviewed plaintiffs' payment data from CMS, TRICARE, the VHA, TriWest and CCN.

Did I read that correctly?

A Yes.

Q And in the last sentence of that same paragraph you write: However, by reviewing this data I could ensure that my review is not tainted by any such potential deficiencies.

It goes on to state: My analysis was not focused on billing practices but instead focused on the clinical relatedness of claims.

Did I read that correctly?

A Yes.

Q How did you review the data to ensure that there were no potential deficiencies?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: For every claim that was made I found an associated medical record to substantiate that particular bill. So if the bill was for a particular service, I reviewed and found the medical record that would be -- that would, again, substantiate that -- that service that was

rendered. I didn't rely only on one billing or coding.

MR. MALONE:

Q What's your understanding of the process by which payment data gets from the patient's treatment facility to the data set that you were given?

MS. KONSTANTOPOULOS: Objection to form. Foundation.

You can answer.

THE WITNESS: I -- I do not -- I'm not knowledgable of that at all.

MR. MALONE: Okay.

Q Did you speak to anyone at CMS, TRICARE, the VHA, TriWest or CCN about the data you received?

A No, I did not.

Q OKAY.

Turning to page 6 of your report, second to last sentence of the first paragraph, you write: In my calculation of these offsets I included only the actual amount paid that was reported instead of what was charged to only reflect the actual amount the government paid for each related medical condition.

Did I read that correctly?

A Yes.

Q So you did quantify the amount that the patient ultimately paid for these amounts?
MS. KONSTANTOPOULOS: Objection to form.
You can answer.
THE WITNESS: No, I did not. That was not what I was asked to do, to quantify payments that the patient made.
MR. MALONE:
Q Doctor, Parkinson's disease is a complex neurological disorder; is that right?
A Yes.
Q And evaluating whether other conditions are secondary to Parkinson's or related to Parkinson's disease can involve pretty complex medical judgment. Is that fair?
MS. KONSTANTOPOULOS: Objection to form.
You can answer.
THE WITNESS: Yes.
MR. MALONE:
Q You did not consult a neurologist or a Parkinson's specialist when you made your relatedness determinations here; is that right?
A Correct.
Q Doctor, are you familiar with CMS's Medicare Program Integrity Manual?

MS. KONSTANTOPOULOS: Objection to form. Foundation.

You can answer.

THE WITNESS: No, I'm not.

MR. MALONE: Okay.

Q Doctor, on page 2 of your report, the last sentence you write -- I'll let you get there, I'm sorry.

A Um-hum.

Q You state: I am well versed in the -- in the billing and reimbursement practices for various insurance types/lines of business, including, but not limited to, Medicare, Medi-Cal, TRICARE, VA and commercial and exchange products.

Did I read that correctly?

A Yes.

Q But you've never reviewed the Medicare Program Integrity Manual?

MS. KONSTANTOPOULOS: Objection to form. Foundation.

You can answer.

THE WITNESS: No, no, I have not.

MR. MALONE:

Q Not something that was in your training?

MS. KONSTANTOPOULOS: Objection to form.

Foundation.

You can answer.

THE WITNESS: No, it was not.

MR. MALONE:

Q Doctor, is it your opinion that what you referred to as offsets represent payments from CMS, TRICARE, VHA, TriWest and CCN for charges incurred due to the plaintiffs' allegedly Camp Lejeune-related medical treatment?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: I'm sorry, could you -- that was a long question.

MR. MALONE: I'm sorry. No, there's a lot of providors --

THE WITNESS: Sure. Sure.

MR. MALONE:

Q What I'm trying to ask is when you're using the term offset here, you are referring to past payments made by government providers for medical bills, the billing which is related to their Parkinson's disease and related conditions?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Yes.

MR. MALONE: Okay.

Q And with regard to plaintiffs' claimed related conditions, you are assuming the conclusions of the plaintiffs medical experts; is that right?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: I'm not assuming their opinions are correct or incorrect. I reviewed their records, their expert on testimonies and their writeups, and hen I used that against the clinical medical records that -- for what the patients actually received.

MR. MALONE:

Q Doctor, if you'll turn to page 8 of your report, Appendix A. And in the third paragraph -- I'm sorry, the third sentence of the first paragraph under the heading Overview of Case, you write: Assuming the conclusions from the plaintiff's expert are correct for the purposes of my damages opinions, charges related to medical care that is directed towards the management, monitoring and treatment of Parkinson's disease and alleged symptoms are considered related.

Did I read that correctly?

A I'm trying to follow you.

Let's see. Could you reread that? You said that you were on the first paragraph.

Q Yes, of page, 8 Appendix A --

A Yeah.

Q -- plaintiff is Gary McElhiney?

MS. KONSTANTOPOULOS: McElinhey.

MR. MALONE: McElinhey. Thank you.

Q So you write: Assuming the conclusions from the plaintiff's expert are correct for purposes of my damages opinions, charges related to medical care that is directed towards the management, monitoring and treatment of Parkinson's disease and the alleged symptoms are considered related.

Did I read that correctly.

A Yes.

Q So is it fair to say that for purposes of your damages opinions you are assuming the conclusions from the plaintiffs' experts are correct?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Again, for the -- for what was written in their reports, everything, again, was validated with the medical record. So if they -- if the plaintiffs' expert wrote that services were

related or unrelated, I -- again, I validated and made my own independent determination.

MR. MALONE:

Q So did you assume the conclusions of the plaintiffs' experts were correct for your purposes within the scope of what you were asked to do?

MS. KONSTANTOPOULOS: Objection to form. The report speaks for itself. You just read it exactly.

You can answer.

MR. MALONE: Are you instructing him not to answer?

MS. KONSTANTOPOULOS: No, no, you can answer.

THE WITNESS: Yes, I didn't make independent opinions of what was -- what was causative or not. I, again, reviewed the medical record -- I'm trying my best to answer your question -- I did it based on the information that was submitted to make sure everything was validated. That was -- that was my portion of the work that I was asked to do.

MR. MALONE: Okay.

Q Let's turn to page 6 of your report under the heading Methodology for Review of Veteran's Service-Connected Disability

Determinations.

Do you see that?

A Yes.

Q Okay.

Doctor, have you ever evaluated VA disability ratings?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: No.

MR. MALONE:

Q Have you ever been trained in evaluating VA disability claims?

A Not VA disability claims.

Q Okay.

What is your understanding of what VBA disability rating percentages represent?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: The disability rating is set forth by the -- by the associated medical condition or disability incurred from the -- from the patient's subsequent medical condition and to the extent it would affect their life or their well-being.

MR. MALONE:

Q So it's your opinion that VBA disability ratings are based on impairment to their life -- the claimant's life or well-being?

MS. KONSTANTOPOULOS: Objection to form. Foundation.

You can answer.

THE WITNESS: Health-related. Health-related well-being.

MR. MALONE: Okay.

Q Health-related well-being.

Did you calculate the value of these VBA benefits?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: The -- the value? I -- again, can you clarify?

MR. MALONE:

Q Sure. Did you assign a dollar value to the VBA benefits you reviewed?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: I -- I did not personally assign a dollar value to that.

MR. MALONE:

Q And you didn't calculate the future value of any government benefits that you reviewed?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: No, I did not.

MR. MALONE:

Q Doctor, if you'll turn to page 7 of your report in the paragraph directly before your Conclusions section -- and this is the -- beginning with the second to last sentence, you write: I am not opining whether the VBA's determinations that a certain condition or illness is secondary or connected to a plaintiff's Parkinson's disease is correct. Instead, I am merely noting that the conditions are identified by VBA as being presumptively connected with plaintiff's Parkinson's disease and/or his or her Camp Lejeune exposures and therefore would be considered related for the sole purpose of determining the amounts paid by the United States in connection to plaintiffs' Parkinson's disease.

Did I read that correctly?

A Yes.

Q Okay.

The word related is in quotes.

What does related mean to you in this context?

A The -- the disability is related to their Parkinson's disease or a condition stemming from it.

Q ^Doctor, were you asked assume that VBA disability service connections were related?

MS. KONSTANTOPOULOS: Objection to the extent it calls for attorney-client privilege and the substance of communication.

Instruct you not to answer the question.

MR. MALONE: Okay.

This is a good spot for a break. Ten minutes?

THE VIDEOGRAPHER: The time is now 10:47. Going off the record.

(A recess is taken.)

THE VIDEOGRAPHER: Time is now 10:58. Back on record.

MR. MALONE: Okay.

Q Dr. Hasan, we're back from another break. Just wanted to ask a few follow-up questions on what we discussed, and then we'll discuss some of the plaintiffs you evaluated a little more.

Is that okay?

A Yes.

Q Doctor, have you read the Camp Lejeune Justice Act?

A No, I have not.

Q I just want to make sure I'm capturing the scope of your opinions in this case.

You were asked to quantify the amounts that were paid by Medicare and -- let's call them government agencies -- as well as verify past payments identified by the plaintiffs' expert Marjorie Hackett-Wallace; is that correct?

MS. KONSTANTOPOULOS: Objection to form. Objection to attorney-client privilege to the extent it goes to the substance of communications with counsel.

However, regarding the scope, you can answer the question.

THE WITNESS: For the work I had to do, I -- again I assessed the related medical conditions, the services that were rendered by those governmental agencies and then the -- the disability assessments that were made by the VBA.

MR. MALONE:

Q So you're not offering an opinion on

which of those categories should be included as an offset --

MS. KONSTANTOPOULOS: Objection --

MR. MALONE:

Q -- is that right?

MS. KONSTANTOPOULOS: Objection to form.

MR. MALONE: And, Counsel, please let me finish my question before the objection, please.

MS. KONSTANTOPOULOS: Sure.

You can answer.

THE WITNESS: The -- I'm sorry could you just rephrase the question to make sure I got it?

MR. MALONE:

Q Are you offering an opinion on which of the amounts and benefits that you quantified should be offsets in this case?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: I -- I looked at the treatments that were rendered, and if they were related to those Parkinson's disease or those related conditions, then I did include it in my report as a related condition and service that was rendered.

MR. MALONE:

Q But you don't have an opinion on which of those relatedness conditions should be applied as an offset?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: If those services were rendered, I included it in my report as part of the services that were rendered as an offset.

MR. MALONE:

Q Does that include then -- I'm sorry.

What is your understanding of what the word offset means in context with the Camp Lejeune Justice Act?

MS. KONSTANTOPOULOS: Objection to form. Foundation.

You can answer.

THE WITNESS: That if a service was rendered and there was an associated payment with it, that that payment was used to look at what -- what the government or government-related agencies had paid for part of the treatment for those related conditions.

MR. MALONE: Okay.

Q So you are offering the opinion that --

strike that.

Do you hold an opinion on what a legal offset is?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: No, I do not.

MR. MALONE: Okay.

Q You were asked to quantify the amounts paid by the VHA, Medicare and TRICARE; is that right?

MS. KONSTANTOPOULOS: Objection to form. Foundation.

You can answer.

THE WITNESS: Yes, for the service that related to the patient's Parkinson's disease.

MR. MALONE: Okay. Okay.

Q Doctor, let's turn back to page 8 of your report, Exhibit 3, Appendix A. Let me know when you get there.

A Yeah, I'm here.

Q Okay.

This was your evaluation of Gary McElhiney; is that right?

A Yes.

Q Okay.

If you'll turn to page 10, which is still in

the section for this plaintiff, under the heading Conclusions?

A Okay.

Q And the last sentence of that paragraph reads: Additionally, the total amount the United States government via CMS, Medicare, VHA, CCN and TRICARE paid for Mr. McElhiney's Parkinson's disease and clinically related conditions come out to $89,891.24 when accounting for VHA's total costs and $78,835.58 when accounting for VHA's total direct costs.

Did I read that correctly?

A Yes.

Q Okay.

And I believe you have a breakdown of the VHA costs on page 8 in that chart. Let me know when you see that page 8 of your report?

A Yes.

Q Okay.

And for the column Government Payments with VHA Total Cost Payments for payment source VHA you have $24,485.69; is that right?

A Yes.

Q And the cell to the right under the column Government Payments with VHA Direct Cost

Payments, you have $13,430.03; is that right?

A Yes.

Q Okay.

What is your understanding of the difference between VHA direct costs and VHA indirect costs?

MS. KONSTANTOPOULOS: Objection to form. Foundation. Do you mean total cost versus direct cost?

MR. MALONE:

Q Yeah. Let me rephrase, Doctor.

What's the difference -- or what is your understanding of the difference between VHA total cost and VHA direct cost?

A The total costs includes overhead services and all other services associated with the -- with the care of the patient. So the direct is the -- is the direct care to the patient. The overhead would include other services related to rendering of the care for the patient.

Q And are you offering any opinion on whether VHA total cost or VHA direct cost should be used to calculate any offset?

A No, no, I am not.

Q Staying on that chart for Payment Source CMS, Medicare, you found $3,756.25; is that right?

A Yes.
Q Okay.
So that figure represents the $3,756.25 was paid by Medicare to pay for treatment of Mr. McElhiney's Parkinson's and related conditions?
MS. KONSTANTOPOULOS: Objection to form.
You can answer.
THE WITNESS: Yes.
MR. MALONE: Okay.
Q Is that true for all of the CMS Medicare payment sources you identified across these five plaintiffs?
MS. KONSTANTOPOULOS: Objection to form.
You can answer.
THE WITNESS: Yes, I believe so.
MR. MALONE:
Q Moving down Payment Source CCN, you found $59,504.27; is that right?
A Yes.
Q Okay.
And similar question here: So that amount represents that $59,504.27 was paid for by CCN to cover treatment of the plaintiff's Parkinson's-related condition?
A Yeah.

MS. KONSTANTOPOULOS: Objection to form.
You can answer.
THE WITNESS: I would just like to verify that for each specific patient, that's all, but --
MR. MALONE:
Q Please go ahead.
A -- yeah, just to let me do that.
So just the -- the -- for CCN, not -- CCN was not a payment source for all the individual patients. So -- so I can't say necessarily it was the same because it wasn't listed as a payment source for each one.
Q For all of the plaintiffs with CCN as a payment source, does the answer you provided apply to those?
A Yes. Yes.
MS. KONSTANTOPOULOS: Objection. Form.
MR. MALONE:
Q Staying on the chart on page 8, Payment Source TRICARE, you found $2,145.03; is that right?
A Yes.
Q And so this figure represents that the $2,145.03 was paid by TRICARE to pay for treatment of the plaintiff's Parkinson's and related conditions?

MS. KONSTANTOPOULOS: Objection to form.
You can answer.
THE WITNESS: Yes.
MR. MALONE:
Q Is that true for each plaintiff with the payment source of TRICARE that you evaluated in your report?
MS. KONSTANTOPOULOS: Objection to form.
You can answer.
THE WITNESS: Yes.
MR. MALONE: Okay. Okay.
Doctor, you are going to be handed what we will mark as Exhibit 6.
(Exhibit 6 was marked for identification by the Certified Shorthand Reporter, a copy of which is attached hereto.)
MR. MALONE:
Q Do you recognize this document?
A Yes.
Q What is it?
A It's the rebuttal expert opinion report from Marjorie Hackett-Wallace.
Q And have you reviewed this report?
A Yes.
Q Okay.

Please turn to page 20 of Exhibit 6. And let me know when you're there.

A Okay.

Q Okay.

And under heading 2 Peterson, Edgar you -- it states: For Edgar Peterson I've quantified $616,336.90 in medical billing expenses. Of these expenses $611,735.93 was confirmed by the defense expert Dr. Syed Hasan, leaving a disputed amount of charges totaling $3,127.61.

Did I read that correctly?

A Yes.

Q Okay.

And the following sentence reads: I quantified $181,586.90 in past paid medical and $10,201.11 in patient payments totaling $191,788.01.

Did I read that correctly?

A Yes.

Q The following sentence reads: The paid past medical expenses and patient payment totals were not disputed.

Is that; correct?

A Yes.

Q Did you dispute any of the past paid medical expenses or past patient payments?

MS. KONSTANTOPOULOS: Objection to form.
You can answer.
THE WITNESS: Can you -- again, can you rephrase the question?
MR. MALONE:
Q Sure. Did you quantify or verify, validate or -- are you offering any opinion on Marjorie Hackett-Wallace's quantification of past paid medical and patient payments?
MS. KONSTANTOPOULOS: Objection to form.
You can answer.
THE WITNESS: Yes, for the -- for what was written in her initial report and also on her rebuttal, I didn't necessarily agree that all of her opinions of what was a related illness -- or unrelated -- as she related specifically was my opinion. So there were differences in opinion between her report and my report.
MR. MALONE:
Q Are you referring to the medical billing expenses, or are you referring to the medical billing expenses, paid past medical and patient payments?
MS. KONSTANTOPOULOS: Objection to form.
You can answer.

THE WITNESS: I'm referring most specifically actually to the review of the records and clinical relatedness.

So based on the clinical relatedness those service that were clinically related were part of the -- that were -- that were part of the calculations or the addition in the table of services that were rendered and paid for by governmental agencies.

MR. MALONE:

Q Doctor, are you offering any opinion on whether the $181,586.90 in past paid medical identified -- quantified by Marjorie Hackett-Wallace is accurate?

MS. KONSTANTOPOULOS: Objection to form. Foundation.

You can answer.

THE WITNESS: No, no, I'm not.

MR. MALONE: Okay.

THE WITNESS: Having -- if it's accurate or not.

MR. MALONE:

Q Are you offering any opinion with regards to the $10,201.11 in past paid medical -- or sorry, in patient payments quantified by Marjorie

Hackett-Wallace?

MS. KONSTANTOPOULOS: Objection to form. Foundation.

You can answer.

THE WITNESS: No, no, I am not.

MR. MALONE:

Q So are you offering any opinions about the past paid medical and patient payments quantified for any plaintiff by Marjorie Hackett-Wallace?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: No, I'm not having any opinions --

MR. MALONE: Okay.

THE WITNESS: -- on that.

MR. MALONE:

Q Doctor, I'd like to turn your attention to page 21 of Exhibit 6, the report that is in front of you now. And I would ask to -- I would ask you to reread to yourself subsection 1 and just let me know when you've had a chance to read that.

A Okay. Okay. Yeah, I've read it.

Q Okay.

So having reviewed Ms. Hackett-Wallace's

opinion here, do you agree with her assessment?

A Actually I do not agree with her assessment.

Q Okay.

Why not?

A Well, for a few reasons. One, she writes in her report that -- let me find the right paragraph: The provider described the cord of the plaintiff's deep brain stimulator as notable for a palpable cord centrally to the erythema from medial calf to thigh.

I don't believe Marjorie Hackett-Wallace is a medical -- has formal medical training. But irrespective of that, she's -- she's, I think, confused by the word cord. For example, a deep brain stimulator has a pulse generator that's usually in the chest or abdomen, and then she's referring to the cord, a palpable cord, centrally erythema from medial calf to thigh. Cord in the latter part is describing a physical exam finding where when you palpate the thigh, you feel like a -- a rope-like structure or like a hard vein or a hard vessel. So I think she's getting mixed up between the cord in the medial calf and thigh with the deep -- where she's writing the cord of the

patient's -- the plaintiff's deep brain stimulator. There's -- there's no cord that's part of the deep brain stimulator, and that's nowhere in the position of the upper thigh. So I -- I don't -- I'm not sure if she's -- yeah, I don't agree with it.

Q Okay.

Was there anything else? I think you said there were a few things, but was there anything else in that paragraph that you disagreed with?

A Let me read the rest.

No, that's mainly what I disagreed with.

Q Okay.

So you agree that the plaintiff was provided guidance on taking his Parkinson's medications during that visit?

A I would have to review the medical document just to confirm that? If you have that document, this one, 1576 Peterson.

Q That's okay, Doctor. Let's turn to paragraph 2 of page 21. Could you just reread that briefly to yourself --

A Sure.

Q -- and let me know -- okay. All right.

So having reviewed paragraph 2 on page 21 do you agree with Marjorie Hackett-Wallace's

assessment?

A I -- I would, again, like to just review the -- this Peterson document because I can't say I necessarily agree with it.

MR. MALONE: Okay. Okay.

Doctor, I'm going to hand you what we will mark as Exhibit 7.

(Exhibit 7 was marked for identification by the Certified Shorthand Reporter, a copy of which is attached hereto.)

MR. MALONE:

Q And could you please take a look and let me know if you recognize this document?

A Okay. Yes.

Q And what is the document?

A This is the -- a medical record for treatment, and it appears an emergency department.

Q For the record, this is Diamond Bates labeled 1567_Peterson_000003900.

A Yes.

Q And, Doctor, I will ask you to turn to the page ending in Bates Number 3901.

A Okay.

MS. KONSTANTOPOULOS: And, Counsel, to the extent there's a question pending, do you mind --

MR. MALONE: I'm sorry.
MS. KONSTANTOPOULOS: -- stating it again?
MR. MALONE: Sorry, I do have a question, sorry.
Q Doctor, what is Lovenox.
A It's a medication that's given subcutaneously as a blood thinner.
Q Okay.
Doctor, on page 3901 the date of observation is 9-15-2017; correct?
A Yes.
Q In your review of this record does that give you any further ability to evaluate Ms. Hackett-Wallace's statement in paragraphs 1, and 2 of page 21?
MS. KONSTANTOPOULOS: Objection to form.
You can answer.
THE WITNESS: Yeah, I -- in her report she's summarizing the -- she's summarizing the -- the clinical aspects of this follow-up visit here. It's my opinion that the patient's conditions that are documented here, which is superficial thrombophlebitis, is not related at all to the patient's Parkinson's disease. So I don't agree with her opinion here.

MR. MALONE: Okay.

Q And even if some of the treatment included counseling for taking Parkinson's medication, this does not meet the standard of relatedness for you?

MS. KONSTANTOPOULOS: Objection to form. Foundation.

You can answer.

THE WITNESS: No, becuase as a part of the primary visit for -- the patient's seeking care for, which is this like redness in the medial thigh, it's not uncommon for a practitioner or provider to address the conditions but not necessarily treat them.

So if I were to see a patient with a diabetic problem, I would remind them to also take all their medications, including their cholesterol medication. But it's not the primary reason why the patient is seeking services.

MR. MALONE:

Q So if a patient is seeking primary services for an unrelated condition but does get treatment for a related condition, not just counseling, not just that it appears in the record, but actual treatment for it, would that be related?

MS. KONSTANTOPOULOS: Objection to form.
You can answer.
THE WITNESS: It would depend on the scenario. But if that were the case, then what you just described would not make it necessarily like a -- a latter diagnosis, it would be closer to the primary diagnosis of -- of what the patient was seeking treatment for -- or seeking a visit for, I should say.
MR. MALONE: Okay.
Q So if Mr. Peterson was administered medication for his Parkinson's during this visit, would it have been related, in your opinion?
MS. KONSTANTOPOULOS: Objection to form. Foundation.
You can answer.
THE WITNESS: Not -- not necessarily. Again, it will depend on the condition, on the scenario.
MR. MALONE: Okay.
Doctor, I'm going to hand you what we will mark as Exhibit 9?
THE REPORTER: Did we have an 8?
MR. MALONE: Oh, I'm so sorry. We -- oh, I'm sorry, this is -- this is 8.

THE WITNESS: 8.
MR. MALONE: Sorry.
THE WITNESS: Yeah.
(Exhibit 8 was marked for identification by the Certified Shorthand Reporter, a copy of which is attached hereto.)
MR. MALONE:
Q Doctor, do you recognize this document?
A Yes.
Q And what is it?
A It's a letter from Dr. Barbano regarding the patient Peterson.
Q Okay.
Do you agree with Dr. Barbano that immobility is a significant risk factor for the development of thrombophlebitis?
MS. KONSTANTOPOULOS: Objection to form. May I give the witness time to read the letter, to review it, before answering questions?
THE WITNESS: I -- I wouldn't -- I wouldn't -- I wouldn't say it's a significant risk factor, but it's a risk factor. So that would be the only word that I wouldn't necessarily agree with. But immobility is a risk factor for development of Parkinson's -- of thrombophlebitis.

MR. MALONE:

Q Have you ever seen a Parkinson's patient develop thrombophlebitis?

A Yes, yes, I have.

Q Was it caused by immobility?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Yes.

MR. MALONE:

Q Having reviewed Exhibit 8 do you agree with Dr. Barbano's assessment here in this letter?

A I do not. Because as part of my work as a hospitalist, I see a lot of patients with advanced Parkinson's disease that are essentially bedbound. So when I look at all of the patients that came in with different associated medical conditions, a majority of them did not thrombophlebitis and were significantly immobile. So I don't think immobility is a significant risk factor based on the experience and the patients I've treated with these concomitant conditions.

Q Would a neurologist be in a better position to make that distinction than a hospitalist?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: I think it will -- not necessarily. I think it would be based on the experience of both individuals. So treating patients in a hospital setting, the patients are more acutely ill, so what ends up happening is we start -- we -- again, seeing patients that are at their most advanced in their medical conditions. So at that time, again, it was -- immobility is at a higher or greater percentage of the patients being treated.

I would say that in this case a hospitalist can be equally, if not more, qualified to make that -- to make that assessment, especially because thrombophlebitis is also not necessarily related only to Parkinson's disease. So I've treated many patients without Parkinson's disease that also have superficial thrombophlebitis.

MR. MALONE:

Q Did you consult a neurologist in coming to your determination that these visits were unrelated?

A No, I did not.

Q Is it your opinion that a hospitalist is in a better position to make a determination on

which conditions are related to Parkinson's than a neurologist?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: I think again it depends on the hospitalist and the neurologist and the years of experience. There's a multitude of factors that would go into it.

As a hospitalist or a generalist, we do get training in a multitude of neurologic disorders, and Parkinson's disease is one of the more common neurologic disorders so that's well -- a significant part of, at least, my practice.

MR. MALONE:

Q Is a hospitalist's training or a neurologist's training more specialized to make that determination?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: I think a neurologist's training is more specialized in the management and treatment of the patient's condition but not necessarily making a diagnosis of a general medical condition that may or may not be related to immobility or Parkinson's disease.

MR. MALONE: Okay.

Q That's fair. I understand that. I'm not asking about a general diagnosis. I'm asking about relatedness.

So would a neurologist have more specialized to opine upon the relatedness of the diagnosis to the Parkinson's disease?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Again, I would say not necessarily. Because if the -- the generalist would be treating all of the patient's medical conditions so they might be able to -- or should be able to better separate, again, conditions that are unique to their medical condition based on their symptomatology and how they present, not necessarily the neurologist.

MR. MALONE: Okay.

Q And you've never treated Mr. McElhiney, have you?

A No, I have not.

Q You reviewed his records; right?

A Yes, that is correct.

Q And Dr. Barbano reviewed his records.

MS. KONSTANTOPOULOS: Objection to form.

Foundation.

You can answer.

THE WITNESS: I believe so, yes.

MR. MALONE:

Q And it's still your opinion that you're in a better position to make that determination than he is?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Based on the letter and how he wrote it, he -- he speaks in general terms, as a lot of physicians would, "Immobility is a significant risk factor," that's a general -- that's general medical knowledge. In this particular document he's not citing any specific definitive reason. He's saying, "I'm doing this with some reasonable degree of certainty," and he's hypothesizing, "Given the lack of other reasonable causes for his immobility, it's my opinion that it's a direct result." I don't think there's any way of really knowing.

The other thing is if -- if his immobility is progressive, of which he is writing in here, in his letter, then the chance of ongoing recurrences of thrombophlebitis would be higher, and there --

there was nothing in his records thereafter. So this was more of a -- a single episode. And since it's a single episode and his Parkinson's disease is chronic and his immobility is chronic, I made that determination that they weren't necessarily related.

MR. MALONE: Okay.

Q Doctor, a moment ago you testified there's no way of really knowing.

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: If I -- if I said there's no way of really knowing, I -- let me clarify. Again, based on the information we have in front of us and with enough proper workup, sometimes we can find out the cause of the thrombophlebitis. Sometimes the reason is not necessarily identified.

MR. MALONE: Okay.

Q You can set that letter aside.

A Okay.

Q And if you will turn to page 22 of the Hackett-Wallace report -- excuse me -- the Hackett-Wallace report?

A Um-hum.

Q Under the heading Section 3: Rothchild, Diane -- do you see that?

A Yes.

Q And the first -- the first paragraph reads: For Diane Rothchild I quantified $43,401.44 in medical billing expenses. Of these expenses $38,594.44 was confirmed by defense expert Dr. Sayed Hasan, leaving a disputed amount of charges totaling $4,807. I quantified $2,155.44 in past paid medical and $1,645.96 in patient payments totaling $3,801.40. The government claimed the following additional offset damages: Medicare totaling 72,27602 for a total alleged offset of $72,000 -- $72,276.03.

Is that right?

A Yes.

Q And the next paragraph reads: Based on my review of the amounts disputed by the defense expert Dr. Hasan, I agree with the disputed medical expenses.

Did I read that correctly?

A Yes.

Q Okay.

And if you need to refer to your own report, please do so.

But is it your understanding, then, that there is no dispute between yourself and

Ms. Hackett-Wallace as to Ms. Rothchild at this point?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Sorry, let me just kind of verify the amount.

Yeah, for her statement there's not a disputed amount with respect to the alleged offset. Yeah, I would -- I do agree with that.

MR. MALONE: Okay.

THE WITNESS: It's the same figure in my report.

MR. MALONE: Okay.

Q Turning down the page now, Number 4: Welch, Robert.

Do you see that?

A Yes.

Q And this paragraph states: For Robert Welch I quantified $5,155.92 in medical billing expenses. Of these expenses $5,155.92 was confirmed by defense expert Dr. Sayed Hasan, leaving a disputed amount of charges totaling zero dollars.

Did I read that correctly.

A Yes.

Q And does that accurately reflect your

opinion with regards to the medical billing expenses?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Yeah, that is the figure that I wrote in my report.

MR. MALONE:

Q Is that the amount that you verified?

A Yes.

Q Okay. Okay.

Let's -- continuing on page 22 here, heading Number 5: Sparks, Richard.

Do you see that?

A Yes.

Q And based on the first paragraph, it appears there is a disputed amount charges totaling $3,418.43; is that right?

A Yes.

Q Okay.

Turn to page 23, the next page of the Hackett-Wallace report.

And if you could just review paragraph 1 and let me know when you've had a chance to?

A Okay. Starting at Number 1?

Q Yes.

A Okay. Okay.
Q Let's turn back to your report briefly here, page -- page 21 Appendix E.
A Yup.
Q Got it? Okay.
And this is your evaluation of the same plaintiff, Richard Sparks; is that right?
A Yes.
Q Okay.
And if you will turn to page 22 of your report, the first paragraph reads: The categories of medical treatment that Mr. Sparks received that were clinically unrelated to his Parkinson's disease include medical care at the University of Colorado Hospital around April 6th, 2018, involved Mr. Sparks undergoing cardiac stress test for evaluation of dyspnea on exertion and chest pain for a patient with significant smoking history as well as oxygen monitoring during stress test.
Did I read that correctly?
A Correct.
Q Am I pronouncing that right? Is it dyspnea?
A Dyspnea, yeah.
Q Okay.

What is dyspnea?

A Shortness of breath.

Q And in the following paragraph you write: My claim level determinations regarding clinical relatedness for the asserted past medical damages are fully contained in Appendix G.

Is that right?

A Yes.

MS. KONSTANTOPOULOS: For the record, are contained in full in Appendix G, not fully contained.

MR. MALONE: Thank you.

Q And if you turn to page 26, does that appear to be Appendix G?

A Yes.

MR. MALONE: Okay. Okay.

And just for the court reporter, this is an electronic exhibit that I'll provide you a copy of.

THE REPORTER: Thank you.

MS. KONSTANTOPOULOS: Just to object, as noted in the Court Management Order Number 3: In in-person depositions the questioning attorney shall provide hard copies of each exhibit.

MR. MALONE: If you read further on, it allows the use of electronic exhibits. So I'm

going to -- please, yeah.

MS. KONSTANTOPOULOS: Have you provided us a copy of the electric exhibit if you want to use it?

MR. MALONE: I -- it's in his own report. You provided it to us.

MS. KONSTANTOPOULOS: Here at a deposition you're supposed to provide copies of exhibits to counsel --

MR. MALONE: It's a --

MS. KONSTANTOPOULOS: You need to provide a copy for review as well.

MR. MALONE: Okay.

Let's take a five-minute break and I'll produce it.

THE VIDEOGRAPHER: The time is 11:50. Going off the record.

(A recess is taken.)

THE VIDEOGRAPHER: The time is now is 12:06. Back on the record.

MR. MALONE: Okay.

Doctor, we are back on the record and we were -- we left off and on page 26 of your report, Appendix G.

And I am going to share with you my screen here, what we will mark as Exhibit --

THE REPORTER: 9.

MR. MALONE: 9. Yes, Exhibit 9.

(Exhibit 9 was marked for identification by the Certified Shorthand Reporter, a copy of which is attached hereto.)

MR. MALONE:

Q Can you let me know if that looks familiar to you?

THE WITNESS: Yes.

MS. KONSTANTOPOULOS: Objection for the record, the Exhibit 9 is using -- on a laptop is in violation of Case Management Order 3 Stipulated Deposition Protocol. Although copies were provided to counsel during the break, it's my understanding that the court reporter, unless otherwise -- I am unaware was not provided with a copy of this either.

So noting my objection for the record, but you can continue.

THE WITNESS: Okay.

MR. MALONE:

Q What do you recognize this document to be?

A This is the Excel spreadsheet I prepared with a summary of charges and notes and accompanying

medical documentation of where the decisions were made.

Q And, I'm sorry, is this related to Plaintiff Sparks?

A Yes.

Q Okay.

And you may still be there, but I will direct you to Tab, on that spreadsheet, 16655670.

Are you there?

A Yes.

Q Okay.

And then within that spreadsheet I would direct to you Row 23.

A Okay.

Q Okay.

What is row 23?

A Sorry, it's a very long spreadsheet.

So it is a -- okay. It's a -- a charge that's noted for cardiac stress test on 4-6-2018.

Q Okay.

And then can you identify what is -- what data that is in Row 24?

A Yes. Sorry, let me just -- just have to scroll. It's so long. Okay.

Row 24 is -- it looks like it's additional

charges that were -- that were rendered for part of the cardiac stress test as well.

Q Okay.

Row 25. Could you identify that, please?

A Yeah. Just one second. All right.

Yes, that is a service for oxygen monitoring during the cardiac stress test.

Q Okay.

And Row 26?

A Okay. That is -- okay. That's -- again, it's an additional charge for part of the services rendered as part of the cardiac stress test.

Q Okay.

And I believe in your Appendix G, which you're looking at right now, you marked Row 23, 24, 25 and 26 unrelated; is that correct?

A Correct.

Q Okay.

Can you identify and describe Row 27 of that sheet, please?

A Yes. 27 is on the date of service April 6th, 2018. It's -- it is a charge for an MRI of the brain.

Q And is that the same date of service as

the dates of service in Row 23 through 26?

A Yes.

Q And in Row 27 you marked that related; correct?

A Correct.

Q Okay.

So a portion of the charges from this visit are related and a portion are not; is that correct?

A Yeah, I just -- I just want to make sure I explain my answer. So it looks like on the same date of service there's multiple testing -- different testing modalities were done. So yes, the MRI of the brain is related. The other testing based on the cardiac stress test, which was also done on the same day was unrelated.

Q Okay.

A It's not part of the same testing, if you will. They're distinct tests.

Q Okay.

A I just want to clarify that.

Q But it's your understanding -- so two tests were performed on the same day that this plaintiff visited the facility?

A Yeah, yes --

Q Okay.

A -- based on this record for dates of service, yes.

Q Okay.

And so because some of testing that was done is related to the Parkinson's in your opinion and some is not, you marked the charges related or unrelated accordingly?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Correct.

MR. MALONE: Okay.

Q And that was your methodology for -- for all the plaintiffs you evaluated and all the records; right?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: No, I -- for every service I -- I looked for medical records. So I -- you know, I didn't realize at that time, maybe when I was writing my report, the date of services were the same, but I looked at each clinical service that was rendered and I made an independent opinion irrespective of the date. So if this happened be two tests that were done on the same day but I didn't -- I didn't look at it that way, whether

they were done on the same date of service or not, I looked at the actual testing that was done.

MR. MALONE: Okay.

Q So you didn't just conclude that the entire visit was unrelated because the MRI was related, even if, in your opinion, the cardiac stress test was not?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Yes, correct.

These services were done at University of Colorado Hospital. So it's not uncommon that university hospitals, they batch or -- they batch testing in one day. They'll say, "Patient come at 8:00 a.m. Get your labs. Get your MRI. Get your stress test. Get this. Get that." Because the way the universities -- or the hospitals are set up, they oftentimes do multiple services in one day in these settings. It's not uncommon.

MR. MALONE: Okay.

Doctor, I am -- you're going to be handed what we will mark as Exhibit 10.

(Exhibit 10 was marked for identification by the Certified Shorthand Reporter, a copy of which is attached hereto.)

MR. MALONE:

Q Do you recognize this document?

A Yes.

Q Okay.

And what is this document?

A It's a letter from Heidi Schwarz with respect to the patient's MRI and an additional pre-procedural checklist done for an MRI. And she's saying that they're related.

Q So you disagree with Dr. Schwarz?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: I don't. For the service that she's describing here, pre-procedural checklist for MRI, asking about a heart valve replacement is standard for all MRIs. Why I disagree is because the services rendered were not -- it was not a pre-procedural checklist for an MRI. That was not -- the cardiac -- the cardiac evaluation was an actual stress test. So the -- the part that she's talking about here is not related to the services that on that -- for that report.

MR. MALONE:

Q Are cardiac stress tests part of the workup procedure for MRIs?

A No.

Q Okay.
How often do you order MRIs for Parkinson's patients?
A It would be an estimate. Maybe 20, 25 percent of the patients may get an MRI in the hospital.
Q 25 percent of your Parkinson's patients?
A Yeah.
Q Okay.
A It depends what they present for. Sometimes it's difficult to distinguish between strokes and Parkinson's disease illness exacerbation. So an MRI is often necessary to rule out a stroke.
Q Do you consult with neurology before ordering an MRI?
A Not necessarily. It depends on the clinical case.
Q So you never perform cardiac stress tests prior to having a Parkinson's patient given an MRI?
MS. KONSTANTOPOULOS: Objection to form.
You can answer.
THE WITNESS: No, because the cardiac stress test has -- the results of that test has nothing to

do with the patient getting an MRI, meaning the results of one test will not affect the ability to obtain the second test, i.e., the MRI.

MR. MALONE: Okay.

Q Doctor you can set that aside.

Doctor, I just have a couple of more questions. I appreciate you patience in being here today. I really do.

We have discussed, you know, the five plaintiffs that you evaluated. We spent a lot of time covering areas where you and the plaintiffs' expert Marjorie Hackett-Wallace are in disagreement on charges.

But for the most part you -- you verified the amounts that she found; is that right?

MS. KONSTANTOPOULOS: Objection to form. Foundation.

You can answer.

THE WITNESS: Again, I didn't verify the -- the amounts that she did. I reviewed the medical records for clinical relatedness. So I -- I wouldn't say especially with what her charges are or agreeing with them.

MR. MALONE:

Q You verify -- or sorry, you quantified

the relatedness of the charges and for the -- with limited exception, you did you not disagree?

MS. KONSTANTOPOULOS: Objection to form. Foundation.

You can answer the question.

THE WITNESS: No, I wouldn't say I -- I think there was some alignment with what she wrote. When I did, I noticed some discrepancies --

MR. MALONE: Okay.

THE WITNESS: -- or differences.

MR. MALONE:

Q So with respect to Plaintiff McElhiney, there was, you know, zero dollars that you had to quantify.

So there's no disagreement there; right?

MS. KONSTANTOPOULOS: Objection to form.

THE WITNESS: Let me just get to the right --

MR. MALONE: Sure.

THE WITNESS: -- page.

MS. KONSTANTOPOULOS: Object also as to no foundation.

THE WITNESS: I'm sorry, could you just repeat the question?

MR. MALONE:

Q Sure. You know, let me pull this out too.

So with respect to the past paid medical with respect to Mr. McElhiney, the plaintiff did not present any dollar amount that you needed to quantify?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: No, she did not.

MR. MALONE: Okay.

Q With respect to plaintiff Edward Peterson -- I can direct you to page 11 of your own report or page 20 of Ms. Hackett-Wallace.

MS. KONSTANTOPOULOS: Which are you directing him to counsel?

MR. MALONE: Whichever.

Q Why don't go to page 11 of your report.

A Okay.

Q So the ultimate amount in dispute for the past billing total was $3,100.97. Does that sound right?

A You know, I don't -- I don't see that figure on my report.

Q Oh, I'm sorry.

A So I would have to do it --
Q Oh, page -- page 20. Thanks.
A Okay.
MS. KONSTANTOPOULOS: Page 20 of which exhibit? Exhibit 6 is the expert report of Marjorie Hackett-Wallace.
MR. MALONE: Counsel, are you raising an objection?
MS. KONSTANTOPOULOS: I'm asking what exhibit you're referring to because you've been referring to two separate exhibits.
MR. MALONE: And I referred to the Hackett-Wallace report and he knew what I was saying.
Let's proceed.
MS. KONSTANTOPOULOS: Okay. Exhibit 6, then.
THE WITNESS: Exhibit 6.
MS. KONSTANTOPOULOS: Thank you.
MR. MALONE:
Q So my question there was: The disputed amount of charges totaled $3,127.61; correct?
A Yeah, that is the figure she wrote in her report.
Q Okay.

A Yes.
Q And that reflects the difference between the amount she quantified in medical billing expenses and those that you confirmed?
MS. KONSTANTOPOULOS: Objection to form.
You can answer.
THE WITNESS: Yeah, I don't want to speak for her, for what she wrote in her report and how she got to it. But the figure that is listed in the report is 3127.61. I don't have a figure in my report about the actual -- the total disputed cost. I'm sure I could -- yeah, I don't have it. No, I'm sorry, I do. I do. It's right here. Yeah, the disputed amount is 3127.67 -- 61, excuse me.
MR. MALONE: Okay.
Q If you turn to page 22 of Exhibit 6 Rothchild?
A Okay.
Q Just let me know when you're there.
A Yeah, I'm here, yeah.
Q Okay. Great.
A Yes.
Q And in paragraph 2 she states that based upon her review of the amount disputed by the defense expert Dr. Hasan, I agree with the disputed

medical expenses.

So would you agree that there is no longer a dispute between yourself and Ms. Hackett-Wallace with regard to those medical expenses?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Yeah, it appears so. That's what she's writing in her report. She's writing: I agree with the disputed medical expenses.

MR. MALONE: Yes.

THE WITNESS: Which is the amount of what I came up with.

MR. MALONE: Okay.

Q For Robert Welch, Number 4 on Exhibit 6 page 22, Ms. Hackett-Wallace writes in the second sentence of Section 4: Of these expenses $5,155.92 was confirmed by the defense expert Dr. Sayed Hasan leaving a disputed amount of changes totaling zero dollars.

Do you agree that there is a disputed amount of charges totaling zero dollars?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Yeah, but our figures of clinically unrelated claim conditions are both

zero.

MR. MALONE: Okay.

Q And if you go down to Number 5, Richard Sparks, on Exhibit 6 page 22, first sentence for Richard Sparks: I quantified $36,602.89 in medical billing expenses. Of these expense $33,084.46 was confirmed by the defense expert Dr. Sayed Hasan, leaving a disputed amount of charges totaling three $3,418.43.

Is that an accurate reflection of your understanding of the dispute between yourself and Ms. Hackett-Wallace?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Her -- on my report the charges for the clinically unrelated -- unrelated claim conditions were 35 -- 3,518.43, and hers is 3,418.43. So there's -- it's a hundred dollars off.

MR. MALONE: Okay.

Q So the total amount of these disputed -- it total of the disputed amounts is 5 percent of the total billing that you guys both reviewed?

MS. KONSTANTOPOULOS: Objection to form. Foundation.

MR. MALONE:
Q Does that sound right?
A I don't know. I'd have to quickly like add it all up.
Q Okay.
And I'm not going to ask --
A I can't --
Q -- you to do that.
But is it -- you agreed with her at least 90 percent of the time on these?
MS. KONSTANTOPOULOS: Objection to form. Foundation.
You can answer.
THE WITNESS: I would say that there's kind of a like alignment with some of the things that she agreed with and some of the things that I -- I wrote in my report.
MR. MALONE: Okay.
Q Those disputes on relatedness, they center around the interpretation of the -- of the medical records; correct?
MS. KONSTANTOPOULOS: Objection to form.
You can answer.
THE WITNESS: I can only speak for myself.
So when I reviewed the records, I looked at

the relatedness to the conditions. I'm not sure exactly what methodology she had used or --

MR. MALONE: Okay.

Q So you have no opinion on the methodology she used?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: Yeah, I -- on the methodology she used for that specific part to determine relatedness or unrelatedness, I mean, she had some, you know, additional records from -- from her experts, some of which I did not necessarily agree with.

MR. MALONE: Okay.

Q But the vast majority of your -- of you and Ms. Hackett-Wallace's independent reviews were in alignment?

MS. KONSTANTOPOULOS: Objection to form. Foundation.

You can answer.

THE WITNESS: I would say in -- in -- for what I was asked to do, to look at related charges, looks like her rebuttal report is the one who said that she's in alignment with my report. So I don't know if the converse is necessarily true. I'm not

trying to split hairs. So --

MR. MALONE: Okay. All right.

Q In forming your opinions you did not consult with any certified professional medical auditors; correct?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: No.

MR. MALONE: Okay.

Q You didn't consult with any neurologists; correct?

MS. KONSTANTOPOULOS: Objection to form --

THE WITNESS: No.

MS. KONSTANTOPOULOS: -- you can answer.

MR. MALONE:

Q Or any certified professional medical billing expert?

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: No.

MR. MALONE:

Q You consulted with your nurse assistant, though?

A She --

MS. KONSTANTOPOULOS: Objection to form.

You can answer.

THE WITNESS: She actually assisted me --

MR. MALONE: Okay.

THE WITNESS: -- with certain services and things like that.

And again, for what I was asked to do, for the scope I was asking for relatedness, that's kind of well under the auspices of what I've been doing in practice in the last two decades.

MR. MALONE: Dr. Hasan, that's all I have for you. Thanks for your time.

THE WITNESS: Thank you.

MS. KONSTANTOPOULOS: I don't have any questions on redirect.

And we will go ahead and read the transcript.

THE REPORTER: Did you need to purchase a copy of the transcript?

MS. KONSTANTOPOULOS: I believe we have a standing order, but if not, I can talk to you afterward.

THE REPORTER: Thank you.

THE VIDEOGRAPHER: Okay. Time is now 12:33. This concludes the deposition. Going off the record.

(End of Proceedings. Declaration of penalty of perjury on the following page hereof.)

(Deposition concluded at 12:33 p.m.)

***

I do solemnly declare under penalty of perjury, under the laws of the State of California, that the foregoing is my deposition under oath;

That these are the questions asked of me and my answers thereto;

That I have read the same and have made the necessary corrections, additions or changes to my answers that I deem necessary.

In witness thereof, I hereby subscribe my name, this _____ day of _____, 20____.

_____

Witness Signature

Certification of Court Reporter Federal Jurat

I, the undersigned, a Certified Shorthand Reporter of the State of California do hereby certify:

That the foregoing proceedings were taken before me at the time and place herein set forth; that any witnesses in the foregoing proceedings, prior to testifying, were placed under oath; that a verbatim record of the proceedings was made by me using machine shorthand, which was thereafter transcribed under my direction; further, that the foregoing is an accurate transcription thereof.

That before completion of the deposition a review of the transcript was requested.

I further certify that I am neither financially interested in the action nor a relative or employee of any of the parties.

IN WITNESS WHEREOF, I hereby subscribe my name this 22nd day of February 2026.

Heidi Hummel-Grant
Certified Shorthand Reporter No. 12556

0

0.67 28:25
0000000010 5:12
0000003900 5:23
000003900 86:19
00897 5:14
01/12/2026 6:4
01576 5:23

1

1 1:19 5:9,20 10:12,13 11:17 34:14 41:13,18 83:21 87:14 99:22,24
1,645.96 97:8
10 5:9 6:7 48:22 51:14,20,24,25 52:4,7,10,17 57:7 74:25 108:22,23
10,201.11 80:16 82:24
100 30:20
103 6:6
108 6:7
10:10 46:15
10:47 70:16
10:58 70:19
10th 28:18
11 113:13,18
11-20-2025 28:25
1100 3:7,19
11:50 102:15
12/02/2025 5:11
121 1:19
12556 1:18 2:17 124:24
12:06 102:18
12:33 2:15 7:2 121:23 122:3
12th 28:18
13 5:11 16:25
13,430.03 76:1
15048 124:23
1567 86:19
1576 85:18
16 36:3
16655670 104:8
17 6:13
181,586.90 80:15 82:12
188639 6:4
191,788.01. 80:16
1993 33:3
1996 33:8
19th 28:19

2

2 5:11 13:23,24 28:14 41:19,21 41:23 62:6 80:5 85:20,24 87:15 115:23
2,145.03 78:20 78:23
2,155.44 97:7
20 5:21 48:22 80:1 110:4 113:14 114:2,4 123:16
20.21 15:11
2000 33:12
20005 3:20
2004 33:15
2005 34:5
2006 34:6
2018 100:15 105:23
202.552.9843 3:21
2025 6:9 14:15 22:12 28:18,18 28:19 30:14
2026 1:14 2:16 5:17,21,21 7:2 7:8 11:20 12:22 124:20
21 83:19 85:20 85:24 87:15 100:3
22 6:13 96:20 99:11 100:10 115:16 116:15 117:4
22nd 124:20
23 99:20 104:13 104:16 105:16 106:1
24 104:22,25 105:16
24,485.69 75:22
25 105:4,17 110:5,7
26 101:13 102:22 105:9 105:17 106:1
27 5:21 105:20 105:22 106:3
28 5:17 32:10 32:11
28th 11:20 12:18,22
2930 3:8
2nd 12:23

3

3 5:13 31:17,18 33:11 41:10 43:1 44:20 49:15 53:1 74:17 96:24 101:21 103:12
3,100.97. 113:21
3,127.61 114:22
3,127.61. 80:10
3,418.43 99:17
3,418.43. 117:9 117:18

3,518.43 117:17
3,756.25 76:25 77:3
3,801.40. 97:9
30 35:18
31 5:13
3127.61. 115:10
3127.67 115:14
33,084.46 117:7
35 117:17
3500 2:14
36,602.89 117:5
38,594.44 97:5
39 5:15
3901 86:22 87:9

4

4 1:14 2:16 5:15 7:2 32:23 39:17 39:18 40:16 49:15 50:20 51:13 98:14 116:14,16
4,000 20:20
4,807 97:7
4-6-2018 104:19
40 5:16
43,401.44 97:3
450 20:14
48 12:24
4th 7:8

5

5 5:16 40:5,6,16 52:25 54:8 56:12 57:6,14 58:7,23 99:12 117:3,22
5,155.92 98:19 98:20 116:16
59,504.27 77:18 77:22

6

6 5:18 55:20 60:18 66:23 79:13,14 80:1 83:19 114:5,16 114:18 115:16 116:14 117:4
61 115:14
611,735.93 80:8
616,336.90 80:7
64105 3:9
6th 100:15 105:23

7

7 5:22 6:14 69:8 86:7,8
7,848.25 14:19
70 6:14
707 2:13
7075 5:12
72,000 97:12
72,276.03. 97:12
72,27602 97:11
78,835.58 75:10
79 5:18
7:23 1:5 2:5 5:14

8

8 5:6 6:2 64:14 65:3 74:16 75:16,17 78:19 89:23,25 90:1,4 91:10
80 30:20 48:23
816.421.1600 3:10
86 5:22
89,891.24 75:9
897 1:5 2:5
8:00 108:15

9

9 6:6,9 51:14,20 51:24,25 52:4,6 52:9,12,17 89:22 103:1,2,2 103:3,11
9-15-2017 87:10
90 6:2 48:23 118:10
95 57:5
9:02 2:15 7:2,9
9:56 46:12

a

a.m. 2:15 7:2,9 108:15
abdomen 84:17
ability 87:13 111:2
able 94:13,14
accompanying 103:25
accounting 75:9,10
accuracy 18:4
accurate 82:14 82:20 117:10 124:13
accurately 98:25
act 71:4 73:14
action 5:10 124:17
actively 38:12
actual 53:9 54:10 60:21,22 88:25 108:2 109:19 115:11
actually 35:10 45:20 47:13 52:18,21 55:20 64:12 82:2 84:2 121:2
acutely 92:6
add 15:10,15 118:4

addition 82:7
additional 97:10 104:25 105:11 109:7 119:11
additionally 75:5
additions 123:12
additive 44:3
address 88:13
adjusted 57:15
administered 44:1 89:11
administrative 48:24,25 49:2 49:12
administrator 37:2
admit 34:10
advanced 91:13 92:8
affect 67:23 111:2
afterward 121:21
agencies 71:10 71:22 73:21 82:9
agency 15:5 24:3 27:6 39:12
ago 25:21 96:7
agree 55:10 57:19 81:14 84:1,2 85:5,13 85:25 86:4 87:24 90:14,23 91:10 97:17 98:9 115:25 116:2,9,20 119:12
agreed 118:9 118:16
agreeing 111:23
agreement 19:14,16,18,19 21:6
ahead 78:6 121:15
aligned 17:24 36:2,4 57:9
alignment 112:7 118:15 119:17,24
alleged 42:1 59:2 64:22 65:13 97:11 98:8
allegedly 63:8
allowed 53:4 56:14
allows 101:25
amended 49:24 50:1
america 3:13
american 6:2,3
amount 14:19 26:14 53:5,6,15 53:24 54:2,3,8 56:14,15 58:2 60:21,22 61:1 75:5 77:21 80:9 97:6 98:6,8,22 99:8,16 113:6 113:20 114:22 115:3,14,24 116:11,18,20 117:8,21
amounts 53:3 56:2 58:4 61:2 69:20 71:8 72:15 74:7 97:16 111:15 111:20 117:22
analysis 17:20 18:5 41:24 42:8 59:11
analysis.slxs 6:6
angeles 1:13 2:14 7:1,10
ani 16:1 48:11
answer 6:12 9:10,23 12:4,5 12:13 13:16 14:22 15:14 18:13,23 21:8 21:22 22:3,10 22:21 23:3 25:14 26:12 27:22 29:21 30:1,7,19 31:1 34:1 35:17 36:18 38:2,15 39:2 40:23 41:4 43:17 44:10 45:9 46:2 48:1 48:16 51:9 52:16 53:17 54:1,20 55:6,16 56:8,24 57:23 58:17 59:19 60:10 61:4,17 62:3,21 63:2,11 63:24 64:6 65:21 66:10,12 66:14,18 67:8 67:18 68:7,15 68:22 69:5 70:12 71:17 72:10,18 73:6 73:17 74:12 77:7,14 78:2,14 79:2,9 81:2,11 81:25 82:17 83:4,12 87:17 88:8 89:2,16 91:7 92:1 93:4 93:19 94:9 95:2 95:9 96:10 98:4 99:4 106:10 107:9,16 108:9 110:23 111:18 112:5 113:9

115:6 116:6,23 117:14 118:13 118:23 119:7 119:20 120:7 120:14,19 121:1
answered 39:15
answering 9:23 90:19
answers 10:2,5 10:8 123:10,13
apollomed 34:5 34:9
appeal 35:2
appear 14:7,10 101:14
appearance 20:18
appearances 3:1 4:1 20:19
appears 14:14 28:15 86:17 88:24 99:16 116:7
appendix 6:6 32:5,12,24 64:15 65:3 74:17 100:3 101:6,10,14 102:23 105:15
applicable 42:11 44:21 45:6,11
applied 73:3
apply 45:20 78:14
appreciate 29:13 38:23 111:7
approach 43:5
appropriate 25:5 43:23
appropriateness 43:11 44:6,13
approximately 16:24 22:11
april 100:15 105:23
areas 23:21 111:11
arrangement 21:4
ashraf 8:5
aside 31:14 41:7 96:18 111:5
asked 13:18 23:19 24:21 39:15 41:24 61:6 66:6,21 70:7 71:8 74:7 119:22 121:6 123:9
asking 29:7 56:18 94:3,3 109:14 114:9 121:7
aspects 49:3 87:20
assert 27:21
asserted 23:22 42:9 101:5
assess 23:21 51:6
assessed 71:20
assessment 84:1,3 86:1 91:11 92:14
assessments 71:23
assign 68:19,24
assist 38:13
assistant 28:8 28:17 120:22
assisted 121:2
associated 21:13 42:25 49:11 59:21 67:20 73:19 76:15 91:16
assume 9:11 22:4 32:21 66:4 70:7
assuming 64:3 64:7,18 65:8,17
attached 10:15 14:1 31:20 37:15 39:20 40:8 79:16 86:10 90:6 103:5 108:25
attention 11:2 83:18
attorney 12:3 13:7 22:20 23:14 27:21 29:25 58:20,21 70:10 71:14 101:22
attorneys 12:1 12:12,14 13:4 13:14 20:8 24:22 27:11,18 28:3,4
auditing 37:24
auditor 36:22
auditors 120:5
auspices 121:8
authorization 16:25
available 51:14
avoid 10:4

b

b 6:9
bachelor's 33:2
back 11:17 17:17 21:12 28:14 33:11 41:10 46:16,18 49:14 56:12 70:19,22 74:16 100:2 102:19 102:21
background 16:20

barbano 90:11 90:14 94:24
barbano's 91:11
based 52:22 53:7 56:16 66:18 68:3 82:4 91:19 92:3 94:15 95:10 96:13 97:15 99:15 106:14 107:1 115:23
basic 13:19
basically 23:20
basis 38:6 43:18 44:4 55:3
batch 108:13 108:13
bates 86:18,22
becuase 88:9
bedbound 91:14
began 50:11
beginning 2:14 69:10
behalf 2:13 7:20
believe 20:20 20:23 28:22 29:4 30:8,22 50:20 75:15 77:15 84:12 95:3 105:15 121:19
bellwether 5:20
benefit 58:1
benefits 25:18 26:24 68:13,20 69:3 72:15
best 30:17 66:18
bethune 3:4
better 47:11 91:22 92:25 94:14 95:6
beyond 16:21
bill 6:6 58:9 59:22,22
billing 50:1,11 50:15,16 52:3 57:20,25 59:12 60:1 62:11 63:21 80:7 81:20,22 97:4 98:20 99:1 113:21 115:3 117:6,23 120:17
bills 25:4 43:6 43:10 63:21
bit 35:11 44:11
blood 87:7
blue 36:3,3
board 6:2,3
bottom 14:18 41:15,22
boulevard 2:13
brain 84:9,16 85:1,3 105:24 106:13
break 9:15,16 9:18 46:9,19 70:14,23 102:13 103:14
breakdown 75:15
breath 101:2
briefly 8:6 85:21 100:2
bring 15:6
brought 45:20
brown 4:4 7:6
bullet 42:6
business 62:12
busy 39:4

c

cal 62:13
calculate 68:12 69:2 76:22
calculation 60:20
calculations 82:7
calf 84:11,19,24
california 1:13 2:14 7:1,10 123:7 124:4
call 28:25 53:3 71:9
called 7:20 53:5 56:14
calls 12:3 13:7 22:20 27:20 28:17,20 29:25 70:10
camp 1:6 2:6 5:13,19 7:11 42:2 63:9 69:18 71:3 73:13
captured 57:20
capturing 71:6
cardiac 100:16 104:19 105:2,7 105:12 106:14 108:6 109:18 109:18,23 110:19,24
care 16:22 25:5 34:11 35:3,23 35:24 36:5 37:16 43:9 49:1 49:9,11 58:10 64:20 65:11 76:16,17,19 88:10 100:14
carolina 1:2 2:2 7:13
case 8:8 14:11 15:11 19:7,11 19:15,22,24,24 20:3,13 21:1 22:8,25 23:8,14 23:18 24:16 25:1,22 26:1,4 26:7,10 30:14

32:2 40:18 45:7 48:10 58:15 64:17 71:7 72:16 89:4 92:12 103:12 110:18
cases 1:7 2:7 15:7 24:19,24 25:11
categories 72:1 100:11
caught 57:25 57:25
causative 66:16
cause 96:15
caused 42:1 91:5
causes 95:19
caveat 27:9
ccn 59:4 60:15 63:7 75:6 77:17 77:22 78:8,8,13
cdeo 5:19
cell 75:24
center 6:8 118:20
centrally 84:10 84:18
certain 55:7 69:13 121:4
certainty 95:17
certification 124:1
certifications 17:4
certified 2:17 7:22 10:14 13:25 31:19 36:21,24 37:4 39:19 40:7 79:15 86:9 90:5 103:4 108:24 120:4,16 124:3 124:24
certify 124:5,16
cfe 5:19
chance 83:22 95:24 99:23
changed 52:4,7
changes 116:18 123:12
charge 54:24 104:18 105:11 105:23
charged 53:3 53:15 54:8 60:22
charges 49:19 49:23,25 50:3,3 54:17 55:25 56:5 58:9 63:7 64:20 65:10 80:10 97:7 98:22 99:16 103:25 105:1 106:7 107:6 111:13,22 112:1 114:22 116:21 117:9 117:16 119:22
charging 37:21
chart 75:16 76:24 78:19
chc 5:18
checklist 109:8 109:13,17
chest 84:17 100:17
chief 34:16,16 34:20
cholesterol 88:17
chronic 96:4,4
cited 50:2
citing 95:15
city 3:9
civil 5:10
claim 59:20 101:4 116:25 117:17
claimant's 68:4
claimed 44:23 49:20 64:2 97:9
claims 17:1 23:20 35:1,1 43:7,10,19 59:13 67:12,13
clarify 12:8 21:10 23:4 29:13 38:17 49:1 52:16 68:17 96:12 106:20
clarifying 38:22 41:20
client 12:3 13:7 22:20 27:21 29:25 70:10 71:14
clinic 36:13,16 47:6,6,7,9
clinical 6:9 16:23 34:23,24 35:4 45:18 49:3 49:5,12 50:22 50:23 59:13 64:11 82:3,4 87:20 101:5 107:21 110:18 111:21
clinically 35:4 42:11,17 45:2 50:4 59:1 75:8 82:5 100:13 116:25 117:16
clinicians 51:5
closer 89:6
cms 17:8 27:3 39:7 51:15,16 59:3 60:14 63:6 75:6 76:25 77:10
cms's 61:24
code 37:15,22 52:9,10,11,14

52:17,21,24
coder 36:24
codes 51:14,20 51:24,25 52:1,1 52:4,17,17,19
coding 17:5 34:24 37:7,25 38:13,19 51:15 52:6 60:2
collect 54:11
colorado 100:14 108:12
column 15:10 15:18 17:18 75:20,25
come 21:13 75:8 108:14
coming 43:24 44:2 92:20
comma 49:20 50:8,8
commercial 62:14
common 93:11
communication 70:11
communicati... 27:10 28:3 71:15
community 46:5
comorbid 42:20
companies 56:19
company 53:6 56:16
complete 10:8 33:17
completed 33:2 33:11,14
completion 124:14
complex 61:9 61:14
conclude 108:4
concluded 122:3
concludes 121:24
conclusions 64:3,18 65:8,18 66:4 69:10 75:2
concomitant 91:20
condition 44:15 44:16 45:1 60:23 67:20,22 69:13 70:5 72:23 77:24 88:22,23 89:18 93:22,24 94:15
conditions 18:1 18:2 23:25 24:5 24:9 42:12,20 42:20,23 45:19 45:25 46:6,6 50:24 61:12 63:22 64:3 69:16 71:20 72:22 73:3,23 75:8 77:5 78:25 87:21 88:13 91:16,21 92:8 93:1 94:13,14 116:25 117:17 119:1
confirm 85:17
confirmed 80:8 97:5 98:21 115:4 116:17 117:7
confused 84:15
connect 21:19
connected 44:25 66:25 69:14,17
connection 23:5 69:21
connections 22:24 23:13 70:8
considered 5:15,16 40:1,14 64:23 65:13 69:19
consistent 43:7
consult 61:20 92:20 110:15 120:4,10
consulted 120:22
contacted 22:7
contained 101:6,10,11
content 28:3
contents 12:11 12:13
context 70:3 73:13
continue 47:10 103:19
continued 4:1 6:1
continuing 47:9 99:11
continuity 47:6 47:7
continuum 34:12
contract 19:20 19:21,23 20:1 20:22 53:7 55:14 56:17,20
contracted 15:6
contracting 35:6
contracts 36:1
conventions 51:16
conversations 12:10,11 13:8
converse 119:25

coordination 36:6 49:11
coordinators 35:3
copayments 57:15
copies 14:2 101:23 102:7 103:13
copy 10:14 13:25 20:1 31:19 32:20 39:19 40:7 79:15 86:9 90:5 101:18 102:3 102:11 103:4 103:16 108:24 121:18
cord 84:8,10,15 84:18,18,19,24 84:25 85:2
core 44:14
corner 14:18 14:24
correct 14:16 29:17 30:24 33:3,15 47:20 47:22 48:7 54:5 54:18 58:20 61:23 64:8,19 65:9,19 66:5 69:15 71:12 80:22 87:10 94:23 100:21 105:17,18 106:4,5,8 107:10 108:10 114:22 118:21 120:5,11
corrected 5:21
corrections 123:12
correctly 43:12 45:4 50:5 51:1 53:11 54:12 57:17 58:12 59:5,14 60:24 62:15 64:24 65:14 69:23 75:12 80:11,17 97:19 98:23 100:20
correspond 37:16
corresponding 49:22 50:12
cost 53:9 55:3 58:5,10 75:21 75:25 76:7,8,13 76:13,21,21 115:11
costs 57:19 75:9 75:11,16 76:5,5 76:14
counsel 7:14 25:23 29:6 32:6 32:20 41:17 71:16 72:7 86:24 102:8 103:14 113:16 114:7
counseling 88:3 88:24
couple 8:19 46:19 111:6
court 1:1 2:1 7:12,16 8:24 9:17,20 20:18 20:19 101:17 101:21 103:15 124:1
cover 8:19 41:18 53:6 56:16 58:5 77:23
covered 57:16
covering 111:11
cpc 5:19
cpip 5:19
cpma 5:19
cpt 37:22
created 13:17
cromwell 3:17 28:6
cross 36:3
crossover 52:8
csr 1:18
current 32:17
currently 34:16
cut 9:24
cv 1:5 2:5 5:14 13:19 32:17,20

d

d 16:4
daily 38:6 43:18 44:3
damages 23:22 23:24 42:9 44:24 49:20,24 50:1 58:11 64:19 65:10,17 97:10 101:6
darnell 4:4 7:6
data 17:20,22 43:7 50:11,15 57:21 59:3,9,16 60:5,6,15 104:22
date 7:8 12:16 87:9 105:22,25 106:11 107:20 107:23 108:1
dates 106:1 107:1
david 3:16
davis 3:4
day 20:20 23:11 35:9,14 38:8 106:15,22 107:24 108:14 108:18 123:15 124:20
days 12:17

dbjlaw.net 3:11
dc 3:20
dealing 45:24
decades 121:9
decisions 104:1
declaration 122:1
declare 123:6
deductibles 57:15
deem 123:13
deep 84:9,15,25 85:1,2
defendant 3:13
defense 80:8 97:5,16 98:21 115:25 116:17 117:7
deficiencies 59:10,17
define 24:13 42:17
definitive 95:16
degree 33:2 95:17
deleted 52:11
demanded 49:24
dentistry 6:8
department 3:14 6:8 22:14 22:17 34:11 86:17
depend 89:3,18
depends 93:5 110:10,17
deponent 7:13
deposed 8:13 8:16 25:8 26:4
deposition 1:12 2:12 5:9 7:9 11:19 12:24 13:1 27:12,18 29:8,15 30:5 102:6 103:13 121:24 122:3 123:8 124:14
depositions 101:22
describe 24:18 34:20 105:20
described 25:1 25:12 84:8 89:5
describing 84:20 109:13
description 5:8 15:19 17:17 28:16
determination 66:2 92:21,25 93:17 95:6 96:5
determinations 50:22 61:22 67:1 69:12 101:4
determine 23:23 24:4 43:10 49:19 50:3 52:18 58:25 119:9
determined 42:24
determining 69:20
develop 42:20 91:3
development 90:16,25
diabetic 88:16
diagnoses 50:4 59:1
diagnosis 37:17 43:24 44:2 52:1 52:1,21 59:1 89:6,7 93:23 94:3,6
diamond 86:18
diane 96:25 97:3
difference 76:4 76:11,12 115:2
differences 81:17 112:10
different 36:2,3 43:21 44:12 91:16 106:12
difficult 110:11
diplomat 6:2,3
direct 11:2 28:23 44:19 49:9 75:11,25 76:5,7,13,16,17 76:21 95:20 104:8,13 113:13
directed 64:20 65:11
directing 113:16
direction 124:12
directly 16:9 69:9
director 43:8 56:22
directors 35:2
disabilities 24:8
disability 24:7 44:25 66:25 67:6,12,13,16 67:19,21 68:2 70:4,8 71:23
disagree 44:8 109:10,15 112:2
disagreed 85:9 85:11
disagreement 111:12 112:15
discharge 35:3 47:12 49:4
discharged 34:12
disciplines 36:7

discrepancies 112:8
discuss 35:10 70:24
discussed 70:24 111:9
discussing 12:13 44:20 53:2
discussions 12:14
disease 18:1 23:25 24:5,9 41:25 42:12,13 42:19,21,25 44:14,14 45:1,3 45:14,17 46:23 48:5 51:6 61:9 61:14 63:22 64:22 65:12 69:14,18,22 70:5 72:21 74:14 75:8 87:24 91:14 92:16,17 93:11 93:25 94:7 96:3 100:13 110:12
disorder 51:5 61:10
disorders 33:24 93:10,12
dispute 26:18 80:24 97:25 113:20 116:3 117:11
disputed 80:9 80:21 97:6,16 97:17 98:8,22 99:16 114:21 115:11,14,24 115:25 116:9 116:18,20 117:8,21,22
disputes 25:12 118:19
distinct 106:18
distinction 91:23
distinguish 110:11
district 1:1,2 2:1,2 7:12,12
division 1:3 2:3 18:9
doctor 8:3 10:11 13:3,22 15:1,9 20:12 24:11 27:9 31:16 32:23 33:20 36:21 39:16 41:7 46:8 49:14 51:4 52:25 58:20 61:9,24 62:6 63:5 64:14 67:5 69:8 70:7 71:3 74:16 76:10 79:12 82:11 83:18 85:19 86:6,21 87:5,9 89:21 90:8 96:7 102:21 108:21 111:5,6
doctors 35:5 49:7
document 1:7 2:7 10:17,20 14:4 31:23 39:23,25 40:10 40:12,14 51:15 79:18 85:17,18 86:3,13,15 90:8 95:15 103:22 109:2,5
documentation 104:1
documented 87:22
documenting 52:19
documents 11:12,21 12:1 12:21,23 13:2 13:13 40:21
doing 38:24 43:15 95:16 121:8
doj 29:1,3
dollar 68:19,24 113:6
dollars 98:22 112:13 116:19 116:21 117:18
dr 5:13,15,17 7:13 12:21 23:10 28:17 46:18 70:22 80:9 90:11,14 91:11 94:24 97:6,17 98:21 109:10 115:25 116:17 117:8 121:10
due 57:15 63:8
duly 7:21
duties 34:22 35:13
dyspnea 100:17 100:23,24 101:1

e

e 100:3
e.d.n.c. 5:14
earlier 25:7 30:22
early 22:12
easier 9:25
eastern 1:2 2:2 7:12
edgar 6:5 80:5 80:6
education 50:23
edward 113:13
effectuated 47:13

either 24:14 103:17
electric 102:3
electrodiagno... 6:3
electronic 101:18,25
eligible 15:7
email 20:5
emergency 34:11 86:17
employee 16:8 16:10 124:18
employer 16:11 25:24 43:19
ends 92:6
ensure 11:11 59:9,16
enter 43:20
entire 108:5
entirety 41:2
entries 17:20
eob 58:1
episode 96:2,3
equally 92:13
erythema 84:10,19
especially 92:14 111:22
essentially 91:14
estimate 30:17 110:4
evaluate 87:13
evaluated 67:5 70:25 79:6 107:13 111:10
evaluating 61:12 67:11
evaluation 74:21 100:6,16 109:18
exacerbation 110:13
exact 12:15 38:4,7
exactly 66:9 119:2
exam 84:20
examination 5:5 8:1
examined 7:22
examiner 37:4
example 43:14 55:25 57:2 84:15
excel 103:24
except 20:17
exception 112:2
exchange 62:14
excuse 96:21 115:14
executive 34:15
exertion 100:17
exhibit 5:9,11 5:13,15,16,18 5:22 6:2,6,7 10:12,13 13:24 28:14 31:17,18 39:17,18 40:5,6 40:16,16 41:10 49:15 53:1 74:17 79:13,14 80:1 83:19 86:7 86:8 89:22 90:4 91:10 101:18 101:23 102:3 102:25 103:2,3 103:11 108:22 108:23 114:5,5 114:10,16,18 115:16 116:14 117:4
exhibits 5:8 6:1 101:25 102:7 114:11
expects 54:11 54:16
expense 44:23 117:6
expenses 80:7,8 80:20,25 81:21 81:22 97:4,4,18 98:20,20 99:2 115:4 116:1,4,9 116:16 117:6
experience 21:16 34:15 44:21 45:12,19 45:24 46:4 50:23 52:9 56:21 91:19 92:4 93:7
expert 5:13,18 15:5 17:14 21:20 22:25 23:23 24:12,15 24:15,15 25:17 25:25 26:23 38:25 42:8,10 49:21 64:9,18 65:9,25 71:11 79:21 80:9 97:5 97:17 98:21 111:12 114:5 115:25 116:17 117:7 120:17
experts 23:7 27:14 64:4 65:18 66:5 119:12
explain 106:10
explanation 58:1
exposure 42:1
exposures 69:18
extensive 16:23
extent 12:3,12 13:7 22:20 27:20 29:25 42:10 67:23 70:10 71:15 86:25

extra 44:3

f

faan 6:9
facilities 35:21 43:20
facility 34:13 60:6 106:23
fact 58:14
factor 90:15,22 90:22,24 91:19 95:13
factors 93:7
fair 9:6,12 61:15 65:16 94:2
familiar 37:11 37:18 45:14 53:19 61:24 103:8
far 19:10
february 1:14 2:16 7:2,8 12:23 124:20
federal 124:1
fee 20:16
feel 84:21
feeling 47:10
fees 20:25
fellowships 33:17
figure 53:8 54:9,15 77:3 78:22 98:11 99:5 113:24 114:23 115:9 115:10
figures 116:24
final 57:14
financially 124:17
find 84:7 96:14
finding 84:20
fine 30:3
finish 9:22 72:8
first 7:21 8:20 22:7 23:21 41:15,22 49:18 53:2 54:7 56:13 57:13 58:7,24 60:19 64:16 65:2 97:2,2 99:15 100:11 117:4
five 17:20 46:9 49:23 77:11 102:13 111:9
flat 20:15,17,18
flipping 32:16
focused 59:12 59:12
follow 46:20 47:15 51:16 64:25 70:23 87:20
following 56:10 80:14,19 97:10 101:3 122:2
follows 7:23
foregoing 11:18 123:8 124:6,8 124:13
forgive 48:9
forgotten 48:9
form 14:20 15:13 18:12,22 21:7,21 22:2,9 23:2 25:13 26:11 29:20 30:6,18,25 33:25 35:16 36:17 38:1,14 39:1,14 40:22 41:3 43:16 44:9 45:8 46:1 47:25 48:15 51:8 53:16,25 54:19 55:4,15 56:7,23 57:22 58:16 59:18 60:8 61:3 61:16 62:1,19 62:25 63:10,23 64:5 65:20 66:7 67:7,17 68:5,14 68:21 69:4 71:13 72:6,17 73:5,15 74:4,10 76:6 77:6,13 78:1,17 79:1,8 81:1,10,24 82:15 83:2,11 87:16 88:6 89:1 89:14 90:17 91:6,25 93:3,18 94:8,25 95:8 96:9 98:3 99:3 107:8,15 108:8 109:11 110:22 111:16 112:3 112:16 113:8 115:5 116:5,22 117:13,24 118:11,22 119:6,18 120:6 120:12,18,25
formal 84:13
forming 40:17 120:3
forms 49:24 50:1 57:25
forth 15:7 45:21 49:6 54:23 67:20 124:7
forward 12:9
found 22:18 59:21,23 76:25 77:18 78:20 111:15
foundation 14:21 55:5 60:9 62:2,20 63:1 68:6 73:16 74:11 76:7 82:16 83:3 88:7 89:15 95:1

111:17 112:4 112:22 117:25 118:12 119:19
four 28:1
fraud 37:4
fraudulent 54:17,22,25
front 83:19 96:13
full 8:4 101:10
fully 101:6,10
further 28:23 87:13 101:24 124:12,16
future 69:2

g

g 6:6 101:6,10 101:14 102:23 105:15
gary 65:5 74:21
general 19:23 93:23 94:3 95:11,13,14
generalist 93:9 94:11
generally 24:18 37:22 56:1,3,5
generator 84:16
getting 84:23 111:1
give 10:5 24:23 43:14 57:2 87:13 90:18
given 13:1 24:4 60:7 87:6 95:18 110:20
giving 8:22 49:9,10
go 14:3 34:13 58:3 78:6 93:8 113:18 117:3 121:15
goes 59:11 71:15
going 8:19 9:10 10:11,12 12:9,9 12:20 22:21 31:17 32:4 39:16 46:8,13 57:6 70:17 79:12 86:6 89:21 102:1,15 102:24 108:21 118:6 121:24
golkow 7:7
good 7:4 8:3 57:12 70:14
government 24:3,3 25:18 27:5 39:11 44:24 58:23 60:23 63:20 69:3 71:10 73:21,21 75:6 75:20,25 97:9
governmental 43:6 71:22 82:9
grant 1:17 2:16 7:16 124:23
great 115:21
greater 92:10
ground 8:20
group 16:15,24 24:20 26:16,20 34:17 35:20,22 35:25,25 36:5 37:14
guess 36:8 56:4
guidance 85:14
guidelines 51:16
guys 117:23

h

hackett 5:18 23:23 42:10 49:22 50:2 71:12 79:22 81:8 82:13 83:1 83:10,25 84:12 85:25 87:14 96:21,22 98:1 99:21 111:12 113:14 114:6 114:13 116:3 116:15 117:12 119:16
hairs 120:1
hand 10:11 39:16 40:4 86:6 89:21
handed 79:12 108:21
handing 13:22 31:16
happened 107:23
happening 92:6
hard 84:22,22 101:23
hasan 5:10,12 5:13,15,17 6:6 7:13 8:5 10:12 12:21 13:23 28:17 46:18 70:22 80:9 97:6 97:17 98:21 115:25 116:17 117:8 121:10
hasen 1:12 2:12 5:3 7:19
head 10:3,4
heading 43:2 64:17 66:24 75:1 80:5 96:24 99:11
health 25:18 33:6 36:1,2,4 37:1 68:8,9,11
healthcare 56:19
healthmed 36:2
heart 109:14
heavily 52:23

heidi 1:17 2:16 6:9 7:16 109:6 124:23
held 7:10
help 17:24
hen 64:10
hereof 122:2
hereto 10:15 14:1 31:20 39:20 40:8 79:16 86:10 90:6 103:5 108:25
heritage 24:20
high 57:8
higher 37:22,22 54:15 56:2,5 92:10 95:25
history 100:18
hold 12:25 74:2
home 34:13
hospital 34:12 35:21,23 36:10 37:8 47:2,8,14 47:16,19 92:5 100:15 108:12 110:6
hospitalist 34:5 34:8 43:8 91:13 91:24 92:12,24 93:6,9
hospitalist's 93:15
hospitalists 34:23
hospitalization 43:22
hospitals 34:5 43:21 108:13 108:17
hour 9:17 46:8
hourly 20:12 20:17
hours 12:24 14:8 15:10,10 15:11 28:25 30:13,16,20 31:5,8 38:8
house 24:22 25:23
huhs 10:4
hum 62:9 96:23
hummel 1:17 2:16 7:16 124:23
hums 10:4
hundred 117:18
hypothesizing 95:18

i

i.e. 111:3
icd 51:14,14,20 51:20,24,24,25 52:4,6,9,12,14 52:17
identification 10:13 13:24 31:18 39:18 40:6 79:14 86:8 90:4 103:3 108:23
identified 69:16 71:11 77:11 82:13 96:16
identify 51:19 104:21 105:4 105:20
illness 69:13 81:15 110:12
illnesses 45:15 49:6
immobile 91:18
immobility 90:15,24 91:5 91:18 92:9 93:25 95:12,19 95:22 96:4
impairment 68:3
improve 47:10
include 31:5 72:22 73:11 76:18 100:14
included 60:20 72:1 73:8 88:3
includes 76:14
including 62:13 88:17
inclusion 50:8
incorrect 64:8
incurred 63:7 67:21
independent 42:8 66:2,15 107:22 119:16
index 5:1
indirect 76:5
individual 21:15 41:25 78:9
individuals 92:4
inflated 54:9,14
information 12:16 13:19 20:21 37:1 50:16 66:19 96:13
initial 81:13
institution 26:15,19
institutional 34:25,25 35:6 43:20
institutions 25:3
instruct 12:4 22:21 30:1 70:12
instructed 6:12
instructing 66:11

insurance 53:6 56:15,18 57:16 58:3 62:12
integrity 61:25 62:18
intensive 16:22
interested 124:17
internal 33:15
interpretation 118:20
invoice 5:11 14:8,10 28:14
invoices 19:6 29:14 30:23 31:10 43:6
involve 61:14
involved 17:2 35:5 100:15
irrespective 84:14 107:23
issued 12:21
issues 51:13,19 51:23
items 13:20 28:15

j

january 5:17 5:21,21 6:9 11:20 12:18,22
ji 23:10
job 39:5
joe 28:6
joey 3:18
jones 3:4
jt 8:7
judgment 61:15
jurat 124:1
justice 3:14 22:15,18 71:4 73:14
justify 17:24

k

kansas 3:9
keeps 31:7
kind 25:11 26:13 29:9 35:10 38:20 42:19 46:19 98:5 118:14 121:7
kinds 10:3
knew 114:13
know 9:4,11,16 9:18 11:3 12:15 13:16 15:1,21 16:11,20 17:4,6 17:8,9,10,12 18:23,24 19:17 19:18 21:2,4 22:5,17 23:7 26:10,14 30:7 30:19 32:24 38:3,7 49:16 56:9 74:17 75:16 80:2 83:22 85:23 86:13 99:23 103:7 107:19 111:9 112:13 113:2,23 115:19 118:3 119:11,25
knowing 45:12 95:21 96:8,12
knowledgable 60:12
knowledge 52:9 95:14
konstantopou... 3:15 12:2 13:6 13:15 14:20 15:13 18:12,22 21:7,21 22:2,9 22:19 23:2 25:13 26:11 27:19 28:5 29:6 29:11,20,24 30:6,18,25 32:6 32:19 33:25 35:16 36:17 38:1,14 39:1,14 40:22 41:3,17 43:16 44:9 45:8 46:1 47:25 48:15 50:7 51:8 53:16,25 54:19 55:4,12,15 56:7 56:23 57:22 58:16 59:18 60:8 61:3,16 62:1,19,25 63:10,23 64:5 65:6,20 66:7,13 67:7,17 68:5,14 68:21 69:4 70:9 71:13 72:3,6,9 72:17 73:5,15 74:4,10 76:6 77:6,13 78:1,17 79:1,8 81:1,10 81:24 82:15 83:2,11 86:24 87:2,16 88:6 89:1,14 90:17 91:6,25 93:3,18 94:8,25 95:8 96:9 98:3 99:3 101:9,20 102:2 102:6,10 103:10 107:8 107:15 108:8 109:11 110:22 111:16 112:3 112:16,21 113:8,15 114:4 114:9,16,19 115:5 116:5,22 117:13,24 118:11,22 119:6,18 120:6 120:12,14,18 120:25 121:13 121:19

konstantopou... 3:22

l

l 3:19
l.barbano 6:2
labeled 86:19
labs 108:15
lack 95:18
laptop 103:11
late 22:11
laws 123:7
leal 24:13
leave 47:13
leaves 47:8
leaving 80:9 97:6 98:21 116:18 117:8
left 102:22
legal 21:19 24:12,16 38:24 74:2
lejeune 1:6 2:6 5:13,19 7:11 42:2 63:9 69:18 71:3 73:13
leslie 4:6
letter 6:4,10 90:11,18 91:11 95:10,24 96:18 109:6
level 23:8,14 101:4
license 6:4
life 67:23 68:3 68:4
limited 62:13 112:2
line 6:12 28:15
lines 62:12
linkedin 21:16
list 12:8 40:1,16
listed 49:23,25 52:2 78:11 115:9
litigation 1:6 2:6 5:13,19 7:11
little 28:23 35:11 44:11 70:25
lives 36:4
long 63:13 104:17,24
longer 116:2
look 17:17 39:24 43:19,24 45:16 73:20 86:12 91:15 107:25 119:22
looked 18:10,11 18:15,15,16 42:22 50:12,17 52:18 72:19 107:18,21 108:2 118:25
looking 11:18 105:16
looks 103:7 104:25 106:10 119:23
los 1:13 2:14 7:1,10
lot 34:22 63:14 91:13 95:12 111:10
lovenox 87:5
lower 57:10

m

m 16:4
m.d. 1:12 2:12 5:3,10 7:19
macchia 4:6
machine 124:11
made 57:11 59:20 61:7,21 63:20 66:2 71:23 96:4 104:2 107:22 123:11 124:10
mailings 58:3
main 3:7 13:20 13:20 17:2
majority 91:17 119:15
make 47:9,12 66:15,19 71:6 72:12 89:5 91:23 92:13,14 92:25 93:16 95:6 106:9
makes 9:24
making 50:21 93:23
malone 3:5 5:6 8:2,7 10:10,16 12:7,19 13:12 13:21 14:2,25 15:17 18:19 19:1 21:11,24 22:6,13,23 23:6 25:16 26:17 27:24 29:9,12 30:3,10,12,21 31:4,16,22 32:8 32:11,22 34:3 35:19 36:20 38:9,11,21 39:6 39:16,22 40:3,9 41:1,6,20 44:5 44:18 45:22 46:7,11,17 48:3 48:18 50:10 51:11 53:22 54:4 55:1,9,13 55:19 56:11 57:1 58:6,19 60:3,13 61:8,19 62:5,23 63:4,14 63:17 64:1,13 65:7 66:3,11,22 67:10 68:1,10 68:18 69:1,7 70:13,21 71:24 72:4,7,13 73:1

73:10,24 74:6
74:15 76:9 77:9
77:16 78:5,18
79:4,11,17 81:5
81:19 82:10,19
82:22 83:6,15
83:17 86:5,11
87:1,3 88:1,20
89:10,20,24
90:2,7 91:1,9
92:19 93:14
94:1,18 95:4
96:6,17 98:10
98:13 99:7
101:12,16,24
102:4,9,12,20
103:2,6,21
107:11 108:3
108:20 109:1
109:22 111:4
111:24 112:9
112:11,19
113:1,11,17
114:7,12,20
115:15 116:10
116:13 117:2
117:20 118:1
118:18 119:3
119:14 120:2,9
120:15,21
121:3,10
managed 35:23
35:24 43:8
management
49:1 64:21
65:11 93:21
101:21 103:12
manner 44:1
manual 61:25
62:18
manuel 28:5
mardyan 16:1
16:5,8 48:11,13
48:19,20
mardyan's
16:11 48:23
marjorie 5:18
23:23 42:10
49:22 71:12
79:22 81:8
82:13,25 83:9
84:12 85:25
111:12 114:6
mark 10:12
13:22 31:17
39:17 40:4
79:13 86:7
89:22 102:25
108:22
marked 10:13
13:24 31:18
39:18 40:6
79:14 86:8 90:4
103:3 105:16
106:3 107:6
108:23
market 54:10
massage 51:6
master's 33:6
materials 5:15
5:16 40:1,14,17
matter 7:10
maximum 53:6
56:15
mcelhiney 65:5
74:21 94:19
112:12 113:5
mcelhiney's
75:7 77:5
mcelinhey 65:6
65:7
md 6:2,9
mean 15:15
25:2 37:13,20
51:23 54:14
70:2 76:7
119:10
meaning 111:1
means 73:13
medi 62:13
medial 84:10
84:19,24 88:11
medical 6:6
16:15,24 17:1,5
17:23,25 18:2,8
23:20,22,24
24:2,22,23 25:4
33:12 34:17,17
34:21 35:2,20
35:22 36:22
42:9,22,23 43:6
43:7,8,10,11,19
44:6,13,16,23
44:24 45:12
46:5 49:20 50:1
50:12,18 52:2
52:18,20,23
53:9,10 56:1,3
56:21 58:11,24
58:25 59:21,24
60:23 61:15
63:9,21 64:4,11
64:20 65:10,24
66:17 67:20,22
71:20 80:7,15
80:20,25 81:9
81:20,21,22
82:12,24 83:8
84:13,13 85:16
86:16 91:16
92:8 93:23
94:12,15 95:14
97:4,8,17 98:19
99:1 100:12,14
101:5 104:1
107:18 111:20
113:4 115:3
116:1,4,9 117:6
118:21 120:4
120:16
medicare 56:1
56:5 57:5,6
61:25 62:13,17
71:9 74:8 75:6

76:25 77:4,10 97:10
medication 49:10 87:6 88:4 88:18 89:12
medications 47:11 49:4 85:14 88:17
medicine 6:4,7 6:8 33:15
meet 44:17 88:4
meeting 29:2
meetings 27:17 27:21,25 28:9 28:20 29:7,8,14 29:18 30:2,4
melanie 3:15 28:5
mentioned 23:12 25:7
merely 69:15
met 8:6 28:4
methodology 43:2 58:23 66:24 107:12 119:2,5,8
metric 57:7
metrics 57:9,11
michael 3:17 28:6
midway 15:18
mind 86:25
minute 46:9 102:13
minutes 70:15
miscoding 37:11,13,14
missouri 3:9
mixed 84:23
modalities 106:12
moment 96:7
monitoring 64:21 65:12 100:19 105:6
morning 7:4 8:3
movement 33:24 51:4
moving 34:4 77:17
mph 33:5
mri 105:23 106:13 108:5 108:15 109:7,8 109:14,17 110:5,13,16,21 111:1,3
mris 109:15,24 110:2
multiple 35:21 36:6 42:19 106:11 108:18
multitude 93:7 93:10

n

n 16:4
name 7:6 8:4,7 15:25 16:3 48:10 123:15 124:20
names 28:4
necessarily 29:22 44:17 45:23 47:23 50:13 78:10 81:14 86:4 88:14 89:5,17 90:23 92:3,15 93:23 94:11,17 96:5,16 110:17 119:12,25
necessary 110:13 123:12 123:13
necessity 17:1
need 9:15,18 26:2 97:22 102:10 121:17
needed 113:6
negotiate 57:4
negotiated 53:3 53:5 55:10 56:15 58:5
negotiating 55:11 56:20
negotiations 56:20
neither 124:16
network 24:21
neurologic 93:10,12
neurological 61:10
neurologist 33:20 48:4 61:20 91:22 92:20 93:2,6 94:5,17
neurologist's 93:16,20
neurologists 51:4 120:11
neurology 6:3,8 6:9 36:15 110:15
never 18:18 62:17 94:19 110:19
new 6:4 35:4
newer 52:11
nods 10:3,5
north 1:2 2:2 7:13
notable 84:9
note 12:20
noted 7:14 50:10 101:21 104:19
notes 5:22 38:6 38:18,19 103:25

noticed 112:8
noting 69:15 103:18
november 14:15 28:18,18 28:19 30:14
number 5:8,12 14:23 86:22 98:14 99:12,24 101:21 116:14 117:3
numbered 32:9
nurse 15:20,20 15:21 16:17,23 17:19,21 19:2 28:8,24 31:6,11 34:24 35:5 38:5 48:9,13,19,20 48:23 120:22
nurses 35:3 49:3
nw 3:19

o

oath 8:23 123:8 124:9
object 101:20 112:21
objection 12:2 13:6,15 14:20 15:13 18:12,22 21:7,21 22:2,9 22:19 23:2 25:13 26:11 27:19 29:20,24 30:6,18,25 33:25 35:16 36:17 38:1,14 39:1,14 40:22 41:3 43:16 44:9 45:8 46:1 47:25 48:15 50:7 51:8 53:16,25 54:19 55:4,12,15 56:7 56:23 57:22 58:16 59:18 60:8 61:3,16 62:1,19,25 63:10,23 64:5 65:20 66:7 67:7 67:17 68:5,14 68:21 69:4 70:9 71:13,14 72:3,6 72:8,17 73:5,15 74:4,10 76:6 77:6,13 78:1,17 79:1,8 81:1,10 81:24 82:15 83:2,11 87:16 88:6 89:1,14 90:17 91:6,25 93:3,18 94:8,25 95:8 96:9 98:3 99:3 103:10,18 107:8,15 108:8 109:11 110:22 111:16 112:3 112:16 113:8 114:8 115:5 116:5,22 117:13,24 118:11,22 119:6,18 120:6 120:12,18,25
observation 87:9
obtain 111:3
obviously 8:21 9:20
occurs 42:22
october 22:12
offering 42:2 58:8 71:25 72:14 73:25 76:20 81:7 82:11,23 83:7
office 48:17
officer 34:17,21
offices 54:23
offset 58:25 63:19 72:2 73:4 73:9,13 74:3 76:22 97:10,11 98:8
offsets 44:24 58:24 60:20 63:6 72:16
oftentimes 108:18
oh 41:20 51:25 89:24,24 113:25 114:2
okay 8:12,15,18 9:2,14,18,19 10:5,10,10,19 10:22 11:1,5,5 11:6,9,13,16,24 12:19 13:21 14:6,9,13,17,25 15:8,17,24 16:2 16:7,19 17:3,7 17:13 18:3,19 19:5,9,25 20:6 20:9,24 21:3,17 21:24 22:6,22 23:16 24:10 25:6,16 26:3,9 26:22 27:8,24 28:7,13 29:5,11 30:10 31:9,13 31:15,21 32:3 32:15,22 33:1 33:10,19,22 34:3,19 35:19 36:11 37:6,10 38:9,21 39:21 40:3,15 41:9,12 41:14 42:16 44:18 45:10,22 46:7,11,21 48:3 49:8,13,17 50:14,19 51:3 51:25 53:13 55:1,9,22 60:13 60:17 62:5 64:1 66:22 67:4,14

68:10 69:25 70:13,21 71:1 73:24 74:6,15 74:15,20,24 75:3,14,19 76:3 77:2,9,20 79:11 79:11,25 80:3,4 80:13 82:19 83:15,23,23,24 84:4 85:6,12,19 85:23 86:5,5,14 86:23 87:8 88:1 89:10,20 90:13 94:1,18 96:6,17 96:19 97:21 98:10,13 99:10 99:10,19,24 100:1,1,5,9,25 101:16,16 102:12,20 103:20 104:6 104:11,14,15 104:18,20,24 105:3,8,10,10 105:14,19 106:6,16,19,25 107:3,11 108:3 108:20 109:4 110:1,9 111:4 112:9 113:11 113:19 114:3 114:16,25 115:15,18,21 116:13 117:2 117:20 118:5 118:18 119:3 119:14 120:2,9 121:3,23

omitted 52:5,11

ones 28:11

ongoing 95:24

open 13:1 49:14

opine 94:6

opining 69:12

opinion 5:18 42:3 58:8,14 63:5 68:2 71:25 72:14 73:2,25 74:2 76:20 79:21 81:7,17 81:17 82:11,23 84:1 87:21,25 89:13 92:24 95:5,19 99:1 107:5,22 108:6 119:4

opinions 24:15 24:23 25:17 26:23 40:18 44:22 64:8,19 65:10,17 66:16 71:7 81:15 83:7 83:14 120:3

opportunities 21:19

order 101:21 103:12 110:2 121:20

ordered 43:25

ordering 110:16

organization 35:23,24 43:9

original 40:13

ortiz 3:16 28:5

outcomes 57:12

overhead 76:14 76:18

oversee 34:23 34:24 35:4 38:4

overview 64:17

own 31:7 66:2 97:22 102:4 113:14

oxygen 100:18 105:6

p

p.m. 2:15 7:2 122:3

page 5:5,8 6:1 6:12 11:3,17 32:6,11,16,23 33:11 34:4,14 41:13,18,18,19 41:21,23 43:1 44:19,20 49:15 50:20 51:13 52:25 54:8 55:20 56:12 57:14 58:7,23 60:18 62:6 64:14 65:3 66:23 69:8 74:16,25 75:16 75:17 78:19 80:1 83:19 85:20,24 86:22 87:9,15 96:20 98:14 99:11,20 99:20 100:3,3 100:10 101:13 102:22 112:20 113:13,14,18 114:2,2,4 115:16 116:15 117:4 122:2

pages 1:19

paid 14:19 19:10 22:1 58:2 60:21,23 61:2 69:20 71:9 73:21 74:8 75:7 77:4,22 78:23 80:15,19,24 81:9,22 82:8,12 82:24 83:8 97:8 113:4

pain 100:17

palpable 84:10 84:18

palpate 84:21

paragraph 41:15,22 44:20 49:19 50:20 53:2 54:8 55:24 56:13 57:14

58:7 59:8 60:19 64:15,16 65:2 69:9 75:4 84:8 85:9,20,24 97:2 97:15 98:18 99:15,22 100:11 101:3 115:23
paragraphs 87:14
parkinson's 18:1 23:25 24:5 24:9 41:25 42:12,18,21,25 45:1,2,13,17 46:23 47:1,3,18 47:21,24 48:5 51:6 61:9,13,14 61:21 63:22 64:22 65:12 69:14,17,22 70:5 72:21 74:14 75:7 77:5 77:24 78:24 85:14 87:24 88:3 89:12 90:25 91:2,14 92:16,17 93:1 93:11,25 94:7 96:3 100:13 107:5 110:2,7 110:12,20
part 46:4 52:2 52:3 57:9 73:8 73:22 82:5,6 84:20 85:2 88:9 91:12 93:13 105:1,11,12 106:17 109:19 109:23 111:14 119:9
particular 23:21 59:22,23 95:15
parties 124:18
partly 46:3
partners 5:11 15:1,4 19:17 20:2
past 24:19 25:18 42:9 44:24 49:20 58:23,25 63:20 71:10 80:15,20 80:24,25 81:8 81:22 82:12,24 83:8 97:8 101:5 113:4,21
patience 111:7
patient 36:4,6 37:15 43:24 47:8 49:9 52:22 53:14 57:8,20 58:2 61:2,7 76:16,17,19 78:4 80:16,20 80:25 81:9,22 82:25 83:8 88:15,19,21 89:7 90:12 91:2 97:8 100:17 108:14 110:20 111:1
patient's 42:18 60:5 67:22 74:14 85:1 87:21,24 88:10 93:22 94:12 109:7
patients 23:25 24:5 25:3 34:10 35:15 36:1,9,15 38:12 43:20 45:13,16,17 46:6,23 47:1,4 47:13,18,21 48:5,20,22 49:5 49:10 50:24 51:7 53:19 57:11 58:4 64:12 78:10 91:13,15,20 92:5,5,7,10,17 110:3,5,7
pay 53:14,19,20 53:21,23 77:4 78:23
payment 59:3 60:5 73:19,20 75:21 76:24 77:11,17 78:9 78:11,14,19 79:6 80:20
payments 43:10 57:14,16 58:10 61:6 63:6 63:20 71:11 75:20,21,25 76:1 80:16,25 81:9,23 82:25 83:8 97:8
payor 26:21 55:11 57:3
payors 56:6,19
penalty 122:1 123:6
pending 86:25
percent 35:18 39:4 48:22,23 57:5,7 110:5,7 117:22 118:10
percentage 35:14 36:14 47:5 92:10
percentages 67:16
perform 11:11 19:3 110:19
performed 14:15 106:22
perjury 122:2 123:7
person 101:22
personal 22:24 23:5,8,14

personally 68:23
pertains 5:20
peterson 5:23 6:5 80:5,6 85:18 86:3,19 89:11 90:12 113:13
ph.d. 6:2
physical 84:20
physicians 38:5 95:12
pick 47:11
place 124:7
placed 124:9
plaintiff 2:13 7:21 65:5 75:1 79:5 83:9 85:13 100:7 104:4 106:23 112:12 113:5,12
plaintiff's 41:25 42:12 64:18 65:9 69:14,17 77:23 78:24 84:9 85:1
plaintiffs 3:3 5:20 8:8 12:25 17:25 23:22 24:8 27:14 42:9 44:23 49:20,21 49:24,25 50:24 59:2,2 63:8 64:2,4 65:18,25 66:5 69:21 70:25 71:11 77:12 78:13 107:13 111:10 111:11
plan 47:12
planners 35:3 49:4
plans 36:1,2,4 49:6
please 8:3 72:7 72:8 78:6 80:1 86:12 97:23 102:1 105:4,21
point 55:20 98:2
points 42:6
portion 17:14 18:16,20 20:25 58:2 66:21 106:7,8
posed 12:6
position 85:3 91:23 92:25 95:6
possible 53:23 54:6
potential 59:10 59:17
power 55:11 56:20
practice 93:13 121:9
practices 59:12 62:11
practicing 38:18,19
practitioner 88:12
practitioners 34:24 35:5 38:5
pre 109:8,13,17
predominantly 36:10
preparation 29:7,15,18
prepare 25:25 27:11 30:5
prepared 32:1 49:21 103:24
present 3:6,17 3:18 4:3 28:8 28:11,12 29:2 94:16 110:10 113:6
presented 23:17
presumptively 69:17
pretty 61:14
prices 54:23 55:2
primary 35:1 43:23 44:2 88:10,18,21 89:7
prior 12:24 16:25 52:6,12 110:20 124:9
privilege 12:3 13:7 22:20 27:21 29:25 70:10 71:14
probably 17:1 20:4 24:17 35:7 37:9 39:3
problem 88:16
procedural 109:8,13,17
procedure 109:24
proceed 114:15
proceedings 122:1 124:6,8 124:10
process 44:14 60:4
produce 11:20 102:14
produced 12:22 12:23 20:8
production 13:1
products 62:14
professional 35:1,6 36:21,24 120:4,16
professor 6:9
program 34:23 61:25 62:18

progressive 95:23
pronouncing 100:22
proper 96:14
protocol 103:13
provide 10:7 11:25 13:4,13 20:7 41:24 42:8 101:18,23 102:7,10
provided 24:15 25:17 26:23 32:20 43:6 55:25 78:14 85:13 102:2,5 103:13,16
provider 24:21 53:7 54:10,16 54:22 55:14 56:17,21 57:4 84:8 88:13
providers 37:25 56:3 58:4 63:20
providing 11:11
providors 56:1 63:15
psychiatry 6:3
public 33:6
pull 113:2
pulse 84:16
purchase 121:17
purpose 69:20
purposes 64:19 65:9,16 66:5
pursuant 10:24 11:18
put 40:2 52:21 57:6

q

qualifications 16:21
qualified 92:13
quality 57:7,9 57:11
quantification 81:8
quantified 72:15 80:6,15 82:13,25 83:9 97:3,7 98:19 111:25 115:3 117:5
quantify 38:3 61:1,6 71:8 74:7 81:6 112:14 113:7
question 9:3,10 9:11,23 12:5 13:3,9,11 21:10 27:22 36:8 48:8 55:18 56:10 63:13 66:18 70:12 71:18 72:8,12 77:21 81:4 86:25 87:3 112:5,24 114:21
questioning 101:22
questions 10:8 24:24 46:20 70:23 90:19 111:7 121:14 123:9
quick 39:24
quickly 118:3
quite 35:12
quotes 70:1

r

r 16:4
raising 114:7
rate 20:12,15 20:17,18,19 37:22,23 53:4,5 55:8 56:15 57:4 57:6
rates 55:11
rating 67:16,19
ratings 67:6 68:3
rational 55:3,8
reached 21:16 44:22
read 11:13 40:17,21 42:14 43:12 45:4,10 50:5 51:1,17 53:11 54:12 57:17 58:12 59:5,14 60:24 62:15 64:24 65:14 66:8 69:23 71:3 75:12 80:11,17 83:22,23 85:10 90:18 97:19 98:23 100:20 101:24 121:15 123:11
reading 38:6
reads 53:4 75:5 80:14,19 97:3 97:15 100:11
realize 107:19
really 13:20 47:11 52:21 95:21 96:8,12 111:8
reason 10:7 47:19 88:18 95:16 96:16
reasonable 95:17,18
reasons 84:6
rebuttal 5:18 79:21 81:14 119:23
recall 12:18 28:10
receive 20:25 21:1 37:16
received 19:12 25:3 33:5 60:15

64:12 100:12
recess 46:14 70:18 102:17
recognize 10:17 14:4 31:23 39:23 40:10 79:18 86:13 90:8 103:22 109:2
record 7:5,15 8:4 9:21,25 10:3 12:20 29:7 32:19 41:18 46:13,16,18 50:9 52:2,18 59:21,24 65:24 66:17 70:17,20 86:16,18 87:12 88:24 101:9 102:16,19,21 103:11,18 107:1 121:25 124:10
records 17:23 18:8,10,14,16 18:17,20 23:20 24:22 42:23 50:2,12,18 52:23 64:9,11 82:2 94:22,24 96:1 107:14,18 111:21 118:21 118:25 119:11
recurrences 95:24
redirect 121:14
redness 88:11
refer 51:15 97:22
referenced 51:14
referred 15:22 63:6 114:12
referring 28:14 28:21 29:9 41:19 54:8 63:19 81:20,21 82:1 84:18 114:10,11
reflect 54:10 55:11 60:22 98:25
reflecting 58:10
reflection 117:10
reflective 53:8
reflects 115:2
regal 16:15,24 34:17 35:20,22
regard 64:2 116:4
regarding 27:20 30:1 44:23 58:9 71:17 90:11 101:4
regards 56:4 82:24 99:1
registered 15:20,20,21 16:17 17:19,21 19:2 28:24 37:1
reimbursed 54:16 56:3 58:10
reimbursement 19:12 57:10 62:11
related 17:5,25 18:1 23:24 24:4 24:7,8 25:5,11 26:24 42:11,17 42:24 44:1,25 45:2,14 46:6 50:4 51:13,23 59:1 60:23 61:13 63:9,21 63:22 64:3,20 64:23 65:10,13 66:1 68:8,9,11 69:19 70:1,2,4 70:8 71:20 72:21,22,23 73:21,22 74:14 75:8 76:18 77:5 77:24 78:24 81:15,16 82:5 87:23 88:23,25 89:13 92:15 93:1,24 96:5 104:3 106:3,8 106:13 107:5,6 108:6 109:9,20 119:22
relatedness 44:7,15 59:13 61:22 73:3 82:3 82:4 88:5 94:4 94:6 101:5 111:21 112:1 118:19 119:1 119:10 121:7
relates 1:7 2:7
relating 51:19
relative 124:17
relevant 52:10
relied 50:22 52:23
rely 51:15 52:13 60:1
remember 12:15,17
remind 88:16
rendered 24:2 25:5 26:15,20 37:23 43:22 50:17 57:8 60:1 71:21 72:20,24 73:8,9,18 82:8 105:1,12 107:22 109:16
rendering 53:9 53:10 76:19

repeat 112:24
rephrase 9:5 13:10 72:12 76:10 81:4
replacement 109:14
report 5:13,18 5:20 13:17 19:3 25:25 27:13 29:19 32:1 40:2 40:18 41:11,13 43:1 49:15,21 50:25 55:21 60:18 62:6 64:15 66:8,23 69:9 72:23 73:8 74:17 75:17 79:7,21,23 81:13,18,18 83:19 84:7 87:18 96:21,22 97:22 98:12 99:6,21 100:2 100:11 102:4 102:22 107:20 109:21 113:14 113:18,24 114:5,13,24 115:8,10,11 116:8 117:15 118:17 119:23 119:24
reported 1:17 60:21
reporter 2:17 7:16,22 9:17,20 10:14 13:25 31:19 39:19 40:7 79:15 86:9 89:23 90:5 101:17,19 103:1,4,15 108:24 121:17 121:22 124:1,4 124:24
reports 27:14 52:20 65:23
represent 8:7 63:6 67:16
represented 15:9
represents 77:3 77:22 78:22
requested 10:23 11:19,21 12:21 124:15
requests 11:10
reread 65:1 83:21 85:20
reserve 12:25
residency 33:14
resolved 26:10
respect 98:8 109:7 112:12 113:4,5,12
respective 42:1
respondent 11:19
response 13:4 13:14 32:20
responsible 36:5
responsive 11:12,25 13:2 20:10
rest 85:10
restate 55:17 56:10
result 42:21 95:20
results 110:25 111:2
retail 54:23 55:2
retained 8:8 25:22 41:23 42:7
retainer 19:14 19:17,19
revealing 28:2
review 11:10 17:1,15,22,23 18:21 23:19 24:22 31:10 34:25 35:1 43:2 43:19 59:9,16 66:24 82:2 85:16 86:2 87:12 90:19 97:16 99:22 102:11 115:24 124:15
reviewed 18:7 18:17,18 24:2,6 27:13,14 40:17 49:21,25 59:2 59:23 62:17 64:8 66:17 68:20 69:3 79:23 83:25 85:24 91:10 94:22,24 111:20 117:23 118:25
reviewing 43:5 43:9 49:4 58:23 59:8
reviews 24:15 119:16
rhia 5:18
richard 6:2 99:12 100:7 117:4,5
right 9:25 12:25 14:3,15 14:18,19 15:12 15:16 25:10 29:10,16 33:12 34:6 40:19 41:8 42:14 46:23 48:6 51:7,17 52:21 61:10,22 64:4 72:5 74:9 74:22 75:22,24 76:1,25 77:18 78:20 84:7

85:23 94:22 97:13 99:17 100:7,22 101:7 105:5,16 107:14 111:15 112:15,18 113:22 115:13 118:2 120:2
risk 90:15,21 90:22,24 91:19 95:13
rn 28:17
robert 98:15,19 116:14
rochester 6:7
rope 84:22
rothchild 96:24 97:3 98:1 115:17
row 104:13,16 104:22,25 105:4,9,16,20 106:1,3
rule 110:13
rules 8:20
ruzicka 3:6

s

satisfaction 57:8
saw 21:15
sayed 97:6 98:21 116:17 117:8
saying 95:16 109:9 114:14
says 11:7,18 15:19 34:14 52:14
scenario 89:4 89:19
schedule 11:7 11:17
schedules 20:16
school 6:8 33:12
schwarz 6:9 109:6,10
scope 23:17 66:6 71:7,17 121:7
screen 102:24
scroll 104:24
search 11:11
second 11:3 49:18 50:21 55:23 58:7 60:18 69:11 105:5 111:3 116:15
secondary 61:13 69:13
section 28:24 58:22 69:10 75:1 96:24 116:16
see 11:7,22 32:11 36:15 43:3 46:25 47:1 47:3,9 48:20 52:9 65:1 67:2 75:17 88:15 91:13 96:25 98:16 99:13 113:23
seeing 38:12 92:7
seeking 27:10 88:10,19,21 89:8,8
seemed 19:19
seems 15:16
seen 46:22 52:22 91:2
sees 48:22
sentence 49:18 50:21 51:12,12 53:4 54:7 55:24 57:13 58:8,24 59:7 60:19 62:7 64:16 69:11 75:4 80:14,19 116:16 117:4
separate 94:14 114:11
september 22:12
service 22:1 24:7 44:25 53:7 53:10 56:16 59:23,25 66:25 70:8 72:23 73:18 74:13 82:5 105:6,22 105:25 106:1 106:11 107:2 107:17,21 108:1 109:12
services 15:19 17:18,24 20:15 25:3 26:16,20 26:21 28:16,16 37:21,23 43:21 43:25 50:17 53:9 55:25 57:7 65:25 71:21 73:7,9 76:15,15 76:18 82:8 88:19,22 105:12 107:20 108:11,18 109:16,20 121:4
set 31:14 41:7 45:23 49:6 54:23 60:6 67:19 96:18 108:17 111:5 124:7
setting 24:12,13 34:25 36:8 46:25 47:6,6 48:13 92:5
settings 35:7 108:19

settlement 26:14
several 38:8
share 102:24
sheet 105:21
shield 36:3
short 46:19
shorthand 2:17 7:22 10:14 13:25 31:19 39:19 40:7 79:15 86:9 90:5 103:4 108:24 124:3,11,24
shortness 101:2
show 10:2 17:24
sign 19:14,21
signature 123:21 124:23
signed 19:23 20:2
significant 90:15,21 91:19 93:12 95:13 100:18
significantly 56:2 91:18
similar 77:21
simply 52:13
simultaneous 38:20
single 96:2,3
sit 42:4
six 24:17
slightly 57:10
small 18:16 36:14 47:5
smoking 100:18
sole 69:19
solemnly 123:6
sorry 9:8 13:10 21:9 23:3 31:21 53:10 62:8 63:12,14 64:16 72:11 73:11 82:25 87:1,3,4 89:24,25 90:2 98:5 104:3,17 104:23 111:25 112:23 113:25 115:13
sound 15:12 113:22 118:2
sounds 35:12
source 75:21 76:24 77:17 78:9,12,14,20 79:6
sources 77:11
southern 1:3 2:3
sparks 6:6 99:12 100:7,12 100:15 104:4 117:4,5
speak 60:14 115:7 118:24
speaking 37:22 49:5
speaks 66:8 95:11
specialist 61:21
specialists 51:5
specialized 33:23 93:16,21 94:5
specific 24:23 44:8 51:21 78:4 95:15 119:9
specifically 19:24 42:7 54:21 81:16 82:2
spell 16:3
spend 38:24
spent 30:13 35:14 37:7,24 111:10
split 120:1
spoke 23:11
spot 70:14
spreadsheet 103:24 104:8 104:12,17
spreadsheets 50:16
standard 46:5 51:16 88:4 109:15
standards 44:22 45:6,11 45:24
standing 121:20
start 32:4 92:7
started 8:7
starting 99:24
state 6:4 8:4 59:11 62:10 123:7 124:4
statement 87:14 98:7
states 1:1 2:1 3:13 7:11 69:21 75:6 80:6 98:18 115:23
stating 87:2
staying 76:24 78:19
stemming 24:1 24:6 42:13 45:1 70:5
stems 44:16
stenographic 7:14
stimulator 84:9 84:16 85:1,3
stipulated 103:12
street 3:7,19
stress 100:16 100:19 104:19 105:2,7,12

106:14 108:7 108:16 109:19 109:23 110:19 110:24
strike 48:19 74:1
stroke 110:14
strokes 110:12
structure 84:22
subcutaneously 87:7
subject 42:3 50:25
submitted 12:16 14:11 19:6 30:23 31:3 31:10 66:19
subpoena 5:9 10:21,24 11:19 12:21 13:5,14 20:10 32:21
subscribe 123:14 124:19
subsection 83:21
subsequent 67:22
subsequently 52:7
substance 13:8 27:20 30:2 70:11 71:15
substantiate 59:22,25
substantiated 52:20
substantive 28:2
suite 2:14 3:8
summarizing 87:19,19
summary 34:15 103:25
superficial 87:22 92:18
supplement 40:13
supplemental 5:16
support 50:2
supposed 102:7
sure 11:14 13:13 16:4 21:12 24:14,20 30:15 32:8,25 35:8 47:10,12 51:25 53:20 55:20 56:12 63:16,16 66:19 68:19 71:6 72:9 72:12 81:6 85:4 85:22 106:9 112:19 113:2 115:12 119:1
swear 7:17
sworn 7:21 8:21
syed 1:12 2:12 5:3,10,13,15,17 7:13,19 8:5 80:9
symptomatol... 94:16
symptoms 64:22 65:13

t

t.j. 3:5
tab 104:8
table 82:7
tainted 59:9
take 8:23 9:15 9:16 39:24 46:9 47:12 86:12 88:16 102:13
taken 2:12 46:14 70:18 102:17 124:6
talk 9:22 121:20
talked 46:20
talking 17:19 56:13 109:20
tallied 30:15
tally 31:7
tasked 43:9,15
team 35:4 49:3
teams 28:17,20 28:25
ted 3:6
tell 9:8,9 12:10 38:7
ten 46:9 70:14
term 19:18 37:11,18 63:19
terms 95:11
test 100:16,19 104:19 105:2,7 105:13 106:14 108:7,16 109:19 110:25 110:25 111:2,3
testified 96:7
testifies 7:23
testify 5:9 10:21 26:6
testifying 8:24 124:9
testimonies 64:9
testimony 8:22 24:16 30:22
testing 106:11 106:12,13,17 107:4 108:2,14
tests 106:18,22 107:24 109:23 110:20
thank 20:10 38:22 41:20 48:12 65:7 101:12,19 114:19 121:12 121:22
thanks 114:2 121:11

thereof 123:14 124:13
thereto 123:10
thigh 84:11,19 84:21,24 85:4 88:12
thing 10:2 24:1 25:2 95:22
things 10:3 17:2 46:20 52:8 85:8 118:15,16 121:5
think 54:6 84:14,23 85:7 91:18 92:2,3 93:5,20 95:20 112:7
thinner 87:7
third 8:17 37:9 53:4 54:7 55:24 64:15,16
thirdly 24:6
thoroughly 27:13
thousands 45:13 46:22
three 14:2 23:20,21 28:15 30:11 117:9
thrombophle... 87:23 90:16,25 91:3,17 92:15 92:18 95:25 96:15
time 7:9 8:17 9:15 30:24 37:7 37:9,24 38:24 44:17 46:12,15 48:22 70:16,19 90:18 92:9 102:15,18 107:19 111:11 118:10 121:11 121:23 124:7
timely 44:1 57:8
times 8:16 24:11,14,17,21
timing 38:7
tjmalone 3:11
today 8:22 10:5 10:8 12:9 27:18 29:8 111:8
today's 7:8 27:11
together 16:9 40:2
top 11:7,17
total 14:19 54:2 58:5 75:5,9,10 75:21 76:7,12 76:14,21 97:11 113:21 115:11 117:21,22,23
totaled 114:22
totaling 80:10 80:16 97:7,9,11 98:22 99:16 116:18,21 117:9
totally 30:3
totals 80:20
towards 64:21 65:11
track 5:20
train 35:2,2,4 38:4
trained 67:11
training 16:23 33:23 50:22 62:24 84:13 93:10,15,16,21
transcribed 124:12
transcript 121:16,18 124:15
transcription 124:13
treat 36:9 47:19 88:14
treated 45:17 91:20 92:11,16 94:19
treating 35:15 44:14 45:13 48:4 50:23 92:4 94:12
treatment 24:2 43:11 44:7,7,13 44:17 46:5 47:24 49:6 55:3 60:6 63:9 64:21 65:12 73:22 77:4,23 78:23 86:17 88:2,23 88:25 89:8 93:22 100:12
treatments 24:4 72:20
trial 26:6
tricare 59:3 60:14 62:14 63:7 74:8 75:7 78:20,23 79:6
triwest 59:3 60:15 63:7
true 42:4 77:10 79:5 119:25
truthful 10:8
try 9:4,16,21 12:10
trying 18:8 51:22 63:18 64:25 66:17 120:1
turn 32:5,23 41:10,13 43:1 49:14,15 52:25 64:14 66:23 69:8 74:16,25 80:1 83:18 85:19 86:21 96:20 99:20 100:2,10 101:13 115:16

turner 3:18 28:6
turning 33:11 58:22 60:18 98:14
twice 25:8
two 17:20 25:21 30:8 39:4 106:21 107:24 114:11 121:9
type 24:25
types 24:18 62:12
typewritten 5:22
typically 36:9 48:13 51:6

u

u.s. 3:14 24:3
uh 10:4
ultimate 113:20
ultimately 18:15 53:20 57:12 61:2
um 62:9 96:23
unaware 103:16
uncommon 88:12 108:12 108:19
under 8:23 17:18 43:1 52:6 64:17 66:24 75:1,24 80:5 96:24 121:8 123:6,7,8 124:9 124:12
undergoing 100:16
undersigned 124:3
understand 8:10,22,25 9:4 9:10 10:23 51:22 94:2
understanding 16:16 18:9 21:5 21:18,25 45:12 45:18 60:4 67:15 73:12 76:4,12 97:24 103:14 106:21 117:11
uninsured 53:14,19
unique 94:15
unit 16:22
united 1:1 2:1 3:13 7:11 69:21 75:6
universities 108:17
university 6:7 100:14 108:11 108:13
unrelated 66:1 81:16 88:22 92:22 100:13 105:17 106:15 107:7 108:5 116:25 117:16 117:16
unrelatedness 119:10
untimely 13:1
upcoding 37:18 37:20,21
upper 85:4
usa 5:12
usdoj.gov 3:22
use 45:6 52:8 101:25 102:3
used 64:10 73:20 76:22 119:2,5,9
using 44:21 63:19 103:11 124:11
usually 54:23 84:17

v

va 17:11 27:1 62:14 67:5,12 67:13
validate 18:4 81:7
validated 50:18 65:24 66:1,20
validity 58:9
value 25:18 54:10 68:12,16 68:19,24 69:3
valve 109:14
various 62:12
varying 20:16
vast 119:15
vba 39:9 67:15 68:2,12,20 69:16 70:7 71:23
vba's 69:12
vein 84:22
verbal 10:2,5
verbatim 124:10
verified 99:8 111:14
verify 71:10 78:3 81:6 98:6 111:19,25
verifying 52:14
versed 16:25 62:10
versus 53:3 58:2,9 76:7
vessel 84:23
veteran's 66:25
veterans 24:7 26:24
vha 59:3 60:15 63:7 74:8 75:6 75:16,21,21,25 76:5,5,12,13,21 76:21
vha's 75:9,10

vident 5:11 15:1,4 19:16 20:2,22,25 21:6 21:14,18
video 1:12 2:12 7:9
videographer 4:4 7:4,7 46:12 46:15 70:16,19 102:15,18 121:23
violation 103:12
visit 47:16 85:15 87:20 88:10 89:8,12 106:7 108:5
visited 106:23
visits 47:15 92:21

w

wallace 4:5 5:18 23:23 42:10 49:22 50:2 71:12 79:22 82:13 83:1,10 84:12 96:21,22 98:1 99:21 111:12 113:14 114:6 114:13 116:3 116:15 117:12
wallace's 81:8 83:25 85:25 87:14 119:16
wang 23:10
want 28:23 71:6 102:3 106:9,20 115:7
wanted 35:10 48:8 70:23
washington 3:20
water 1:6 2:6 5:13,19 7:11 42:2
way 52:21 55:24 95:21 96:8,12 107:25 108:16
we've 46:8
wednesday 1:14 2:15 7:2
weeks 30:9,11
welch 98:15,19 116:14
whereof 124:19
whichever 113:17
whitney 4:5
wilshire 2:13
witness 5:2 7:17,20 12:4 13:10,17 14:23 15:15 18:14,24 21:9,23 22:4,11 22:22 23:4 24:12 25:15 26:13 27:23 29:22 30:8,11 30:20 31:2,21 32:10 34:2 35:18 36:19 38:3,10,16 39:3 39:21 40:24 41:5 43:18 44:11 45:10 46:3,10 48:2,17 51:10 53:18 54:2,21 55:7,17 56:9,25 57:24 58:18 59:20 60:11 61:5,18 62:4,22 63:3,12 63:16,25 64:7 65:22 66:15 67:9,19 68:8,16 68:23 69:6 71:19 72:11,19 73:7,18 74:5,13 77:8,15 78:3 79:3,10 81:3,12 82:1,18,20 83:5 83:13,16 87:18 88:9 89:3,17 90:1,3,18,20 91:8 92:2 93:5 93:20 94:10 95:3,10 96:11 98:5,11 99:5 103:9,20 107:10,17 108:10 109:12 110:24 111:19 112:6,10,17,20 112:23 113:10 114:18 115:7 116:7,11,24 117:15 118:14 118:24 119:8 119:21 120:8 120:13,20 121:2,4,12 123:14,21 124:19
witnesses 124:8
word 50:8 70:1 73:12 84:15 90:23
work 13:18 14:11,14 15:5 15:19 16:9 17:18 18:9 19:3 19:7,11,15,21 19:23 20:2,12 21:20 23:17,18 24:20 28:24 38:25 39:4 43:7 45:20 48:14,21 48:24 49:2 66:21 71:19 91:12
worked 16:24 17:8,10 22:14 24:19,25 27:1,3 27:5 31:5 39:7

39:9,11 48:10
working 22:8 30:13
workup 96:14 109:24
write 17:14 38:18 41:16,23 42:7 43:5 44:21 49:19 50:21 51:13 54:9 57:14 58:8,24 59:8 60:19 62:7 64:17 65:8 69:11 101:4
writes 84:7 116:15
writeups 64:10
writing 38:19 84:25 95:23 107:20 116:8,8
written 45:23 65:23 81:13
wrote 56:14 65:25 95:11 99:6 112:7 114:23 115:8 118:17

y

y 16:4
ye 25:9
yeah 13:17 15:16 20:4 32:11,14 35:23 38:10 46:10 65:4 74:19 76:10 77:25 78:7 83:23 85:5 87:18 90:3 98:7 98:9 99:5 100:24 102:1 105:5 106:9,24 110:8 114:23 115:7,12,13,20 115:20 116:7 116:24 119:8
year 33:12
years 16:25 25:21 50:23 93:6
york 6:4
yup 100:4

z

zero 98:22 112:13 116:18 116:21 117:1
zoom 3:6,17,18

Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate. The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

DISCLAIMER: THE FOREGOING FEDERAL PROCEDURE RULES ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY. THE ABOVE RULES ARE CURRENT AS OF APRIL 1, 2019. PLEASE REFER TO THE APPLICABLE FEDERAL RULES OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.

VERITEXT LEGAL SOLUTIONS

COMPANY CERTIFICATE AND DISCLOSURE STATEMENT

Veritext Legal Solutions represents that the foregoing transcript is a true, correct and complete transcript of the colloquies, questions and answers as submitted by the court reporter. Veritext Legal Solutions further represents that the attached exhibits, if any, are true, correct and complete documents as submitted by the court reporter and/or attorneys in relation to this deposition and that the documents were processed in accordance with our litigation support and production standards.

Veritext Legal Solutions is committed to maintaining the confidentiality of client and witness information, in accordance with the regulations promulgated under the Health Insurance Portability and Accountability Act (HIPAA), as amended with respect to protected health information and the Gramm-Leach-Bliley Act, as amended, with respect to Personally Identifiable Information (PII). Physical transcripts and exhibits are managed under strict facility and personnel access controls. Electronic files of documents are stored in encrypted form and are transmitted in an encrypted

fashion to authenticated parties who are permitted to access the material. Our data is hosted in a Tier 4 SSAE 16 certified facility.

Veritext Legal Solutions complies with all federal and State regulations with respect to the provision of court reporting services, and maintains its neutrality and independence regardless of relationship or the financial outcome of any litigation. Veritext requires adherence to the foregoing professional and ethical standards from all of its subcontractors in their independent contractor agreements.

Inquiries about Veritext Legal Solutions' confidentiality and security policies and practices should be directed to Veritext's Client Services Associates indicated on the cover of this document or at www.veritext.com.

Exhibit 778

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF NORTH CAROLINA
SOUTHERN DIVISION

IN RE: CAMP LEJEUNE WATER LITIGATION,	)	
This Document Relates To:	)	No. 7:23-CV-897
ALL CASES	)	

Video Deposition of WANG JI, M.D., taken at 707 Wilshire Boulevard, Suite 3500, Los Angeles, California, commencing at 9:02 a.m., on Monday, February 2, 2026, reported stenographically by Lisa Moskowitz, California CSR 10816, Certified Realtime Reporter, Nevada CCR 991, Washington CCR 21001437, Illinois CSR 084.004982, RPR, CLR, NCRA Realtime Systems Administrator.

GOLKOW, a Veritext Division
877.370.3377 ph | 917.591.5672 fax

APPEARANCES:

On behalf of Plaintiff:
DAVIS BETHUNE & JONES, LLC
BY: JT MALONE
jtmalone@dbjlaw.net.com
1100 Main Street
Suite 2930
Kansas City, Missouri 64105
(816) 421-1600

On behalf of Defendant:
U.S. DEPARTMENT OF JUSTICE
BY: DAVID ORTIZ
david.r.ortiz@usdoj.gov
BY: MELANIE KONSTANTOPOULOS
melanie.konstantopoulos@usdoj.gov
1100 L Street NW
Washington, DC 20005
(202) 514-2000

ALSO PRESENT VIA ZOOM:

GIOVANNI ANTONUCCI
JENNA BUTLER
MICHAEL CROMWELL
LESLIE LaMACCHIA
TED RUZICKA
JOEY TURNER
WHITNEY WALLACE

VIDEOGRAPHER:
DARNELL BROWN,
GOLKOW TECHNOLOGIES

I N D E X

EXAMINATION OF WANG JI, M.D.		PAGE
	By Attorney Malone	6

DEPOSITION EXHIBITS

(STENOGRAPHER'S NOTE: All quotations from exhibits are reflected in the manner in which they were read into the record and do not necessarily denote an exact quote from the document.)

NUMBER	DESCRIPTION	PAGE
1	Subpoena to Testify at a Deposition in a Civil Action, dated 1/20/2026	8
2	Invoice, dated 10/30/2025	10
3	Letter to Wang Ji, M.D., dated 8/15/2025	15
4	Solicitation/Contract/Order for Commercial Products and Commercial Services, dated 9/22/2025	16
5	Expert Opinion Report of Wang Ji, M.D., dated 12/15/2025	27
6	Materials Considered of Dr. Wang Ji - December 22, 2025	38
7	Supplemental Materials Considered of Dr. Wang Ji - January 26, 2026	39
8	Rebuttal Expert Opinion Report of Marjorie Hacket-Wallace, dated 1/27/2026	56

DEPOSITION EXHIBITS (Continued)

NUMBER	DESCRIPTION	PAGE
9	New Hanover Regional Medical Center Records, dated 6/27/2014	70
10	Letter from Thomas Longo, M.D., dated 1/14/2026	78
11	New Hanover Regional Medical Center Records, dated 12/2/2015	76
12	Sound Physicians medical charges for Karen Amsler, dated 8/26/2025	98
13	United Healthcare Medical Records, dated 4/24/2018	98
14	CCHC Coastal Primary Care Medical Records, dated 12/21/2015	105
15	Primary Care Chase Medical Records, dated /4/2023	113

MONDAY, FEBRUARY 2, 2026
LOS ANGELES, CALIFORNIA
9:02 A.M.

THE VIDEOGRAPHER: Good morning. We are now on the record. My name is Darnell Brown, and I'm the videographer with Golkow. Today's date is February 2, 2026, and the time is now 9:02 a.m.

This video deposition is being held in Los Angeles, California, in the matter of Camp Lejeune Water Litigation for the United States District Court for the eastern district of North Carolina. The deponent is Dr. Wang Ji.

Counsel will be noted on the stenographic record. The court reporter is Lisa Moskowitz who will now swear in the witness.

THE CERTIFIED STENOGRAPHER: My name is Lisa Moskowitz. I'm a California certified stenographic reporter, and my CSR license number is

10816.

WANG JI, M.D.,
called as a witness,
was examined and testified as follows:

EXAMINATION

BY ATTORNEY MALONE:

Q. Good morning, Dr. Ji.

A. Good morning.

Q. Could you please just state your full name for the record?

A. Yes, I'm Wang Ji.

Q. And we met very briefly before we went on the record, but my name is JT Malone, and I'm an attorney for the plaintiffs' leadership group. We represent the plaintiffs in this litigation.

Do you understand that?

A. I do.

Q. Have you ever been deposed before?

A. I have

Q. How many times have you been deposed?

A. Once.

Q. Just once. We'll go over a couple of ground rules just briefly. So you were just sworn in, and so you understand that you'll be testifying under oath the same way you would if you were in court?

A. I do.

Q. If I ask you any questions that you don't understand, just let me know, and I can try and rephrase it. Okay?

A. Sure. Absolutely.

Q. And if you don't tell me that you don't understand the question, I'm going to assume that you do understand. Okay?

A. Yes.

Q. We can take a break at any time. Just let me know. As long as you answer -- if I have a pending question, just answer my question, and we can take our break.

Is that fair?

A. Yes.

Q. Let's try not to talk over each other. It just makes it easier for the court reporter. Another thing, since we have our court reporter here, keep all your answers verbal. So head nods, say yes, no,

that kind of thing.
A. Okay. Yes.
Q. Got it. So I'm going to hand you this. What we will mark as Exhibit 1.
(Exhibit Number 1 was marked for identification.)
BY ATTORNEY MALONE:
Q. Do you recognize this document?
A. Yes, I do.
Q. Can you tell me what that is?
A. This is a subpoena for the production of documents for the case.
Q. Okay. Does it also appear to be a notice of your deposition?
A. Yes, it does.
Q. If you could direct your attention to the second to last page.
ATTORNEY MALONE: I'm sorry, Counsel. Here's a copy.
ATTORNEY ORTIZ: Thank you.
BY ATTORNEY MALONE:
Q. At the top it says Schedule A and Request for Production.
Do you see that?
A. Yes.

Q. Did you review all these requests and perform a search to make sure you were providing all the responsive documents?

ATTORNEY ORTIZ: Object to form.

You can answer.

THE WITNESS: Yes, I did.

BY ATTORNEY MALONE:

Q. I'll represent to you that last week, there were responsive documents that were produced by your attorneys. Was there anything -- I'm sorry. Strike that.

Last week, your attorneys provided responsive documents. We'll go through them. And it appeared that they contained invoices and contracts regarding your work in this case.

Is that what you provided to your attorneys?

A. Yes, I did.

Q. Okay. Do you recall anything else that you provided to your attorneys that was responsive to these document requests?

A. I provided many documents. I don't recall specifically which were to these requests, but I did provide all the

documents that I had in my possession regarding this case.

Q. Okay. I'm going to hand you what we will mark as Exhibit 2.

(Exhibit Number 2 was marked for identification.)

BY ATTORNEY MALONE:

Q. Do you recognize this document?

A. I do.

Q. Okay. And they appear to be invoices that you have submitted to the Department of Justice; is that right?

A. That's correct.

Q. Okay. And you can go through. I count that there are eight invoices that begin on October 30, 2025, and the last one is December 31, 2025.

Does that appear correct?

A. Yes, it does.

Q. Okay. Are these all the invoices that you've submitted to the Department of Justice to date?

A. I believe there were some more that were submitted after the fact, but they have not been processed yet.

Q. Okay. How many more do you believe you've submitted?

A. To the best of my knowledge, one additional for January.

Q. And do you recall how much that invoice was for?

A. I don't recall. It was -- it was, I believe, less than four hours. There was not that much to do in January, but that's to the best of my knowledge.

Q. Okay. And from the invoices that are in front of you here, it looks like you've billed 286 hours.

Does that sound right?

A. I can't say -- I can't do the math that quickly, but it would be the amount, whatever these documents say.

Q. If I represented to you that adding all of these hours up, you get to 286 hours and give or take a half hour, that sounds about right?

ATTORNEY ORTIZ: Object to form.

THE WITNESS: I would have to do the math on this. I don't have an estimate off the top of my head how

many hours.
BY ATTORNEY MALONE:
Q. Okay.
A. But these documents should be correct.
Q. Okay. You have no reason to dispute the hours that you've billed --
A. No.
Q. -- to the DOJ?
A. No.
Q. Okay. How were you first contacted about being involved in this litigation?
A. I was first contacted by an agency called Vident, which is on these contracts, who put me in touch with the DOJ regarding this case.
Q. Have you ever worked with the DOJ in any litigation before?
A. No, I haven't.
Q. Do you have any personal connections with any other experts that are involved in this case?
ATTORNEY ORTIZ: Object to form.
You can answer.
THE WITNESS: I previously worked

with Dr. Hasan at my previous job at Regal Medical Group.

BY ATTORNEY MALONE:

Q. Besides Dr. Hasan, do you have any personal connections to other experts?

ATTORNEY ORTIZ: Same objection. You can answer.

THE WITNESS: No other connections.

BY ATTORNEY MALONE:

Q. Prior to your retention, did you have any personal relationships with any of the attorneys in this case?

THE WITNESS: No, I haven't.

BY ATTORNEY MALONE:

Q. Turning back to Exhibit 2, the invoices in front of you, if I represented that the sum total of these invoices is $210,489.30, would you have any reason to dispute that?

ATTORNEY ORTIZ: Object to form.

THE WITNESS: Again, I don't have an estimate that I'm aware of, but I have no reason to object to these numbers, whatever's on these

documents.

ATTORNEY ORTIZ: And object to foundation earlier too as well.

BY ATTORNEY MALONE:

Q. Okay. How much do you believe you've been paid so far in this case?

A. I don't have an estimate. In terms of the amount that has entered my bank account, it has been less than a hundred thousand so far.

Q. Okay. So you haven't been compensated for all of these invoices yet?

ATTORNEY ORTIZ: Objection.

THE WITNESS: I don't keep exact track of what I've billed. It's partially through an agency; so I believe that there will be more payments, but I really don't have an estimate off the top of my head.

BY ATTORNEY MALONE:

Q. Do you receive all the compensation personally, or is it through the agency that you mentioned?

A. It's through the agency.

Q. Okay. And that agency, is it

Vident?

A. That's correct.

Q. Okay. Have you ever worked with Vident before?

A. I worked with Vident on one other case in the past.

Q. Okay. Does Vident receive any portion of your fees that you invoice for?

A. Yes, they do.

Q. Okay. Do you know how much they receive?

A. Out of the $735 rate, they -- I receive 550, and they receive the rest.

Q. Okay. I'm going to hand you what we'll mark as Exhibit 3.

(Exhibit Number 3 was marked for identification.)

BY ATTORNEY MALONE:

Q. Do you recognize this document, Dr. Ji?

A. I do.

Q. Okay. And what is this document?

A. This is the agreement -- compensation agreement for work to the DOJ. I believe Vident produced this to the DOJ.

Q. Okay. And you'll see the bullet points there listing the retainer record review, in person, attorney, those bullet points.

Are these bullet points what you understand your rates to be for your work in this litigation?

A. Off the top of my head, these are the numbers produced by Vident. I actually don't recall exactly what portion I receive, but it looks about right for the agreement. This is signed by me in the past.

Q. You can set that aside.

I will now hand you what we will mark as Exhibit 4.

(Exhibit Number 4 was marked for identification.)

BY ATTORNEY MALONE:

Q. Do you recognize this document?

ATTORNEY ORTIZ: Objection.

THE WITNESS: I do not recognize this document.

BY ATTORNEY MALONE:

Q. If I represent that this was produced by your attorney in response to our

document requests for your contracts in this case, do you have any reason to dispute that?

A. I have no knowledge one way or the other.

Q. Okay.

ATTORNEY ORTIZ: Just for the record, this is Bates CLJ-USA-G19 through it looks like 53.

BY ATTORNEY MALONE:

Q. And Dr. Ji, I would ask you to turn to the page Bates-numbered CLJ_USA_G_00044.

A. I'm there.

Q. And do you see Section 3.6 Labor Category on that page?

A. I do.

Q. Okay. And if you look at the middle column where it says Award Rate, it appears to be the hourly billing for record review, in-person consultation, deposition, and trial; is that right?

A. That looks correct.

Q. Okay. And if you'll actually go to the section just above that, 3.5, do you see where it says Funding?

A. I do.
Q. And it states: The contract ceiling/funding is $88,020.
Did I read that right?
A. That looks correct.
Q. Okay. Could you now turn to the page ending in 0052 of this document? Did you get there?
A. Yes.
Q. And if you look at the -- about halfway down on the left-hand side of the page where it says Funding Details, it says: Previous $88,020, change $5,000, current $93,020.
Did I read that right?
A. That looks correct.
Q. Just below that it says: The total invoices shall not exceed the ceiling/funding amount.
Did I read that right?
A. Oh, at the bottom. Yes, you did.
Q. Okay. To the best of your knowledge, has the funding ceiling been raised for your work in this litigation?
ATTORNEY ORTIZ: Object to form

and foundation.

THE WITNESS: I don't know any specific details. Originally, I was retained for nine plaintiff -- sorry, eight plaintiffs. The scope of my work increased to a total of 17 during the course of the trial. So it is possible, but I have no direct knowledge of how much the funding has changed.

BY ATTORNEY MALONE:

Q. Do you recall which nine plaintiffs you were originally retained to perform work on?

A. I do.

Q. Okay. Do you remember their names?

A. I can list you their names. They were the bladder cancer and renal cell carcinoma cases. It would be helpful if I had a copy of my report. But from memory it could be Mr. Cagiano, Criswell, Laramore, Dyer, Mr. and Mrs. It would be Fancher, Howard, Downs. Sorry. It's hard to recall these from memory.

Q. And that's okay. But your

original -- the original nine were the bladder cancer and the kidney cancer plaintiffs; is that right?

A. That's correct.

Q. Okay. When was your scope of work increased to cover 17 plaintiffs?

ATTORNEY ORTIZ: I'm just going to object. You can answer to the extent it doesn't get into privileged communications.

I'm fine with you asking about the scope of the task, but I don't want to get into the substance of communications.

BY ATTORNEY MALONE:

Q. And I just want to say throughout this entire deposition, I am never going to ask or try to get you to tell me anything that was discussed between you and your attorneys.

So without divulging any of those conversations, to the best of your recollection, when was your scope of work increased from 9 plaintiffs to 17 plaintiffs?

ATTORNEY ORTIZ: Are you asking about the date, just to clarify?

ATTORNEY MALONE: Yes.

ATTORNEY ORTIZ: Okay.

You can answer with the same instruction.

THE WITNESS: I really don't recall the exact date.

BY ATTORNEY MALONE:

Q. Okay. If you could turn to the page in the exhibit in front of you ending in 00042, just let me know when you get there.

A. I'm here.

Q. Okay. And the top of the page it says: Attachment number 2. Statement of Work (SOW).

Do you see that?

A. I do.

Q. Okay. Section 2.1 Contractor, it says: The contractor for this contract is Wang Ji; is that correct?

A. That's correct.

Q. Okay. Section 2.2 Scope under A says: Provide expert testimony, exposure

calculations, and reports in the field of toxicology.

Did I read that right?

ATTORNEY ORTIZ: Objection.

You can answer.

THE WITNESS: You read that correctly.

BY ATTORNEY MALONE:

Q. Have you ever been asked by the Department of Justice to provide exposure calculations and reports in the field of toxicology?

ATTORNEY ORTIZ: Objection.

You can answer.

THE WITNESS: My scope of work that I was retained was to provide damage assessment calculations and assessment calculations. The specific field was not stated, but it was for the scope of Camp Lejeune.

BY ATTORNEY MALONE:

Q. Okay. Are you an expert in exposure assessments?

ATTORNEY ORTIZ: Objection.

THE WITNESS: My expertise is in

medical care which includes all manner of medical diseases. I'm not a toxicologist.

BY ATTORNEY MALONE:

Q. Okay. You can put those to the side as well.

Dr. Ji, how many times have you worked as an expert witness in litigation?

A. I have -- in my experience, I've had three total cases prior to this.

Q. And in those three prior cases -- I'm sorry.

Does that include this litigation, or there were three before this litigation?

A. Before this litigation.

Q. Okay. Those three prior cases, do you recall whether you were retained by the plaintiffs or the defendants in those cases?

A. In two of the cases were by the defendants. One was by the plaintiff.

Q. And do you recall for each of those the circumstances of the litigation that you were retained in?

ATTORNEY ORTIZ: Objection. Form and foundation.

THE WITNESS: I recall the circumstances.

BY ATTORNEY MALONE:

Q. Okay. What were those circumstances?

ATTORNEY ORTIZ: Objection. Form and foundation.

THE WITNESS: For two of the cases, they were medical malpractice cases. In one case, it is currently under a confidentiality agreement I have; so I'm unable to provide any specific information.

BY ATTORNEY MALONE:

Q. Okay. In the two medical malpractice cases that you have previously worked as an expert witness, were you testifying for the defendants or for the plaintiffs?

A. I was testifying for the defendants.

Q. Okay. In any of your prior expert witness work, have you provided opinions on the value of past government health benefits?

ATTORNEY ORTIZ: Objection. Form and foundation.

You can answer.

THE WITNESS: Not for government benefits.

BY ATTORNEY MALONE:

Q. Have you ever provided expert opinions related to veteran's benefits?

ATTORNEY ORTIZ: Same objections.

THE WITNESS: Not for veteran's benefits.

BY ATTORNEY MALONE:

Q. Dr. Ji, with the caveat that I'm not asking for the contents of any attorney communications that you've had, what did you do to prepare for this deposition today?

ATTORNEY ORTIZ: You can answer to the extent you don't get into privileged communications.

THE WITNESS: I have reviewed my own report, the reports of the other experts, and the materials included on the materials -- sorry, the materials list.

///

BY ATTORNEY MALONE:
Q. Did you have any meetings prior to this to prepare?
A. I have.
Q. Okay. How many meetings did you have to prepare for the deposition today?
A. I don't recall an exact number but maybe about two meetings.
Q. Who were those meetings with?
ATTORNEY ORTIZ: You can answer to the extent you don't get into the substance of privileged communications.
THE WITNESS: With the DOJ.
BY ATTORNEY MALONE:
Q. Do you recall which DOJ attorneys you met with?
ATTORNEY ORTIZ: Same instruction.
THE WITNESS: The general DOJ team. I'm trying to recall because there's privilege in this case, but including the two attorneys here.
BY ATTORNEY MALONE:
Q. Were there other attorneys from the DOJ present besides the two attorneys who

are present here today?
A. There were.
Q. Do you recall their names?
A. I do.
Q. What are their names?
A. I'm assuming here that I'm allowed to provide names of the DOJ attorneys?
ATTORNEY ORTIZ: You can provide the names, just not the communications.
THE WITNESS: Okay. Joseph Turner and Michael Cromwell.
BY ATTORNEY MALONE:
Q. About how long were those meetings?
A. About an hour.
Q. I am handing you what we are going to mark Exhibit 5.
(Exhibit Number 5 was marked for identification.)
BY ATTORNEY MALONE:
Q. Do you recognize that document?
A. Yes, I do.
Q. Okay. What is it?
A. This is my expert opinion report.
ATTORNEY ORTIZ: Counsel, do you

have other copies? Is it just his report?

ATTORNEY MALONE: This is just his report. Sorry.

ATTORNEY ORTIZ: That's fine.

BY ATTORNEY MALONE:

Q. If you could turn to page 2 of Appendix B -- actually it's page 1 of Appendix B.

A. I'm here.

Q. And this appears -- is this your current CV?

A. Yes, it is.

Q. Okay. And let's turn to page 3 of your CV. Let me know when you're there.

A. I'm here.

Q. Okay. And so you graduated from medical school in 2010; is that right?

A. That's correct.

Q. Okay. And then you completed your residency in internal medicine in 2013; is that right?

A. That's correct.

Q. Okay. Did you complete any other residences or fellowships in any

subspecialties?
A. I did not.
Q. Doctor, you are a urological oncologist?
A. I'm not.
ATTORNEY ORTIZ: Objection.
You can answer.
THE WITNESS: I'm not.
BY ATTORNEY MALONE:
Q. Did you ever train as a nephrologist?
ATTORNEY ORTIZ: Objection.
You can answer.
THE WITNESS: I did not.
BY ATTORNEY MALONE:
Q. Okay. How about endocrinology?
ATTORNEY ORTIZ: Same objection.
You can answer.
THE WITNESS: I did not.
BY ATTORNEY MALONE:
Q. Hematology oncology?
ATTORNEY ORTIZ: Same objection.
THE WITNESS: I did not.
BY ATTORNEY MALONE:
Q. All right. Turn to page 1 of your

CV. Under current employment where it says associate medical director Los Angeles area, Healing Care Hospice, do you see that?

A. I do.

Q. What do you do in that role?

A. For this role, I perform patient visits to hospice patients. Typically home visits.

Q. How many patients do you see in that position?

A. In this position, a few a week. Maybe three or four patients a week.

Q. And the next one here is hospitalist at Verdugo Hills Hospital.

What do you do in that position?

A. In this position, I'm admitting and rounding on patients at the hospital.

Q. And how often are you rounding at Verdugo Hills Hospital?

A. On average about once a week.

Q. So how many patients weekly would that be?

A. It would vary but anywhere between 10 and 20.

Q. Down here it says clinical

physician at L.A. Department of Public Health.

Did I read that right?

A. That's correct.

Q. Okay. What do you do in that role?

A. In this role right now, I am seeing patients at the correctional facility.

Q. Is there a specific correctional facility where you work?

A. The Twin Towers.

Q. How often do you see patients at the Twin Towers Correctional Facility?

A. Also about once a week.

Q. Once a week. Okay.

So how many patients would you estimate you see a week there?

A. It would be about 20 patients.

Q. Okay. The next one on page 1 of your CV for employment says independent clinical reviewer for Commerce.ai and Acentra.

Did I read that right?

A. That's correct.

Q. Are Commerce.ai and Acentra, is that one company?

A. No, they're two separate.
Q. Two. Okay.
A. Two separate companies.
Q. And what is an independent clinical reviewer?
A. For this role, I review clinical documents and make determinations regarding the coding and clinical accuracy.
Q. What is the context of those reviews that you perform? Are they audits of other healthcare facilities?
ATTORNEY ORTIZ: Objection to form and foundation.
You can answer.
THE WITNESS: These are cases where the hospital and the payor are in dispute regarding whether the medical documentation supports the appropriate payment, and they need an expert clinician to review -- expert opinion from a clinician.
BY ATTORNEY MALONE:
Q. So Commerce.ai and Acentra, do they come in as third parties between the two, or are you retained by either the facility or

the payor?
A. They're third parties.
Q. Okay. So between the four -- I guess five positions that we just went through under your current employment, could you give a percentage breakdown of what you spend your time -- how you spend your work time between them?
A. Just as a rough estimate, about 50/50.
Q. So 50/50 between the independent clinical review and then all of your hospitalist clinician roles?
A. Correct. 60/40. 50/50. It varies by week but yes, roughly.
Q. And then what percentage of your time would you say you spend doing legal expert work like this?
A. For a small percentage. I typically only try to take one legal case per year just because it's very difficult schedule-wise, and I would have to clear out some of my other work to do this work. So most months very, very little, little to none legal work. When I'm working on the

legal work, it would be more.
Q. So just to understand your prior testimony, you split your time about 50/50 between independent clinical review and treatment of patients?
A. That's correct.
ATTORNEY ORTIZ: Objection to form.
BY ATTORNEY MALONE:
Q. Dr. Ji, are you a certified professional medical auditor?
A. I don't have that title. I am a medical expert insofact that I provide expert medical opinions as a physician.
Q. Are you a certified professional coder?
A. Again, I do not have that title of a professional coder.
Q. Are you a registered health information administrator?
A. I am not.
Q. Are you a certified fraud examiner?
A. I am not.
Q. Are you certified in healthcare compliance?

A. I am not.
Q. How much of your time do you spend coding?
ATTORNEY ORTIZ: Object to form and foundation.
You can answer.
THE WITNESS: Are you referring to personal coding of patients I've seen, or are you talking about reviewing coding and other coding-related matters?
BY ATTORNEY MALONE:
Q. Thank you for asking me to clarify that.
I'm talking about personal coding of patients you've seen.
A. I spend little to no time personally coding. I have in the past.
Q. Do you have a support staff that assists you in coding?
A. Yes. At my current positions, the support staff provide the coding.
Q. Okay. Do you review the coding that your support staff does on your behalf?
A. At my current position, I do not.

Q. Would you agree that human error can impact coding?

ATTORNEY ORTIZ: Objection to form and foundation.

THE WITNESS: Can you be more specific?

BY ATTORNEY MALONE:

Q. Okay. So when you've performed coding in the past, you have to you manually enter that coding; is that correct?

ATTORNEY ORTIZ: Objection.

THE WITNESS: In the past, yes.

BY ATTORNEY MALONE:

Q. And so it's possible -- is it possible that human error can result in incorrect coding?

ATTORNEY ORTIZ: Objection.

THE WITNESS: Can you be more specific? Are you referring to CPT codes or ICD codes or what?

BY ATTORNEY MALONE:

Q. ICD codes for starters.

A. ICD codes. ICD codes are -- can be affected by human error.

Q. How can they be affected by human

error?

ATTORNEY ORTIZ: Objection.

You can answer.

THE WITNESS: In the sense that the ICD codes should be extracted from a medical document, and it's possible that the wrong ICD code is entered whether by just incorrect data entry.

BY ATTORNEY MALONE:

Q. Are you familiar with the term "miscoding"?

ATTORNEY ORTIZ: Objection.

THE WITNESS: I have -- I am familiar with the term.

BY ATTORNEY MALONE:

Q. Okay. What does it mean?

A. It's a general term for coding incorrectly.

Q. Are you familiar with the term "upcoding"?

ATTORNEY ORTIZ: Objection.

THE WITNESS: I am familiar with the term.

BY ATTORNEY MALONE:

Q. What does that mean?

A. It means coding for more than services that was actually provided.

Q. How much of your time is spent auditing other providers' coding?

A. In regards to a total weekly amount of time?

Q. Yes.

A. It's about 20 percent of the time.

ATTORNEY ORTIZ: Are you about to do another exhibit?

ATTORNEY MALONE: Yes.

ATTORNEY ORTIZ: I just want to note for the record the deposition protocol requires four copies of each exhibit, and there wasn't four copies of the report, but I understand it's a large document. But I just wanted to note that for the record.

ATTORNEY MALONE: Okay. I'll hand you this one first, Doctor, what we'll mark as Exhibit 6.

(Exhibit Number 6 was marked for identification.)

BY ATTORNEY MALONE:

Q. Do you recognize this document?

A. I do.
Q. What is this document?
A. This is a materials considered list.
ATTORNEY ORTIZ: I'm sorry. Do you have a copy for counsel?
ATTORNEY MALONE: Yes.
BY ATTORNEY MALONE:
Q. And then I will also hand you what we'll mark Exhibit 7.
(Exhibit Number 7 was marked for identification.)
BY ATTORNEY MALONE:
Q. Do you recognize this document?
A. I do.
Q. Okay. So Exhibit 6 and Exhibit 7, are these all the materials that you read and reviewed in forming your opinions for your report?
ATTORNEY ORTIZ: Objection to form.
You can answer.
THE WITNESS: It is.
BY ATTORNEY MALONE:
Q. Okay. And you read each of the

documents that are listed in Exhibit 6 and Exhibit 7?

ATTORNEY ORTIZ: Objection.

THE WITNESS: I did.

BY ATTORNEY MALONE:

Q. Dr. Ji, if I represented to you that there are approximately 140 reports, transcripts, and other documents in your materials considered list, do you have any reason to dispute that?

ATTORNEY ORTIZ: Objection to foundation and to form. Objection to foundation for Exhibit 7.

You can answer.

THE WITNESS: I'd have to count the exact number of documents, but I have no reason to dispute.

BY ATTORNEY MALONE:

Q. Okay. Doctor, on Exhibit 6 could you turn to the index there, the Bates ranges of medical records.

ATTORNEY ORTIZ: Is that page 11?

ATTORNEY MALONE: I believe that's where it starts, yes.

THE WITNESS: Yes, I'm here.

BY ATTORNEY MALONE:
Q. Okay. If I represented to you that the sum total of all those page ranges adds up to over 509,000 pages, does that sound about right?
ATTORNEY ORTIZ: Objection to form and foundation.
THE WITNESS: I didn't count the exact number of pages, but that's -- I would have no reason to object to that.
BY ATTORNEY MALONE:
Q. And you testified earlier that you -- you read and reviewed every single page of these materials considered lists?
ATTORNEY ORTIZ: Objection. That misstates the testimony.
THE WITNESS: I reviewed every single document in this list.
BY ATTORNEY MALONE:
Q. Dr. Ji, if you turn to page 3 of your report.
A. I'm sorry is this Exhibit 6 or Exhibit 5, the report?
ATTORNEY ORTIZ: Exhibit 5.

BY ATTORNEY MALONE:

Q. That would be Exhibit 5.

A. I'm sorry. You said page 6?

Q. Page 3.

A. Page 3. I'm sorry. I'm here.

Q. Okay. And do you see the subsection methodology for review of claimed medical expense damages?

A. Yes, I do.

Q. Okay. And here in that second full paragraph of page 3, you state: All charges asserted in Plaintiffs' Amended Damages Forms and supported by plaintiffs' expert Marjorie Hackett-Wallace were reviewed line-by-line for a clinical relationship to the claimed conditions based on the primary medical records.

Did I read that right?

A. That's right.

Q. Okay. So is it fair to say that your methodology for claimed medical expense damages was a review of Ms. Hackett-Wallace's report along with the damage assessment forms and medical billing records to determine the relatedness of

those claims?

ATTORNEY ORTIZ: Objection to form and foundation.

THE WITNESS: My methodology is as stated in my report. I did use Ms. Hackett-Wallace's damage assessment forms to determine which charges were being filed by claimants, by plaintiffs, and from there I reviewed them for relatedness.

BY ATTORNEY MALONE:

Q. Towards the bottom of page 3, I believe it's the second to last sentence, you write: In particular, I have significant clinical experience treating patients with the same conditions as those claimed by the 17 plaintiffs who were the subjects of this report.

Did I read that right?

A. Yes, you did.

Q. I'm not asking for a specific number. Generally, how many bladder cancer patients have you treated in your career?

A. It would be hard to estimate but likely in the hundreds.

Q. How about leukemia patients?
A. Again, very difficult estimate over my whole career but likely also in the hundreds.
Q. Non-Hodgkin's lymphoma?
A. Also likely in the hundreds.
Q. How many kidney cancer patients have you treated?
A. Likely also in the hundreds.
Q. Were you the primary specialist for those patients for their specific illnesses?
ATTORNEY ORTIZ: Objection.
THE WITNESS: When you say specialist, do you refer to the specialist for that specific disease or the -- I apologize. Primary in medicine may mean something different; so I was the primary doctor on many of the cases. But are you referring to am I the oncologist or the urologist in those cases?
BY ATTORNEY MALONE:
Q. That's correct. That's what I'm referring to.
A. I was not the urologist oncologist.

Q. Okay. If you could turn to page 4 of your report, Exhibit 5, and the second -- or the first full paragraph, the second sentence you write: The billed charges are the initial non-negotiated requests for payment, often derived from a hospital chargemaster, which are oftentimes many higher than the actual cost of care delivered.

Did I read that right?

A. That's correct.

Q. Okay.

ATTORNEY ORTIZ: I think you might have said oftentimes, and I think it says often many times higher than.

ATTORNEY MALONE: I apologize. It does say often many times.

BY ATTORNEY MALONE:

Q. Doctor, are non-negotiated requests for payment the actual amount that those without insurance have to pay?

ATTORNEY ORTIZ: Objection.

You can answer.

THE WITNESS: It's more complicated than that. This is the

requested amount for payment. I don't know on average how much the actual uninsured person would have to pay. It would depend on how much money they have, how much negotiation happens afterwards. So I'm unable to answer that question fully, but to the best of my knowledge, it's often not this exact amount.

BY ATTORNEY MALONE:

Q. Have you ever seen a situation where an uninsured patient does have to pay the non-negotiated amount?

A. I am unable to answer that question since I am never been the person to try to bill or collect payments for this. To the best of my knowledge, there's usually a process afterwards, but this is the requested amount of money.

Q. Who would be the person, in your words, that would I believe you said try to collect that amount of money?

A. It would be whichever entity is billing for them, whether it's the hospital or clinic. It would depend on the

situation.

Q. But that's not something you've ever done in your career?

A. No.

Q. Okay. So in that next sentence just after that you say: The actual payment or reimbursement to the provider or hospital is determined by the negotiated contract between the care provider and payor (typically an insurance company).

Did I read that right?

A. That's correct.

Q. Are insurance companies the only payors that you encounter?

A. No.

Q. Who are some other payors?

A. It would be complex, but a payor can be out of pocket. It can be an insurance company. It can be -- those are typically the two main payors contingent.

Q. Is Medicare a payor?

A. Yes, it is.

Q. In your experience, do the negotiated amounts -- strike that.

In your experience, can the

negotiated amount that is ultimately paid by the payor reflect that payor's negotiating power?

ATTORNEY ORTIZ: Objection.

THE WITNESS: I have no opinion on the power or the negotiations. My report simply states the -- simply states that there is a negotiation, and there is a negotiated payment.

BY ATTORNEY MALONE:

Q. In your experience, does Medicare typically negotiate a lower reimbursement than private insurance?

ATTORNEY ORTIZ: Objection. Form and foundation.

THE WITNESS: I have no opinion on whether Medicare pays more or less compared to privates.

BY ATTORNEY MALONE:

Q. The last sentence of that paragraph says: The actual cost to the patient is often even more complex and may be reflected in payments to insurance (premiums), deductible payments, copayments, and any other payments not covered by

insurance.

Did I read that right?

A. That's correct.

Q. So is it your opinion that there are costs to the patient that wouldn't be captured in billing data alone?

ATTORNEY ORTIZ: Objection.

THE WITNESS: It's -- as I stated in my report, the actual amount that a patient has to pay is often different than what is paid through insurance.

BY ATTORNEY MALONE:

Q. If you'll turn your attention to the third full paragraph on page 4 of your report, Exhibit 5, it states: Plaintiffs' expert Marjorie Hackett-Wallace did not provide an opinion regarding the validity of billed charges versus reimbursed payments reflecting the cost of care of medical damages. While asserting no opinion regarding the validity of either approach, in my role assessing the accuracy of claims, I also used billed charges for consistency.

Did I read that correctly?

A. That's correct.

Q. So you're not offering an opinion that billed charges validly reflect the cost of care in medical damages?

ATTORNEY ORTIZ: Objection.

THE WITNESS: I have no opinion on whether payments or bill charges is more accurate.

BY ATTORNEY MALONE:

Q. Okay.

ATTORNEY ORTIZ: JT, I don't know if you're coming up on a good time for a break. We've been going about an hour.

ATTORNEY MALONE: We can take a short break here. Is that's okay?

THE WITNESS: Yeah, sure.

THE VIDEOGRAPHER: The time is 9:59. Going off the record.

(Recess taken from 9:59 a.m. to 10:09 20 a.m.)

THE VIDEOGRAPHER: The time is now 10:09. Back on record.

BY ATTORNEY MALONE:

Q. Dr. Ji, we're back on the record after a short break, and I just had a couple

of follow-up questions about what we discussed earlier.

Have you ever opined in the past on offset damages?

ATTORNEY ORTIZ: Objection.

THE WITNESS: I have not.

BY ATTORNEY MALONE:

Q. Dr. Ji, are you offering an opinion that these offset damages, as you call them -- strike that.

Dr. Ji, are you offering the opinion that these government payor damages are an offset or that they could be an offset?

ATTORNEY ORTIZ: Objection to from and foundation.

You can answer.

THE WITNESS: I am not offering an opinion on what the exact role of the offset. I was retained to provide an opinion on whether the government payments were related to the track 1 diseases in the record.

BY ATTORNEY MALONE:

Q. Is it fair to say that is the scope

of your role for the past medical billing as well, was to determine the relatedness?

ATTORNEY ORTIZ: Objection.

You can answer.

THE WITNESS: When you say "my role," do you mean the entirety or just part of my role?

BY ATTORNEY MALONE:

Q. Your role as we discussed in your methodology for claimed medical expense damages as you write on page 3 of your report.

ATTORNEY ORTIZ: Objection.

THE WITNESS: My role is to determine whether those damages were related to the track 1 diseases.

BY ATTORNEY MALONE:

Q. Dr. Ji, if you'll turn to page 5 of Exhibit 5, which is your report.

A. I am there.

Q. Okay. And the second to last paragraph, first sentence you write: In this review of government payment offsets, the reimbursed medical payments accurately reflect the government's financial payments.

Did I read that right?

A. Yes.

Q. So these amounts were incurred as a result of plaintiffs' alleged Camp Lejeune conditions and subsequent treatment?

ATTORNEY ORTIZ: Objection.

THE WITNESS: The -- I'm not providing an opinion on any relationship to Camp Lejeune or exposures. I am only opining on whether these payments were related to the track 1 diseases.

BY ATTORNEY MALONE:

Q. Okay.

(Clarification by the Certified Stenographer.)

BY ATTORNEY MALONE:

Q. And as part of that review, you are assuming that plaintiffs' phase 2 experts were correct for purposes of your review?

ATTORNEY ORTIZ: Objection to form and foundation.

THE WITNESS: As I stated in the reports for underage plaintiff, I make assumptions on assuming that the

plaintiffs were correct. These would be the related conditions.

BY ATTORNEY MALONE:

Q. So your assumption for purposes of each plaintiff is that the plaintiffs' experts were correct in their determination of primary and secondary conditions allegedly related to their track 1 illness?

ATTORNEY ORTIZ: Objection. Form and foundation.

You can answer.

THE WITNESS: For the purposes of the analysis, I assumed that they are correct and performed the analysis based on that assumption.

BY ATTORNEY MALONE:

Q. Still on page 5 of Exhibit 5 of your report here, methodology for review of claimed veterans benefits.

Do you see that?

A. Yes.

Q. Okay. Have you ever evaluated VA disability ratings in the past?

ATTORNEY ORTIZ: Objection.

THE WITNESS: No, not

specifically.

BY ATTORNEY MALONE:

Q. Have you ever been trained in evaluating VA disability claims?

A. No.

Q. Have you ever worked in any capacity at the VA?

A. I have not.

Q. What's your understanding of what VBA disability ratings percentages represent?

ATTORNEY ORTIZ: Objection. Form and foundation.

THE WITNESS: I have no specific opinion on the VBA percentages.

BY ATTORNEY MALONE:

Q. Okay. So you have no opinion on what disability rating percentages are based upon?

ATTORNEY ORTIZ: Objection.

THE WITNESS: My analysis is as stated in my methodology. It's for the relatedness of the condition. I have no opinion on the percentage itself.

BY ATTORNEY MALONE:

Q. Did you calculate the value of these VBA benefits?

ATTORNEY ORTIZ: Objection.

THE WITNESS: I did not.

BY ATTORNEY MALONE:

Q. Did you calculate the future value of any of these benefits?

ATTORNEY ORTIZ: Objection.

THE WITNESS: I did not.

BY ATTORNEY MALONE:

Q. Dr. Ji, I'm going to hand you what we have marked as Exhibit 8.

(Exhibit Number 8 was marked for identification.)

BY ATTORNEY MALONE:

Q. Do you recognize this document?

A. I do.

Q. Okay. What is it?

A. This is the rebuttal report from Marjorie Hackett-Wallace.

ATTORNEY ORTIZ: Do you have an extra copy, Counsel?

ATTORNEY MALONE: Let me check. I apologize. I don't know if I have one

in here. I do not. I'm sorry about that.

ATTORNEY ORTIZ: That's okay.

BY ATTORNEY MALONE:

Q. So Dr. Ji, if you could turn to page 5 of Marjorie Hackett-Wallace's rebuttal report?

A. I'm here.

Q. And in the first sentence -- this is Marjorie Hackett-Wallace for Mark Cagiano: I quantified $148,971.88 in medical billing expenses all incurred under the Tricare program. Of these expenses, $121,299.81 was confirmed by the defense expert, Wang Ji, MD, leaving a disputed amount of charges totaling $27,672.07.

Do you see that?

A. Yes.

Q. Okay. And I would just ask you to read the -- to yourself, just take a moment to reread the paragraph at the bottom of page 5 into page 6. Could you just read that and let me know when you've read that?

A. Okay.

Q. So having read that, would you

agree that the plaintiffs' expert, Marjorie Hackett-Wallace, agrees with your assessment of a past billed amount of $121,299.81?

ATTORNEY ORTIZ: Object to form and foundation.

You can answer.

THE WITNESS: Based on this, she makes no dispute over my value of the 121,299.81.

BY ATTORNEY MALONE:

Q. And if you will look at the second to last paragraph that says: The government further claimed additional offset damages for Medicare totally $11,941.

Did I read that right?

A. That's correct.

Q. And is that your opinion in this case?

ATTORNEY ORTIZ: Objection.

You can answer.

THE WITNESS: It's -- I will refer to my report. I do believe that number is correct.

BY ATTORNEY MALONE:

Q. And I should have mentioned, we'll

just be flipping between these two as we go through the plaintiffs; so please feel free to --

A. I have read --

Q. -- refer to this the report.

A. -- this report ahead of time. I do think the numbers are correct, but just for completeness, that is correct.

Q. And so that number reflects that Mr. Cagiano incurred at least that much in treatment charges relating to his alleged track 1 conditions, and Medicare would have paid those treatment costs?

ATTORNEY ORTIZ: Objection to form and foundation.

You can answer.

THE WITNESS: This indicates that Medicare did pay $11,941 for his track 1 diseases.

BY ATTORNEY MALONE:

Q. And so would that answer apply to all of the Medicare offsets that you identified?

ATTORNEY ORTIZ: Same objection.

THE WITNESS: Any Medicare offsets

identified does indicate it was payments for track 1 diseases.

BY ATTORNEY MALONE:

Q. And now we'll actually turn to page 8 of Exhibit 5, which is your report. I believe it's 5.

ATTORNEY ORTIZ: It is 5.

BY ATTORNEY MALONE:

Q. This will be page 8. And actually, I'm sorry. Page 9. Let me know when you're there.

A. Okay. I'm here.

Q. Okay. This is the section overall summaries of opinions related to Mr. Cagiano.

Do you see that?

A. Yes.

Q. And the third line from the bottom starts with: Total offsets were $35,447 between CMS (11,941), Tricare Institutional ($12,908), and Tricare Non-Institutional ($10,599).

Do you see that?

A. I do.

Q. With regard to the Tricare

institutional and Tricare non-institutional offsets, do those numbers reflect that Mr. Cagiano incurred that much in treatment charges that were paid for by Tricare?

ATTORNEY ORTIZ: Objection to form and foundation.

THE WITNESS: This indicates that out of the -- out of the Tricare data that I analyzed, those were the amounts that were paid by Tricare for the track 1 disease.

BY ATTORNEY MALONE:

Q. And does that answer apply to all the Tricare offsets that you've identified?

ATTORNEY ORTIZ: Same objection.

THE WITNESS: It just -- the Tricare offsets identified are the amounts paid by Tricare for the track 1 diseases.

BY ATTORNEY MALONE:

Q. To your knowledge, does Tricare -- strike that.

Do you know if Tricare patients pay premiums?

ATTORNEY ORTIZ: Objection.

THE WITNESS: I have no knowledge of that.

BY ATTORNEY MALONE:

Q. What is your understanding of what Tricare is?

A. My understanding is that Tricare is a government agency that -- I'm sorry, government insurance that pays -- that covers the medical expenses of patients as an insurance agency.

Q. So it's a subsidized insurance plan essentially?

ATTORNEY ORTIZ: Objection.

THE WITNESS: I have no knowledge of the specific subsidies.

BY ATTORNEY MALONE:

Q. Turning back to page 9 of your report, that same paragraph, last sentence, you write: Of note, the past paid medical expenses claimed by the plaintiff are billing charges while the government offsets are reimbursement payments.

Did I read that correctly?

A. That's correct.

Q. Were you provided with the billing

charges?

ATTORNEY ORTIZ: Objection.

You can answer.

THE WITNESS: The task I was given was to analyze the government payments. I don't recall if specific billing data was provided, but I did not analyze it specifically.

BY ATTORNEY MALONE:

Q. And you don't recall if you were provided with that data?

ATTORNEY ORTIZ: Objection.

THE WITNESS: To the best of my knowledge, I do recall there were some billing data as well, but I was tasked to analyze payment data.

BY ATTORNEY MALONE:

Q. Did you quantify the patient paid amount of the Tricare charges?

ATTORNEY ORTIZ: Objection to foundation.

THE WITNESS: I was not provided the data for patient payments.

BY ATTORNEY MALONE:

Q. Were you provided with the data to

quantify the patient payments?

ATTORNEY ORTIZ: Objection.

THE WITNESS: To the best of my recollection -- I'm sorry. By patient payments, are you referring to out-of-pocket payments or premiums or . . .

BY ATTORNEY MALONE:

Q. Let's start with premiums.

A. No, I was not provided that information.

Q. Out-of-pocket payments?

A. Not provided that information.

Q. So you didn't have the ability to quantify patient paid in terms of out of pocket or premiums?

ATTORNEY ORTIZ: Objection to form and foundation.

You can answer.

THE WITNESS: No, I did not have that information.

BY ATTORNEY MALONE:

Q. Staying on page 9 of your report, footnote 9, you write: Although my opinion is the plaintiff's prostate cancer and

sciatic peripheral neuropathy are medically unrelated to his UTUC, the plaintiff specifically received VBA benefits for his prostate cancer and sciatic peripheral neuropathy as related to his purported Camp Lejeune exposures.

Did I read that right?

A. That's correct.

Q. You go on to write: I am not offering -- sorry.

I am not offering any opinion that his prostate cancer and sciatic peripheral neuropathy is medically related to or caused by his Camp Lejeune exposures.

Did I read that right?

A. That's correct.

Q. Do you have any opinion on if the VBA was correct or incorrect in relating to Mr. Cagiano's prostate cancer and sciatic peripheral neuropathy to his purported Camp Lejeune exposures?

ATTORNEY ORTIZ: Objection.

THE WITNESS: I have no opinion regarding the exposures at Camp Lejeune.

BY ATTORNEY MALONE:

Q. Do you have any opinion whether the VBA was correct or incorrect in its relatedness determination?

ATTORNEY ORTIZ: Objection.

THE WITNESS: I have no opinion.

BY ATTORNEY MALONE:

Q. Staying in footnote 9, page 9 of your report, you write: However, I am noting these conditions were identified by the VBA as being in connection with Mr. Cagiano's purported Camp Lejeune exposures and would thus presumably be included in any kind of offset calculation as constituting a disability award provided to Mr. Cagiano in connection with his purported Camp Lejeune exposures.

Did I read that right?

A. That's correct.

Q. Why would they presumably be included in any offset calculation?

ATTORNEY ORTIZ: Objection.

THE WITNESS: I have no knowledge of why they would be included.

///

BY ATTORNEY MALONE:
Q. Were you asked to presume they would be included?
ATTORNEY ORTIZ: Objection. Draft reports are privileged.
THE WITNESS: I was not asked. I was only -- I am only giving my own opinions.
BY ATTORNEY MALONE:
Q. Okay. Let's turn back to the Marjorie Hackett-Wallace report, page 6. Let me know when you're there.
A. Okay. We're here.
Q. Number 2 you see it says Criswell, Jefferson near the bottom of the page.
Do you see that?
A. I do.
Q. Okay. And in the first sentence Marjorie Hackett-Wallace writes: For Michael Criswell, I identified $202,674 in medical billing expenses. Of these expenses, all expenses were confirmed to be related by the defense expert, Wang Ji, MD, leaving a disputed amount of zero dollars.
Do you see that?

A. Yes, I do.
Q. Do you agree with that statement?
ATTORNEY ORTIZ: Objection.
You can answer.
THE WITNESS: Again, just for completeness sake I'll refer to my report.
BY ATTORNEY MALONE:
Q. Sure.
A. I do believe that is correct. Yes.
Q. Okay. And then the following sentence: I quantified $40,321.44 in past paid medical and $13,321.05 in patient payments totaling $53,642.49. The paid past medical expenses and patient payment totals were not disputed.
Did I read that right?
A. That's correct.
Q. Are you disputing the paid past medical expenses and patient payment totals with regard to Mr. Criswell?
ATTORNEY ORTIZ: Objection to foundation.
THE WITNESS: I was not tasked to provide analysis on the patient

payments or the total paid amount; so I have no opinion on that matter.

BY ATTORNEY MALONE:

Q. Does that answer apply to all 17 plaintiffs that you evaluated?

ATTORNEY ORTIZ: Same objection.

THE WITNESS: Correct. I was not -- I did not perform analysis on payments or patient private payments.

BY ATTORNEY MALONE:

Q. Turn to page 7 of Marjorie Hackett Wallace's report. And I will direct you down to Section 2(a) of the report.

Do you see that?

A. I do.

Q. Okay. And it states: Dr. Ji alleged that certain charges were unrelated to the claimed conditions related to two dates of service for the plaintiff. 6/27/2014 and 12/2/2015. For the reasons stated below, I disagree with all disputed relatedness determinations made by Dr. Ji.

Do you see that?

A. I do.

Q. And I can just -- I'll just ask

you, could you just please, to yourself, reread 2(a), and just let me know when you've finished reading that.

A. I will.

Q. Okay.

A. Okay.

Q. So having reread that portion of Ms. Hackett-Wallace's report, do you agree with her assessment there?

A. I do not.

ATTORNEY ORTIZ: Objection to form and foundation.

BY ATTORNEY MALONE:

Q. Why do you disagree?

A. My opinion is as stated in my report, which I will refer to on page -- Exhibit 5, page 24. And it is still my opinion that these two charges were not related to the track 1 disease.

Q. Dr. Ji, I'm handing you what we'll mark as Exhibit 9.

(Exhibit Number 9 was marked for identification.)

BY ATTORNEY MALONE:

Q. Which is Bates number

0357_Dyer_0000000029.

Are you familiar with this document?

A. I am.

Q. Okay. What is it?

A. This is the medical documentation from the emergency department regarding the ER visit on June 27, 2014.

Q. Okay. If you would turn to the page ending in 35.

A. I am here.

Q. Do you see up at the top of the page the section titled ED course and medical decision-making?

A. I do.

Q. Okay. And here the provider writes: Patient's well-appearing here in the emergency department. She does have very mild right upper quadrant tenderness. She received ultrasound does show gallstones but no acute chole.

I'm probably mispronouncing it?

A. Chole.

Q. Chole. Thank you, Doctor.

Patient's primary care physician

did call with positive urine culture results. At this point, we will go ahead and treat the urinary tract infection.

Did I read that correctly?

A. That's correct.

ATTORNEY ORTIZ: It says recent ultrasound, not received ultrasound.

ATTORNEY MALONE: I apologize.

That is correct.

BY ATTORNEY MALONE:

Q. Dr. Ji, are UTIs common in bladder cancer patients who have undergone cystectomies?

A. In patients with ileal conduits, they are common.

Q. To your knowledge, did Ms. Dyer have an ileal conduit?

A. She did.

Q. Is it your opinion that treatment of a UTI is unrelated to an ileal conduit?

A. It is -- it depends on the medical circumstance in its entirety.

Q. What medical circumstances does it depend on?

A. I will try to not be overly

technical, but an ileal conduit predisposes to having bacteria in the tract. At times this can be an infection. At times it's what we call colonization where bacteria will live there simply because it's an unusual surface for that area.

And in this case, the treatment for a urinary -- first, one must consider whether this is truly a urinary tract infection, and secondly, whether this was caused by the ileal conduit. So depending on the totality of lab results, cultures, and the entire workup, at times they may be related. At times they may be colonization.

Q. So is it your opinion that for this date of service, the UTI was unrelated to the ileal conduit?

ATTORNEY ORTIZ: Objection.

THE WITNESS: I have no major opinion on whether the UTI was related to the ileal conduit in this case. I am simply stating that the ER course, its entirety, is primarily for reasons other than the UTI.

///

BY ATTORNEY MALONE:

Q. So you have no major opinion about the UTI's relatedness to the ileal conduit.

Do you have any opinion about the UTI's relatedness to the ileal conduit?

ATTORNEY ORTIZ: Objection to form.

You can answer.

THE WITNESS: In most of the cases for Ms. Dyer, the UTI is related to the ileal conduit. And I do believe in this case, the UTI is related to the ileal conduit, but I also believe that this is not the primary reason for this ER visit.

BY ATTORNEY MALONE:

Q. Was Ms. Dyer's UTI one of the reasons for this hospital visit?

A. The primary reason for this hospital visit was she was experiencing pain in her upper abdomen, the RUQ, right upper quadrant pain as stated in page 1 of Exhibit -- I apologize. This is Exhibit 9. The patient stated Dr. William Hope, who is a general surgeon -- Dr. William Hope wants

to be called when I'm here. This is her general surgeon.

She had a urinary tract infection which is accurate, but as stated in the documentation, her primary care doctor had already received a culture, had already placed her on antibiotics, and already had the sensitivities for that culture which would not require a person to go to the ER for a urinary tract infection. The primary reason would then be for the right upper quadrant pain necessitating the general surgeon to evaluate her.

Q. So is it your opinion that for this date of service, Ms. Dyer did not receive any treatment for a UTI?

ATTORNEY ORTIZ: Objection.

THE WITNESS: She did receive treatment, but it did not have to take place in the ER setting.

BY ATTORNEY MALONE:

Q. But it did take place in the ER setting; correct?

A. It did take place in a ER setting because she happened to be in the ER for a

different significant reason.

Q. Okay. You can put that aside, Doctor. Thank you.

Doctor, I'm going to hand you what we'll mark as Exhibit 11. Do you recognize this document as --

ATTORNEY ORTIZ: Should it be Exhibit 10?

ATTORNEY MALONE: I am so sorry. We skipped a sticker.

ATTORNEY ORTIZ: You can make it 11 if you want.

ATTORNEY MALONE: We can make it 11. That's fine.

(Exhibit Number 11 was marked for identification.)

THE WITNESS: I do.

BY ATTORNEY MALONE:

Q. And what is this document?

ATTORNEY ORTIZ: I'm sorry. Do you have a copy for counsel?

ATTORNEY MALONE: I'm so sorry. I believe I don't have an extra copy.

THE WITNESS: This is the discharge summary for a

hospitalization from December 2, 2015, to December 3, 2015.

BY ATTORNEY MALONE:

Q. And on the middle of the first page there with -- where it says Admission Diagnoses.

Do you see that?

A. I do.

Q. And it says: Other chest pain, UTI, lower urinary tract infection, chest pain.

Did I read that correctly?

A. That's correct.

Q. And below that it says: Discharge Diagnoses, atypical chest/flank pain -- chest/flank pain, with low risk stress test, recurrent UTI.

Did I read that right?

A. That's correct.

Q. Okay. And I think we went over this with the prior medical record, but is it your opinion that Ms. Dyer's treatment for UTI on this date of service was related to her ileal conduit?

ATTORNEY ORTIZ: Objection to

form.

You can answer.

THE WITNESS: I believe so.

BY ATTORNEY MALONE:

Q. But it is also still your opinion that this date of service -- the charges for this date of service were not related to her track 1 illness?

A. That is correct.

Q. You can set that to the side.

I'm going to hand you what we're marking as Exhibit 10.

(Exhibit Number 10 was marked for identification.)

BY ATTORNEY MALONE:

Q. Do you recognize this document?

A. I do.

Q. What is it?

A. This is a letter from Dr. Longo regarding Ms. Dyer.

Q. Have you reviewed this letter recently?

A. I have.

Q. Okay. And please take your time if you need to review it again, but I would

just ask, you know, if you have reviewed it, do you disagree with Dr. Longo's assessment here?

A. I disagree with parts of it. Dr. Longo's absolutely correct that Ms. Dyer had -- Mrs. Dyer had a UTI in both cases. However, when we're determining the relatedness of a disease in regards to a hospitalization, the disease must be significantly the reason for the hospitalization. In the same way that if a person happened to have diabetes but went to the hospital for a broken leg, you would not say that the hospitalization was related to the diabetes. It would be for the broken leg.

So in this case -- in both cases, Mrs. Dyer has frequent urinary tract infections very frequently, and while she did go to the hospital having a urinary tract infection, that was not the primary reason that she was in the hospital.

As an internal medicine doctor, I will say that we do see chronic diseases and recurrent diseases all the time in the

hospital. And when we treat the patient in the hospital, we take the totality of their medical conditions, and we have to identify which are the reasons for their hospitalization.

I will also point out that in both cases, a urologist was not consulted for the hospitalization, and she was not specifically managed for the UTI as a primary reason for her hospitalizations.

Q. Okay. So it's your opinion that although she was treated for a UTI during these two hospital visits, because it was not the primary reason for the hospital visit, it's, therefore, unrelated for purposes of your analysis?

ATTORNEY ORTIZ: Objection.

THE WITNESS: When we analyze patients for hospitalizations, the medical condition has to be related to one of the primary reasons for the hospitalization. The hospital will certainly not ignore other conditions the patient is having at the time, but if not for another condition,

Mrs. Dyer would not have to go to the hospital for that condition. In other words, if it were not for her right upper quadrant pain and if it were not for her chest and flank pain, she would not have to be at the hospital if just for the UTI.

BY ATTORNEY MALONE:

Q. But she incurred charges for treatment of the UTI at this visit; is that right?

ATTORNEY ORTIZ: Objection.

THE WITNESS: Treatment of the UTI was a small portion of the total treatment that she had. As I previously stated, this hospital certainly would not ignore her urinary tract infection while she was at the hospital. That would be inappropriate.

But regarding the workup, the UTI constituted a very small amount of her total workup and treatment. Typically, some urine tests and antibiotics. So I did not quantify

the exact amount, but it would be presumably a very small percentage of her treatments.

BY ATTORNEY MALONE:

Q. But it would be some percentage of this treatment?

A. I would classify it as an insubstantial percentage of the treatment.

Q. So if Ms. Dyer did not have the UTI present during these two hospital visits, her charge -- or her medical bills would have been lower for these two visits?

ATTORNEY ORTIZ: Objection.

THE WITNESS: I am unable to quantify that in part because I do not recall off the top of my head how her bills were processed. For example, if it was a bundled payment charge, it may not be different at all.

BY ATTORNEY MALONE:

Q. Turning back to page 8 of the Marjorie Hackett-Wallace report, let me know when you get there.

A. Yes, we're here.

Q. Okay. The heading number 4

Laramore, Jimmy Carroll.

Do you see that?

A. I do.

Q. And in the second sentence it states: Despite no past medical damages being claimed by the plaintiff, the government claimed the following offset damages: VHA indirect and direct costs totaling $670 or VHA direct costs only totaling $304.

Did I read that right?

A. That's correct.

ATTORNEY ORTIZ: Just for the record, that's not the full sentence.

ATTORNEY MALONE: Okay.

BY ATTORNEY MALONE:

Q. Just talking about these VHA costs for a moment, did these amounts reflect that Mr. Laramore incurred charges of at least $304 that you found related to his track 1 disease that were paid for by VHA?

ATTORNEY ORTIZ: Objection form and foundation.

THE WITNESS: I'm just simply stating in that VHA did pay that

amount of dollars for the track 1 disease.

BY ATTORNEY MALONE:

Q. Okay. And is that true for all the VHA costs you identify throughout your report?

ATTORNEY ORTIZ: Same objection.

THE WITNESS: Regarding offset costs. If I identify an offset from VHA, that is -- that is stating that VHA provided that payment for track 1 disease.

BY ATTORNEY MALONE:

Q. What's your understanding of the difference between direct and indirect VHA costs?

A. While I have no specific detailed knowledge, direct costs are typically what we consider variable costs. Indirect costs may include typically fixed costs such as building payments, things that may not be directly related to the care. But I have no specific knowledge of what this entails.

Q. Okay. Do you have any opinion on whether direct or indirect costs more

accurately reflect the cost of Mr. Laramore's treatment?

A. I have no opinion.

ATTORNEY ORTIZ: Objection. Foundation.

BY ATTORNEY MALONE:

Q. And are you offering any opinion on whether VHA direct or indirect costs should be used in determining an offset calculation?

ATTORNEY ORTIZ: Object to foundation.

THE WITNESS: I have no opinion.

BY ATTORNEY MALONE:

Q. Okay. Following a semi column in the sentence we just discussed, it states: TriWest/CCN totaling $31,010 for a total alleged offset of $31,314 (VHA direct costs) or $31,680 (VHA indirect and direct.)

Did I read that right?

A. That's correct.

Q. Okay. So with regards to the $31,010 for TriWest/CCN, is that the amount that you found for Mr. Laramore? And you can refer to your report if you need to.

A. Just for completeness sake, that is correct.

Q. And so what does that amount represent?

A. This again represents the total amount of government payment for the track 1 disease in these specific payors.

Q. And would that be true for all of the TriWest/CCN alleged offsets you identify in your report?

ATTORNEY ORTIZ: Object to form.

THE WITNESS: As I stated previously, the -- these payments are the amounts identified related to the track 1 diseases from each individual payor.

BY ATTORNEY MALONE:

Q. We've been going about an hour. Do you guys want to take a 10-minute break?

ATTORNEY ORTIZ: Sure.

THE VIDEOGRAPHER: The time now is 11:00 a.m. We're going off the record.

(Recess taken from 10:59 a.m. to 11:12 25 a.m.)

THE VIDEOGRAPHER: The time is now 11:12. Back on the record.

BY ATTORNEY MALONE:

Q. Dr. Ji, we're back from a short break, and I just wanted to circle back to Exhibit Number 10.

Could you pull that out?

A. Sorry. Exhibit 10 is?

ATTORNEY ORTIZ: Is 10 Dr. Longo's letter?

BY ATTORNEY MALONE:

Q. It should be the letter from Dr. Longo.

A. Yes, I have it here.

Q. On the first page in the third paragraph, he writes towards the middle here: Patients with an ileal conduit, like Mrs. Dyer, are at a higher risk of bacteria entering the urine and refluxing to the kidneys. When this happens, patients often experience symptoms similar to that of Mrs. Dyer, including fever and chest pain.

Did I read that correctly?

A. You read that correctly.

Q. Do you disagree with Dr. Longo's

statement here?

A. I disagree for the specific instance. In this case -- Dr. Longo is correct that patients with ileal conduit are at a higher risk for urinary tract infections, and urinary tract infections that do -- that can get progressively worse can present with what we call pyelonephritis where the infection gets to the kidneys in which case it can cause fevers and pain all the way up to the side and the flank as we call it.

In this case, however, which I will just refer to the medical records, she had received a CAT scan, CT scan, which showed no infection of the kidneys. The infection was isolated to the bladder, to the urine. And simple -- what we call simple or localized urinary tract infections like this typically almost never present with chest pain or flank pain.

So this would not explain why she had to undergo cardiac testing, including stress tests, which was the majority of her hospitalization.

Q. During your review of Mrs. Dyer's medical records, did you consult with any urologic oncologists?

ATTORNEY ORTIZ: Objection.

THE WITNESS: I did not.

BY ATTORNEY MALONE:

Q. Did you consult with any specialists for any of the plaintiffs' medical records review that you performed?

ATTORNEY ORTIZ: Objection.

THE WITNESS: I did not.

BY ATTORNEY MALONE:

Q. You can put that to the side.

A. Okay.

Q. Doctor, if you could pull out Exhibit 6, your materials considered list.

A. I am ready.

Q. And on page 10 under document productions, let me know when you get there.

A. Yes, I'm here.

Q. Okay. The first one there, the Bates number is CLJ_Tricare_0000000001 through 55.

Do you see that?

A. I do.

Q. Do you recall what that document is?

ATTORNEY ORTIZ: Objection. If you're going to ask him about a specific document, I'd ask that you show it to him.

THE WITNESS: I don't recall the specific contents. As best as I can recall, this is Tricare data. I believe it's an Excel spreadsheet.

BY ATTORNEY MALONE:

Q. Do you recall what was contained within that data?

ATTORNEY ORTIZ: I'm just going to object. If you're going to ask him about a detailed spreadsheet, I'd ask that you show it to him.

THE WITNESS: Yeah, I don't recall the specific spreadsheet.

BY ATTORNEY MALONE:

Q. Okay. You can put that to the side, Doctor.

Turning back to Exhibit 8, which is the rebuttal expert opinion report of Marjorie Hackett-Wallace, go to page 9,

please.

A. I'm here.

Q. Okay. And for heading number 1, Mousser, Frank Wayne, she writes: For Frank Mousser, I quantified zero dollars in medical billing expenses. Despite no past damages being claimed by plaintiff -- by the plaintiff, the government claimed the following offset damages: VHA indirect and direct costs totaling $62,854 or VHA direct costs totaling $43,801 VHA totaling $43,801, for an alleged offset of $43,801 (VHA direct only) or $62,854 (VHA direct and indirect costs).

Did I read that right?

A. That's correct.

Q. Okay. And if you need to, you can refer to your own report. But are those, in fact, the amounts that you found?

A. For completeness, I will just double-check, but that is correct.

Q. What's your understanding of how VHA direct and indirect costs are derived?

ATTORNEY ORTIZ: Objection. Asked and answered.

You can answer.

THE WITNESS: I have no specific knowledge of how they derive these costs.

BY ATTORNEY MALONE:

Q. Continuing on page 9 under Section 2, Howard, Allan W., the second paragraph Ms. Hackett-Wallace writes: After review, I reduced the amount of medical billing expenses to the amount confirmed by the defense expert, Wang Ji, MD, and have amended my totals accordingly to reflect $839,455 in charges verified by the experts for both parties to be related to the conditions claimed.

Did I read that right?

A. That's correct.

Q. Okay. And once again, if you need to refer to your own report, please do so. But is that, in fact, the amount in charges that you verified?

A. That is correct.

Q. Okay.

A. I will just say that I did not quantify the amount of payment data, only

the billed charges for the past medical expenses.

Q. And that's the case for all the plaintiffs; correct?

A. That's correct.

Q. Okay. Turn to page 10 of the same exhibit here, headline section number 3, Fancher, David W.

Do you see that?

A. Yes.

Q. Okay. The second sentence: Of these expenses, $6,475.30 was confirmed by the defense expert, Wang Ji, MD, leaving a disputed amount of charges totaling zero dollars.

Do you see that?

A. I do.

Q. Okay. Is that, in fact, the amount of expenses you confirmed?

A. That is correct.

Q. Okay. Going down to Section 4, Downs, David, second sentence again she writes: Of these expenses, $49,971.61 was confirmed by the defense expert, Wang Ji, M.D., leaving a disputed amount of charges

totaling zero dollars.

Do you see that?

A. I do.

Q. And is that, in fact, the amount that you confirmed for Mr. Downs?

A. That is correct.

Q. Turn to page 11, same exhibit here, Section 5, Tukes, Jacqueline.

Do you see that?

A. I do.

Q. And if you'll actually turn to the next page, second paragraph.

A. Okay. Page 12?

Q. That's right.

A. Yes.

Q. Second paragraph: Further, after review, Plaintiffs agreed to the disputed medical billing expenses identified by Dr. Ji in the amount of 3,478.

Did I read that right?

A. That's correct.

Q. So is it your understanding that following your review, there's no dispute of the past billed medical expenses for Ms. Tukes?

ATTORNEY ORTIZ: Object to form.

THE WITNESS: It appears there's no dispute over the values that I have produced.

BY ATTORNEY MALONE:

Q. If you'll turn to page 13 staying in this exhibit, the section titled: Leukemia Plaintiffs, number 1, Amsler, Karen.

Do you see that?

A. I do.

Q. I would just ask you to review the second paragraph of Section 1 and just let me know when you've had a chance to --

A. Is this where it begins "based upon my review of the amounts"?

Q. That's correct.

A. Okay. I reviewed it.

Q. So after your review, do you still -- sorry. Do you agree with Ms. Hackett-Wallace's assessment regarding those charges?

A. I did review this after receiving this, and I do agree with her that this was a simple accounting error on their part

regarding the -- where it states: The total amount is correctly calculated as follows.

Q. And will you be providing an amendment to your report to reflect that?

ATTORNEY ORTIZ: Objection.

THE WITNESS: I will refer to my counsel.

ATTORNEY ORTIZ: His testimony is the supplement.

BY ATTORNEY MALONE:

Q. Staying on page 13, Section 2, Connard, Stephen.

Do you see that?

A. I do.

Q. And the second paragraph: Dr. Ji disputed $3.97 related to a data entry error. I agree to Dr. Ji's assessment regarding the charge amount for the University of Maryland Medical Center date of service 11/9/2001 wherein the charges were overstated by $3.97.

Do you see that?

A. Yes, I do.

Q. So do you agree there is no dispute here between you and Ms. Hackett-Wallace

regarding these charges now?

A. I agree with the -- I see no contradiction; so I agree.

Q. Turn to page 14 of the report, the next page here. It begins on the prior page, but this is for Joseph Gleesing.

Do you see that?

A. I do.

Q. Okay. And I would just ask you to briefly review Section 1(c) on page 14, and just let me know when you've had a chance to review that.

A. Okay. I've reviewed it.

Q. Okay. Do you agree with Ms. Hackett-Wallace's assessment there?

A. I disagree with her assessment for this date.

Q. And why do you disagree?

A. For the -- I apologize. I'm going to refer to my own report for this particular date which should be -- this is Exhibit 5, page 62. And it would be under 8(b) for the related work, Section 8, for the related charge. In this case, I have reviewed her rebuttal and have reviewed the

source material. And after reviewing all the data, I did not see any issue with the number identified, the $15,560.65 as opposed to 15,800.

Q. Doctor, I'm handing you what we will mark Exhibit 12.

(Exhibit Number 12 was marked for identification.)

BY ATTORNEY MALONE:

Q. Do you recognize this document?

A. I do.

Q. Okay. What is it?

A. This is a list of charges for Karen Amsler.

Q. You know what? I handed you the wrong one.

A. I was going to say.

Q. I'm sorry about that. I just realized that. I got out of order there. You can set that to the side. We don't need it.

Let's try this again. I'm going to hand you what we will mark as Exhibit 13.

(Exhibit Number 13 was marked for identification.)

BY ATTORNEY MALONE:

Q. Do you recognize this document?

A. I do.

Q. Okay. What is it?

A. It's a list of charges for prescription drugs.

Q. Okay.

A. For Mr. Gleesing.

Q. And please feel free to review this, but do you believe that these charges are overstated as they are laid out here?

ATTORNEY ORTIZ: Give him a second to review it, please.

ATTORNEY MALONE: Sure.

ATTORNEY ORTIZ: And are you going to come back to 12, or should we set it aside?

ATTORNEY MALONE: I'm not. You can set it aside.

ATTORNEY ORTIZ: Dr. Ji, when you're done, just let us know.

THE WITNESS: Well, I reviewed this document. This was only a United Healthcare bill for prescription drugs. This did not contain enough

information to determine the relatedness of prescription drugs for the patient. I will have to -- I don't recall off the top of my head which document. It would be in my report. But we -- but this bill alone does not -- of a generic description of prescription drugs, quote/unquote, would not be sufficient to provide relatedness to a track 1 condition.

BY ATTORNEY MALONE:

Q. Okay. So you stand by your opinion disputing the amount between yourself and the amount alleged by plaintiffs' expert?

A. That's correct. I do not believe that this -- that the cited Exhibit 13, which was cited in Ms. Marjorie Hackett-Wallace's report is sufficient to provide any information about relatedness.

Q. Okay. Returning to page 14 of Exhibit 8, Hackett-Wallace's rebuttal report, are you still there?

A. Yes, I am.

Q. Okay. First paragraph, the final sentence: The government claimed the

following additional offset damages: VHA indirect and direct costs totaling $1,743 or VHA direct costs totaling $879; Medicare totaling $16,835; Tricare totaling $115, for an alleged total offset of $17,829 (VHA direct costs only) or $18,693 (VHA direct and indirect costs).

Did I read that correctly?

A. That's correct.

Q. Okay. And is that statement correct with regards to your findings for this plaintiff?

A. Just for completeness, I do believe they are correct, but let me verify. I'm sorry. I was looking at the wrong page. That is correct.

Q. With respect to Tricare, your Tricare offset, you have no reason to disagree with billed amounts or patient pay amounts for Tricare for this plaintiff?

ATTORNEY ORTIZ: Objection.

BY ATTORNEY MALONE:

Q. Is that right?

ATTORNEY ORTIZ: Objection.

THE WITNESS: For Mr. Gleesing, I

did not calculate for the purposes the patient paid amounts. Again, for patient paid amounts, are you referring to hospital paid -- I'm sorry, Tricare paid amounts to the hospital or patient paid amounts?

BY ATTORNEY MALONE:

Q. Patient paid amounts.

A. As in premiums?

Q. Uh-huh.

A. I did not perform any analysis on patient paid amounts.

Q. And billed amounts?

A. And for billed amounts, I did not perform an analysis for that purpose of offsets for billed amounts.

Q. Did you perform that analysis with respect to Tricare for any plaintiff?

ATTORNEY ORTIZ: Objection.

You can answer.

THE WITNESS: For the purposes of offsets, I did not. I did evaluate billed amounts for past medical expenses for Tricare.

///

BY ATTORNEY MALONE:

Q. Okay. Let's turn to page 15 of the same exhibit, Section 4, Hill, Bruce.

Do you see that?

A. I do.

Q. Okay. Second sentence she writes: Despite no medical damages being claimed by the plaintiff, the government claimed the following additional offset damages: VHA indirect and direct costs totaling $244,881 or VHA direct costs totaling $142,727; Medicare totaling $1,777, for a total alleged offset (VHA direct costs only) of $144,504.

Did I read that right?

A. That's correct.

Q. And is that, in fact, your assessment for this plaintiff?

A. That's correct.

Q. Let's turn to page 16 still on Exhibit 8. And Section 1 says: Carter, Ronald Lee.

Do you see that?

A. I do.

Q. Okay. And I would direct you down

to Section 2. If you could just reread that to yourself, and you let me know when you've -- a chance to review that.

A. Okay. I've reviewed it.

Q. And having reviewed Hackett-Wallace's assessment there, do you agree with her assessment?

A. In regards to her assessment that this is related, I disagree, although some of the facts of her statement are correct.

Q. Actually, I'll ask you to first also could you review Section 3 on that same page of 16 on Exhibit 8, please.

A. Okay. Okay. I've reviewed it.

Q. Okay. Do you agree with Hackett-Wallace's conclusions and assessments in that section?

A. I disagree with her conclusion that this appears to be related to the plaintiff's track 1 disease.

Q. And then I'll also ask you now to review Section 4 just below that, and let me know when you've had a chance.

A. I'm done reviewing.

Q. Okay. And do you agree with

Hackett-Wallace, her assessment in that section?

A. Again, I disagree that this is related to her track 1 disease although she did not specifically state that in this case. I do agree that the visit was for an infection.

Q. Okay. So I am going to hand you what we will mark as Exhibit 14.

(Exhibit Number 14 was marked for identification.)

BY ATTORNEY MALONE:

Q. Do you recognize this document?

A. I do.

Q. And you can read -- flip through and review this. What is this document?

A. These are primary care visits for Mr. Ronald Carter.

Q. All right. And if you will turn to page Bates number ending in 5878, and let me know when you're there.

A. Okay. I'm here.

Q. And do you see the encounter date up at the top left of this document?

A. This is for December 15, 2015.

Q. Okay. And it says under history of present illness: 67-year-old gentleman comes in with his wife provider wish and respiratory infection characterized by fever.

Did I read that right?

A. That's correct.

Q. Okay. And then I will direct you to the page number ending in Bates 5880.

A. Okay.

Q. And this is a continuation of the active problems list. For number 27, do you see what problem is listed there?

A. Number 27 is listed as mantle cell lymphoma.

Q. Okay. I would now ask you to go to the page ending in Bates number 5874. Let me know when you're there.

A. Okay. I'm here.

Q. And the third paragraph under history of present illness -- actually, I'm sorry.

Do you see the encounter date up at the top there?

A. Yes.

Q. And what date is that?
A. December 17, 2015.
Q. Okay. Under history of present illness, it states: Patient history is complex with history of coronary artery disease having had a stent January 2014. Long-standing history of lymphoma with chemotherapy, now in remission.
Did I read that correctly?
A. That's correct.
Q. Okay. And now we'll turn to page Bates number ending 5869. I believe it's the first page of the exhibit.
A. Yes.
Q. And do you see what the encounter date is for this record?
A. Yes. It's December 21, 2015.
Q. And then turning to the page number ending 5871, this is also a continuation of active problems.
A. Yes.
Q. Do you see what problem number 27 is identified as?
A. It's identified as mantle cell lymphoma.

Q. Okay. Dr. Ji, do you agree that chemotherapy can suppress the immune system?

ATTORNEY ORTIZ: Object to form.

THE WITNESS: Chemotherapy can suppress the immune system during the time of chemotherapy.

BY ATTORNEY MALONE:

Q. Okay. Do you agree that non-Hodgkin's lymphoma can cause immunosuppression?

ATTORNEY ORTIZ: Object to form.

THE WITNESS: Non-Hodgkin's lymphoma has not classically been associated with significant immunosuppression.

BY ATTORNEY MALONE:

Q. What about mantle cell lymphoma?

ATTORNEY ORTIZ: Same objection.

THE WITNESS: Mantle cell lymphoma is a type of non-Hodgkin's lymphoma and has not been associated with significant immunosuppression.

BY ATTORNEY MALONE:

Q. Are patients you treat who have non-Hodgkin's lymphoma or mantle cell

lymphoma at a higher risk for infections?
A. Not in a significant way. The lymphoma -- it would depend on their totality of circumstances, but for patients who are in remission from lymphoma for years are generally not considered to be a significant increase for infections.
Q. So you stand by your -- all of your opinions with regards to Mr. Carter on the unrelatedness of this -- I believe it's $926.52?
A. That's correct.
Q. Okay. You can put that to the side.
A. Okay.
Q. Let's turn to page 17 of Exhibit 8, section number 2, Davis, Cometto?
A. We're here.
Q. Okay. And the first paragraph reads: For Cometto Davis, I quantified zero dollars in medical billing expenses. Despite no past medical damages being claimed by the plaintiff, the government claimed the following additional offset damages: VHA direct and indirect

costs totaling $3,178 or VHA direct costs totaling $1,614 for a total alleged offset (applying VHA direct costs only) of $1,614.

Did I read that correctly?

A. That's correct.

Q. Okay. And is that, in fact, your opinion with regards to this plaintiff?

A. That's correct.

Q. Okay. You know, I think we can take a break here.

ATTORNEY ORTIZ: Sure.

ATTORNEY MALONE: For about -- we're at the lunch period.

THE VIDEOGRAPHER: The time is now 11:53 15 . Going off the record.

(Recess taken from 11:53 a.m. to 12:43 p.m.)

THE VIDEOGRAPHER: The time is now 12:44. Back on the record.

BY ATTORNEY MALONE:

Q. Dr. Ji, we took a brief lunch break, and now we are back on the record here. I would like to direct you here to page 17 of Exhibit 8, Section 2, Davis, Cometto.

Do you see that?

A. I do.

Q. Okay. And the first paragraph here states for Cometto Davis, I quantified zero dollars in medical billing expenses. Despite no past medical damages being claimed by the plaintiff, the government claimed the following additional offset damages: VHA direct and indirect costs totaling $3,187 or VHA direct costs totaling $1,614, for a total alleged offset (applying VHA direct costs only) of $1,614.

Did I read that right?

A. That's correct.

Q. And is that an accurate summary of your conclusions as well for this plaintiff?

A. It is.

Q. Section 3, still on page 17, for Keller, Scott.

Do you see that?

A. I do.

Q. Okay. And I would ask you to now turn to page 18, still on that section, and if you could just reread Section 1(a).

ATTORNEY ORTIZ: I'm sorry.

Before we do that, some of our folks are listening on Zoom and said there's an audio distortion effect. The audio sounds off.

THE VIDEOGRAPHER: The time is now 12:47. Going off the record.

(Recess taken from 12:46 p.m. to 12:47 p.m.)

THE VIDEOGRAPHER: The time is now . Back on the record.

BY ATTORNEY MALONE:

Q. Dr. Ji, we left off, I was just referring you to page 18 of Exhibit 8, and I would just ask could you please reread Section 1(a) and just let me know when you've had a chance to review that.

A. I did it during the brief intermission we had.

Q. Okay. And do you agree with the assessment of Ms. Hackett-Wallace?

ATTORNEY ORTIZ: Object to form. You can answer.

THE WITNESS: I do not.

BY ATTORNEY MALONE:

Q. Why do you disagree?

A. In this case, referring to 1(a), the office visit on February 21, 2023, this was for a gastroenterology visit which is a gastrointestinal specialist who did order blood work, but this was not for the purposes of chronic kidney disease as Ms. Hackett-Wallace alleges. There was no mention of any concern of kidney-related diseases, and the actual visit itself was identified for gastrointestinal.

Q. Doctor, I'm going to hand you what we're going to mark as Exhibit 15.

(Exhibit Number 15 was marked for identification.)

BY ATTORNEY MALONE:

Q. Do you recognize this document?

A. I do.

Q. What is it?

A. This is a primary care visit from January 4, 2023.

Q. And if you will turn to the page Bates-numbered 1501_Keller_PCC0000000503.

A. I'm here.

Q. Okay. And about halfway down on

the page under -- from -- I believe that means previous notes, it says: Number 1, stage 4 chronic kidney disease (HCC). CBC with differential comprehensive metabolic panel. Troponin 1, magnesium.

Did I read that correctly?

A. That's correct.

Q. Okay. And so given that that is listed in the medical record for this date, referring to the studies -- the last disputed in Section 1(a) that we discussed, do you still -- is it still your opinion that these charges were unrelated to Mr. Keller's chronic kidney disease?

ATTORNEY ORTIZ: Object to form.

You can answer.

THE WITNESS: I still believe these are unrelated. To the best of my recollection and my previous review, the charges for this date were actually for a gastroenterology visit. The document here is a primary care office visit for January 24, 2023. While I do not have the actual bill in front of me, to the best of my

recollection of the review, the bill was actually for a different charge.

BY ATTORNEY MALONE:

Q. So even if the chronic kidney disease was listed among the encounter details, because it was a gastroenterology visit, it's your opinion that it would be, therefore, unrelated to the track 1 illness; right?

A. That's correct.

ATTORNEY ORTIZ: Object to form. You can answer.

THE WITNESS: To the best of my recollection, the gastroenterology visits did not mention any stage 4 chronic kidney disease as one of their primary concerns. And unless it was meaningfully used to change management or manage the actual kidneys themselves, it would not be considered related to the track 1 diseases in this case.

BY ATTORNEY MALONE:

Q. Okay. Dr. Ji, I would like to direct you to Exhibit 5, page number 72.

That would be your report.

A. I'm here.

Q. And if you would then turn to page 74, that same report in this Section 4, Mr. Keller.

A. I'm here.

Q. Footnote 39 reads: Although my opinion is that the plaintiff's diabetes and diabetic nephropathy are medically unrelated to any of the claimed conditions including lymphoma, the patient specifically received VBA benefits for his diabetes and diabetic nephropathy all as associations to lymphoma as related to his purported Camp Lejeune exposures.

Did I read that right?

A. That's correct.

Q. You go on to state: I am not offering any opinion that his diabetes, diabetic nephropathy, and neuropathy are medically related to or caused by his Camp Lejeune exposures.

Did I read that correct?

A. That's correct.

Q. Do you have any reason to dispute

the VBA's findings as referenced in footnote 39?

ATTORNEY ORTIZ: Objection to form and foundation.

THE WITNESS: When you say "their findings," are you regarding the disability reward or what specific findings from the VBA?

BY ATTORNEY MALONE:

Q. I'm referring to the -- their findings of relatedness to his purported Camp Lejeune exposures.

ATTORNEY ORTIZ: Objection.

THE WITNESS: Oh, you -- are you referring to, for example, the diabetes, mellitus type 2 due to non-Hodgkin's lymphoma with anemia, the due to statement?

BY ATTORNEY MALONE:

Q. Let's start with that, yes.

A. I disagree that the -- or I should actually say that I really have no opinion regarding the relatedness of the type 2 diabetes, but I found no evidence that the type 2 diabetes in this case was related to

the non-Hodgkin's lymphoma.

Q. Let's turn to page 19 of Exhibit 8.

A. I'm here.

Q. And the section number reads: Number 4, Kidd, Robert.

Do you see that?

A. I do.

Q. And the first paragraph states: For Robert Kidd, I quantified zero dollars in medical billing expenses. Despite no past medical damages being claimed by the plaintiff, the government claimed the following offset damages: VHA indirect and direct costs totaling $14,082 or VHA direct costs totaling $7,733; TriWest/CCN totaling $15,353, for a total alleged offset (applying VHA direct costs only) of $23,086.

Did I read that correctly?

A. That's correct.

Q. Okay. And is that an accurate summary of your opinions with respect to Mr. Kidd? Please refer to your report if you need to.

A. I will do so for completeness. But this should be correct. That's correct.

Q. Dr. Ji -- and you can set the reports aside for now.

Do you have any training in Medicare claims data systems?

ATTORNEY ORTIZ: Objection.

THE WITNESS: Can you define by Medicare data systems?

BY ATTORNEY MALONE:

Q. Sure. So have you ever been trained by CMS in the use of their billing and payment systems?

A. I have not been trained by CMS. I do encounter Medicare data bills frequently in my line of work.

Q. Okay. How do they come about in your line of work?

A. In my previous jobs as a medical director, we -- my work at Caremore was as a Medicare Advantage company; so we are very familiar with Medicare claims -- Medicare Advantage claims and billing. In addition for my work as -- for independently reviewing and auditing chart reviews, we do encounter Medicare patients.

Q. Okay. And I think you answered

this so forgive me, but you've never worked for CMS before; correct?

A. That's correct.

Q. Have you ever administered or maintained a Medicare claims database?

A. No, I have not.

Q. Okay. We've talked a lot about the offsets that you have calculated. To quantify the amounts that you describe as offsets, you were relying on the government-provided data; is that right?

ATTORNEY ORTIZ: Object to form and foundation.

THE WITNESS: I was relying on the data that the DOJ provided to me which was from -- which is listed in the materials considered.

BY ATTORNEY MALONE:

Q. Okay. You didn't generate that data yourself?

A. That's correct.

Q. I believe it's in your materials considered, and feel free to refer back to it, but you read the deposition testimony of the government's Tricare, VHA, and Medicare

non-retained experts.

Do you recall reading those?

A. I do recall reading those.

ATTORNEY ORTIZ: Object to form. You can answer.

THE WITNESS: Yeah, I do recall reading them.

BY ATTORNEY MALONE:

Q. Do you have any opinion on the reliability of the data that was provided to you by the government?

ATTORNEY ORTIZ: Objection.

THE WITNESS: I don't have an opinion on the reliability.

BY ATTORNEY MALONE:

Q. Okay. And did you personally verify the accuracy of the data that was provided to you?

ATTORNEY ORTIZ: Objection.

THE WITNESS: By accuracy, do you mean whether -- do you mean whether there was correct that we received or do you mean that the filtering or do you have any particular --

///

BY ATTORNEY MALONE:
Q. Yeah. I'm sorry. Please.
A. I was just saying do you have any particular areas that you are referring to?
Q. Specifically -- so you didn't verify the data that you were given against the original Medicare claims; right?
ATTORNEY ORTIZ: Objection.
THE WITNESS: By original Medicare claims, are you referring to paper bills? Are you referring to datasets? Or . . .
BY ATTORNEY MALONE:
Q. Let's start with paper bills.
A. In only one patient -- I believe it was Mr. Gleesing off the top of my head -- there were some paper bills that we were able to verify. In most cases, there were no paper bills. However, to my knowledge, what I received was an unfiltered dataset from CMS; so I have no reason to question their accuracy.
Q. Okay. You have no reason to question their accuracy why?
ATTORNEY ORTIZ: Objection. Asked

and answered.

THE WITNESS: Since CMS is the payor in this case, there's no reason to question why their payments would be incorrect since they are the organization that is providing the payments.

BY ATTORNEY MALONE:

Q. Okay. So did you rely on anyone else to validate that data, or is that just an assumption that you have?

ATTORNEY ORTIZ: Objection to form and foundation.

THE WITNESS: Are you referring to rely on someone else to verify if the data is correct?

BY ATTORNEY MALONE:

Q. Yes.

A. No. There was -- the data came directly from the DOJ which received data from the CMS as far as I'm aware.

Q. Dr. Ji, do you recall earlier when we were discussing Mrs. Dyer and the -- we'll call it the dispute relating to those two emergency department visits?

A. I do recall.

Q. Okay. And it's my understanding that your testimony was that although she -- strike that.

Is it your testimony that Ms. Dyer presented to the emergency department with an unrelated condition and, therefore, that entire treatment is considered to be unrelated?

ATTORNEY ORTIZ: Object to form.

THE WITNESS: I would not quantify it as she came with an unrelated condition; so it was unrelated. As I previously discussed, she came in to the emergency room in those cases with symptoms that were due to other causes which were the primary reason why she would have to go to the emergency room. Although she happened to have a urinary tract infection at that time, had it not been for other conditions, she would not have required an ER visit.

BY ATTORNEY MALONE:

Q. And, therefore, it's your

determination that it was unrelated for purposes of this analysis?

A. That's correct.

Q. I'm just trying to get a better understanding of the basis for that rationale.

Is there a coding or a billing guideline that leads you to that conclusion?

ATTORNEY ORTIZ: Object to form.

Is there a question there?

ATTORNEY MALONE: Sorry. Let me rephrase. That was a bad question.

BY ATTORNEY MALONE:

Q. Are there any guidelines or regulations that you relied upon in reaching that conclusion?

A. In reaching the conclusion that it would be unrelated to the visit?

Q. Correct.

A. When we conduct -- when we determine whether a patient requires hospitalization or admission, we do so as physicians with the understanding that they have to meet certain guidelines to be hospitalized. There are various criteria or

guidelines that you can use to determine the level of illness that you need to be hospitalized for, and there are criteria, for example, the Milliman guidelines. But we are not discussing coding or billing or hospitalizations in this case, but similar principles apply in which case hospitalization is required when the patient cannot be adequately treated outside the hospital.

In other words, if you have a simple urinary tract infection that can be managed with some pills and you're not so sick that you be unwell, you don't need to be in the hospital. You can simply -- just like if I catch a cold, I may not feel well. I may need some medication, some simple pills or other medications to take, but I don't need to go to the hospital. I don't need to be hospitalized for that reason.

In the same vein, if you go to the -- if you have a urinary tract infection but it can simply be treated with a pill as in these cases, the hospitalization is not directly related to the urinary tract

infection. It's instead related to the other conditions that led her to go to the hospital.

Q. Okay. You mentioned the principles between billing, coding, and I guess you call it medical treatment.

Why do those principles apply here?

ATTORNEY ORTIZ: Object to form.

THE WITNESS: In this case we -- when we were determining relatedness for medical charge, billing charge, while I'm not opining on whether the bill was accurate or correct and I'm making no opinion on the bills themselves since the medical charge is to pay for the hospitalization as a whole, we do not split up the hospital bill into individual parts for a urinary tract infection and for a gallbladder and for chest pain. It's one entire hospitalization. And the hospitalization is determined by the reason in its totality for the patient to be hospitalized or in the ER.

///

BY ATTORNEY MALONE:

Q. And this is kind of what I'm getting at. Is that a policy or principle that you use in determining relatedness outside the context of your work in this litigation?

ATTORNEY ORTIZ: Object to form and foundation.

You can answer.

THE WITNESS: As physicians, we don't generally think in terms of relatedness in our day-to-day jobs. We think in terms of treating the patient and managing them, which does include whether they need to be treated in the hospital or not. But when we are managing the patient, if I had this patient in the ER and she had pain in her abdomen, right quadrant pain and urinary tract infection, I would treat both. I don't think in terms of relatedness.

However, when it comes to time to determine whether the patient needed to be in the hospital, we do think in

terms of why does the patient need to be in the hospital right now.

BY ATTORNEY MALONE:

Q. With respect to the two visits that we're discussing for Mrs. Dyer, did you consult with the treating physicians regarding those dates of service?

ATTORNEY ORTIZ: Objection.

THE WITNESS: You're referring to the doctors at the actual hospital at the time?

BY ATTORNEY MALONE:

Q. I am.

A. I did not.

Q. Okay.

ATTORNEY ORTIZ: The doctors from 2014? 2015?

ATTORNEY MALONE: I am referring, yes.

BY ATTORNEY MALONE:

Q. And you didn't consult with any other physicians about these two dates of service, did you?

A. I did not.

Q. Okay. Turning back to page 5 of

your report, Exhibit 5, a little bit about your methodology. Sorry, let me know when you're --

A. I'm here.

Q. Okay. Going back to the second to last paragraph, it's my understanding based on what we've talked about today that you assessed the billed amounts for private paid charges; is that correct?

A. You're talking about the past medical expenses?

Q. Sorry, yes. The past medical expenses.

A. Yes, regarding the past medical expenses, I was requested to analyze the billed amounts.

Q. Okay. And you were requested to analyze the reimbursed or paid amounts for the offsets; is that fair?

ATTORNEY ORTIZ: Objection to foundation.

THE WITNESS: I was tasked to analyze the paid amounts for the offsets. That's correct.

///

BY ATTORNEY MALONE:

Q. Okay. For this I'll direct you to you page 23 of Exhibit 8, Ms. Hackett-Wallace's rebuttal.

A. Sorry. To page 23?

Q. 23. Sorry.

A. Thank you.

Q. Do you see at the bottom of the page under bladder cancer plaintiffs, she offers tables kind of summarizing the past medical and offsets?

Do you see that?

A. I do.

Q. Okay. You were not disputing the final charges on past payments for Tricare; correct?

ATTORNEY ORTIZ: Objection.

THE WITNESS: I was -- I am not -- I don't have any opinion on the total payments from Tricare. I was only tasked to analyze the total billed amounts.

BY ATTORNEY MALONE:

Q. Okay. And I believe earlier you testified that you didn't have access to the

Tricare patient paid and billing information; is that right?

ATTORNEY ORTIZ: Object to form.

You can answer.

THE WITNESS: I don't recall exactly what I said earlier, but in terms of Tricare data, I had access -- I definitely had access to the paid and billed data since for the past medical damages I was assessing the billed amounts. And for the payments, total paid amounts by Tricare, that's the data I used for offsets.

BY ATTORNEY MALONE:

Q. So you were given a dataset from which to derive that quantification?

ATTORNEY ORTIZ: Object to form.

THE WITNESS: That's correct.

BY ATTORNEY MALONE:

Q. Okay. What form was that provided to you in?

A. You are regarding the Tricare dataset I received?

Q. Yes.

A. It was an Excel spreadsheet.

Q. Okay. And so then that data would have shown both the amount Tricare was charged and the amount Tricare ultimately paid?

ATTORNEY ORTIZ: Objection. JT, if you're going to ask him detailed questions about the spreadsheets, I'd ask that you show him the spreadsheets.

ATTORNEY MALONE: Okay.

THE WITNESS: To the best of my knowledge that should be -- both datasets -- both the payments and the billed amounts should be in the Excel spreadsheet.

BY ATTORNEY MALONE:

Q. Okay. Dr. Ji, I know we've spent a lot of time on those points where you were in disagreement with Ms. Hackett-Wallace, but would you agree that by and large with regards to the past medical damages, you verified the amounts that she presented in her report?

ATTORNEY ORTIZ: Object to form. You can answer.

THE WITNESS: My opinions are contained in my report regarding the total amount. I will say that outside of the disagreements that I've labeled in my report, I do agree with the other numbers.

BY ATTORNEY MALONE:

Q. Okay. So if I represented to you that in total you were able to verify about 97 percent of Ms. Hackett-Wallace's past billed amounts, would you have any reason to disagree with that figure?

ATTORNEY ORTIZ: Objection to form and foundation.

THE WITNESS: Without looking through the numbers, I can't give you an accurate assessment. I have no basis to disagree.

BY ATTORNEY MALONE:

Q. Okay. And so we've identified, you know, the agreements that you have, the disagreements that you have with relation to relatedness. But these are disagreements on specific relatedness issues and not Ms. Hackett-Wallace's methodology in coming

to those numbers; correct?

ATTORNEY ORTIZ: Objection to form and foundation and move to strike.

THE WITNESS: I do believe that she -- based on her original report, which I don't have in front of me right now, not her rebuttal report, she primarily started her analysis using ICD and billing code data which I find to be less accurate than line-by-line analysis. However, in terms of the overall numbers, the numbers are what's contained in my report.

BY ATTORNEY MALONE:

Q. Okay. We've spent a lot of time looking through your report and going over things.

Is there anything in your report that you think you need to amend based on this deposition?

ATTORNEY ORTIZ: Objection.

THE WITNESS: Outside of what we've already discussed here, there's

nothing else I would add.
BY ATTORNEY MALONE:
Q. Okay. Does your report that we've just reviewed contain all the extra opinions that you'll be offering in this case?
ATTORNEY ORTIZ: Objection. Form and foundation.
THE WITNESS: I can't predict what will be asked of me as time goes on, but this is -- I have completed what was asked of me so far.
ATTORNEY MALONE: Do you want to take ten minutes and come back and if there's anything else? I just want to go through my notes.
ATTORNEY ORTIZ: That's fine.
THE VIDEOGRAPHER: The time is now 1:21. Going off the record.
(Recess taken from 1:21 p.m. to 1:35 p.m.)
THE VIDEOGRAPHER: The time is now 1:35. Back on the record.
BY ATTORNEY MALONE:
Q. Dr. Ji, we're back from another break. I just have a couple more questions.

We discussed before the break that you did not evaluate the reliability of the Medicare data that was provided to you; correct?

ATTORNEY ORTIZ: Objection.

You can answer.

THE WITNESS: Regarding how accurate the actual data was in the Excel spreadsheet, I cannot verify that number.

BY ATTORNEY MALONE:

Q. Okay. And is that true for the other government data that you were provided?

ATTORNEY ORTIZ: Objection.

THE WITNESS: That's correct. I cannot verify the accuracy of the contents within the document.

BY ATTORNEY MALONE:

Q. You briefly testified about Ms. Hackett-Wallace's methodology. Is it your understanding, as you testified earlier, that she began with data extractions to determine her relatedness determinations?

ATTORNEY ORTIZ: Objection.

THE WITNESS: It is my understanding that she relied on ICD-9 and 10 data as part of her methodology to evaluate the relatedness of the determinations. Whether -- I cannot remember off the best of my recollection whether she started with that or just used it somewhere in her analysis.

BY ATTORNEY MALONE:

Q. Okay. And so just the fact that she used it in her analysis is something that you would take issue with methodologically?

A. I would take issue with it only if she relied primarily on the billing codes as a source of accuracy in terms of relatedness. If she then also reviewed the actual charge in the medical documentation itself, I would have no issue with it.

Q. Okay. Turning to your own methodology, and let's start with the offset data, did you start with claims data first and then verified through medical records,

or did you go line by line through the medical records first?

A. For the offsets, I used the payment data from the various payors and went line by line through those payments. And then through that, I went back to the medical record to confirm whether those were related or not.

Q. Okay. So you didn't presume that the data provided to you in the datasets for the offsets category, Medicare, Tricare, CCN, you didn't presume that those were related? You verified them with medical records?

A. Absolutely.

Q. Okay. Was that the same process you used for private pay?

A. Are you -- private pay regarding offsets or private pay regarding -- which private pay are you referring to?

Q. I'm referring to the past bill that Ms. Hackett-Wallace quantifies in her report.

A. For the past medical damages, I did not have a separate -- I did not have a

separate methodology for private pay versus any of the other payors. I took the charges that were claimed by Ms. Hackett-Wallace, and I either verified or disagreed with the relatedness.

Q. Going back just a moment ago, you said it's problematic to use the ICD-9 and 10 codes for relatedness purposes.

Why is it problematic?

A. When using ICD-9 and 10 codes, it's a coding that you can provide for a service, and the billing or the coding may have inaccuracies both from human error and also because if -- for example, if a patient has a -- let's say, for example, a patient had a gastrointestinal bleed which they thought was typically, a vast majority of the time, unrelated to, say, cancer, but they later found out this was cancer related, then the initial bills from the initial visits prior to the diagnosis of cancer would reflect only a GI bleed and presumably be unrelated. And then later on they would find out that the entire series of workups was related. So there may be a temporal inaccuracy just

because of something that's discovered later on that pertains to the past. So for many reasons, just reviewing the actual medical data is far more accurate.

Q. Dr. Ji, I have nothing else for you. Thanks so much for your time.

ATTORNEY ORTIZ: I don't have any questions for you, Dr. Ji.

I did just want to put on the record there were a couple exhibits -- the deposition protocol in this litigation requires four copies, and there were a couple exhibits where there were not copies for counsel. I think it was Exhibits 5, 8, 9, and 11. I just want to lodge that objection on the record.

But I have no questions for you, Dr. Ji. Thank you very much.

THE VIDEOGRAPHER: The time is now 1:40. This concludes the deposition. Going off the record.

(Whereupon the deposition concluded at 1:40 p.m.)

REPORTER'S CERTIFICATE

The undersigned Certified Shorthand Reporter licensed in the states of California, Nevada, Illinois, and Washington does hereby certify:

That the foregoing deposition was taken before me at the time and place therein set forth, at which time the witness was duly sworn by me;

That the testimony of the witness and all objections made at the time of the examination were recorded stenographically by me and were thereafter transcribed, said transcript being a true copy of my shorthand notes thereof;

That if this is a Federal case, a request [X] was [ ] was not made to read and correct said deposition.

I further declare that I have no interest in the outcome of the action.

In witness whereof, I have subscribed my name this 17th day of February, 2026.

_____

LISA MOSKOWITZ
California CSR 10816, RPR, CRR, CLR
Washington CCR 21001437, Nevada CCR 991,
Illinois CSR 084.004982

INSTRUCTIONS TO WITNESS

Please read your deposition over carefully and make necessary corrections. You should state the reason in the appropriate space on the errata sheet for any corrections that are made.

After doing so, please sign the errata sheet and date it.

You are signing same subject to the changes you have noted on the errata sheet, which will be attached to your deposition.

It is imperative that you return the original errata sheet to the deposing attorney within thirty (30) days of receipt of the deposition transcript by you. If you fail to do so, the deposition transcript may be deemed to be accurate and may be used in court.

E R R A T A S H E E T

- - - - - -

PAGE LINE CHANGE

_____ _____

_____

REASON:

_____

_____ _____

_____

REASON:

_____

_____ _____

_____

REASON:

_____

_____ _____

_____

REASON:

_____

_____ _____

_____

REASON:

_____

_____ _____

_____

REASON:

_____

_____ _____

_____

REASON:

_____

_____ _____

_____

REASON:

_____

_____ _____

_____

REASON:

_____

_____ _____

_____

REASON:

_____

ACKNOWLEDGMENT OF DEPONENT

I, WANG JI, M.D., do hereby certify that I have read the foregoing pages, 1-147, and that the same is a correct transcription of the answers given by me to the questions therein propounded, except for the corrections or changes in form or substance, if any, noted in the attached Errata Sheet.

_____ _____

WANG JI, M.D. DATE

LAWYER'S NOTES

PAGE	LINE
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

1 _____
2 _____ _____
3 _____
4 _____ _____
5 _____
6 _____ _____
7 _____
8 _____ _____
9 _____
10 _____ _____
11 _____
12 _____ _____
13 _____
14 _____ _____
15 _____
16 _____ _____
17 _____
18 _____ _____
19 _____
20 _____ _____
21 _____
22 _____ _____
23 _____
24
25

&

& 2:4

0

0 136:20
0000000001 89:22
0000000029 71:1
00042 21:12
00044 17:12
0052 18:7
0357 71:1
084.004982 1:18 143:5

1

1 3:12 8:4,5 28:8 29:25 31:18 50:1 51:22 52:16 53:12 54:8 59:12,19 60:2 61:11,19 70:19 74:22 78:8 83:20 84:1,11 86:6,15 91:3 95:8,13 97:10 100:10 103:21 104:20 105:4 110:1 111:24 112:1,15 113:1 114:2,5,11 115:8,21
1,614 110:2,3 111:11,12
1,743 101:2
1,777 103:12
1-147 147:4
1/14/2026 4:5
1/20/2026 3:13
1/27/2026 3:25
10 3:14 4:5 30:24 50:10 76:8 78:12,13 86:19 87:6,8,9 89:18 93:6 110:10 112:10 138:4 140:8,10
10,599 60:22
10/30/2025 3:14
105 4:12
10816 1:16 6:1 143:4
10:09 50:20,22
10:59 86:24
11 4:6 40:22 50:11 76:5,12 76:14,15 94:7 110:11 112:11 141:15
11,941 58:14 59:18 60:20
11/9/2001 96:20
1100 2:5,12
113 4:14
115 101:4
11:00 86:22
11:12 86:24 87:2
11:53 110:15 110:16
12 4:8 50:12 94:13 98:6,7 99:16 110:12 112:12
12,908 60:21
12/15/2025 3:19
12/2/2015 4:7 69:20
12/21/2015 4:13
121,299.81 57:14 58:3
121,299.81. 58:9
12:43 110:17
12:44 110:19
12:46 112:7
12:47 112:6,8
13 4:10 50:13 95:6 96:11 98:23,24 100:16 110:13 112:13
13,321.05 68:13
14 4:12 50:14 97:4,10 100:20 105:9,10 110:14 112:14
14,082 118:14
140 40:7
142,727 103:11
144,504 103:14
148,971.88 57:11
15 3:15 4:14 50:15 103:2 105:25 110:15 112:15 113:12 113:13
15,353 118:16
15,560.65 98:3
15,800 98:4
1501 113:23
16 3:16 50:16 103:20 104:13 110:16 112:16
16,835 101:4
17 19:6 20:6,24 43:17 50:17 69:4 107:2 109:16 110:17 110:24 111:18 112:17
17,829 101:5
17th 142:23
18 50:18 110:18 111:23 112:13,18
18,693 101:6

19 50:19 110:19 112:19 118:2
1:21 136:18,19
1:35 136:20,22
1:40 141:21,24

2

2 1:14 3:14 5:1 5:9 10:4,5 13:16 21:16 28:7 50:2 53:19 67:14 69:13 70:2 77:1 92:7 96:11 104:1 109:17 110:2 110:24 112:2 117:16,23,25
2.1 21:20
2.2 21:24
20 30:24 31:17 38:8 50:20 110:20 112:20
20005 2:13
2010 28:18
2013 28:21
2014 71:8 107:6 129:17
2015 77:1,2 105:25 107:2 107:17 129:17
202 2:13
202,674 67:20
2023 113:2,20 114:23
2025 3:21 10:16,17
2026 1:14 3:23 5:1,9 142:24
21 50:21 107:17 110:21 112:21 113:2
210,489.30 13:19
21001437 1:18 143:4
22 3:21 50:22 110:22 112:22
23 50:23 110:23 112:23 131:3,5,6
23,086 118:17
24 50:24 70:17 110:24 112:24 114:23
244,881 103:10
25 50:25 86:24 110:25 112:25
26 3:23
27 3:19 71:8 106:12,14 107:22
27,672.07. 57:16
286 11:13,19
2930 2:6

3

3 3:15 15:15,16 28:14 41:21 42:4,5,11 43:12 50:3 52:11 77:2 93:7 104:12 110:3 111:18 112:3
3,178 110:1
3,187 111:10
3,478 94:19
3.5 17:24
3.6 17:14
3.97 96:16
3.97. 96:21
30 10:16 144:15
304 83:10,20
31 10:17
31,010 85:17,23
31,314 85:18
31,680 85:19
35 71:10
35,447 60:19
3500 1:12
38 3:20
39 3:22 116:7 117:2

4

4 3:16 16:15,16 45:1 49:14 50:4 82:25 93:21 103:3 104:22 110:4 112:4 113:20 114:3 115:15 116:4 118:5
4/2023 4:14
4/24/2018 4:11
40,321.44 68:12
421-1600 2:7
43,801 91:11,11 91:12
49,971.61 93:23

5

5 3:19 27:17,18 41:24,25 42:2 45:2 49:15 50:5 52:18,19 54:17,17 57:6 57:22 60:5,6,7 70:17 94:8 97:22 110:5 112:5 115:25 129:25 130:1 141:15
5,000 18:13
50/50 33:10,11 33:14 34:3
509,000 41:4

514-2000 2:13
53 17:9
53,642.49. 68:14
55 89:23
550 15:13
56 3:24
5869 107:12
5871 107:19
5874 106:17
5878 105:20
5880 106:9

6

6 3:4,20 38:21 38:22 39:16 40:1,19 41:23 42:3 50:6 57:22 67:11 89:16 110:6 112:6
6,475.30 93:12
6/27/2014 4:4 69:20
60/40 33:14
62 97:22
62,854 91:10,13
64105 2:6
67 106:2
670 83:9

7

7 3:22 39:10,11 39:16 40:2,13 50:7 69:11 110:7 112:7
7,733 118:15
70 4:3
707 1:12
7102 143:2
72 115:25
735 15:12
74 116:4
76 4:6
78 4:5
7:23 1:7

8

8 3:12,24 50:8 56:13,14 60:5 60:9 82:21 90:23 97:23,23 100:21 103:21 104:13 109:16 110:8,24 112:8 112:13 118:2 131:3 141:15
8/15/2025 3:15
8/26/2025 4:9
816 2:7
839,455 92:13
877.370.3377 1:21
879 101:3
88,020 18:3,13
897 1:7

9

9 4:3 20:24 50:9 60:10 62:17 64:23,24 66:8,8 70:21 70:22 74:23 90:25 92:6 110:9 112:9 138:3 140:7,10 141:15
9/22/2025 3:18
917.591.5672 1:21
926.52 109:11
93,020 18:14
97 134:10
98 4:8,10
991 1:17 143:4
9:02 1:14 5:3 5:10
9:59 50:18,19

a

a.m. 1:14 5:3 5:10 50:19,20 86:22,24,24 110:16
abdomen 74:21 128:19
ability 64:14
able 122:18 134:9
above 17:24
absolutely 7:10 79:5 139:15
access 131:25 132:7,8
account 14:9
accounting 95:25
accuracy 32:8 49:22 121:17 121:20 122:22 122:24 137:17 138:18
accurate 50:7 75:4 111:15 118:20 127:13 134:17 135:11 137:8 141:4 144:18
accurately 52:24 85:1
acentra 31:21 31:24 32:23
acknowledg... 147:1
action 3:12 142:21
active 106:12 107:20
actual 45:8,20 46:2 47:6 48:21 49:9 113:9 114:24 115:19 129:10 137:8 138:20

141:3
actually 16:9 17:23 28:8 38:2 60:4,9 94:11 104:11 106:21 114:21 115:2 117:22
acute 71:21
add 136:1
adding 11:18
addition 119:21
additional 11:4 58:13 101:1 103:9 109:24 111:8
adds 41:3
adequately 126:9
administered 120:4
administrator 1:19 34:20
admission 77:5 125:22
admitting 30:16
advantage 119:19,21
affected 36:24 36:25
agency 12:13 14:16,22,24,25 62:7,10
ago 140:6
agree 36:1 58:1 68:2 70:8 95:20,24 96:17 96:24 97:2,3 97:14 104:7,15 104:25 105:6 108:1,8 112:19 133:20 134:5
agreed 94:17
agreement 15:23,24 16:11 24:11
agreements 134:21
agrees 58:2
ahead 59:6 72:2
allan 92:7
alleged 53:4 59:11 69:17 85:18 86:9 91:12 100:14 101:5 103:13 110:2 111:11 118:16
allegedly 54:8
alleges 113:7
allowed 27:6
amend 135:21
amended 42:12 92:12
amendment 96:4
amount 11:16 14:8 18:19 38:5 45:20 46:1,9,13,19,22 48:1 49:9 57:16 58:3 63:19 67:24 69:1 81:22 82:1 84:1 85:23 86:3,6 92:9,10,20,25 93:14,18,25 94:4,19 96:2 96:18 100:13 100:14 133:2,3 134:3
amounts 47:24 53:3 61:10,18 83:18 86:14 91:19 95:16 101:19,20 102:2,3,5,6,8 102:12,13,14 102:16,23 120:9 130:8,16 130:18,23 131:22 132:11 132:12 133:14 133:22 134:11
amsler 4:9 95:8 98:14
analysis 54:13 54:14 55:21 68:25 69:8 80:16 102:11 102:15,17 125:2 135:9,12 138:10,13
analyze 63:5,8 63:16 80:18 130:15,18,23 131:21
analyzed 61:9
anemia 117:17
angeles 1:13 5:2,12 30:2
answer 7:16,17 9:5 12:24 13:7 20:8 21:5 22:5 22:14 25:3,17 26:10 29:7,13 29:18 32:14 35:6 37:3 39:22 40:14 45:23 46:6,14 51:17 52:4 54:11 58:6,20 59:16,21 61:13 63:3 64:19 68:4 69:4 74:8 78:2 92:1 102:20 112:22 114:16 115:12 121:5 128:9 132:4 133:25 137:6
answered 91:25 119:25

123:1
answers 7:25 147:6
antibiotics 75:7 81:25
antonucci 2:16
apologize 44:16 45:16 56:25 72:8 74:23 97:19
appear 8:13 10:10,18
appearances 2:1
appeared 9:14
appearing 71:17
appears 17:19 28:11 95:2 104:19
appendix 28:8 28:9
apply 59:21 61:13 69:4 126:7 127:7
applying 110:3 111:11 118:17
approach 49:21
appropriate 32:19 144:6
approximately 40:7
area 30:2 73:6
areas 122:4
artery 107:5
aside 16:13 76:2 99:17,19 119:2
asked 22:9 67:2 67:6 91:24 122:25 136:9 136:11
asking 20:11 21:1 25:14 35:13 43:21
asserted 42:12
asserting 49:20
assessed 130:8
assessing 49:22 132:10
assessment 22:17,18 42:24 43:7 58:2 70:9 79:2 95:21 96:17 97:15,16 103:18 104:6,7 104:8 105:1 112:20 134:17
assessments 22:23 104:17
assists 35:20
associate 30:2
associated 108:14,21
associations 116:13
assume 7:13
assumed 54:13
assuming 27:6 53:19,25
assumption 54:4,15 123:11
assumptions 53:25
attached 144:12 147:9
attachment 21:16
attention 8:16 49:13
attorney 3:4 6:8,16 8:7,18 8:20,21 9:4,7 10:7 11:22 12:2,23 13:3,6 13:10,15,21 14:2,4,13,20 15:18 16:3,18 16:20,23,25 17:7,10 18:25 19:11 20:7,15 21:1,3,4,9 22:4 22:8,13,21,24 23:4,24 24:3,6 24:14 25:1,6,9 25:12,14,17 26:1,10,15,18 26:23 27:8,13 27:20,25 28:3 28:5,6 29:6,9 29:12,15,17,20 29:22,24 32:12 32:22 34:7,9 35:4,12 36:3,7 36:11,13,17,21 37:2,9,12,15,21 37:24 38:9,11 38:12,19,24 39:5,7,8,13,20 39:24 40:3,5 40:11,18,22,23 41:1,6,12,16,20 41:25 42:1 43:2,11 44:12 44:22 45:13,16 45:18,22 46:10 48:4,10,14,19 49:7,12 50:4,8 50:10,14,23 51:5,7,15,24 52:3,8,13,17 53:6,13,17,21 54:3,9,16,24 55:2,12,16,20 56:1,4,6,9,11 56:16,22,24 57:3,4 58:4,10 58:19,24 59:14 59:20,24 60:3 60:7,8 61:5,12 61:15,20,25 62:3,13,16 63:2,9,12,17,20 63:24 64:2,8

64:17,22 65:22
66:1,5,7,22
67:1,4,9 68:3,8
68:22 69:3,6
69:10 70:11,13
70:24 72:6,8
72:10 73:18
74:1,6,16
75:17,21 76:7
76:9,11,13,18
76:20,22 77:3
77:25 78:4,15
80:17 81:8,12
82:4,13,20
83:13,15,16,22
84:3,7,13 85:4
85:6,11,14
86:11,17,20
87:3,9,11 89:4
89:6,10,12
90:3,11,14,20
91:24 92:5
95:1,5 96:5,8
96:10 98:9
99:1,12,14,15
99:18,20
100:11 101:21
101:22,24
102:7,19 103:1
105:12 108:3,7
108:11,16,18
108:23 110:11
110:12,20
111:25 112:11
112:21,24
113:15 114:15
115:3,11,23
117:3,9,13,19
119:5,8 120:12
120:18 121:4,8
121:12,15,19
122:1,8,13,25
123:8,12,17
124:10,24
125:9,11,13
127:8 128:1,7
129:3,8,12,16
129:18,20
130:20 131:1
131:17,23
132:3,14,17,19
133:5,10,16,24
134:7,13,19
135:2,16,23
136:2,6,12,16
136:23 137:5
137:11,15,19
138:1,11 141:7
144:15

attorneys 9:10 9:12,18,21 13:13 20:20 26:16,22,24,25 27:7

atypical 77:15

audio 112:3,3

auditing 38:4 119:23

auditor 34:11

audits 32:10

average 30:20 46:2

award 17:18 66:15

aware 13:23 123:21

b

b 28:8,9 97:23

back 13:16 50:22,24 62:17 67:10 82:21 87:2,4,5 90:23 99:16 110:19 110:22 112:10 120:23 129:25 130:5 136:13 136:22,24 139:6 140:6

bacteria 73:2,4 87:18

bad 125:12

bank 14:8

based 42:16 54:15 55:18 58:7 95:15 130:6 135:6,21

basis 125:5 134:18

bates 17:8,12 40:20 70:25 89:22 105:20 106:9,17 107:12 113:22

began 137:23

begins 95:15 97:5

behalf 2:3,9 35:24

believe 10:23 11:1,8 14:5,17 15:25 40:23 43:13 46:21 58:22 60:6 68:10 74:11,13 76:23 78:3 90:10 99:10 100:15 101:13 107:12 109:10 114:1,17 120:22 122:15 131:24 135:5

benefits 24:25 25:5,8,11 54:19 56:3,8 65:3 116:12

best 11:3,10 18:22 20:22 46:7,17 63:13 64:3 90:8 114:18,25 115:13 133:11 138:7

bethune 2:4

better 125:4

bill 46:16 50:6 99:24 100:6 114:24 115:1 127:13,18 139:21
billed 11:13 12:7 14:15 45:4 49:18,23 50:2 58:3 93:1 94:24 101:19 102:13,14,16 102:23 130:8 130:16 131:21 132:9,11 133:14 134:11
billing 17:19 42:24 46:24 49:6 52:1 57:12 62:21,25 63:7,15 67:21 91:6 92:10 94:18 109:21 111:5 118:10 119:10,21 125:7 126:5 127:5,11 132:1 135:10 138:17 140:12
bills 82:11,17 119:13 122:11 122:14,17,19 127:14 140:20
bit 130:1
bladder 19:18 20:2 43:22 72:11 88:17 131:9
bleed 140:16,22
blood 113:5
bottom 18:21 43:12 57:21 60:18 67:15 131:8
boulevard 1:12
break 7:15,18 50:12,15,25 86:19 87:5 110:10,22 136:25 137:1
breakdown 33:6
brief 110:21 112:17
briefly 6:14 7:2 97:10 137:20
broken 79:13 79:15
brown 2:22 5:7
bruce 103:3
building 84:21
bullet 16:1,3,5
bundled 82:18
butler 2:17

c

c 97:10
cagiano 19:21 57:11 59:10 60:15 61:3 66:16
cagiano's 65:19 66:12
calculate 56:2,7 102:1
calculated 96:2 120:8
calculation 66:14,21 85:10
calculations 22:1,11,17,18
california 1:13 1:16 5:2,12,24 142:5 143:4
call 51:9 72:1 73:4 88:8,12 88:18 123:24 127:6
called 6:4 12:14 75:1
camp 1:5 5:13 22:20 53:4,9 65:5,14,20,24 66:12,17 116:14,21 117:12
cancer 19:18 20:2,2 43:22 44:7 64:25 65:4,12,19 72:12 131:9 140:18,19,21
capacity 55:7
captured 49:6
carcinoma 19:19
cardiac 88:23
care 4:12,14 23:1 30:3 45:8 47:9 49:19 50:3 71:25 75:5 84:22 105:17 113:19 114:22
career 43:23 44:3 47:3
carefully 144:4
caremore 119:18
carolina 1:2 5:16
carroll 83:1
carter 103:21 105:18 109:9
case 8:12 9:16 10:2 12:16,22 13:13 14:6 15:6 17:2 24:10 26:21 33:20 58:18 73:7,21 74:12 79:17 88:3,10 88:13 93:3 97:24 105:6 113:1 115:22

117:25 123:3 126:6,7 127:9 136:5 142:17
cases 1:8 19:19 23:10,11,16,18 23:19 24:9,10 24:16 32:15 44:19,21 74:9 79:7,17 80:7 122:18 124:15 126:24
cat 88:15
catch 126:16
category 17:15 139:11
cause 88:10 108:9
caused 65:13 73:11 116:21
causes 124:16
caveat 25:13
cbc 114:3
cchc 4:12
ccn 85:17,23 86:9 118:15 139:12
ccr 1:17,17 143:4,4
ceiling 18:3,19 18:23
cell 19:18 106:14 107:24 108:17,19,25
center 4:3,7 96:19
certain 69:17 125:24
certainly 80:23 81:17
certificate 142:1
certified 1:16 5:22,24 34:10 34:15,22,24 53:15 142:3
certify 142:6 147:3
chance 95:14 97:11 104:3,23 112:16
change 18:13 115:18 145:4
changed 19:10
changes 144:11 147:8
characterized 106:4
charge 82:11 82:18 96:18 97:24 115:2 127:11,11,15 138:20
charged 133:3
chargemaster 45:7
charges 4:9 42:11 43:8 45:4 49:18,23 50:2,6 57:16 59:11 61:4 62:21 63:1,19 69:17 70:18 78:6 81:9 83:19 92:13,20 93:1,14,25 95:22 96:20 97:1 98:13 99:5,10 114:13 114:20 130:9 131:15 140:2
chart 119:23
chase 4:14
check 56:24 91:21
chemotherapy 107:8 108:2,4 108:6
chest 77:9,10 77:15,16 81:5 87:22 88:20 127:20
chole 71:21,23 71:24
chronic 79:24 113:6 114:3,14 115:4,16
circle 87:5
circumstance 72:22
circumstances 23:22 24:2,5 72:23 109:4
cited 100:16,17
city 2:6
civil 3:12
claimants 43:8
claimed 42:7 42:16,21 43:17 52:10 54:19 58:13 62:20 69:18 83:6,7 91:7,8 92:15 100:25 103:7,8 109:23,24 111:7,8 116:10 118:11,12 140:3
claims 43:1 49:22 55:4 119:4,20,21 120:5 122:7,10 138:24
clarification 53:15
clarify 21:2 35:13
classically 108:13
classify 82:7
clear 33:22
clinic 46:25
clinical 30:25 31:20 32:4,6,8 33:12 34:4 42:15 43:15

clinician 32:20 32:21 33:13
clj 17:8,12 89:22
clr 1:18 143:4
cms 60:20 119:10,12 120:2 122:21 123:2,21
coastal 4:12
code 37:7 135:10
coder 34:16,18
codes 36:20,20 36:22,23,23 37:5 138:17 140:8,10
coding 32:8 35:3,8,10,10,15 35:18,20,22,23 36:2,9,10,16 37:17 38:1,4 125:7 126:5 127:5 140:11 140:12
cold 126:16
collect 46:16,22
colonization 73:4,14
column 17:18 85:15
come 32:24 99:16 119:15 136:13
comes 106:3 128:23
cometto 109:17 109:20 110:25 111:4
coming 50:11 134:25
commencing 1:13
commerce.ai 31:20,24 32:23
commercial 3:17,17
common 72:11 72:15
communicati... 20:10,14 25:15 25:19 26:13 27:10
companies 32:3 47:13
company 31:25 47:10,19 119:19
compared 48:18
compensated 14:12
compensation 14:21 15:24
complete 28:24
completed 28:20 136:10
completeness 59:8 68:6 86:1 91:20 101:13 118:24
complex 47:17 48:22 107:5
compliance 34:25
complicated 45:25
comprehensive 114:4
concern 113:8
concerns 115:17
concluded 141:24
concludes 141:21
conclusion 104:18 125:8 125:16,17
conclusions 104:16 111:16
condition 55:23 80:20,25 81:2 100:10 124:7 124:13
conditions 42:16 43:16 53:5 54:2,7 59:12 66:10 69:18 80:3,23 92:15 116:10 124:21 127:2
conduct 125:20
conduit 72:17 72:20 73:1,11 73:17,21 74:3 74:5,11,13 77:24 87:17 88:4
conduits 72:14
confidentiality 24:11
confirm 139:7
confirmed 57:14 67:22 92:10 93:12,19 93:24 94:5
connard 96:12
connection 66:11,16
connections 12:21 13:5,9
consider 73:8 84:19
considered 3:20,22 39:3 40:9 41:15 89:16 109:6 115:20 120:17 120:23 124:8
consistency 49:23
constituted 81:22

constituting 66:15
consult 89:2,7 129:6,21
consultation 17:20
consulted 80:7
contacted 12:11,13
contain 99:25 136:4
contained 9:14 90:12 134:2 135:14
contents 25:14 90:8 137:18
context 32:9 128:5
contingent 47:20
continuation 106:11 107:19
continued 4:1
continuing 92:6
contract 3:16 18:2 21:21 47:8
contractor 21:20,21
contracts 9:15 12:14 17:1
contradiction 97:3
conversations 20:22
copayments 48:24
copies 28:1 38:14,15 141:12,14
copy 8:19 19:20 39:6 56:23 76:21,23 142:15
coronary 107:5
correct 10:13 10:18 12:5 15:2 17:22 18:5,16 20:4 21:22,23 28:19 28:23 31:4,23 33:14 34:6 36:10 44:23 45:11 47:12 49:3,25 53:20 54:1,6,14 58:16,23 59:7 59:8 62:24 65:8,16,18 66:3,19 68:10 68:18 69:7 72:5,9 75:23 77:13,19 78:9 79:5 83:12 85:21 86:2 88:4 91:16,21 92:17,22 93:4 93:5,20 94:6 94:21 95:17 100:15 101:9 101:11,14,16 103:16,19 104:10 106:7 107:10 109:12 110:5,8 111:14 114:7 115:10 116:17,23,24 118:19,25,25 120:2,3,21 121:22 123:16 125:3,19 127:13 130:9 130:24 131:16 132:18 135:1 137:4,16 142:19 147:5
correctional 31:7,8,12
corrections 144:4,7 147:8
correctly 22:7 49:24 62:23 72:4 77:12 87:23,24 96:2 101:8 107:9 110:4 114:6 118:18
cost 45:8 48:21 49:19 50:2 85:1
costs 49:5 59:13 83:8,9 83:17 84:5,9 84:16,18,19,19 84:20,25 85:8 85:18 91:10,11 91:14,23 92:4 101:2,3,6,7 103:10,11,13 110:1,1,3 111:9,10,12 118:14,15,17
counsel 5:18 8:19 27:25 39:6 56:23 76:21 96:7 141:14
count 10:15 40:15 41:8
couple 7:1 50:25 136:25 141:10,13
course 19:7 71:13 73:22
court 1:1 5:15 5:19 7:5,23,24 144:19
cover 20:6
covered 48:25
covers 62:9
cpt 36:19
criswell 19:21 67:14,20 68:21

criteria 125:25 126:3
cromwell 2:17 27:12
crr 143:4
csr 1:16,18 5:25 143:4,5
ct 88:15
culture 72:1 75:6,8
cultures 73:12
current 18:13 28:12 30:1 33:5 35:21,25
currently 24:10
cv 1:7 28:12,15 30:1 31:19
cystectomies 72:13

d

d 3:1
damage 22:17 42:24 43:6
damages 42:8 42:12,22 49:20 50:3 51:4,9,12 52:11,15 58:13 83:5,8 91:7,9 101:1 103:7,9 109:22,25 111:6,9 118:11 118:13 132:10 133:21 139:24
darnell 2:22 5:7
data 37:8 49:6 61:8 63:7,11 63:15,16,23,25 90:9,13 92:25 96:16 98:2 119:4,7,13 120:11,15,20 121:10,17 122:6 123:10 123:16,19,20 132:7,9,13 133:1 135:10 137:3,8,13,23 138:4,24,24 139:4,10 141:4
database 120:5
dataset 122:20 132:15,23
datasets 122:11 133:13 139:10
date 5:9 10:22 21:2,8 73:16 75:15 77:23 78:6,7 96:19 97:17,21 105:23 106:23 107:1,16 114:9 114:20 144:9 147:12
dated 3:13,14 3:15,17,19,25 4:3,5,7,9,11,12 4:14
dates 69:19 129:7,22
david 2:10 93:8 93:22
david.r.ortiz 2:11
davis 2:4 109:17,20 110:24 111:4
day 128:12,12 142:23
days 144:15
dbjlaw.net.com 2:5
dc 2:13
december 3:21 10:17 77:1,2 105:25 107:2 107:17
decision 71:14
declare 142:20
deductible 48:24
deemed 144:18
defendant 2:9
defendants 23:18,20 24:18 24:21
defense 57:14 67:23 92:11 93:13,24
define 119:6
definitely 132:8
delivered 45:9
denote 3:9
department 2:10 10:12,21 22:10 31:1 71:7,18 123:25 124:6
depend 46:4,25 72:24 109:3
depending 73:11
depends 72:21
deponent 5:17 147:1
deposed 6:21 6:24
deposing 144:14
deposition 1:11 3:7,12 4:1 5:11 8:14 17:20 20:17 25:16 26:6 38:13 120:24 135:22 141:11,21,23 142:7,19 144:3 144:12,16,17
derive 92:3 132:16
derived 45:6 91:23
describe 120:9

description 3:11 4:2 100:7
despite 83:5 91:6 103:7 109:22 111:6 118:10
detailed 84:17 90:16 133:6
details 18:12 19:3 115:6
determination 54:6 66:4 125:1
determinations 32:7 69:22 137:25 138:6
determine 42:25 43:7 52:2,15 100:1 125:21 126:1 128:24 137:24
determined 47:8 127:22
determining 79:7 85:9 127:10 128:4
diabetes 79:12 79:15 116:8,12 116:19 117:16 117:24,25
diabetic 116:9 116:12,20
diagnoses 77:6 77:15
diagnosis 140:21
difference 84:15
different 44:17 49:10 76:1 82:19 115:2
differential 114:4
difficult 33:21 44:2
direct 8:16 19:8 69:12 83:8,9 84:15,18,25 85:8,18,19 91:10,10,12,13 91:23 101:2,3 101:6,6 103:10 103:11,13,25 106:8 109:25 110:1,3,23 111:9,10,12 115:25 118:14 118:14,17 131:2
directly 84:22 123:20 126:25
director 30:2 119:18
disability 54:23 55:4,10,18 66:15 117:7
disagree 69:21 70:14 79:2,4 87:25 88:2 97:16,18 101:19 104:9 104:18 105:3 112:25 117:21 134:12,18
disagreed 140:4
disagreement 133:19
disagreements 134:4,22,23
discharge 76:25 77:14
discovered 141:1
discussed 20:19 51:2 52:9 85:16 114:11 124:14 135:25 137:1
discussing 123:23 126:5 129:5
disease 44:15 61:11 70:19 79:8,9 83:21 84:2,12 86:7 104:20 105:4 107:6 113:6 114:3,14 115:5 115:16
diseases 23:2 51:23 52:16 53:12 59:19 60:2 61:19 79:24,25 86:15 113:9 115:21
dispute 12:7 13:20 17:2 32:17 40:10,17 58:8 94:23 95:3 96:24 116:25 123:24
disputed 57:15 67:24 68:16 69:21 93:14,25 94:17 96:16 114:11
disputing 68:19 100:13 131:14
distortion 112:3
district 1:1,2 5:15,16
division 1:3,21
divulging 20:21
doctor 29:3 38:20 40:19 44:18 45:19 71:24 75:5 76:3,4 79:23 89:15 90:22 98:5 113:11
doctors 129:10 129:16
document 1:7 3:10 8:8 9:22

10:8 15:19,22 16:19,22 17:1 18:7 27:21 37:6 38:17,25 39:2,14 41:19 56:17 71:3 76:6,19 78:16 89:18 90:1,5 98:10 99:2,23 100:5 105:13 105:16,24 113:16 114:22 137:18
documentation 32:18 71:6 75:5 138:20
documents 8:12 9:3,9,13 9:23 10:1 11:17 12:4 14:1 32:7 40:1 40:8,16
doing 33:17 144:8
doj 12:9,15,17 15:24,25 26:14 26:16,19,25 27:7 120:15 123:20
dollars 67:24 84:1 91:5 93:15 94:1 109:21 111:5 118:9
double 91:21
downs 19:23 93:22 94:5
dr 3:20,22 5:17 6:9 13:1,4 15:20 17:11 23:7 25:13 34:10 40:6 41:21 50:24 51:8,11 52:18 56:12 57:5 69:16,22 70:20 72:11 74:24,25 78:19 79:2,5 87:4,9,13,25 88:3 94:19 96:15,17 99:20 108:1 110:21 112:12 115:24 119:1 123:22 133:17 136:24 141:5,8,19
draft 67:4
drugs 99:6,25 100:2,8
due 117:16,18 124:16
duly 142:10
dyer 19:22 71:1 72:16 74:10 75:15 78:20 79:6,6,18 81:1 82:9 87:18,22 123:23 124:5 129:5
dyer's 74:17 77:22 89:1

e

e 3:1 145:1,1,1
earlier 14:3 41:13 51:2 123:22 131:24 132:6 137:23
easier 7:22
eastern 1:2 5:15
ed 71:13
effect 112:3
eight 10:15 19:5
either 32:25 49:21 140:4
emergency 71:7,18 123:25 124:6,15,18
employment 30:1 31:19 33:5
encounter 47:14 105:23 106:23 107:15 115:5 119:13 119:24
endocrinology 29:16
entails 84:23
enter 36:10
entered 14:8 37:7
entering 87:19
entire 20:17 73:13 124:8 127:21 140:24
entirety 52:6 72:22 73:23
entity 46:23
entry 37:8 96:16
er 71:8 73:22 74:15 75:9,20 75:22,24,25 124:22 127:24 128:18
errata 144:6,9 144:11,14 147:9
error 36:1,15 36:24 37:1 95:25 96:17 140:13
essentially 62:12
estimate 11:25 13:23 14:7,19 31:16 33:9 43:24 44:2
evaluate 75:13 102:22 137:2 138:5

evaluated 54:22 69:5
evaluating 55:4
evidence 117:24
exact 3:10 14:14 21:8 26:7 40:16 41:9 46:9 51:19 82:1
exactly 16:10 132:6
examination 3:2 6:7 142:13
examined 6:5
examiner 34:22
example 82:17 117:15 126:4 140:14,15
exceed 18:18
excel 90:10 132:25 133:14 137:9
except 147:7
exhibit 8:4,5 10:4,5 13:16 15:15,16 16:15 16:16 21:11 27:17,18 38:10 38:15,21,22 39:10,11,16,16 40:1,2,13,19 41:23,24,25 42:2 45:2 49:15 52:19 54:17 56:13,14 60:5 70:17,21 70:22 74:23,23 76:5,8,15 78:12,13 87:6 87:8 89:16 90:23 93:7 94:7 95:7 97:22 98:6,7 98:23,24 100:16,21 103:3,21 104:13 105:9 105:10 107:13 109:16 110:24 112:13 113:12 113:13 115:25 118:2 130:1 131:3
exhibits 3:7,8 4:1 141:10,13 141:15
expense 42:8 42:21 52:10
expenses 57:12 57:13 62:9,20 67:21,22,22 68:15,20 91:6 92:10 93:2,12 93:19,23 94:18 94:24 102:24 109:22 111:5 118:10 130:11 130:13,15
experience 23:9 43:15 47:23,25 48:11 87:21
experiencing 74:20
expert 3:19,24 21:25 22:22 23:8 24:17,22 25:7 27:24 32:20,20 33:18 34:13,14 42:13 49:16 57:15 58:1 67:23 90:24 92:11 93:13,24 100:14
expertise 22:25
experts 12:21 13:5 25:22 53:19 54:6 92:13 121:1
explain 88:22
exposure 21:25 22:10,23
exposures 53:10 65:6,14 65:21,24 66:13 66:17 116:15 116:22 117:12
extent 20:8 25:18 26:11
extra 56:23 76:23 136:4
extracted 37:5
extractions 137:24

f

facilities 32:11
facility 31:7,9 31:12 32:25
fact 10:24 91:19 92:20 93:18 94:4 103:17 110:6 138:12
facts 104:10
fail 144:17
fair 7:19 42:20 51:25 130:19
familiar 37:10 37:14,19,22 71:2 119:20
fancher 19:22 93:8
far 14:6,10 123:21 136:11 141:4
fax 1:21
february 1:14 5:1,9 113:2 142:24
federal 142:17
feel 59:2 99:9 120:23 126:16
fees 15:8

fellowships 28:25
fever 87:22 106:5
fevers 88:10
field 22:1,11,19
figure 134:12
filed 43:8
filtering 121:23
final 100:24 131:15
financial 52:25
find 135:11 140:23
findings 101:11 117:1,6,8,11
fine 20:11 28:5 76:14 136:16
finished 70:3
first 12:11,13 38:20 45:3 52:22 57:9 67:18 73:8 77:4 87:15 89:21 100:24 104:11 107:13 109:19 111:3 118:8 138:24 139:2
five 33:4
fixed 84:20
flank 77:15,16 81:5 88:11,21
flip 105:15
flipping 59:1
folks 112:1
follow 51:1
following 68:11 83:7 85:15 91:9 94:23 101:1 103:9 109:24 111:8 118:13
follows 6:5 96:2
footnote 64:24 66:8 116:7 117:1
foregoing 142:7 147:4
forgive 120:1
form 9:4 11:22 12:23 13:21 18:25 23:24 24:6 25:1 32:12 34:8 35:4 36:3 39:21 40:12 41:6 43:2 48:14 53:21 54:9 55:12 58:4 59:14 61:5 64:17 70:11 74:7 78:1 83:22 86:11 95:1 108:3,11 112:21 114:15 115:11 117:3 120:12 121:4 123:12 124:10 125:9 127:8 128:7 132:3,17 132:20 133:24 134:13 135:3 136:6 147:8
forming 39:18
forms 42:13,24 43:7
forth 142:9
found 83:20 85:24 91:19 117:24 140:19
foundation 14:3 19:1 23:25 24:7 25:2 32:13 35:5 36:4 40:12,13 41:7 43:3 48:15 51:16 53:22 54:10 55:13 58:5 59:15 61:6 63:21 64:18 68:23 70:12 83:23 85:5,12 117:4 120:13 123:13 128:8 130:21 134:14 135:3 136:7
four 11:8 30:12 33:3 38:14,15 141:12
frank 91:4,4
fraud 34:22
free 59:2 99:9 120:23
frequent 79:18
frequently 79:19 119:13
front 11:12 13:17 21:11 114:25 135:7
full 6:12 42:10 45:3 49:14 83:14
fully 46:7
funding 17:25 18:3,12,19,23 19:9
further 58:13 94:16 142:20
future 56:7

g

g 17:12
g19 17:8
gallbladder 127:20
gallstones 71:20
gastroenterol... 113:3 114:21 115:6,14

gastrointestinal 113:4,10 140:16
general 26:19 37:17 74:25 75:2,12
generally 43:22 109:6 128:11
generate 120:19
generic 100:7
gentleman 106:2
getting 128:3
gi 140:22
giovanni 2:16
give 11:20 33:6 99:12 134:16
given 63:4 114:8 122:6 132:15 147:6
giving 67:7
gleesing 97:6 99:8 101:25 122:16
go 7:1 9:13 10:14 17:23 59:1 65:9 72:2 75:9 79:20 81:1 90:25 106:16 116:18 124:18 126:19 126:21 127:2 136:15 139:1
goes 136:9
going 7:12 8:3 10:3 15:14 20:7,17 27:16 50:12,18 56:12 76:4 78:11 86:18,22 90:4 90:14,15 93:21 97:19 98:17,22 99:15 105:8 110:15 112:6 113:11,12 130:5 133:6 135:18 136:18 140:6 141:22
golkow 1:21 2:22 5:8
good 5:5 6:9,10 50:11
government 24:24 25:4 51:12,21 52:23 58:12 62:7,8 62:21 63:5 83:7 86:6 91:8 100:25 103:8 109:24 111:7 118:12 120:11 121:11 137:13
government's 52:25 120:25
graduated 28:17
ground 7:2
group 6:17 13:2
guess 33:4 127:5
guideline 125:8
guidelines 125:14,24 126:1,4
guys 86:19

h

h 145:1
hacket 3:24
hackett 42:14 42:23 43:6 49:16 56:21 57:6,10 58:2 67:11,19 69:11 70:8 82:22 90:25 92:8 95:21 96:25 97:15 100:18 100:21 104:6 104:16 105:1 112:20 113:7 131:4 133:19 134:10,25 137:21 139:22 140:3
half 11:20
halfway 18:11 113:25
hand 8:3 10:3 15:14 16:14 18:11 38:19 39:9 56:12 76:4 78:11 98:23 105:8 113:11
handed 98:15
handing 27:16 70:20 98:5
hanover 4:3,6
happened 75:25 79:12 124:19
happens 46:5 87:20
hard 19:23 43:24
hasan 13:1,4
hcc 114:3
head 7:25 11:25 14:19 16:8 82:16 100:4 122:16
heading 82:25 91:3
headline 93:7
healing 30:3
health 24:24 31:2 34:19
healthcare 4:10 32:11 34:24 99:24

held 5:12
helpful 19:19
hematology 29:21
higher 45:8,15 87:18 88:5 109:1
hill 103:3
hills 30:14,19
history 106:1 106:21 107:3,4 107:5,7
hodgkin's 44:5 108:9,12,20,25 117:17 118:1
home 30:7
hope 74:24,25
hospice 30:3,7
hospital 30:14 30:17,19 32:16 45:6 46:24 47:7 74:18,20 79:13,20,22 80:1,2,13,14,22 81:2,6,16,19 82:10 102:4,6 126:10,15,19 127:3,17 128:16,25 129:2,10
hospitalist 30:14 33:13
hospitalization 77:1 79:9,11 79:14 80:5,8 80:22 88:25 125:22 126:8 126:24 127:16 127:21,22
hospitalizatio... 80:10,19 126:6
hospitalized 125:25 126:3 126:20 127:24
hour 11:20 27:15 50:13 86:18
hourly 17:19
hours 11:8,13 11:19,19 12:1 12:7
howard 19:23 92:7
huh 102:10
human 36:1,15 36:24,25 140:13
hundred 14:9
hundreds 43:25 44:4,6,9

i

icd 36:20,22,23 36:23 37:5,7 135:10 138:3 140:7,10
identification 8:6 10:6 15:17 16:17 27:19 38:23 39:12 56:15 70:23 76:16 78:14 98:8,25 105:11 113:14
identified 59:23 60:1 61:14,17 66:10 67:20 86:14 94:18 98:3 107:23,24 113:10 134:20
identify 80:3 84:5,9 86:9
ignore 80:23 81:17
ileal 72:14,17 72:20 73:1,11 73:17,21 74:3 74:5,11,13 77:24 87:17 88:4
illinois 1:18 142:5 143:5
illness 54:8 78:8 106:2,21 107:4 115:8 126:2
illnesses 44:11
immune 108:2 108:5
immunosupp... 108:10,15,22
impact 36:2
imperative 144:13
inaccuracies 140:13
inaccuracy 140:25
inappropriate 81:20
include 23:13 84:20 128:15
included 25:22 66:14,21,24 67:3
includes 23:1
including 26:22 87:22 88:23 116:10
incorrect 36:16 37:8 65:18 66:3 123:5
incorrectly 37:18
increase 109:7
increased 19:6 20:6,24
incurred 53:3 57:12 59:10 61:3 81:9 83:19
independent 31:19 32:4 33:11 34:4

independently 119:22
index 40:20
indicate 60:1
indicates 59:17 61:7
indirect 83:8 84:15,19,25 85:8,19 91:9 91:13,23 101:2 101:7 103:10 109:25 111:9 118:13
individual 86:15 127:18
infection 72:3 73:3,10 75:3 75:10 77:10 79:21 81:18 88:9,16,16 105:7 106:4 124:20 126:12 126:22 127:1 127:19 128:20
infections 79:19 88:6,6 88:19 109:1,7
information 24:13 34:20 64:11,13,21 100:1,19 132:2
initial 45:5 140:20,20
insofact 34:13
instance 88:3
institutional 60:20,21 61:1 61:1
instruction 21:6 26:18
instructions 144:1
insubstantial 82:8
insurance 45:21 47:10,13 47:19 48:13,23 49:1,11 62:8 62:10,11
interest 142:21
intermission 112:18
internal 28:21 79:23
invoice 3:14 11:6 15:8
invoices 9:15 10:11,15,20 11:11 13:17,18 14:12 18:18
involved 12:12 12:22
isolated 88:17
issue 98:2 138:14,16,21
issues 134:24

j

jacqueline 94:8
january 3:23 11:4,9 107:6 113:20 114:23
jefferson 67:15
jenna 2:17
ji 1:11 3:3,15 3:19,21,22 5:17 6:3,9,13 15:20 17:11 21:22 23:7 25:13 34:10 40:6 41:21 50:24 51:8,11 52:18 56:12 57:5,15 67:23 69:16,22 70:20 72:11 87:4 92:11 93:13,24 94:19 96:15 99:20 108:1 110:21 112:12 115:24 119:1 123:22 133:17 136:24 141:5,8 141:19 147:3 147:12
ji's 96:17
jimmy 83:1
job 13:1
jobs 119:17 128:12
joey 2:19
jones 2:4
joseph 27:11 97:6
jt 2:4 6:15 50:10 133:5
jtmalone 2:5
june 71:8
justice 2:10 10:12,22 22:10

k

kansas 2:6
karen 4:9 95:9 98:13
keep 7:24 14:14
keller 111:19 113:23 116:5
keller's 114:14
kidd 118:5,9,22
kidney 20:2 44:7 113:6,8 114:3,14 115:4 115:16
kidneys 87:20 88:9,16 115:19
kind 8:1 66:14 128:2 131:10
know 7:8,16 15:10 19:2 21:12 28:15 46:2 50:10 56:25 57:23 60:10 61:23

67:12 70:2 79:1 82:22 89:19 95:14 97:11 98:15 99:21 104:2,23 105:21 106:18 110:9 112:15 130:2 133:17 134:21
knowledge 11:3,10 17:4 18:23 19:9 46:8,17 61:21 62:1,14 63:14 66:23 72:16 84:18,23 92:3 122:19 133:12
konstantopou... 2:11

l

l 2:12
l.a. 31:1
lab 73:12
labeled 134:4
labor 17:14
laid 99:11
lamacchia 2:18
laramore 19:21 83:1,19 85:24
laramore's 85:2
large 38:17 133:20
lawyer's 148:1
leadership 6:17
leads 125:8
leaving 57:15 67:24 93:13,25
led 127:2
lee 103:22
left 18:11 105:24 112:12
leg 79:13,16
legal 33:17,20 33:25 34:1
lejeune 1:5 5:13 22:20 53:4,9 65:6,14 65:21,25 66:12 66:17 116:14 116:22 117:12
leslie 2:18
letter 3:15 4:5 78:19,21 87:10 87:12
leukemia 44:1 95:8
level 126:2
license 5:25
licensed 142:4
likely 43:25 44:3,6,9
line 42:15,15 60:18 119:14 119:16 135:12 135:12 139:1,1 139:4,5 145:4 148:2
lisa 1:15 5:20 5:23 143:3
list 19:17 25:24 39:4 40:9 41:19 89:16 98:13 99:5 106:12
listed 40:1 106:13,14 114:9 115:5 120:16
listening 112:2
listing 16:2
lists 41:15
litigation 1:5 5:14 6:18 12:12,18 16:7 18:24 23:8,13 23:14,15,22 128:6 141:12
little 33:24,24 35:17 130:1
live 73:5
llc 2:4
localized 88:19
lodge 141:16
long 7:16 27:14 107:7
longo 4:5 78:19 87:13 88:3
longo's 79:2,5 87:9,25
look 17:17 18:10 58:11
looking 101:15 134:15 135:18
looks 11:12 16:11 17:9,22 18:5,16
los 1:13 5:2,12 30:2
lot 120:7 133:18 135:17
low 77:16
lower 48:12 77:10 82:12
lunch 110:13 110:21
lymphoma 44:5 106:15 107:7 107:25 108:9 108:13,17,19 108:20,25 109:1,3,5 116:11,13 117:17 118:1

m

m.d. 1:11 3:3 3:15,19 4:5 6:3 93:25 147:3,12
made 69:22 142:12,18 144:7
magnesium 114:5

main 2:5 47:20
maintained 120:5
major 73:19 74:2
majority 88:24 140:17
make 9:2 32:7 53:24 76:11,13 144:4
makes 7:22 58:8
making 71:14 127:14
malone 2:4 3:4 6:8,16 8:7,18 8:21 9:7 10:7 12:2 13:3,10 13:15 14:4,20 15:18 16:18,23 17:10 19:11 20:15 21:3,9 22:8,21 23:4 24:3,14 25:6 25:12 26:1,15 26:23 27:13,20 28:3,6 29:9,15 29:20,24 32:22 34:9 35:12 36:7,13,21 37:9,15,24 38:11,19,24 39:7,8,13,24 40:5,18,23 41:1,12,20 42:1 43:11 44:22 45:16,18 46:10 48:10,19 49:12 50:8,14 50:23 51:7,24 52:8,17 53:13 53:17 54:3,16 55:2,16 56:1,6 56:11,16,24 57:4 58:10,24 59:20 60:3,8 61:12,20 62:3 62:16 63:9,17 63:24 64:8,22 66:1,7 67:1,9 68:8 69:3,10 70:13,24 72:8 72:10 74:1,16 75:21 76:9,13 76:18,22 77:3 78:4,15 81:8 82:4,20 83:15 83:16 84:3,13 85:6,14 86:17 87:3,11 89:6 89:12 90:11,20 92:5 95:5 96:10 98:9 99:1,14,18 100:11 101:22 102:7 103:1 105:12 108:7 108:16,23 110:12,20 112:11,24 113:15 115:3 115:23 117:9 117:19 119:8 120:18 121:8 121:15 122:1 122:13 123:8 123:17 124:24 125:11,13 128:1 129:3,12 129:18,20 131:1,23 132:14,19 133:10,16 134:7,19 135:16 136:2 136:12,23 137:11,19 138:11
malpractice 24:9,16
manage 115:19
managed 80:9 126:13
management 115:18
managing 128:14,17
manner 3:9 23:1
mantle 106:14 107:24 108:17 108:19,25
manually 36:9
marjorie 3:24 42:14 49:16 56:21 57:6,10 58:1 67:11,19 69:11 82:22 90:25 100:17
mark 8:4 10:4 15:15 16:15 27:17 38:21 39:10 57:10 70:21 76:5 98:6,23 105:9 113:12
marked 8:5 10:5 15:16 16:16 27:18 38:22 39:11 56:13,14 70:22 76:15 78:13 98:7,24 105:10 113:13
marking 78:12
maryland 96:19
material 98:1
materials 3:20 3:22 25:22,23 25:23 39:3,17 40:9 41:15 89:16 120:17 120:22
math 11:15,24

matter 5:13 69:2
matters 35:11
md 57:15 67:23 92:11 93:13
mean 37:16,25 44:17 52:6 121:21,21,23
meaningfully 115:18
means 38:1 114:2
medical 4:3,6,8 4:10,12,14 13:2 23:1,2 24:9,15 28:18 30:2 32:18 34:11,13,14 37:6 40:21 42:8,17,21,24 49:19 50:3 52:1,10,24 57:12 62:9,19 67:21 68:13,15 68:20 71:6,14 72:21,23 77:21 80:3,20 82:11 83:5 88:14 89:2,9 91:6 92:9 93:1 94:18,24 96:19 102:23 103:7 109:21,22 111:5,6 114:9 118:10,11 119:17 127:6 127:11,15 130:11,12,14 131:11 132:10 133:21 138:20 138:25 139:2,6 139:13,24 141:3
medically 65:1 65:13 116:9,21
medicare 47:21 48:11,17 58:14 59:12,18,22,25 101:3 103:12 119:4,7,13,19 119:20,20,24 120:5,25 122:7 122:9 137:3 139:11
medication 126:17
medications 126:18
medicine 28:21 44:17 79:23
meet 125:24
meetings 26:2,5 26:8,9 27:14
melanie 2:11
melanie.kons... 2:12
mellitus 117:16
memory 19:20 19:24
mention 113:8 115:15
mentioned 14:23 58:25 127:4
met 6:14 26:17
metabolic 114:4
methodologi... 138:15
methodology 42:7,21 43:4 52:10 54:18 55:22 130:2 134:25 137:21 138:4,23 140:1
michael 2:17 27:12 67:20
middle 17:18 77:4 87:16
mild 71:19
milliman 126:4
minute 86:19
minutes 136:13
miscoding 37:11
mispronounc... 71:22
missouri 2:6
misstates 41:17
moment 57:20 83:18 140:6
monday 1:14 5:1
money 46:4,19 46:22
months 33:24
morning 5:5 6:9,10
moskowitz 1:15 5:20,23 143:3
mousser 91:4,5
move 135:3

n

n 3:1
name 5:6,23 6:12,15 142:23
names 19:16,17 27:3,5,7,9
ncra 1:19
near 67:15
necessarily 3:9
necessary 144:4
necessitating 75:12
need 32:19 78:25 85:25 91:17 92:18 98:20 118:23 126:2,14,17,19 126:20 128:15 129:1 135:21

needed 128:24
negotiate 48:12
negotiated 45:5 45:19 46:13 47:8,24 48:1,9
negotiating 48:2
negotiation 46:5 48:8
negotiations 48:6
nephrologist 29:11
nephropathy 116:9,13,20
neuropathy 65:1,5,13,20 116:20
nevada 1:17 142:5 143:4
never 20:17 46:15 88:20 120:1
new 4:3,6
nine 19:4,12 20:1
nods 7:25
non 44:5 45:5 45:19 46:13 60:21 61:1 108:9,12,20,25 117:17 118:1 121:1
north 1:2 5:16
note 3:8 38:13 38:18 62:19
noted 5:18 144:11 147:9
notes 114:2 136:15 142:16 148:1
notice 8:14
noting 66:10
number 3:11 4:2 5:25 8:5 10:5 15:16 16:16 21:16 26:7 27:18 38:22 39:11 40:16 41:9 43:22 56:14 58:23 59:9 67:14 70:22,25 76:15 78:13 82:25 87:6 89:22 91:3 93:7 95:8 98:3 98:7,24 105:10 105:20 106:9 106:12,14,17 107:12,18,22 109:17 113:13 114:2 115:25 118:4,5 137:10
numbered 17:12 113:22
numbers 13:25 16:9 59:7 61:2 134:6,16 135:1 135:13,14
nw 2:12

o

oath 7:4
object 9:4 11:22 12:23 13:21,24 14:2 18:25 20:8 35:4 41:10 58:4 85:11 86:11 90:15 95:1 108:3,11 112:21 114:15 115:11 120:12 121:4 124:10 125:9 127:8 128:7 132:3,17 133:24
objection 13:6 14:13 16:20 22:4,13,24 23:24 24:6 25:1 29:6,12 29:17,22 32:12 34:7 36:3,11 36:17 37:2,12 37:21 39:20 40:3,11,12 41:6,16 43:2 44:12 45:22 48:4,14 49:7 50:4 51:5,15 52:3,13 53:6 53:21 54:9,24 55:12,20 56:4 56:9 58:19 59:14,24 61:5 61:15,25 62:13 63:2,12,20 64:2,17 65:22 66:5,22 67:4 68:3,22 69:6 70:11 73:18 74:6 75:17 77:25 80:17 81:12 82:13 83:22 84:7 85:4 89:4,10 90:3 91:24 96:5 101:21,24 102:19 108:18 117:3,13 119:5 121:12,19 122:8,25 123:12 129:8 130:20 131:17 133:5 134:13 135:2,23 136:6 137:5,15 138:1 141:16
objections 25:9 142:12
october 10:16

offering 50:1 51:8,11,18 65:10,11 85:7 116:19 136:5
offers 131:10
office 113:2 114:23
offset 51:4,9,13 51:14,20 58:13 66:14,21 83:7 84:8,9 85:9,18 91:9,12 101:1 101:5,18 103:9 103:13 109:25 110:2 111:8,11 118:13,16 138:23
offsets 52:23 59:22,25 60:19 61:2,14,17 62:21 86:9 102:16,22 120:8,10 130:19,24 131:11 132:13 139:3,11,19
oftentimes 45:7 45:14
oh 18:21 117:14
okay 7:9,13 8:2 8:13 9:20 10:3 10:10,14,20 11:1,11 12:3,6 12:11 14:5,11 14:25 15:3,7 15:10,14,22 16:1 17:6,17 17:23 18:6,22 19:16,25 20:5 21:4,10,15,20 21:24 22:22 23:5,16 24:4 24:15,22 26:5 27:11,23 28:14 28:17,20,24 29:16 31:5,14 31:18 32:2 33:3 35:23 36:8 37:16 38:19 39:16,25 40:19 41:2 42:6,10,20 45:1,12 47:5 50:9,15 52:21 53:14 54:22 55:17 56:19 57:3,19,24 60:12,13 67:10 67:13,18 68:11 69:16 70:5,6 71:5,9,16 76:2 77:20 78:24 80:11 82:25 83:15 84:4,24 85:15,22 89:14 89:21 90:21 91:3,17 92:18 92:23 93:6,11 93:18,21 94:13 95:18 97:9,13 97:14 98:12 99:4,7 100:12 100:20,24 101:10 103:2,6 103:25 104:4 104:14,14,15 104:25 105:8 105:22 106:1,8 106:10,16,19 107:3,11 108:1 108:8 109:13 109:15,19 110:6,9 111:3 111:22 112:19 113:25 114:8 115:24 118:20 119:15,25 120:7,19 121:16 122:23 123:9 124:2 127:4 129:15 129:25 130:5 130:17 131:2 131:14,24 132:20 133:1 133:10,17 134:8,20 135:17 136:3 137:12 138:12 138:22 139:9 139:16
old 106:2
once 6:25 7:1 30:20 31:13,14 92:18
oncologist 29:4 44:20,25
oncologists 89:3
oncology 29:21
opined 51:3
opining 53:10 127:12
opinion 3:19,24 27:24 32:21 48:5,16 49:4 49:17,20 50:1 50:5 51:8,12 51:19,21 53:8 55:15,17,24 58:17 64:24 65:11,17,23 66:2,6 69:2 70:15,18 72:19 73:15,20 74:2 74:4 75:14 77:22 78:5 80:11 84:24 85:3,7,13 90:24 100:12 110:7 114:12 115:7 116:8,19 117:22 121:9 121:14 127:14 131:19

opinions 24:23 25:8 34:14 39:18 60:14 67:8 109:9 118:21 134:1 136:4
opposed 98:3
order 3:16 98:19 113:4
organization 123:6
original 20:1,1 122:7,9 135:6 144:14
originally 19:3 19:13
ortiz 2:10 8:20 9:4 11:22 12:23 13:6,21 14:2,13 16:20 17:7 18:25 20:7 21:1,4 22:4,13,24 23:24 24:6 25:1,9,17 26:10,18 27:8 27:25 28:5 29:6,12,17,22 32:12 34:7 35:4 36:3,11 36:17 37:2,12 37:21 38:9,12 39:5,20 40:3 40:11,22 41:6 41:16,25 43:2 44:12 45:13,22 48:4,14 49:7 50:4,10 51:5 51:15 52:3,13 53:6,21 54:9 54:24 55:12,20 56:4,9,22 57:3 58:4,19 59:14 59:24 60:7 61:5,15,25 62:13 63:2,12 63:20 64:2,17 65:22 66:5,22 67:4 68:3,22 69:6 70:11 72:6 73:18 74:6 75:17 76:7,11,20 77:25 80:17 81:12 82:13 83:13,22 84:7 85:4,11 86:11 86:20 87:9 89:4,10 90:3 90:14 91:24 95:1 96:5,8 99:12,15,20 101:21,24 102:19 108:3 108:11,18 110:11 111:25 112:21 114:15 115:11 117:3 117:13 119:5 120:12 121:4 121:12,19 122:8,25 123:12 124:10 125:9 127:8 128:7 129:8,16 130:20 131:17 132:3,17 133:5 133:24 134:13 135:2,23 136:6 136:16 137:5 137:15 138:1 141:7
outcome 142:21
outside 126:9 128:5 134:3 135:24
overall 60:13 135:13
overly 72:25
overstated 96:21 99:11
own 25:21 67:7 91:18 92:19 97:20 138:22

p

p.m. 110:17 112:7,8 136:19 136:20 141:24
page 3:2,11 4:2 8:17 17:12,15 18:7,12 21:11 21:15 28:7,8 28:14 29:25 31:18 40:22 41:3,15,21 42:3,4,5,11 43:12 45:1 49:14 52:11,18 54:17 57:6,22 57:22 60:5,9 60:10 62:17 64:23 66:8 67:11,15 69:11 70:16,17 71:10 71:13 74:22 77:4 82:21 87:15 89:18 90:25 92:6 93:6 94:7,12 94:13 95:6 96:11 97:4,5,6 97:10,22 100:20 101:15 103:2,20 104:13 105:20 106:9,17 107:12,13,18 109:16 110:24 111:18,23 112:13 113:22 114:1 115:25 116:4 118:2 129:25 131:3,5 131:9 145:4

148:2
pages 41:4,9 147:4
paid 14:6 48:1 49:11 59:13 61:4,10,18 62:19 63:18 64:15 68:13,14 68:19 69:1 83:21 102:2,3 102:4,5,6,8,12 130:8,18,23 132:1,8,12 133:4
pain 74:20,22 75:12 77:9,11 77:15,16 81:4 81:5 87:22 88:10,21,21 127:20 128:19 128:20
panel 114:5
paper 122:10 122:14,17,19
paragraph 42:11 45:3 48:21 49:14 52:22 57:21 58:12 62:18 87:16 92:8 94:12,16 95:13 96:15 100:24 106:20 109:20 111:3 118:8 130:6
part 52:7 53:18 82:15 95:25 138:4
partially 14:16
particular 43:14 97:21 121:24 122:4
parties 32:24 33:2 92:14
parts 79:4 127:18
past 15:6 16:12 24:24 35:18 36:9,12 51:3 52:1 54:23 58:3 62:19 68:12,14,19 83:5 91:6 93:1 94:24 102:23 109:22 111:6 118:11 130:10 130:12,14 131:10,15 132:9 133:21 134:10 139:21 139:24 141:2
patient 30:6 46:12 48:22 49:5,10 63:18 63:23 64:1,4 64:15 68:13,15 68:20,25 69:9 74:24 80:1,24 100:3 101:19 102:2,3,6,8,12 107:4 116:11 122:15 125:21 126:8 127:23 128:14,17,18 128:24 129:1 132:1 140:14 140:15
patient's 71:17 71:25
patients 30:7,9 30:12,17,21 31:7,11,15,17 34:5 35:8,16 43:16,23 44:1 44:7,11 61:23 62:9 72:12,14 80:19 87:17,20 88:4 108:24 109:4 119:24
pay 45:21 46:3 46:12 49:10 59:18 61:23 83:25 101:19 127:16 139:17 139:18,19,20 140:1
payment 32:19 45:6,20 46:1 47:6 48:9 52:23 63:16 68:15,20 82:18 84:11 86:6 92:25 119:11 139:3
payments 14:18 46:16 48:23,24,25 49:18 50:6 51:22 52:24,25 53:11 60:2 62:22 63:6,23 64:1,5,6,12 68:14 69:1,9,9 84:21 86:13 123:4,7 131:15 131:20 132:11 133:13 139:5
payor 32:16 33:1 47:9,17 47:21 48:2 51:12 86:16 123:3
payor's 48:2
payors 47:14 47:16,20 86:7 139:4 140:2
pays 48:17 62:8
pcc00000005... 113:23
pending 7:17
percent 38:8 134:10
percentage 33:6,16,19 55:24 82:2,5,8

percentages 55:10,15,18
perform 9:2 19:13 30:6 32:10 69:8 102:11,15,17
performed 36:8 54:14 89:9
period 110:13
peripheral 65:1 65:4,12,20
person 16:3 17:20 46:3,15 46:20 75:9 79:12
personal 12:20 13:5,12 35:8 35:15
personally 14:22 35:18 121:16
pertains 141:2
ph 1:21
phase 53:19
physician 31:1 34:14 71:25
physicians 4:8 125:23 128:10 129:6,22
pill 126:23
pills 126:13,18
place 75:20,22 75:24 142:8
placed 75:7
plaintiff 2:3 19:4 23:20 53:24 54:5 62:20 65:2 69:19 83:6 91:7,8 101:12 101:20 102:18 103:8,18 109:23 110:7 111:7,16 118:12
plaintiff's 64:25 104:20 116:8
plaintiffs 6:17 6:18 19:5,12 20:3,6,24,25 23:18 24:19 42:12,13 43:9 43:17 49:15 53:4,19 54:1,5 58:1 59:2 69:5 89:8 93:4 94:17 95:8 100:14 131:9
plan 62:11
please 6:11 59:2 70:1 78:24 91:1 92:19 99:9,13 104:13 112:14 118:22 122:2 144:3,8
pocket 47:18 64:6,12,16
point 72:2 80:6
points 16:2,4,5 133:18
policy 128:3
portion 15:8 16:10 70:7 81:14
position 30:10 30:11,15,16 35:25
positions 33:4 35:21
positive 72:1
possession 10:1
possible 19:8 36:14,15 37:6
power 48:3,6
predict 136:8
predisposes 73:1
premiums 48:24 61:24 64:6,9,16 102:9
prepare 25:16 26:3,6
prescription 99:6,24 100:2 100:8
present 2:15 26:25 27:1 82:10 88:8,20 106:2,21 107:3
presented 124:6 133:22
presumably 66:13,20 82:2 140:22
presume 67:2 139:9,12
previous 13:1 18:13 114:2,19 119:17
previously 12:25 24:16 81:16 86:13 124:14
primarily 73:23 135:9 138:17
primary 4:12 4:14 42:16 44:10,16,18 54:7 71:25 74:14,19 75:5 75:10 79:21 80:10,14,21 105:17 113:19 114:22 115:17 124:17
principle 128:3
principles 126:7 127:4,7
prior 13:11 23:10,11,16 24:22 26:2

34:2 77:21 97:5 140:20
private 48:13 69:9 130:8 139:17,18,19 139:20 140:1
privates 48:18
privilege 26:21
privileged 20:9 25:19 26:12 67:5
probably 71:22
problem 106:13 107:22
problematic 140:7,9
problems 106:12 107:20
process 46:18 139:16
processed 10:25 82:17
produced 9:10 15:25 16:9,25 95:4
production 8:12,23
productions 89:19
products 3:17
professional 34:11,15,18
program 57:13
progressively 88:7
propounded 147:7
prostate 64:25 65:4,12,19
protocol 38:14 141:11
provide 9:25 21:25 22:10,16 24:12 27:7,8 34:13 35:22 49:17 51:20 68:25 100:9,19 140:11
provided 9:12 9:17,21,23 24:23 25:7 38:2 62:25 63:7,11,22,25 64:10,13 66:15 84:11 120:11 120:15 121:10 121:18 132:20 137:3,14 139:10
provider 47:7,9 71:16 106:3
providers 38:4
providing 9:3 53:8 96:3 123:6
public 31:1
pull 87:7 89:15
purported 65:5 65:20 66:12,17 116:14 117:11
purpose 102:15
purposes 53:20 54:4,12 80:16 102:1,21 113:6 125:2 140:8
put 12:15 23:5 76:2 89:13 90:21 109:13 141:9
pyelonephritis 88:8

q

quadrant 71:19 74:22 75:12 81:4 128:19
quantification 132:16
quantified 57:11 68:12 91:5 109:21 111:4 118:9
quantifies 139:22
quantify 63:18 64:1,15 81:25 82:15 92:25 120:9 124:11
question 7:12 7:17,18 46:7 46:14 122:21 122:24 123:4 125:10,12
questions 7:7 51:1 133:7 136:25 141:8 141:18 147:6
quickly 11:16
quotations 3:8
quote 3:10 100:8

r

r 145:1,1
raised 18:24
ranges 40:21 41:3
rate 15:12 17:18
rates 16:6
rating 55:18
ratings 54:23 55:10
rationale 125:6
reaching 125:15,17
read 3:9 18:4 18:15,20 22:3 22:6 31:3,22 39:17,25 41:14 42:18 43:19 45:10 47:11 49:2,24 53:1 57:20,22,23,25

58:15 59:4 62:23 65:7,15 66:18 68:17 72:4 77:12,18 83:11 85:20 87:23,24 91:15 92:16 94:20 101:8 103:15 105:15 106:6 107:9 110:4 111:13 114:6 116:16,23 118:18 120:24 142:18 144:3 147:4
reading 70:3 121:2,3,7
reads 109:20 116:7 118:4
ready 89:17
realized 98:19
really 14:18 21:7 117:22
realtime 1:16 1:19
reason 12:6 13:19,24 17:2 40:10,17 41:10 74:14,19 75:11 76:1 79:10,22 80:10,14 101:18 116:25 122:21,23 123:3 124:17 126:20 127:23 134:11 144:5 145:7,11,15,19 145:23 146:2,6 146:10,14,18
reasons 69:20 73:23 74:18 80:4,21 141:3
rebuttal 3:24 56:20 57:7 90:24 97:25 100:21 131:4 135:8
recall 9:20,24 11:5,7 16:10 19:12,23 21:8 23:17,21 24:1 26:7,16,20 27:3 63:6,10 63:14 82:16 90:1,7,9,12,18 100:4 121:2,3 121:6 123:22 124:1 132:5
receipt 144:15
receive 14:21 15:7,11,13,13 16:10 75:15,18
received 65:3 71:20 72:7 75:6 88:15 116:11 121:22 122:20 123:20 132:23
receiving 95:23
recent 72:6
recently 78:22
recess 50:19 86:24 110:16 112:7 136:19
recognize 8:8 10:8 15:19 16:19,21 27:21 38:25 39:14 56:17 76:5 78:16 98:10 99:2 105:13 113:16
recollection 20:23 64:4 114:19 115:1 115:14 138:8
record 3:9 5:6 5:19 6:12,15 16:2 17:8,19 38:13,18 50:18 50:22,24 51:23 77:21 83:14 86:23 87:2 107:16 110:15 110:19,22 112:6,10 114:9 136:18,22 139:7 141:10 141:17,22
recorded 142:13
records 4:3,7 4:11,12,14 40:21 42:17,25 88:14 89:2,9 138:25 139:2 139:14
recurrent 77:17 79:25
reduced 92:9
refer 44:14 58:21 59:5 68:6 70:16 85:25 88:14 91:18 92:19 96:6 97:20 118:22 120:23
referenced 117:1
referring 35:7 36:19 44:19,24 64:5 102:4 112:13 113:1 114:10 117:10 117:15 122:4 122:10,11 123:14 129:9 129:18 139:20 139:21
reflect 48:2 50:2 52:25 61:2 83:18 85:1 92:12 96:4 140:21

reflected 3:8 48:23
reflecting 49:19
reflects 59:9
refluxing 87:19
regal 13:2
regard 60:25 68:21
regarding 9:15 10:2 12:15 32:7,17 49:17 49:21 65:24 71:7 78:20 81:21 84:8 95:21 96:1,18 97:1 117:6,23 129:7 130:14 132:22 134:2 137:7 139:18 139:19
regards 38:5 79:8 85:22 101:11 104:8 109:9 110:7 133:21
regional 4:3,6
registered 34:19
regulations 125:15
reimbursed 49:18 52:24 130:18
reimbursement 47:7 48:12 62:22
related 25:8 35:10 51:22 52:16 53:11 54:2,8 60:14 65:5,13 67:23 69:18 70:19 73:14,20 74:10 74:12 77:23 78:7 79:14 80:20 83:20 84:22 86:14 92:14 96:16 97:23,24 104:9 104:19 105:4 113:8 115:21 116:14,21 117:25 126:25 127:1 139:7,13 140:19,24
relatedness 42:25 43:10 52:2 55:23 66:4 69:22 74:3,5 79:8 100:2,10,19 117:11,23 127:10 128:4 128:12,22 134:23,24 137:24 138:5 138:19 140:5,8
relates 1:7
relating 59:11 65:18 123:24
relation 134:22
relationship 42:15 53:9
relationships 13:12
reliability 121:10,14 137:2
relied 125:15 138:3,17
rely 123:9,15
relying 120:10 120:14
remember 19:16 138:7
remission 107:8 109:5
renal 19:18
rephrase 7:9 125:12
report 3:19,24 19:20 25:21 27:24 28:2,4 38:16 39:19 41:22,24 42:23 43:5,18 45:2 48:7 49:9,15 52:12,19 54:18 56:20 57:7 58:22 59:5,6 60:5 62:18 64:23 66:9 67:11 68:7 69:12,13 70:8 70:16 82:22 84:6 85:25 86:10 90:24 91:18 92:19 96:4 97:4,20 100:6,18,22 116:1,4 118:22 130:1 133:23 134:2,5 135:6 135:8,15,18,20 136:3 139:23
reported 1:15
reporter 1:17 5:20,25 7:23 7:24 142:4
reporter's 142:1
reports 22:1,11 25:21 40:7 53:24 67:5 119:2
represent 6:17 9:8 16:24 55:11 86:4
represented 11:18 13:17 40:6 41:2 134:8
represents 86:5
request 8:23 142:18

requested 46:1 46:19 130:15 130:17
requests 9:1,22 9:25 17:1 45:5 45:19
require 75:9
required 124:22 126:8
requires 38:14 125:21 141:12
reread 57:21 70:2,7 104:1 111:24 112:14
residences 28:25
residency 28:21
respect 101:17 102:18 118:21 129:4
respiratory 106:4
response 16:25
responsive 9:3 9:9,13,22
rest 15:13
result 36:15 53:4
results 72:2 73:12
retained 19:4 19:13 22:16 23:17,23 32:25 51:20 121:1
retainer 16:2
retention 13:11
return 144:13
returning 100:20
review 9:1 16:3 17:20 32:6,20 33:12 34:4 35:23 42:7,22 52:23 53:18,20 54:18 78:25 89:1,9 92:9 94:17,23 95:12 95:16,19,23 97:10,12 99:9 99:13 104:3,12 104:22 105:16 112:16 114:20 115:1
reviewed 25:20 39:18 41:14,18 42:14 43:10 78:21 79:1 95:18 97:13,25 97:25 99:22 104:4,5,14 136:4 138:19
reviewer 31:20 32:5
reviewing 35:9 98:1 104:24 119:23 141:3
reviews 32:10 119:23
reward 117:7
right 10:12 11:14,21 16:11 17:21 18:4,15 18:20 20:3 22:3 28:18,22 29:25 31:3,6 31:22 41:5 42:18,19 43:19 45:10 47:11 49:2 53:1 58:15 65:7,15 66:18 68:17 71:19 74:21 75:11 77:18 81:3,11 83:11 85:20 91:15 92:16 94:14,20 101:23 103:15 105:19 106:6 111:13 115:9 116:16 120:11 122:7 128:19 129:2 132:2 135:8
risk 77:16 87:18 88:5 109:1
robert 118:5,9
role 30:5,6 31:5 31:6 32:6 49:22 51:19 52:1,6,7,9,14
roles 33:13
ronald 103:22 105:18
room 124:15,19
rough 33:9
roughly 33:15
rounding 30:17 30:18
rpr 1:18 143:4
rules 7:2
ruq 74:21
ruzicka 2:18

s

s 145:1
sake 68:6 86:1
saying 122:3
says 8:22 17:18 17:25 18:12,12 18:17 21:16,21 21:25 30:1,25 31:19 45:15 48:21 58:12 67:14 72:6 77:5,9,14 103:21 106:1 114:2
scan 88:15,15
schedule 8:22 33:22
school 28:18
sciatic 65:1,4 65:12,19

scope 19:5 20:5 20:12,23 21:24 22:15,20 51:25
scott 111:19
search 9:2
second 8:17 42:10 43:13 45:2,3 52:21 58:11 83:4 92:7 93:11,22 94:12,16 95:13 96:15 99:12 103:6 130:5
secondary 54:7
secondly 73:10
section 17:14 17:24 21:20,24 60:13 69:13 71:13 92:7 93:7,21 94:8 95:7,13 96:11 97:10,23 103:3 103:21 104:1 104:12,17,22 105:2 109:17 110:24 111:18 111:23,24 112:15 114:11 116:4 118:4
see 8:24 16:1 17:14,24 21:18 30:3,9 31:11 31:16 42:6 54:20 57:17 60:16,23 67:14 67:16,25 69:14 69:23 71:12 77:7 79:24 83:2 89:24 93:9,16 94:2,9 95:10 96:13,22 97:2,7 98:2 103:4,23 105:23 106:13 106:23 107:15 107:22 111:1 111:20 118:6 131:8,12
seeing 31:6
seen 35:8,16 46:11
semi 85:15
sense 37:4
sensitivities 75:8
sentence 43:13 45:4 47:5 48:20 52:22 57:9 62:18 67:18 68:12 83:4,14 85:16 93:11,22 100:25 103:6
separate 32:1,3 139:25 140:1
series 140:24
service 69:19 73:16 75:15 77:23 78:6,7 96:20 129:7,23 140:11
services 3:17 38:2
set 16:13 78:10 98:20 99:16,19 119:1 142:9
setting 75:20 75:23,24
sheet 144:6,9 144:11,14 147:9
short 50:15,25 87:4
shorthand 142:3,15
show 71:20 90:6,17 133:8
showed 88:15
shown 133:2
sick 126:14
side 18:11 23:6 78:10 88:11 89:13 90:22 98:20 109:14
sign 144:8
signature 143:2
signed 16:12
significant 43:15 76:1 108:14,22 109:2,7
significantly 79:10
signing 144:10
similar 87:21 126:6
simple 88:18,18 95:25 126:12 126:17
simply 48:7,7 73:5,22 83:24 126:15,23
single 41:14,19
situation 46:11 47:1
skipped 76:10
small 33:19 81:14,22 82:2
solicitation 3:16
sorry 8:18 9:11 19:4,23 23:12 25:23 28:4 39:5 41:23 42:3,5 57:1 60:10 62:7 64:4 65:10 76:9,20,22 87:8 95:20 98:18 101:15 102:5 106:22 111:25 122:2 125:11 130:2 130:12 131:5,6

sound 4:8 11:14 41:4
sounds 11:20 112:4
source 98:1 138:18
southern 1:3
sow 21:17
space 144:6
specialist 44:10 44:14,15 113:4
specialists 89:8
specific 19:3 22:18 24:13 31:8 36:6,19 43:21 44:11,15 55:14 62:15 63:6 84:17,23 86:7 88:2 90:5 90:8,19 92:2 117:7 134:24
specifically 9:24 55:1 63:8 65:3 80:9 105:5 116:11 122:5
spend 33:7,7,17 35:2,17
spent 38:3 133:17 135:17
split 34:3 127:17
spreadsheet 90:10,16,19 132:25 133:15 137:9
spreadsheets 133:7,9
staff 35:19,22 35:24
stage 114:3 115:15
stand 100:12 109:8
standing 107:7
start 64:9 117:20 122:14 138:23,24
started 135:9 138:8
starters 36:22
starts 40:24 60:19
state 6:11 42:11 105:5 116:18 144:5
stated 22:19 43:5 49:8 53:23 55:22 69:21 70:15 74:22,24 75:4 81:16 86:12
statement 21:16 68:2 88:1 101:10 104:10 117:18
states 1:1 5:14 18:2 48:7,8 49:15 69:16 83:5 85:16 96:1 107:4 111:4 118:8 142:4
stating 73:22 83:25 84:10
staying 64:23 66:8 95:6 96:11
stenographer 5:22 53:16
stenographer's 3:8
stenographic 5:19,24
stenographic... 1:15 142:13
stent 107:6
stephen 96:12
sticker 76:10
street 2:5,12
stress 77:16 88:24
strike 9:11 47:24 51:10 61:22 124:4 135:4
studies 114:10
subject 144:10
subjects 43:18
submitted 10:11,21,24 11:2
subpoena 3:12 8:11
subscribed 142:23
subsection 42:7
subsequent 53:5
subsidies 62:15
subsidized 62:11
subspecialties 29:1
substance 20:13 26:12 147:8
sufficient 100:9 100:18
suite 1:12 2:6
sum 13:18 41:3
summaries 60:14
summarizing 131:10
summary 76:25 111:15 118:21
supplement 96:9
supplemental 3:22
support 35:19 35:22,24
supported 42:13

supports 32:18
suppress 108:2 108:5
sure 7:10 9:2 50:16 68:9 86:20 99:14 110:11 119:9
surface 73:6
surgeon 74:25 75:2,13
swear 5:21
sworn 7:3 142:10
symptoms 87:21 124:16
system 108:2,5
systems 1:19 119:4,7,11

t

t 145:1,1
tables 131:10
take 7:15,18 11:20 33:20 50:14 57:20 75:19,22,24 78:24 80:2 86:19 110:10 126:18 136:13 138:14,16
taken 1:12 50:19 86:24 110:16 112:7 136:19 142:8
talk 7:21
talked 120:7 130:7
talking 35:9,15 83:17 130:10
task 20:12 63:4
tasked 63:15 68:24 130:22 131:21
team 26:20
technical 73:1
technologies 2:22
ted 2:18
tell 7:11 8:10 20:18
temporal 140:25
ten 136:13
tenderness 71:19
term 37:10,14 37:17,19,23
terms 14:7 64:15 128:11 128:13,22 129:1 132:7 135:13 138:18
test 77:16
testified 6:5 41:13 131:25 137:20,22
testify 3:12
testifying 7:4 24:18,20
testimony 21:25 34:3 41:17 96:8 120:24 124:3,5 142:11
testing 88:23
tests 81:24 88:24
thank 8:20 35:13 71:24 76:3 131:7 141:19
thanks 141:6
thereof 142:16
thing 7:23 8:1
things 84:21 135:19
think 45:13,14 59:7 77:20 110:9 119:25 128:11,13,21 128:25 135:21 141:15
third 32:24 33:2 49:14 60:18 87:15 106:20
thirty 144:15
thomas 4:5
thought 140:16
thousand 14:10
three 23:10,11 23:14,16 30:12
time 5:9 7:15 33:7,8,17 34:3 35:2,17 38:3,6 38:8 50:11,17 50:21 59:6 78:24 79:25 80:24 86:21 87:1 108:6 110:14,18 112:5,9 124:20 128:23 129:11 133:18 135:17 136:9,17,21 140:17 141:6 141:20 142:8,9 142:12
times 6:23 23:7 45:15,17 73:2 73:3,13,14
title 34:12,17
titled 71:13 95:7
today 25:16 26:6 27:1 130:7
today's 5:8
took 110:21 140:2
top 8:22 11:25 14:19 16:8 21:15 71:12 82:16 100:4

105:24 106:24 122:16
total 13:18 18:17 19:6 23:10 38:5 41:3 60:19 69:1 81:14,23 85:17 86:5 96:1 101:5 103:12 110:2 111:11 118:16 131:19,21 132:12 134:3,9
totaling 57:16 68:14 83:9,10 85:17 91:10,11 91:11 93:14 94:1 101:2,3,4 101:4 103:10 103:11,12 110:1,2 111:10 111:10 118:14 118:15,15
totality 73:12 80:2 109:4 127:23
totally 58:14
totals 68:15,20 92:12
touch 12:15
towards 43:12 87:16
towers 31:10 31:12
toxicologist 23:3
toxicology 22:2 22:12
track 14:15 51:22 52:16 53:12 54:8 59:12,18 60:2 61:11,18 70:19 78:8 83:20 84:1,11 86:6 86:15 100:10 104:20 105:4 115:8,21
tract 72:3 73:2 73:9 75:3,10 77:10 79:18,21 81:18 88:5,6 88:19 124:20 126:12,22,25 127:19 128:20
train 29:10
trained 55:3 119:10,12
training 119:3
transcribed 142:14
transcript 142:15 144:16 144:17
transcription 147:5
transcripts 40:8
treat 72:3 80:1 108:24 128:21
treated 43:23 44:8 80:12 126:9,23 128:16
treating 43:15 128:13 129:6
treatment 34:5 53:5 59:11,13 61:3 72:19 73:7 75:16,19 77:22 81:10,13 81:15,23 82:6 82:8 85:2 124:8 127:6
treatments 82:3
trial 17:21 19:7
tricare 57:13 60:20,21,25 61:1,4,8,10,14 61:17,18,21,23 62:5,6 63:19 89:22 90:9 101:4,17,18,20 102:5,18,24 120:25 131:15 131:20 132:1,7 132:12,22 133:2,3 139:11
triwest 85:17 85:23 86:9 118:15
troponin 114:5
true 84:4 86:8 137:12 142:15
truly 73:9
try 7:9,21 20:18 33:20 46:15,21 72:25 98:22
trying 26:20 125:4
tukes 94:8,25
turn 17:11 18:6 21:10 28:7,14 29:25 40:20 41:21 45:1 49:13 52:18 57:5 60:4 67:10 69:11 71:9 93:6 94:7 94:11 95:6 97:4 103:2,20 105:19 107:11 109:16 111:23 113:21 116:3 118:2
turner 2:19 27:11
turning 13:16 62:17 82:21 90:23 107:18 129:25 138:22
twin 31:10,12
two 23:19 24:8 24:15 26:8,22

26:25 32:1,2,3 32:24 47:20 59:1 69:18 70:18 80:13 82:10,12 123:25 129:4 129:22
type 108:20 117:16,23,25
typically 30:7 33:20 47:10,20 48:12 81:24 84:18,20 88:20 140:17

u

u.s. 2:10
uh 102:10
ultimately 48:1 133:3
ultrasound 71:20 72:7,7
unable 24:12 46:6,14 82:14
under 7:4 21:24 24:11 30:1 33:5 57:12 89:18 92:6 97:22 106:1,20 107:3 114:1 131:9
underage 53:24
undergo 88:23
undergone 72:12
undersigned 142:3
understand 6:19 7:3,8,12 7:13 16:6 34:2 38:16
understanding 55:9 62:4,6 84:14 91:22 94:22 124:2 125:5,23 130:6 137:22 138:3
unfiltered 122:20
uninsured 46:3 46:12
united 1:1 4:10 5:14 99:23
university 96:19
unquote 100:8
unrelated 65:2 69:17 72:20 73:16 80:15 114:13,18 115:8 116:9 124:7,9,12,13 125:1,18 140:18,22
unrelatedness 109:10
unusual 73:6
unwell 126:14
upcoding 37:20
upper 71:19 74:21,21 75:11 81:4
urinary 72:3 73:8,9 75:3,10 77:10 79:18,20 81:17 88:5,6 88:19 124:20 126:12,22,25 127:19 128:20
urine 72:1 81:24 87:19 88:17
urologic 89:3
urological 29:3
urologist 44:20 44:25 80:7
usa 17:8,12
usdoj.gov 2:11 2:12
use 43:5 119:10 126:1 128:4 140:7
used 49:23 85:9 115:18 132:13 138:9,13 139:3 139:17 144:18
using 135:10 140:10
usually 46:17
uti 72:20 73:16 73:20,24 74:10 74:12,17 75:16 77:10,17,23 79:6 80:9,12 81:7,10,13,21 82:9
uti's 74:3,5
utis 72:11
utuc 65:2

v

va 54:22 55:4,7
validate 123:10
validity 49:17 49:21
validly 50:2
value 24:24 56:2,7 58:8
values 95:3
variable 84:19
varies 33:14
various 125:25 139:4
vary 30:23
vast 140:17
vba 55:10,15 56:3 65:3,18 66:3,11 116:12 117:8
vba's 117:1
vein 126:21
verbal 7:25

verdugo 30:14 30:19
verified 92:13 92:21 133:22 138:25 139:13 140:4
verify 101:14 121:17 122:6 122:18 123:15 134:9 137:9,17
veritext 1:21
versus 49:18 140:1
veteran's 25:8 25:10
veterans 54:19
vha 83:8,9,17 83:21,25 84:5 84:10,11,15 85:8,18,19 91:9,10,11,12 91:13,23 101:1 101:3,5,6 103:9,11,13 109:25 110:1,3 111:9,10,12 118:13,14,17 120:25
vident 12:14 15:1,4,5,7,25 16:9
video 1:11 5:11
videographer 2:21 5:5,8 50:17,21 86:21 87:1 110:14,18 112:5,9 136:17 136:21 141:20
visit 71:8 74:15 74:18,20 80:15 81:10 105:6 113:2,3,9,19 114:21,23 115:7 124:23 125:18
visits 30:7,8 80:13 82:10,12 105:17 115:15 123:25 129:4 140:20

w

w 92:7 93:8
wallace 2:19 3:24 42:14 49:16 56:21 57:10 58:2 67:11,19 82:22 90:25 92:8 96:25 105:1 112:20 113:7 133:19 139:22 140:3
wallace's 42:23 43:6 57:6 69:12 70:8 95:21 97:15 100:18,21 104:6,16 131:4 134:10,25 137:21
wang 1:11 3:3 3:15,19,21,22 5:17 6:3,13 21:22 57:15 67:23 92:11 93:13,24 147:3 147:12
want 20:12,16 38:12 76:12 86:19 136:12 136:14 141:9 141:16
wanted 38:17 87:5
wants 74:25
washington 1:17 2:13 142:5 143:4
water 1:5 5:13
way 7:4 17:4 79:11 88:11 109:2
wayne 91:4
we've 50:12 86:18 120:7 130:7 133:17 134:20 135:17 135:25 136:3
week 9:9,12 30:11,12,20 31:13,14,16 33:15
weekly 30:21 38:5
went 6:15 33:4 77:20 79:12 139:4,6
whatever's 13:25
whereof 142:22
whichever 46:23
whitney 2:19
wife 106:3
william 74:24 74:25
wilshire 1:12
wise 33:22
wish 106:3
witness 5:21 6:4 9:6 11:23 12:25 13:8,14 13:22 14:14 16:21 19:2 21:7 22:6,15 22:25 23:8 24:1,8,17,23 25:4,10,20 26:14,19 27:11 29:8,14,19,23 32:15 35:7 36:5,12,18 37:4,13,22 39:23 40:4,15 40:25 41:8,18

43:4 44:13
45:24 48:5,16
49:8 50:5,16
51:6,18 52:5
52:14 53:7,23
54:12,25 55:14
55:21 56:5,10
58:7,21 59:17
59:25 61:7,16
62:1,14 63:4
63:13,22 64:3
64:20 65:23
66:6,23 67:6
68:5,24 69:7
73:19 74:9
75:18 76:17,24
78:3 80:18
81:13 82:14
83:24 84:8
85:13 86:12
89:5,11 90:7
90:18 92:2
95:2 96:6
99:22 101:25
102:21 108:4
108:12,19
112:23 114:17
115:13 117:5
117:14 119:6
120:14 121:6
121:13,20
122:9 123:2,14
124:11 127:9
128:10 129:9
130:22 131:18
132:5,18
133:11 134:1
134:15 135:5
135:24 136:8
137:7,16 138:2
142:9,11,22
144:1
words 46:21
81:3 126:11
work 9:15
15:24 16:6
18:24 19:6,13
20:5,23 21:17
22:15 24:23
31:9 33:7,18
33:23,23,25
34:1 97:23
113:5 119:14
119:16,18,22
128:5
worked 12:17
12:25 15:3,5
23:8 24:17
55:6 120:1
working 33:25
workup 73:13
81:21,23
workups
140:24
worse 88:7
write 43:14
45:4 52:11,22
62:19 64:24
65:9 66:9
writes 67:19
71:17 87:16
91:4 92:8
93:23 103:6
wrong 37:7
98:16 101:15

x

x 3:1 142:18

y

yeah 50:16
90:18 121:6
122:2
year 33:21
106:2
years 109:5

z

zero 67:24 91:5
93:14 94:1
109:21 111:4
118:9
zoom 2:15
112:2

Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate. The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

DISCLAIMER: THE FOREGOING FEDERAL PROCEDURE RULES ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY. THE ABOVE RULES ARE CURRENT AS OF APRIL 1, 2019. PLEASE REFER TO THE APPLICABLE FEDERAL RULES OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.

VERITEXT LEGAL SOLUTIONS

COMPANY CERTIFICATE AND DISCLOSURE STATEMENT

Veritext Legal Solutions represents that the foregoing transcript is a true, correct and complete transcript of the colloquies, questions and answers as submitted by the court reporter. Veritext Legal Solutions further represents that the attached exhibits, if any, are true, correct and complete documents as submitted by the court reporter and/or attorneys in relation to this deposition and that the documents were processed in accordance with our litigation support and production standards.

Veritext Legal Solutions is committed to maintaining the confidentiality of client and witness information, in accordance with the regulations promulgated under the Health Insurance Portability and Accountability Act (HIPAA), as amended with respect to protected health information and the Gramm-Leach-Bliley Act, as amended, with respect to Personally Identifiable Information (PII). Physical transcripts and exhibits are managed under strict facility and personnel access controls. Electronic files of documents are stored in encrypted form and are transmitted in an encrypted

fashion to authenticated parties who are permitted to access the material. Our data is hosted in a Tier 4 SSAE 16 certified facility.

Veritext Legal Solutions complies with all federal and State regulations with respect to the provision of court reporting services, and maintains its neutrality and independence regardless of relationship or the financial outcome of any litigation. Veritext requires adherence to the foregoing professional and ethical standards from all of its subcontractors in their independent contractor agreements.

Inquiries about Veritext Legal Solutions' confidentiality and security policies and practices should be directed to Veritext's Client Services Associates indicated on the cover of this document or at www.veritext.com.

Exhibit 779

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF NORTH CAROLINA
SOUTHERN DIVISION
No. 7:23-CV-897

IN RE:
CAMP LEJEUNE WATER LITIGATION

This Document Relates to:
ALL CASES

REMOTE VIDEO-RECORDED EXPERT DEPOSITION OF ANDREW MCILROY

Tuesday, February 24, 2026
9:01 AM Eastern Time

JOB NO.: 7887232
Reported by: Denise Dobner Vickery, CRR, RMR

Tuesday, February 24, 2026

9:01 AM Eastern Time

Remote Video-Recorded Expert Deposition of Andrew McIlroy, held in the location of the witness in Washington, DC.

Pursuant to notice, before Denise Dobner Vickery, Certified Realtime Reporter, Registered Merit Reporter, and Notary Public in and for the District of Columbia.

REMOTE APPEARANCES:

Representing the Plaintiffs Leadership Group:

WEITZ & LUXENBERG
BY: BENJAMIN BARTON VANSLYKE, ESQ.
Fisher Building
3011 West Grand Boulevard, 24th Floor
Detroit, MI 48202
313.800.4170
BVanslyke@weitzlux.com

Representing the Plaintiffs Leadership Group:

WALLACE & GRAHAM, PA
BY: WHITNEY WALLACE, ESQ.
525 N. Main Street
Salisbury, NC 28144
704.633.5244
wwallace@wallacegraham.com

REMOTE APPEARANCES: (Continued)

Representing the United States of America:

U.S. DEPARTMENT OF JUSTICE
CIVIL DIVISION, TORTS BRANCH
BY: WILLIAM V. KLOTZBUCHER, ESQ.
BY: MICHAEL W. CROMWELL, ESQ.
1100 L Street NW, Room 4055
Washington, DC 20005
202.532.5193
william.v.klotzbucher@usdoj.gov
Michael.W.Cromwell@usdoj.gov

VIDEOGRAPHER: DAVID LANE

INDEX

EXAMINATION OF ANDREW MCILROY	PAGE
BY MR. VANSLYKE	9
AFTERNOON SESSION	128

MCILROY DEPOSITION EXHIBITS
(Attached to transcript.)

NUMBER		PAGE
EXHIBIT 1	Plaintiffs' Notice of Deposition of Andrew McIlroy	13
EXHIBIT 2	United States' Responses and Objections to Plaintiffs' Notice of Deposition and Subpoena for the Production of Documents to Andrew McIlroy	16
EXHIBIT 3	Curriculum Vitae of Andrew McIlroy and SES Position Description CLJA_USA_MCILROY_0000000001 - 09	17
EXHIBIT 4	VA OIG Office of Audits and Evaluations - "Review of VA's $2.9 Billion Supplemental Funds Request for FY2024 to Support Veterans' Benefits Payments" March 27, 2025	41
EXHIBIT 5	Military.com - "VA Asks for	44

		Historic $4.1 Billion for Construction as Agency Weighs Closing Some Aging Medical Facilities" March 13, 2023	
	EXHIBIT 6	Rand Corp. - Planning, Programming Budgeting, and Execution in Comparative Organizations, Volume 6 Additional Case Studies of Selected Non-DoD Federal Agencies	47
	EXHIBIT 7	The United States' Second Disclosure Of Expert Testimony For Phase III Pursuant to FED.R. CIV.P. 26(a)(2) and D.E. 630	51
	EXHIBIT 8	VA FY2026 Budget Submission Budget in Brief May 2025 BiB-1 - BiB-49	69
	EXHIBIT 9	CBO - Options for Reducing the Deficit: 2025 to 2034, December|2024	114
	EXHIBIT 10	Statement Of The Honorable Douglas A. Collins, Secretary Of Veterans Affairs, Department Of Veterans Affairs (VA) Before The Committee On Veterans' Affairs United States House of	

		Representatives On Opportunities	
		With VHA Reorganization	
		February 11, 2026, Pages 1-4	
	EXHIBIT 11	Financial Policy Documents	162
		2/24/26 Volume VI - Liabilities	
		Chapter 06 - Federal Employees'	
		and Veterans' Benefits Liabilities	

P R O C E E D I N G S

- - -

THE VIDEOGRAPHER: We are now on the record.

My name is David Lane, videographer for Golkow, a Veritext division.

Today's date is February 24, 2026. Our time on the record is 9:01 AM Eastern Time.

This remote video deposition is being held in the matter of Camp Lejeune Water Litigation.

Our deponent today is Andrew McIlroy.

All parties to this deposition are appearing remotely and have agreed to the witness being sworn in remotely. Due to the nature of remote reporting, please pause briefly before speaking to ensure all parties are heard completely.

Counsel will be noted on the stenographic record.

The court reporter today is

Denise Vickery and will now swear in the witness.

- - -

ANDREW MCILROY

called for examination, and, after having been duly sworn, was examined and testified as follows:

THE VIDEOGRAPHER: Please begin.

- - -

EXAMINATION

- - -

BY MR. VANSLYKE:

Q. Good morning.

A. Good morning.

MR. VANSLYKE: This is Ben VanSlyke from Weitz & Luxenberg on behalf of the Plaintiffs Leadership Group.

Bill, do you want to make an appearance?

MR. KLOTZBUCHER: Right. This is -- my name is William Klotzbucher. I'm with my colleague Michael Cromwell. We're with the U.S. Department of Justice

representing the Defendant.

MR. VANSLYKE: Thank you.

And I see we have Whitney Wallace from Wallace & Graham on behalf of the Plaintiffs as well.

BY MR. VANSLYKE:

Q. Mr. McIlroy, can you please state your full name for the record?

A. Andrew McIlroy.

Q. And have you ever been deposed before?

A. I have not.

Q. Do you understand what a deposition is?

A. I do.

Q. Do you understand that you're under oath today?

A. I do.

Q. As we move through this deposition, I will be asking you a series of questions. If at any point I ask you a question that you do not understand, please let me know and I will rephrase the question. Okay?

A. Very good.

Q. All right. And if at any point today you would like a break, I will ask that you please answer any question that's pending, but other than that, we could take a break at any time. Okay?

A. Understand.

Q. Are you represented by counsel today?

A. DOJ, yes, is here with me.

Q. Do I understand correctly that you do not have a VA counsel with you today?

A. I do not.

Q. And has the DOJ counsel worked with you in coordinating this deposition?

A. They have.

Q. Without telling me anything that was discussed, did you meet with your counsel from DOJ to prepare for this deposition?

MR. KLOTZBUCHER: Answer -- objection. Only you can only answer without discussing the substance of any conversation, but you may continue.

THE WITNESS: He told me the time and kind of the nature of a

deposition.

BY MR. VANSLYKE:

Q. Did you review any documents in preparing for today's deposition?

A. Yes, like the deposition document or something.

Q. Is it fair to say that you reviewed the procedural documents related to this deposition?

A. Yes.

Q. Did you review any other documents in preparing for today's deposition?

A. No.

Q. I'm going to place in chat the notice of deposition.

So, Mr. McIlroy, when I introduce documents today, I'm going to place them in this chat for everybody to have access. That includes the court reporter and your counsel and it also includes you.

Can you please confirm that you can open that document that I just placed in chat?

A. It's file _01?

Q. Correct.

MR. VANSLYKE: And I will mark this document as Exhibit 1.

(Document marked for identification as McIlroy Exhibit 1.)

BY MR. VANSLYKE:

Q. Can you see that document, Mr. McIlroy?

A. One moment.

Yes, I have it in front of me now.

Q. Okay. So throughout the deposition I will also screen share documents for convenience, but I wanted to confirm that you can access it and please at any point feel free to pull up the document yourself and review it as you wish. Okay?

A. Okay.

Q. I am now screen sharing Exhibit 1.

And do you see that this is the Plaintiffs' Notice of Deposition of Andrew McIlroy?

A. I do.

Q. I will scroll so you can briefly review the document.

And, Mr. McIlroy, have you seen this

notice before?

A. Scrolling. Yes, I have.

Q. Did you scroll all the way through the document?

A. You are on what page? Page?

Q. I'm currently on page 2, but I'm trying to make sure I'm keeping up with you.

A. I'm on --

Q. So if we keep scrolling.

A. Okay.

Q. Apologies for speaking over you.

If you keep scrolling, you can see there's a certificate of service followed by the subpoena, and after the subpoena, there is Attachment A. And further down in Attachment A, there is a Requests For Documents. Or Requests For Production.

So, Mr. McIlroy, have you seen this document before?

A. Yes.

Q. Thank you.

And did you review these Requests For Production?

A. Yes.

Q. And did you produce any materials in response to these Requests For Production?
A. A resumé and job description.
Q. I will represent to you that we received those two documents.
Is that the entirety of the documents that you have produced in response to these Requests For Production?
A. Yes.
Q. Thank you.
I'll go ahead and stop sharing.
Are you aware that DOJ provided us with a written response to those Requests For Production?
A. Yes.
Q. Have you reviewed that response?
A. Yes.
MR. VANSLYKE: I will now place that response in the chat, and I will mark as Exhibit 2 the United States' Responses and Objections to Plaintiffs' Notice of Deposition and Subpoena For the Production of Documents to Andrew McIlroy.

(Document marked for identification as McIlroy Exhibit 2.)

BY MR. VANSLYKE:

Q. And I will go ahead and share my screen.

Mr. McIlroy, does this appear to be the response that you indicated you had reviewed?

A. Yes.

Q. Would you like to review this further?

A. I have it on my screen now. I'm reviewing it.

Q. Okay. Please feel free to review and let me know when you finished.

A. (Reviews document.)

Okay.

Q. And now that you finished reviewing, do you still believe this is the response that you indicated you had reviewed?

A. Yes.

MR. VANSLYKE: Thank you.

I will stop sharing.

And I am placing in chat what I will mark as Exhibit 3, which I will

represent to you are the two documents that we discussed being produced to us, your CV and job description.

(Document marked for identification as McIlroy Exhibit 3.)

BY MR. VANSLYKE:

Q. Mr. McIlroy, will you please review that document and confirm that these are the CV and job description that you produced.

A. (Reviews document.)

Yes, that is.

Q. Thank you.

So I'm starting on the first page here and this is your current CV, correct?

A. Yes.

Q. Is there anything within your CV that you believe requires updating?

A. No.

Q. So I'm just going to quickly walk through some of the items on here.

I'm going to scroll down to your education.

So I see that you have a BA in history from St. Olaf College, correct?

A. Correct.
Q. And that was in 1990?
A. Correct.
Q. And then you have a Master of Arts in History from the University of Akron in 1993?
A. Correct.
Q. And you have a Master of Science in Public Policy and Public Management from Carnegie Mellon's Heinz School in 1997, correct?
A. Correct.
Q. So it looks to me like your academic background includes both history and budget or policy training; is that correct?
A. Yes.
Q. And would you say that that gives you a perspective on how federal programs evolve over time?
A. It does. It has, yes.
Q. So you started your career at the Office of Management and Budget in 2001?
A. Correct.
Q. And starting then you were analyzing budget requests and funding recommendations?
A. That is correct.

Q. And this included developing budget plans, correct?
A. Yes.
Q. And then it looks like you worked in that position until July of 2006?
A. Correct.
Q. And from there you moved to a deputy budget officer position at the FBI in July 2006?
A. Yes.
Q. And in this role, you were still working with federal government budgets, correct?
A. Yes.
Q. And in this role, you were supervising staff within the budget office?
A. Yes.
Q. And you were still working on preparing budget options; is that correct?
A. Yes.
Q. And you were also reporting and auditing on budgets?
A. Yes.
Q. I see here in this first bullet point that it says you improved budget justification material; is that correct?

A. Yes.

Q. Can you briefly describe for me what that means?

A. So budgeting is really about describing where you get the money, what you get for the money, and to the extent that you are able to better explain the benefits of spending additional money, that can often lead to an increased budget. So I think that's what's happened there.

At the FBI we demonstrated the value of increased funding for more FBI agents, specifically around counterterrorism, counterintelligence, and financial crimes as well as cyber intrusions.

Q. So am I understanding correctly that the budget justification material is essentially that you have identified a need for funding and you have prepared a justification for why that funding is needed; is that correct?

A. That is correct.

Q. I will keep scrolling up here, and I see that in June 2011 you moved to the role of deputy director of the Office of Budget and

Program Performance with Immigration & Customs Enforcement; is that correct?

A. Yes.

Q. And in this role, you were still leading staff within the budget office; is that correct?

A. Yes.

Q. And I see here it says:

"Served on advisory committee for analysis of alternatives for the selection of a new financial system."

Did I read that correctly?

A. You did.

Q. Could you briefly describe for me the role of serving on an advisory committee?

A. So at that time, ICE had a very old proprietary financial system and it was not in compliance with the then-current requirements for federal -- federal financial management systems. So we looked at a variety of options, and ultimately I think we settled on using a service provided by Department of Transportation at the time.

Q. Do I understand correctly that your

role was essentially to serve as a subject matter expert and provide information to somebody else who was the decision-maker?

A. Yes, that is accurate.

Q. And then in -- excuse me.

In December of 2013, I see you moved to a director role within the Office of Budget at the Office of Energy Efficiency & Renewable Energy within the Department of Energy; is that correct?

A. That is correct.

Q. And in this role, you were still supervising other staff within the budget office?

A. Correct.

Q. And I see in this first line it says that you "directed staff of 20 in budget formulation and execution as budget director"; is that correct?

A. Yes.

Q. So I know in the previous roles we have discussed essentially that you have prepared budget requests.

Is that different in any way from budget formulation?

A. They are essentially the same.

Q. Thank you.
And then in July of 2016, you moved to the budget director role within the Farm Service Agency at the Department of Agriculture?
A. Correct.
Q. And I see again "led staff of 30 to prepare and execute a budget," correct?
A. Yes.
Q. So other than the change in staff, that component of this role is similar to the previous one?
A. Similar --
MR. KLOTZBUCHER: Objection to form.
You may answer. Sorry to talk over you, Mr. McIlroy.
THE WITNESS: You can rephrase or.
BY MR. VANSLYKE:
Q. I see at this role as well you were leading other staff in the budget office, correct?
A. Correct.
Q. And you were still preparing and executing a budget, correct?

A. Correct.

Q. And while the specific programs that are part of the budget have changed, this part of this role where you are leading staff and preparing and executing a budget was a role that you performed in the previous role, correct?

A. Yes.

Q. And is it fair to say that you have performed similar job functions in each of these roles that we have discussed starting at least at the FBI in 2006?

A. Yes, I have long been responsible for preparing and executing budgets.

Q. Okay. So I am back at the first page of this document.

And it looks like in April of 2019 you began working for the Department of Veterans Affairs; is that correct?

A. Actually, in June of 2018, but there are a series of jobs there.

Q. Ah. Thank you for pointing that out.

I see third line down June of 2018 you began working at the Department of Veterans

Affairs, correct?

A. Correct.

Q. And I see it appears to me that you started as associate deputy assistant secretary for budget?

A. Correct.

Q. And then in March -- I'm sorry.

In April of 2019, you transitioned to deputy assistant secretary for budget?

A. Correct.

Q. And from July of 2024 to December of 2024, you were acting deputy assistant secretary for management and deputy CFO?

A. Correct.

Q. Can you briefly explain to me the difference between the associate deputy assistant secretary for budget role versus the deputy assistant secretary for budget role?

A. So the associate deputy assistant secretary for budgets, or the ADAS, is also a senior executive position within the Office of Budget, but it has responsibility for a smaller scope of the budget.

So as ADAS, I had responsibility for

just a couple components of the Department of Veterans Affairs, and as deputy assistant secretary for budget, I have responsibility for all the components of the Department of Veterans Affairs and the entire budget. So it relates to the span and scope of responsibility.

Q. And am I correct that the deputy assistant secretary for budget would oversee the associate deputy assistant secretary for budget?

A. That is correct.

Q. And can you explain to me the difference between the role of deputy assistant secretary for budget versus the role of acting deputy assistant secretary for management and deputy CFO?

A. So within the last administration and transition to the Trump Administration, our politically appointed CFO left and the deputy CFO became the acting CFO. And I then became the acting deputy CFO for the Department of Veterans Affairs, and the deputy CFO has responsibility not only for budget but also accounting and capital assets, as well as actuarial programs and implementation of the new financial system and

management of our entire financial operations.

Q. Could you briefly describe for me what actuarial analysis means?

A. So we use actuaries for kind of two different things in the Department of Veterans Affairs. One, we use actuaries to estimate health care costs.

So the actuaries working on health care estimates look at the veteran population receiving health care and what we know about kind of the average age of death and the average kind of mortality and health care needs of that veteran population, and they extend those costs out into the future.

And then for benefits, the actuaries again look at essentially mortality of the veteran population to estimate how long veterans will live and, thus, how long they will receive veteran -- how long they will receive benefits out into the future.

Q. It sounds like that is a fairly complicated analysis.

Would you agree?

A. You should ask actuaries to

describe. Yes, it is. It appears complicated.

Q. Do I understand correctly then that you would not hold yourself out as an actuary?

A. I am not an actuary.

Q. Are you capable of performing actuarial analysis?

A. I receive actuarial analysis and I use that in the budget process, but I do not do actuarial analysis.

Q. So in this first bullet point, I see it says that you "led VA staff and leaders through 7 years of successful budget formulation," correct?

A. Correct.

Q. Would you say there has been significant overlap in the job duties of these three job titles that you've held since June of 2018?

A. Yes.

Q. And I see here that you reference the "growing VA budget from $201 billion in Fiscal Year 2019 to $441 billion in Fiscal Year 2026"; is that correct?

A. That is correct.

Q. Has the VA budget increased each year in between Fiscal Year 2019 and Fiscal Year 2026?

A. It has.

Q. And I see on the second bullet that you "led consolidation of budget analysts from staff offices to Office of Budget"; is that correct?

A. That is true.

Q. Could you clarify for me? Before they were consolidated, in what way were they separate?

A. So staff offices includes kind of the leadership offices of the Department of Veterans Affairs. So that would be the Office of General Counsel, the Office of Secretary, the Office of Public Affairs, the Office of Congressional Relations and Legislative Affairs, those types of offices, HR as well as OM, Office of Management, which is the CFO.

And prior to consolidation, each of those offices had one or two budget analysts. The contention was that, you know, they were not doing adequate budgetary analysis and not performing the

functions as they should because they were not reporting directly to the CFO.

So we consolidated those functions, and by consolidating we were able to reduce some of the number of staff that had previously been devoted to that work, thereby saving some money and as well as improving the services that those offices received.

Q. Thank you.

I see a bullet a few down from there says:

"Developed compromise proposal to accelerate veteran benefits processing at the Veterans Benefits Administration."

Is that correct?

A. Correct. Yes.

Q. Could you clarify? When you refer to "compromise," between what parties was there a compromise?

A. So at the start of the new administration, we had a new Deputy Secretary Paul Lawrence. He set a goal of reducing the backlog for veteran benefits. So we try to process the claims that veterans file for benefits quickly,

but in some cases we are not able to process them so quickly and they extend beyond 125 days.

We call that a backlog or the claims backlog. And the claims backlog had grown to well above 200,000 at the start of the new administration in January '25, and the goal was to reduce it substantially down to about 100,000 by December.

And so in order to do that, they needed -- VBA, the Veterans Benefits Administration, needed additional funding to work overtime. So more overtime means more claims processed and that goes to reduce the backlog, and so we were able to identify funds within the Office of Information Technology that could be transferred to VBA.

And so we worked with OMB and Congress and got OIT to agree to give up 67 million, and so we worked to transfer that funding to VBA, and they were indeed able to reduce the backlog. And recently they sent out a press release noting that it now had gone below 100,000 in aged claims. So significant and successful.

Q. And just to clarify.

If the parties involved had agreed to that compromise, why did you have to work with OMB and Congress?

A. So there are requirements in the annual preparation law that when we move funds between accounts, we have to notify Congress or in some cases we're not allowed to move funds between accounts, but in this case we were. But it required a notification of Congress and that requires, of course, OMB approval.

Q. Moving down two more bullets, I see that you "formulated and implemented new funding stream, the Toxic Exposures Fund to support implementation of the Honoring our PACT Act of 2022"; is that correct?

A. That is true.

Q. Could you describe for me this new funding stream?

A. So when the PACT Act was in development, it was clear that there would be a surge of new applications for benefits and potentially a surge of veterans seeking new health care or expanded health care that they had not originally sought or had not originally been

eligible for.

So that was clear that it would require additional funding to meet that surge of requests for processing of claims benefits and processing for providing health care.

So Congress in the PACT Act established a new funding stream called the Toxic Exposures Fund, and that is a fund that they have in subsequent years appropriated funds to the TEF that we have used to process claims and to provide for expanded health care benefits.

And often when Congress creates a new thing or a new funding stream, they just provide general outlines and say generally how it is to be used. But to actually execute the funds in practice requires additional clarification and explanation to folks in the field, who actually do the obligating of funds, to explain to them what is an acceptable use of the TEF and what would not be an acceptable use of the TEF and how we would allocate the funds across the VA.

Q. And the second sentence under that bullet says:

"This new funding stream will

provide more than $50 billion in funding to the VA for 2022 through 2025."

Correct?

A. That is true. Yes.

Q. Did it end in 2025?

A. No, it has continued and funds were appropriated in FY26 and will likely -- when the President's budget is released, you will see the request again for FY27.

Q. And the following sentence says:

"Developed new cost accounting strategies to justify the new funding stream, explained complicated methodologies to skeptical audiences, and forged consensus among VA staff, the Office of Management and Budget and congressional staff."

Correct?

A. Correct. Yes.

Q. When you refer to "skeptical audiences," could you explain to me what they were skeptical of?

A. So OMB is full of budgeteers and budgeteers are always skeptical of anything new or anything expensive, and the TEF is both new and

big and expensive. So they are appropriately skeptical, and likewise Congressional staff are also. Certainly appropriations staff are skeptical of new things and big things, and so it requires justification of why that is or why the TEF was a reasonable and sound way to fund these veteran benefits.

Q. What makes the Toxic Exposures Fund different from the rest of the VA's funding?

MR. KLOTZBUCHER: Object to form.

You may answer.

THE WITNESS: Okay.

Well, so it's -- in some ways it's similar. It's all about dollars, taxpayer dollars, but this is somewhat unique in that it is a mandatory funding stream.

So in the federal budget process, there are two primary funding streams: discretionary and mandatory. Most VA funding is -- most operational funding.

So for VBA or VHA it has

traditionally been a discretionary fund. Whereas, the benefits funding was always a mandatory fund, but the TEF is also classified as a mandatory fund. So that was one of the new things about the TEF.

BY MR. VANSLYKE:

Q. Am I understanding correctly that you said the operational funding was traditionally discretionary, but the benefits funding was traditionally mandatory?

A. That is true. Yes.

Q. And you said the Toxic Exposures Fund is mandatory?

A. Correct.

Q. If both the benefits funding and the Toxic Exposures Fund are mandatory, they are similar in that way, correct?

A. They both come from -- they are both classified as mandatory expenditures.

Q. Is the Toxic Exposures Fund intended to fund something other than what you described as benefits funding?

A. The Toxic Exposures Fund supports delivery of health care for toxic exposed

veterans, it supports delivery of benefits for toxic exposed veterans, and it supports -- supports research for toxically exposed veterans, as well as kind of associated administrative costs, like IT, for toxically exposed veterans.

Q. So is it fair to say that the Toxic Exposures Fund involves mandatory spending for both items that have traditionally been mandatory and items that have traditionally been discretionary?

A. No. It would be fair to say that the Toxic Exposures Fund supports costs that previously were discretionary.

Q. So you do not agree that it supports costs that were previously mandatory?

A. We have not -- well, the VA is complicated. There was the CHOICE Act that created a funding stream that, I believe, was mandatory following -- it was during the Obama Administration.

But, in general, the work of VBA, the work of VHA, the work of OIT, the work of the staff offices has traditionally been funded by

discretionary funds.

Q. Okay. Let me look through this for one moment.

Okay. I think I'm done with this part of the resumé. I'm going to scroll down to the beginning of the job description.

For reference on the record, the resumé is at Bates pages CLJA_USA_MCILRAY -- MCILROY -- sorry -- 0000000001 through 4, and the job description starts on the same Bates stamp page 5.

Mr. McIlroy, do you see the job description on my screen?

A. I do.

Q. And this is for your current job description; is that correct?

A. It is correct. Yes.

Q. And I see it looks like in row B there is a date of October 31, 2012; is that correct?

A. Correct.

Q. And that is the date that the job description was updated, not any date pertinent to your occupancy of this role; is that correct?

A. I don't know what that -- the HR people wrote that date. So if you want to know what that date means, you should go ask them.

Q. You were not in this role in 2012, correct?

A. Correct.

Q. But you believe that as of today this job description accurately represents the role that you occupy?

A. It does, yes.

Q. Thank you.

All right. I'm going to stop sharing this document.

So just to summarize the things that we've been discussing, you have been in your role for -- I'll rephrase.

You have been working in the budget office of the Department of Veterans Affairs for approximately seven years; is that correct?

A. Since 2018, yes.

Q. And as the deputy assistant secretary for budget, you serve as the VA's chief budget advisor; is that correct?

A. Correct.

Q. So your office leads the formulation and execution of the VA's budget, which now exceeds $400 billion annually?

A. Yes.

Q. And in doing so, you coordinate with the Office of Management and Budget and congressional appropriations committees?

A. I do, yes.

Q. And on the other hand, you work with VA program officials to ensure that budget requests are accurate?

A. Yes.

Q. Do you recall being interviewed by the VA Office of Inspector General in 2024?

A. I've been interviewed by the OIG multiple times.

Q. Do you recall an interview related to the $2.9 billion supplemental funds request for Fiscal Year 2024?

A. I do.

Q. Are you aware that statements made by you are quoted in a report by the VA OIG on this topic?

A. Yes.

MR. VANSLYKE: I will go ahead and share that document to chat, and I will mark that document as Exhibit 4.

(Document marked for identification as McIlroy Exhibit 4.)

BY MR. VANSLYKE:

Q. And, Mr. McIlroy, can you see this document that I'm sharing?

A. Yes, I can.

Q. And this appears to be a document from the U.S. Department of Veterans Affairs, Office of Inspector General, Office of Audits and Evaluations, correct?

A. Correct.

Q. And the title of this document appears to be "Review of VA's $2.9 Billion Supplemental Funds Request for Fiscal Year 2024 to Support Veterans' Benefits Payments."

Is that correct?

A. Correct.

Q. So I see on Page v in the Introductory section, Footnote 18 appears to be the first time that you, "Andrew McIlroy, deputy assistant secretary for budget," are cited as your

"interview with the OIG team."

Do you see that on the screen?

A. I do see that.

Q. And is this the interview that you described recalling on this topic?

A. The OIG interviewed me multiple times over the course of their work on this, and they have interviewed me multiple times for many things, but that is an accurate statement.

Q. Sitting here today, are you aware of any statements made to the OIG in these interviews that you would now disagree with?

A. The statements I gave to the OIG were honest and correct.

Q. Thank you. I may come back to this document later.

In your role, do you also sometimes provide statements to the media related to VA budgeting topics?

A. No. I sometimes respond to questions from the press office, and they then take that and respond to the media.

Q. And if you are quoted in a news article, would you assume that that was the

process by which that quote was obtained?
MR. KLOTZBUCHER: Object to form.
You may answer.
THE WITNESS: I don't know.
BY MR. VANSLYKE:
Q. Do you believe that you are a credible source of information regarding VA budgeting?
A. Yes.
MR. KLOTZBUCHER: Objection. Sorry.
BY MR. VANSLYKE:
Q. Would you be surprised if individuals in the media looked to you for information regarding the VA budget?
MR. KLOTZBUCHER: Objection. Form.
You may answer.
THE WITNESS: If you want to -- if you want to know about what the media thinks, you should go ask them.
MR. VANSLYKE: I will go ahead and share an article from Military.com in

the chat, and I will mark that as Exhibit 5.

(Document marked for identification as McIlroy Exhibit 5.)

BY MR. VANSLYKE:

Q. Okay. Can you see my screen shared at this time?

A. Yes.

Q. And do you see at the top of the page there is a logo that indicates this is from Military.com

A. Yes.

Q. And do you see the title of this article is "VA Asks for Historic $4.1 billion for Construction as Agency Weighs Closing Some Aging Medical Facilities"?

A. I do see that.

Q. I will give you a quick moment if you'd like to review this article. Please let me know when you're finished.

A. (Reviews document.)

Okay. I've read through that.

Q. And did you see a quote attributed to you in that article?

A. Can you refer me to the page that you are looking at?

Q. I am on the third page --

A. Okay.

Q. -- and the third to last paragraph. It says:

"'The need for funding and investment in facilities is only going to increase, and this is one of the ways the administration thinks we might be able to get to that issue, starting now,' said Andrew McIlroy, the VA's deputy assistant secretary for budget."

A. I see that, yes.

Q. Could you briefly describe for me the need for funding and investment in facilities within the VA.

A. So the VA has approximately 172 medical centers and 12 to 14 locations of care. The average age of a VA hospital is now reported in the 50- to 60-year-old range. Whereas, the average age of a private sector hospital is maybe in the 10- to 20-year range.

So doctors and care providers often find that VA facilities are not adequate to meet

the care demands of today, and so that's why there is the estimated need for significant replacement or investment in facilities.

Q. Is it fair to say that you're highlighting a gap between what the VA needs for these projects and what has been currently funded?

A. There is a gap, yes, between what is needed and what is funded. That is true.

Q. Thank you.

Mr. McIlroy, we are just about at an hour on the record. Would you like a short break to grab some water, anything like that?

A. Ah, you know, we can keep going. I'm fine. I have some coffee here.

Q. Okay. Are you familiar with the Rand Corporation?

A. In general, yes.

Q. Are you aware that the Rand Corporation reviews budgeting information regarding veterans programs and federal resource allocation?

A. In general, yes.

MR. VANSLYKE: I will share in chat a report from the Rand Corporation.

I will mark that as Exhibit 6.

(Document marked for identification as McIlroy Exhibit 6.)

BY MR. VANSLYKE:

Q. And can you see my screen at the moment?

A. I can.

Q. So at the bottom of the first page, do you see the logo from the Rand Corporation?

A. I do.

Q. And the title appears to be "Volume 6, Planning, Programming, Budgeting, and Execution in Comparative Organizations," correct?

A. Yes.

Q. And the subtitle is "Additional Case Studies of Selected Non-DoD Federal Agencies," correct?

A. It is, yes.

Q. And on the second page, I see this copyright from 2024, correct?

A. I see that as well.

Q. So I have used the Control F feature for the name "McIlroy" and do you see on page 29 as a source they say the "Authors' analysis of

information from McIlroy, 2023"?

A. I see that, yes.

Q. Do you understand what that citation would be to?

A. As I recall, they came to talk to me. We provided them some documents. It's been a while.

Q. So I'm looking at Footnote 54, which says "Fiscal Year 2025 budget and performance guidance was issued on May 2, 2023 (McIlroy, 2023)."

Do you see that?

A. I do.

Q. Could you explain to me what that guidance document is?

A. So I believe they are referencing our annual budgetary guidance. So as you see in the graphic above, there's kind of a process and a timeline for submitting the budget.

So in the early summer, we ask the components of VA to submit their budget requests for the coming budget year. And then in the midsummer, you see there July. We review those generally with the Secretary, and in August we

submit those to OMB.

And so that's OMB's guidance document kicks off the process and says: VA components please submit your budget submissions in this fashion and on this timeline.

Q. And is there subcomponent -- some component of that information that is not available to the public?

A. All that information would be predecisional.

Q. So I'm looking at Footnote 52 now, which says "Andrew McIlroy, Fiscal Year 2025 Internal Budget and Performance Submission Guidance, U.S. Department of Veterans Affairs, May 2, 2023, Not available to the general public."

Do you see that?

A. I do.

Q. Do you understand what that is describing as "not available to the general public"?

A. I do.

Q. Could you explain to me which part of that is not available to the general public?

A. So the budget process is, in

general, considered predecisional and not subject to public release. These would be internal documents directing, like explaining the Secretary's priorities or the President's budgetary priorities, those kind of things. So we do not post those documents to public websites.

Q. Thank you.

I will stop sharing for now.

Is it fair to say that you are recognized in the policy and budget community as an expert on VA funding and appropriations?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: I think I have great expertise.

BY MR. VANSLYKE:

Q. Would you agree that others in the policy and budget community appear to cite to you as an authority?

A. Some have, yes.

Q. And over your 20-plus-year career in federal budget work, you have seen multiple administrations and Congresses, correct?

A. That is true, yes.
Q. And has that included shifts in fiscal and political priorities?
A. Yes.
Q. And your work has included adapting to those shifts, correct?
A. Correct.
Q. And it seems that you have been able to do so successfully, correct?
A. I think so, yes.
Q. You have been able to fulfill your job duties under each fiscal year, correct?
A. Correct.
Q. Are you aware that the United States has identified you as a nonretained expert in the Camp Lejeune Water Litigation?
A. Yes.
MR. VANSLYKE: I will place in chat the United States damages disclosures.
THE WITNESS: That's File 3A?
MR. VANSLYKE: Correct, File 3A, and I will mark that as Exhibit 7.
(Document marked for

identification as McIlroy Exhibit 7.)

BY MR. VANSLYKE:

Q. Can you see that I'm sharing my screen?

A. Yes.

Q. And you can see that this is a document in regard -- In re the camp -- excuse me. Let me rephrase.

This is a document In re Camp Lejeune Water Litigation in the United States District Court for the Eastern District of North Carolina, correct?

A. I see that, yes.

Q. And scrolling down, do you see the title "The United States' Second Disclosure of Expert Testimony for Phase III Pursuant to Federal Rule Civil Procedure 26(a)(2) and D.E. 630," correct?

A. I do see that, yes.

Q. And I have searched for your name, which brings me to page 3.

And do you see your name listed here?

A. I do.

Q. And will you briefly review the first paragraph and let me know when you're finished.

A. (Reviews document.)

I finished.

Q. Does that fairly describe the job history that we have just discussed in detail?

A. It does.

Q. And do you see the following paragraph reads:

"Mr. McIlroy is expected to offer testimony under Federal Rule of Evidence 702, 703, or 705 to include opinions about the sources of funding of benefits programs administered by VBA. In particular, Mr. McIlroy is expected to support his opinions based on the following information: A. VA's disability compensation and pension benefits are funded through annual Congressional appropriations. B. These appropriations are from the general fund, meaning VA benefits are funded through general taxpayer revenues and federal borrowing."

Did I read that correctly?

A. You did.

Q. Were you aware that you were expected to offer this testimony?

A. I am aware, yes.

Q. Does this accurately describe all of the testimony that you are aware of being expected to offer at this time?

A. Yes.

Q. Do you agree that the VA's disability compensation and pension benefits are funded through annual congressional appropriations?

A. Yes.

Q. Could you briefly describe for me what that means?

A. So every year, as you saw previously, we go through a budget process where we estimate the needs for veteran compensation and pension. We work through OMB, and the President makes a request to Congress in the annual President's budget. Congress will hold a series of budget hearings and deliberates and then ultimately appropriates funds for disability compensation and pension.

Q. And would you agree that these

appropriations are from the general fund, meaning VA benefits are funded through general taxpayer revenues and federal borrowing?

A. I agree, yes.

Q. And could you please briefly explain to me what that means?

A. So federal government every year collects money from a variety of sources. Most of the money that funds the federal government comes from general taxes, which is personal taxes and corporate taxes, and that's supplemented by federal borrowing because the income is not sufficient to pay all the expenditures, and all that funding goes into the general fund.

The federal government is big. There are a variety of different funds, but in the case of compensation and pensions, those costs are paid through taxes and borrowing that flow into the general fund.

Q. Do I understand correctly that the general fund encompasses more than benefits programs administered by the VBA?

A. It does, yes.

Q. Are there alternative sources of

funding for federal government programs other than the general fund?

A. It depends. You know, so, for example, you and I all pay Social Security tax, and that goes into the Social Security fund. You pay -- when you buy gasoline, you pay a gas tax, and that goes into the kind of road transportation fund. But, in general, individual and corporate income tax goes into the general fund.

Q. And using your example of the Social Security fund, other than the source of the tax funding, could you explain to me the difference between the general fund and the Social Security fund?

MR. KLOTZBUCHER: Object to form and foundation.

You may answer.

THE WITNESS: They are for different purposes. So the general fund funds, in general, the general operations of the federal government. Social Security trust fund funds Social Security benefits.

BY MR. VANSLYKE:

Q. What does it mean when you refer to it as a "trust fund"?

MR. KLOTZBUCHER: Object to foundation.

THE WITNESS: If you want to know about Social Security, you should go ask people from Social Security.

BY MR. VANSLYKE:

Q. In general, how would you describe a trust fund?

A. So a trust fund has kind of -- it depends. A private trust fund could mean, you know, a corpus of funding supports whatever activity through interest of the trust fund. So it can depend.

Q. Does the general fund operate on interest in the same way?

A. No.

Q. And why not?

A. That's how Congress has established it.

Q. What about the general fund precludes it from operating on interest?

A. The federal government operates at a

deficit. So there, you know, the general fund receives funds from taxpayers and borrowing and then, you know, that money is disbursed through the programs of the federal government.

Q. Are there any VA programs that operate on a trust fund?

A. Like, the definition of trust fund is complicated. VA programs operate in a variety of different ways.

Q. Are there any VA programs that operate on interest accrual rather than annual appropriations?

MR. KLOTZBUCHER: Object to form.

THE WITNESS: Yeah.

BY MR. VANSLYKE:

Q. Is there something that you don't understand about that question?

A. Can you rephrase it?

Q. Are there any VA programs that operate on funds not contained in annual congressional appropriations?

A. Yes.

Q. Could you describe those for me?

A. The VA canteen operation, for example. If you go to a VA hospital, you can have lunch at, you know, the lunch counter. We call it the canteen, or there's probably a convenience store, coffee shop at a VA hospital. All those operate on self-funded basis, for example, in general, except during the pandemic.

The VA operates insurance programs and, in general, those are funded through insurance payments of the beneficiaries or of the program participants, rather.

Q. Is it correct to say that none of the VBA benefits are operated on funds other than annual congressional appropriations?

A. The home loan program, for example, the VA guaranteed loan program, in general, much of that operates without an annual appropriation. That's possible because veterans pay an application fee. When they receive the loan, they pay a reduced rate of interest or they pay -- yeah, in general that operates without an annual appropriation.

Q. When you referred to insurance programs, were those for employees of the VA?

A. No. Those are for veterans or service members.

Q. Could you describe those insurance programs for me?

A. There are a variety of insurance programs. You can have -- look on the VA website for details, but they are, in general, life insurance programs. So if you want to have life insurance, this is -- could be an affordable option for obtaining life insurance.

Q. When you referred to those insurance programs, were you including any medical insurance programs?

A. No.

Q. So looking back at this document, under bullet B it says:

"VA benefits are funded through general taxpayer revenues and federal borrowing."

Given that you just described programs that are not funded through general taxpayer revenues and federal borrowing, could you more clearly define which VA benefits are funded through general taxpayer revenues and federal borrowing?

A. Specifically --

MR. KLOTZBUCHER: Objection. Foundation.

You may answer.

THE WITNESS: So specifically disability compensation and pension benefits are funded through the general fund.

BY MR. VANSLYKE:

Q. And would that include all VBA disability payments?

A. It includes disability compensation and pension payments paid through that fund, yes, or that account, rather.

Q. What would be disability and compensation benefits not paid through that account?

A. Oh. Yeah, I don't think there are any. It's complicated, but I don't think there are any. Yeah. No, there are none.

Q. Does this meaning of VA benefits include all variables to VBA disability payments, such as special monthly compensation rates?

A. Yes.

Q. Do you understand what DIC benefits are?

A. You could explain it.

Q. One moment.

Apologies. I was forgetting the acronym for a moment.

DIC is Dependency and Indemnity Compensation benefits.

Are you aware of those benefits?

A. Do you have a further explanation?

Q. My understanding is that DIC benefits are a tax-free monthly payment for eligible surviving spouses, children, or parents of service members who died in the line of duty or from service-related injuries.

Do you understand that to be correct?

A. That sounds accurate, yes.

Q. Is it fair to say that those benefits are distinct from the VBA disability benefits that veterans receive?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: Can you rephrase?

BY MR. VANSLYKE:

Q. Would you classify VBA disability benefits and the DIC benefits that we just discussed as the same thing?

A. They are provided for different purposes. They are different.

Q. Are DIC benefits included in this meaning of "VA benefits are funded through general taxpayer revenues and federal borrowing"?

A. They are paid through the compensation and pension account.

Q. And you previously stated that, to the best of your knowledge, all benefits through that account are funded through general taxpayer revenues and federal borrowing, correct?

A. Correct.

Q. Are you aware of the VA Community Care Network?

A. I am.

MR. KLOTZBUCHER: Objection. Foundation.

You may answer.

THE WITNESS: Although you can explain it. Go ahead.

BY MR. VANSLYKE:

Q. My understanding of the Community Care Network is that it is more or less analogous to essentially an out-of-network provider on a private insurance program.

Is that accurate?

MR. KLOTZBUCHER: Objection. Foundation.

THE WITNESS: More or less, you know. Can you give a better description?

BY MR. VANSLYKE:

Q. Apparently my description is inadequate. Could you describe it for me?

MR. KLOTZBUCHER: Objection. Foundation.

You may answer.

THE WITNESS: The Community Care Network is how we provide for veteran health care in non-VA facilities.

BY MR. VANSLYKE:

Q. And are those benefits included in

this statement that "VA benefits are funded through general taxpayer revenues and federal borrowing"?

A. So those benefits are paid through a different account. It's paid through the VA health care account, but it is funded through the general fund. That is true, yes.

Q. Are there differences in how the VA budgets for those two accounts?

A. Yes.

Q. Could you briefly describe the differences?

A. Well, they're budgeting for different things. So in the case of the comp and pen account, we are estimating the payments for veterans and their family members for compensation and pension costs, and in community care for medical services, all the VA health care accounts we are estimating the cost of health care.

So they are different.

Q. You described the Community Care Network as how the VA pays for services not at a VA medical facility; is that correct?

A. That is true.

Q. Would it be fair to describe those payments as reimbursements?

MR. KLOTZBUCHER: Objection. Form and foundation.

You may answer.

THE WITNESS: So doctors or hospitals in the community provide services to veterans. Those services are not free. The VA pays for those services.

BY MR. VANSLYKE:

Q. Mr. McIlroy, you have not prepared a written expert report for this litigation, correct?

A. That is correct.

Q. While I understand you are capable of testifying in much greater detail about these topics, are the topics that we have discussed under bullet points A and B an accurate summary of the opinions that you expect to offer in this litigation?

A. Yes.

Q. Have you reviewed any deposition transcripts from this case in preparation for your

testimony today?

A. I have not.

Q. Have you reviewed any of the expert reports that have been issued in this litigation?

A. I have not.

Q. I am moving to page 2 of the same document.

Do you see that this identifies Jadine Piper?

A. I do.

Q. And it says here that "Jadine Piper has served as Acting Assistant Director for Policy at the VBA since March 10, 2025"; is that correct?

A. I do not personally know Jadine but...

Q. Do you agree that that's what it says in the document shared on the screen?

A. That is what it says, yes.

Q. So you said you do not know Jadine personally, but have you worked with Jadine Piper?

A. I don't recall.

Q. Is it safe to assume then that you have not spoken to her about this case?

A. I have not spoken to her about this

case.

Q. Okay. I'm moving back to your section of this document, and you can see on the screen again bullets A and B, correct?

A. I can, yes.

Q. Do I understand correctly that you are not offering any opinion that VA will pay any specific future benefit amount to any individual plaintiff?

A. I have no knowledge of that.

Q. And similarly, you are not offering any opinion that current benefit laws will remain unchanged for the lifetime of any individual plaintiff, correct?

A. I have no ability to predict the future.

Q. And you are not offering any opinion about how damage calculations should be performed in this litigation, correct?

A. I have no opinion on that.

Q. And you are not offering any opinion predicting specific future congressional actions regarding veterans benefits, correct?

A. I cannot predict what Congress will

do in the future.

MR. VANSLYKE: Okay. I will stop sharing my screen.

I would like to take a short break before we continue.

Can we go off the record?

THE VIDEOGRAPHER: All right. We're going to go off the record at 10:30 AM.

(A recess was taken.)

THE VIDEOGRAPHER: Back on the record at 10:44 AM.

BY MR. VANSLYKE:

Q. Mr. McIlroy, if I refer to the VA's annual Budget in Brief, do you know what I'm referring to?

A. Yes.

MR. VANSLYKE: I am placing in chat the Fiscal Year 2026 Budget in Brief, which I will mark as Exhibit 8.

(Document marked for identification as McIlroy Exhibit 8.)

BY MR. VANSLYKE:

Q. And can you see that I'm sharing my

screen?
A. I can, yes.
Q. And this document says "U.S. Department of Veterans Affairs Fiscal Year 2026 Budget Submission," correct?
A. It does, yes.
Q. And at the bottom it says "Budget in Brief May 2025," correct?
A. Correct.
Q. Were you involved in the creation of this document?
A. Yes.
Q. I have scrolled down to page BiB-3. And do you see the title "VA Funding"?
A. I do.
Q. And below that is a table "VA Total Appropriations," correct?
A. Correct.
Q. Or would it be more accurate to call this a graph?
A. It is a graph. It's a bar graph, yes.
Q. And then below that is a table

titled "Funding History," correct?

A. Correct.

Q. In the bar graph section, I see the key at the top for mandatory versus discretionary appropriations, correct?

A. Correct.

Q. I know we have talked a little bit so far about mandatory versus discretionary appropriations, but could you please explain the difference between the two?

A. In general -- excuse me.

So, in general, discretionary appropriations are usually or often described as those appropriations that are subject to the annual appropriation action of Congress, and mandatory appropriations are frequently described as funding which is not subject to the annual appropriation action of Congress. However, in the case of VA, that is not true.

The VA mandatory funding is a part of the annual appropriation, and it describes a different stream of funding but still subject to the annual appropriation process.

Q. Is that true for all VA funding

labeled "mandatory" or is there any that is not subject to the annual appropriation?

MR. KLOTZBUCHER: Objection. Foundation.

You may answer.

THE WITNESS: Is -- mandatory funding is -- comes from the annual appropriation process. That is true.

BY MR. VANSLYKE:

Q. Can you explain to me how that's consistent with your previous statement that that is not the case for VA mandatory funding?

MR. KLOTZBUCHER: Objection. Foundation. Form.

THE WITNESS: That was -- that is consistent. I have been consistent.

BY MR. VANSLYKE:

Q. Did I understand correctly that you stated that mandatory funding is typically that which is not subject to the annual congressional appropriation?

A. So that is true of many types of mandatory funding, like food stamps, for example.

The SNAP program is a mandatory program. If you look, that is -- doesn't have an annual appropriation and that is an annual or a mandatory program.

But in the case of VA, Congress can always do what it wants, and Congress chooses to annually appropriate mandatory funding for the VA.

Q. For examples like SNAP benefits that you pointed to, how is that funding provided if not through annual appropriations?

A. Yeah.

MR. KLOTZBUCHER: Objection. Foundation.

THE WITNESS: Yeah. You can -- you can go talk to somebody from USDA about that, but those appropriations often have the language "such sums as necessary" so there's not a specific number.

BY MR. VANSLYKE:

Q. Would it be fair to say that legislation provides instructions to fund programs as necessary without specifying what those funds would be?

MR. KLOTZBUCHER: Objection. Form.

THE WITNESS: Yeah. I don't understand the question. Can you rephrase?

BY MR. VANSLYKE:

Q. I'm trying to understand what you just described for me.

So you said they often use language like "such funds as necessary," correct?

A. Some mandatory programs do use such language. That is true. Yes.

Q. And if Congress uses that language, what does that mean in terms of funds being allocated?

A. Funds are available as needed. So, you know, if you read in the Constitution, as you no doubt have, you know, "no funds shall be drawn from the Treasury but by action of Congress." So that is an action of Congress, and the phrase "such sums as necessary" allows funds to be drawn from -- from to be spent.

Q. And you've stated that VA funding is not allocated in that way, correct?

MR. KLOTZBUCHER: Objection. Form.

BY MR. VANSLYKE:

Q. I'm sorry. Did you answer? I didn't hear.

A. I did not.

Q. Would you like me to rephrase the question?

A. Yes, please.

Q. Are you aware of any VA programs that are funded through mandatory funds in that way?

A. In what way?

Q. In the way that you have described with language like "such funds as necessary."

A. If you look in the annual appropriations bill, you will see that one of the loan programs has that phrase "such sums as necessary," but the other programs like compensation and pension does include an annual specific appropriation number in the appropriation bill.

Q. And is the same true for VHA funding?

MR. KLOTZBUCHER: Objection to foundation.

THE WITNESS: Yeah. Is what true?

BY MR. VANSLYKE:

Q. What you just described about the compensation and pension fund being specified for annual appropriations, is that also true for VHA?

A. Yes, VHA also receives an annual appropriation.

Q. Can you explain to me how mandatory funds subject to an annual appropriation are different from discretionary funds?

A. So they are different in that they are treated differently in congressional accounting and in congressional budgeting. So often in the congressional budget process, there is focus on the discretionary funding.

Specifically if you read news reports about the annual appropriation process, you will hear people talk about they want to see, you know, growth or no growth in the nondefense discretionary accounts -- so VA would be part of that as well as DOJ and other federal agencies --

as opposed to growth in the defense discretionary accounts. So there's often debate about the level of growth of the discretionary funds for defense and nondefense.

Q. And looking at the graph in this document, I see from Fiscal Year 2022 through 2026, the discretionary funds have varied between 116.3 billion to 140.1 billion; is that correct?

A. 140 billion, yes.

Q. The widest range not chronologically is 116.3 to 140.1, correct?

A. Just doing the math from year to year, that is a jump of -- yes, that would be the biggest jump.

Q. And from Fiscal Year 2022 to Fiscal Year 2026, I see a range of 157.5 billion to 301.2 billion, correct?

A. Correct.

Q. Would you agree that the difference between 301.2 billion versus 157.5 billion is greater than the difference between 140.1 billion versus 116.3 billion?

A. Mathematically, yeah.

Q. So is it fair to say that there has

been more change in the mandatory spending than there has been in the discretionary spending?

A. Yes.

MR. KLOTZBUCHER: Objection. Form.

BY MR. VANSLYKE:

Q. Can you explain to me why there has been such a significant change in the mandatory spending?

A. So the primary driver in the mandatory spending is compensation and pension. There's also education benefits in there, and over time the number of veterans who are receiving compensation and pension benefits has increased as well as the average amount of benefits that those veterans has received.

Also within that, those green bars, the mandatory count starting in 2022, there is also the addition of the TEF funding, the Toxic Exposures Fund.

Q. So you indicated that there has been an increase in the average amounts received under the compensation and pension fund, correct?

A. That is true. Yes.

Q. Are you aware of why that average amount has increased?

A. So if you look over time, the average disability rating for veterans has increased.

Q. And you also stated that there has been an increase in the number of veterans receiving those benefits, correct?

A. That is true.

Q. Are you aware of any reasons why that has increased?

A. The PACT Act is a primary contributor to that.

Q. And if I look down at the Funding History table, I'm looking at the Total VA line. It looks like going back to 2016, the total VA budget was 166.9 billion; is that correct?

A. That is correct.

Q. So between 2016 and 2026, it has increased from 166.9 billion to 441.2 billion?

A. That is correct.

Q. Looking at the 2026 mandatory versus discretionary in the graph, is it fair to say that mandatory spending represents roughly two-thirds

of the VA's total budget?

A. Approximately. You could do the math.

Q. Under VA mandatory spending, does that automatically grow as more people qualify for benefits?

A. As more veterans receive benefits, the budget will grow, yes.

Q. But that is still subject to annual congressional appropriations?

A. That is true.

Q. And you have spoken about the general fund operating at a deficit.

Would that deficit increase as these funds increase unless Congress raises revenues in other ways?

A. So the veteran benefit costs and veteran health care costs contributes to total federal expenditures, and those federal expenditures do exceed, you know, taxpayer revenue and force the federal government to borrow. That is true.

Q. So absent other changes to revenue, if the mandatory spending in Fiscal Year 2027 were

to increase by $100 billion then presumably the deficit would increase by $100 billion?

MR. KLOTZBUCHER: Objection. Foundation.

THE WITNESS: There are many factors that go into the deficit calculations.

BY MR. VANSLYKE:

Q. You do agree that the VA mandatory spending comes from the general fund, correct?

A. I do.

Q. And you have stated that the general fund operates at a deficit --

A. That is true.

Q. -- correct?

If the other variables remain the same but the VA mandatory spending increased, the deficit would also increase, correct?

A. That seems logical, yes.

Q. Do you know how many individuals receive benefit payments through the compensation and pensions fund?

A. It's under 7 million. It's in the bid.

Q. And I believe you stated that the compensation and pensions fund is the largest component of the VA's mandatory budget, correct?

A. Yes.

Q. Have you heard disability benefits referred to as appropriated entitlements?

A. Yes.

Q. Do you understand what that refers to?

A. You could explain it.

Q. I don't understand. Could you explain it?

A. Yes. So it's called an "entitlement" because the veterans by law if they meet the criteria for the benefits, they are entitled to receive them. But as we have discussed, it is included in the -- or funding for those benefits is included in the annual appropriations act and is appropriated on an annual basis. So they are called "appropriated entitlements."

Q. Is that different than if something were described simply as an entitlement?

A. I don't know. I suppose it depends

on the context.

Q. If I were to describe VA disability benefits as simply entitlement benefits, would you disagree?

MR. KLOTZBUCHER: Objection. Foundation. Hypothetical.

BY MR. VANSLYKE:

Q. You can still answer.

A. Can you repeat the question?

Q. If I were to refer to disability benefits through the VBA as entitlements, would you disagree?

MR. KLOTZBUCHER: Objection. Foundation and form.

BY MR. VANSLYKE:

Q. You can still answer.

A. No.

Q. You would not disagree with that statement?

A. I would not disagree with that statement.

Q. So you do not think it's necessary to distinguish them as appropriated entitlements?

MR. KLOTZBUCHER: Objection.

Form and foundation.

THE WITNESS: Yeah. It depends on the context.

BY MR. VANSLYKE:

Q. In what context would that distinction matter?

A. In the appropriations process. If there was no appropriation, there would be no money.

Q. And what would that mean?

A. There would be no money to pay those benefits without the annual appropriation.

Q. And what would happen to those benefits?

A. So if there was no appropriated funding, then what happens is, we would hold those payments until there was an appropriation and we would make those back payments.

Q. So looking at this graph, the 2026 fiscal year includes $301.2 billion in mandatory spending, correct?

A. Correct.

Q. And you have stated that this includes the compensation and pensions fund,

correct?

A. Compensation and pensions account, yes.

Q. And if at the end of Fiscal Year 2026 there had been 50 billion additional benefits owed, you would not have funding appropriated for those benefits at this time, correct?

A. In the compensation and pension account, if we had more payments due than we had funding, we wouldn't have been able to pay those benefits. That is correct.

Q. And would the outcome be similar to what you're describing, that you would hold those payments until funding was received?

A. Yes.

Q. And earlier you stated that you cannot predict what Congress will do, correct?

A. I cannot predict what Congress will do, yes. True.

Q. Is it possible that Congress would choose not to fund those benefits entirely?

MR. KLOTZBUCHER: Objection. Foundation.

BY MR. VANSLYKE:

Q. You can still answer.
A. Can you restate the question?
Q. Is it within Congress's power to choose not to fund those benefits entirely?
A. Generally, Congress can do whatever it wants. Historically, they have always funded veteran benefits, though.
Q. Understood.
All right. I will stop sharing.
So we have spoken already about the appropriations process, and I would like to just walk through that cycle.
So your office leads the budget formulation for the VA, correct?
A. Correct.
Q. And the VA prepares a budget request and submits it to OMB?
A. Correct.
Q. And you are very involved in that process, yes?
A. I am, yes.
Q. OMB then reviews that budget request, correct?
A. Correct.

Q. And do they have the ability to make adjustments?

A. They do.

Q. And once OMB approves the budget request, they would include it in the President's budget submitted to Congress, correct?

A. That is true. Yes.

Q. And when Congress considers the VA appropriations, it goes through the appropriations committees and subcommittees?

A. That is true. Yes.

Q. And then once Congress passes an appropriations bill or a continuing resolution and the President signs it, the VA receives budget authority, correct?

A. Yes.

Q. And you've stated that even for mandatory programs like compensation and pensions, Congress must enact an appropriation providing that budget authority each year, correct?

A. Correct.

Q. And after appropriations are enacted, OMB apportions the funds to the VA, correct?

A. That is true. Yes.
Q. So this means that OMB sets limits on how much the VA can obligate in a given period, correct?
A. Within certain parameters of law, they cannot impound the funds, but yes, they can place criteria in the apportionment document.
Q. And the VA must comply with the OMB's apportionment, correct?
A. That is true. Yes.
Q. And the VA cannot obligate more than the apportioned amount?
A. That is true. Yes.
Q. To your knowledge, does OMB have any authority to adjust VA's apportionments or allocations in a way that reflects OMB's priorities among different federal departments?
A. So OMB has authority to make adjustments to the apportionments. The basis for their adjustments, you should ask them.
Q. I'm not asking for a basis, but it sounds like you are confirming that they have the ability to make those adjustments?
A. That is true. Yes.

Q. And then within the VA, you or your office would then allocate funds to the various administrations within the VA, correct?

A. Correct.

Q. And within the VA, do you have authority to adjust allocations across these administrations based on priorities within the VA?

A. No. We are bound to follow the appropriations act and the numbers provided in the apportionments.

Q. And earlier you described if you transfer funds from one account to another that you have to go back and seek approval from OMB and Congress, correct?

A. We have to follow the law. That is true.

Q. Did I mischaracterize the law?

A. No.

Q. Okay. So there are multiple layers of approval required for VA spending, correct?

A. That is correct. Yes.

Q. It requires congressional approval, OMB approval, and VA approval?

A. That is correct.

Q. And if Congress fails to pass appropriations and there's a lapse in funding, the VA cannot make payments even for mandatory programs without appropriated funds, correct?

A. That is true, except Congress in the case of compensation and pension and the health care accounts has provided an advance appropriation. So they are providing money a year in advance which enables us to continue making payments even in the case of a government shutdown, which we call a lapse in appropriations.

Q. You said that was for health care spending, correct?

A. As well as for compensation and pension.

Q. So the compensation and pension is funded a year in advance?

A. Correct.

Q. When you say "a year in advance," do you mean a full year in advance or it is paid through the end of the upcoming fiscal year?

A. A full year in advance. So in FY25, if you look at the appropriation act in FY25, they made an appropriation for the entire estimated

amount for FY26.

Likewise in FY26, in that appropriation act, they appropriated funds for the entire estimated amount of payments in FY27. So we have money today in FY26 for the entire estimated amount for FY27 as of the estimates that we released in May of 2025.

Q. And those estimates would be based on the actuarial analysis that we discussed earlier, correct?

A. Yes.

Q. So when you describe these funds being allocated in advance, do you know the end date of the current funding?

A. When the funds are appropriated, they are appropriated to be available until expended. So Congress appropriates funds in a variety of fashions. Sometimes they appropriate single year funds. Sometimes they appropriate funds that are available for an obligation or expenditure over the course of multiyears, or in some cases like compensation and pension, they are appropriated until expended. So they are good until they are completely obligated.

Q. When you talk about the estimates that those one year in advance appropriations are based on, what is the end date of those estimates?

A. So the estimates are based on the expected payments to be made in that fiscal year. So in the FY26 budget, we made estimates for the total sum of payments -- in this case compensation and pension payments -- to be made in FY27, and that's the number that was included in the budget request to be made and appropriated in advance for FY27.

Q. So to clarify, those are through the end of Fiscal Year 2027?

A. Correct.

Q. And do I understand that correctly that you would refer to the end of Fiscal Year 2027 as being in 2028 calendar year?

A. No. 20 -- the end of FY27 will be September 30, 2027.

Q. Thank you.

Are you familiar with the Antideficiency Act?

A. I am.

Q. Could you describe for me in your

own words how that applies to the VA and its appropriations?

A. The Antideficiency Act applies to, in general, all federal agencies and all federal appropriations. It says that you cannot exceed or you cannot obligate or expend greater than the appropriated amount.

Q. Is that the basis for what you stated earlier that if funds were not appropriated, you would pause payments until funds were appropriated?

A. That is true. That is one of the reasons why.

Q. Would you agree that in recent years Congress has sometimes failed to pass a full year appropriations by the start of the fiscal year?

A. That is true.

MR. KLOTZBUCHER: Objection. Foundation.

You may answer.

BY MR. VANSLYKE:

Q. And when that happens, Congress sometimes passes a continuing resolution, correct?

A. That is true.

Q. Can you explain to me how a continuing resolution applies to VA's funding?

A. Yes, I can.

Q. Will you please do so?

A. Yes. So essentially when a continuing resolution is passed, that means that agency receives the same level of funding as in the prior year. So yes.

Q. Would you say that a continuing resolution creates any uncertainty for VA budget planning?

A. Yes, it is uncertain.

Q. Can you describe what uncertainties it creates?

A. So when there is a continuing resolution, we do not yet know the full year funding. So that is the degree of uncertainty. We are subject to the prior year funding level.

Q. And are you subject to the entire prior year's funding level or only a portion of it?

A. Depends on from account to account. So in the case of those accounts like compensation and pension where we have advance request or an

advance appropriation, that is the amount of funding that would be available during a CR.

So in those cases, even though there is a CR, for compensation and pension as well as for the medical care accounts, there is no uncertainty because we have the advance appropriation.

Q. We spoke earlier about the mandatory spending can fluctuate based on preexisting legislative instructions, correct?

A. Mandatory spending will vary based on the law. So veterans are entitled to receive benefits. Those benefits are due by the law. So if the law changes, veteran benefits will change.

Q. So if the VA in a given period is subject to a continuing resolution binding them to the prior year's spending, does that allow for increased spending as required by the laws creating mandatory appropriations?

A. So a CR doesn't change the level of benefits to which veterans are entitled.

Q. If the number of veterans entitled to those benefits increases in a period while the VA is subject to a continuing resolution, does the

continuing resolution allow the VA to pay those increased benefits to those additional veterans?

A. So paying benefits requires VBA employees to process the monthly payments. It requires VBA employees to process claims and determine eligibility and, thus, make payments.

But even during the CR, those activities related to the payment of benefits, processing the annual or the monthly payments, receiving claims, reviewing claims, approving claims, all those are considered excepted activities and they continue during a CR.

So a CR doesn't impact veterans receiving benefits.

Q. Would that change after a certain period of time if a full appropriation is not passed?

A. No.

Q. Why not?

A. Because the function in providing claims is considered an excepted function, and it's not related to the duration of the CR. So if the CR was a day or 45 days, those employees in VBA that process claims and provide for the

monthly payments continue to work.

Q. And the payments to the veterans themselves would also continue throughout the CR?

A. Yes, because those payments were -- specifically for compensation and pension were provided in advance. So we have all the funds that we estimated.

So in the case of this year where we had a CR of some 45 days, we had all the advance appropriation for compensation and pension for the estimated amounts of claims in FY26.

Q. If a series of CRs were passed through the end of the advance appropriations, would the CR allow those benefits to continue being paid at the current levels?

A. So historically, yes. So in FY25, for example, there was a full year continuing resolution. So Congress did not enact a normal appropriation. They enacted a full year continuing resolution. And in that bill if you were to look, you would see that Congress appropriated the amount estimated in the President's budget as an advance for FY26.

Q. Do I understand correctly that that

is another instance of specific congressional appropriation for those benefits as opposed to an inherent feature of a CR?

A. If you look in the FY25 appropriations act, which was a full year continuing resolution, you will see that Congress appropriated funds in advance for the compensation and pension account, yes.

Q. If that provision had not been included in the CR, those funds would not have been allocated in advance, correct?

A. Correct.

Q. In addition to appropriations, Congress can also amend statutes governing VA benefits, correct?

A. That is true. Yes.

Q. Are you aware of Congress doing so?

A. Yes.

Q. For example, can Congress change eligibility criteria for VA benefits?

A. They have, yes.

Q. Can Congress change criteria for how ratings are to be applied to disability benefits?

A. They could, yes.

Q. Can Congress change formulas for those benefits?
A. They could, yes.
Q. Can Congress change how cost-of-living adjustments are applied to those benefits?
A. Presumably, yes.
Q. Can Congress change dependency allowances that modify those benefits?
A. They could, yes.
Q. Can Congress change survivor benefits, such as the DIC benefits we discussed earlier?
A. They could, yes.
Q. So all of those potential changes to VA benefits programs are within Congress's power to change, correct?
A. Yes.
Q. And, for example, Congress has previously expanded presumptions related to Agent Orange, correct?
A. That is true. Yes.
Q. Congress has made changes related to the GI Bill and education benefits, yes?

A. Yes.
Q. Have they made changes to housing and readjustment benefits?
A. They have.
Q. So while current law creates an appropriated entitlement structure, future law could reduce or restrict those benefits, correct?
A. The law could change in the future. That is true.
Q. And as you stated previously, you would not be able to predict what Congress would do in this regard, correct?
A. I cannot predict what Congress will do. That is true.
Q. From a budget perspective, a change in eligibility requirements or benefit formulas would directly affect the amount that the VA needed to request in future appropriations, correct?
A. That is true.
Q. Have you made previous adjustments to VA budget requests based on those topics?
A. Yes.
Q. And even if Congress does not change

the underlying benefits themselves, you agree that Congress could fail to appropriate sufficient funds to pay all VA benefits, correct?

A. That is true.

Q. Earlier I referenced Fiscal Year 2024 when the VA made a supplemental appropriations request for 2.9 billion.

Do you recall discussing that?

A. I do.

Q. Would you agree that that supplemental request was made based on a perceived need of concern for inadequate funding?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: Yes.

BY MR. VANSLYKE:

Q. Is there something you'd like to clarify about that statement?

A. I think that is an accurate statement. We estimated there was a need for additional funding and we asked for additional funding. Potentially a need for additional funding would be the most correct way to describe

it.

Q. Was it later determined that the VA in fact had sufficient funding?

A. Yes, we did determine that.

Q. But if that had not been the case and the supplemental funding had not been granted, the VA would have faced a shortfall in the compensation and pensions account, correct?

A. That is true. Yes.

Q. Would that have been despite the funds in the compensation and pension account being appropriated a year in advance?

A. Yes.

Q. And that supplemental request had to go the full approval process that we discussed earlier, correct?

A. That is true. We worked with people here at VA and OMB and we made a request through OMB and the President to Congress for additional funds.

Q. So in the event of a shortfall like the one the VA was concerned about in 2024, there is no automatic mechanism to ensure that Congress will always provide supplemental appropriations,

correct?

A. That is true. We have to ask for additional funds.

Q. Would you agree that the VA has no authority to simply create new budget authority on its own?

A. As the law currently reads, we do not have that authority.

Q. And would you agree that the VA cannot spend beyond appropriated amounts?

A. That is true. We cannot spend beyond appropriated funds amounts.

Q. So from a legal and financial control standpoint, the VA's ability to pay benefits is constrained by the amount Congress has appropriated, correct?

A. That is true.

Q. Are you aware generally that external budget analysts often identify veterans benefits as one of several rapidly growing mandatory aid programs?

A. I have --

MR. KLOTZBUCHER: Objection.

You may answer.

Objection.

THE WITNESS: I have heard that, yes.

BY MR. VANSLYKE:

Q. I'm sorry. Can you restate your answer?

A. I have heard that, yes.

Q. If I reference external budget analysts expressing those concerns, you understand what I'm referring to, correct?

A. Generally, yes.

Q. Do you understand that in the broader federal budget debate, mandatory programs are increasingly the focus of deficit reduction discussions?

A. I generally understand there's a lot of talk about that, yes.

Q. Can you explain to me why reducing mandatory spending would be important for deficit reduction?

A. It is a large and fast-growing component of the federal budget.

Q. If I refer to annual caps on discretionary spending, do you know what I'm

referring to?

A. I do.

Q. Could you explain what those annual caps are?

A. Yes. So in the context of the annual federal budget discussion, there are often proclamations or requests or commitments from various people involved in the annual budget process to hold discretionary spending to a certain rate of growth or to hold a component of the discretionary budget, like the nondefense component of the discretionary budget, to a certain rate of growth or to, you know, have a budget at a lower rate of growth or a negative rate of growth. All those are part of the budget discussions.

Q. And is it fair to say that those annual caps are not applied to mandatory spending?

A. You know, Congress can do what it wants, but the discussion is often around discretionary caps.

Q. And even though we have talked about VA benefits requiring annual appropriations, they are still not included within the bucket of funds

that are discussed with these annual caps, correct?

A. Specifically, the compensation and pension account is a mandatory account. So it is not a discretionary account, and the discussion is often about the discretionary accounts or the discretionary budget. That is true.

Q. And to contrast the two, mandatory spending is today a larger and faster-growing share of the federal budget than discretionary spending, correct?

A. That is true. Yes.

Q. Are you familiar with the Congressional Budget Office's periodic publications of budget options?

A. I am.

Q. Do you understand that these are documents that lay out possible ways to reduce federal deficits?

A. I am aware of that, yes.

Q. Are you aware that the Congressional Budget Office has identified options related to veterans benefits?

A. I am aware of that, yes.

Q. I am placing a document in the chat. Can you see that I am sharing my screen?

A. Yes, I can.

Q. And you see at the top it says this is from the Congressional Budget Office, correct?

A. I see that, yes.

Q. And the title says "Options for Reducing the Deficit: 2025 to 2034," correct?

A. Yes.

Q. I'm scrolling down to the Contents and then to the Mandatory Spending list. It's page 4 of the PDF. It does not appear to have a page number.

You can see this Mandatory Spending list, correct?

A. Yes. Agriculture, Housing, Education, Health. Yes.

Q. And do you understand this to be the Congressional Budget Office identifying options to reduce mandatory spending?

A. Yes.

Q. And if I look at Option 23, it says "Introduce Means-Testing for Eligibility for VA's

Disability Compensation," correct?

A. Yes.

Q. Could you describe what that might mean?

A. You want to know what that means, you should go read what CBO says.

Q. I have the document here. Would you like me to scroll down to that section?

A. Sure.

Q. Okay. So we're on -- there's now a page number. It says page 31 for Option 23. It looks like this section is only one page. The next page starts a new section.

So please take a moment to review page 31 and let me know when you've finished.

A. I will review the documents you provided.

(Reviews document.)

All right. I have read what's on page 31.

Q. Could you summarize your understanding of what this option would do?

A. So currently VA disability benefits are paid without regard to the current income of

the veteran. This would propose to reduce those benefits based on income.

So specifically CBO is suggesting that incomes above 135,000, I guess, would be -- those disability benefits would be reduced.

Q. I am scrolling down.

So I'm looking now at Option 27 on page 35.

Do you see that the title says "Use an Alternative Measure of Inflation to Index Social Security and Other Mandatory Programs"?

A. I do.

Q. Would you like to review this section before you tell me what you understand that to mean?

A. Yes.

Q. Okay. I'll give you time. Please let me know when you finished reviewing.

A. (Reviews document.)

Okay.

Q. And can you summarize for me what you understand that option to mean?

A. So Social Security and other benefits, like compensation and pension program

here at VA, grow based on an annual inflation rate. That's called the cost-of-living adjustment, or a COLA. That is tied to a certain way of calculating the annual creation rate done by the Bureau of Labor Statistics.

There are other ways to calculate those estimates or those annual inflation rates. If you used a lower inflation rate, the costs would grow at a lower rate. So they're proposing to use GCPI, which has historically grown at a lower rate, and that would reduce the cost of benefits, like Social Security and compensation and pension at VA.

Q. Okay. I'm scrolling back up to Option 26. This is on page 34.

Do you see the title that says "Narrow Eligibility for VA's Disability Compensation By Excluding Veterans With Low Disability Ratings"? Do you see that?

A. I do, yes.

Q. Okay. Would you like to review before I ask you to describe it?

A. Yes.

Q. I will give you time. Please let me

know when you're finished.

A. (Reviews document.)

I have completed reading.

Q. And would you please describe for me what you understand this option to mean?

A. So currently, as you read there, veteran benefits are -- veteran benefits for service disabilities are paid according to a disability rating. It goes in 10 percent increments from 0 to 100 percent based on an estimate of kind of earning loss.

And what CBO is proposing is currently veterans start to receive benefits at the 10 percent disability rating. VA suggests that we could narrow the eligibility and only provide benefits to those rated 30 percent or higher. So those less than 30 percent would not receive benefits.

Q. Thank you.

I'm scrolling down to Option 55, which begins on page 65.

Would you like a moment to review this section?

A. Yes, please.

Q. Please let me know when you're finished.

A. (Reviews document.)

Okay. So what CBO is describing here in Option 55 is related to increase income or taxable income to the federal government by. Currently veteran benefits are excluded from tax. CBO proposes that disability benefits would be included in taxable income calculations.

Q. And do you understand that to suggest that the benefits themselves should be increased so that the benefits take home the same amount in their pocket?

A. That does not seem to be part of CBO's proposal.

Q. Do you understand instead that it would decrease the amount that the veteran gets to take home?

A. That would be the practical impact of this proposal, yes.

Q. I will go now to Option 40, which is on page 49.

Would you like a moment to review this section?

A. Yes.

Q. Okay. Please let me know when you're finished.

A. (Reviews document.)

Okay.

Q. And would you please describe what you understand this option to mean?

A. So this is related to how VA provides health care to veterans. So veterans when they enroll in the VA health care system, they are placed in a priority group ranging from 1 -- group 1 to group 8. Group 7 and 8 are tied to income or disability level -- disability rating level.

CBO proposes to unenroll or stop enrolling veterans in priority group 7 and 8. That would reduce the number of the veterans cared for by the VHA health care system and would reduce costs. So that is a way to reduce costs by reducing the number of veterans who receive health care services.

Q. Thank you.

I will stop sharing.

Court reporter, I believe I might

have forgotten to mark that as an exhibit. Is that correct?

Okay. I will mark that as Exhibit 9, please. Thank you.

(Document marked for identification as McIlroy Exhibit 9.)

BY MR. VANSLYKE:

Q. And I believe you, Mr. McIlroy, described those options as suggestions by CBO as to ways that Congress may reduce the budget deficit, correct?

A. That is true.

Q. As VA's budget chief, are you aware of any formal proposals within the current administration to adopt any of those options?

A. I am not.

Q. Are you aware of any proposals in recent administrations to adopt any of those options?

A. No. No.

Q. But the fact that these options are being studied and published reflects that veterans benefits are part of the broader conversation about controlling mandatory spending, correct?

MR. KLOTZBUCHER: Object to form.

You may answer.

THE WITNESS: Certainly benefits are part of the broader conversation about budgets. That's true.

BY MR. VANSLYKE:

Q. And you cannot rule out that future Congresses or administrations might pursue such changes to reduce the deficit, correct?

MR. KLOTZBUCHER: Objection. Foundation. Speculation.

BY MR. VANSLYKE:

Q. You can still answer.

MR. KLOTZBUCHER: You can answer.

THE WITNESS: Congress can do whatever it wants. I cannot rule it in and cannot rule it out.

BY MR. VANSLYKE:

Q. And would be the same be true that you cannot rule in or out whether the Trump Administration might pursue such measures in the future?

A. Hard to --
MR. KLOTZBUCHER: Objection. Foundation.
THE WITNESS: -- President Trump will do.
MR. VANSLYKE: I'm sorry. I couldn't hear you. Did you state an objection?
MR. KLOTZBUCHER: I said: Objection. Foundation.
You may answer.
THE WITNESS: Yes. So my answer is I cannot predict what President Trump will do.
BY MR. VANSLYKE:
Q. And would the same be true that you cannot predict what a future administration might do?
A. That is true. Yes.
Q. Do you know who VA Secretary Doug Collins is?
A. I do know who he is, yes.
Q. Are you aware that Secretary Collins testified before the House Veterans' Affairs

Committee on February 11th of 2026?

A. Yes.

MR. VANSLYKE: I am placing a file in chat. This is the statement published from Secretary Collins in regards to that hearing, and I will mark that as Exhibit 10.

(Document marked for identification as McIlroy Exhibit 10.)

BY MR. VANSLYKE:

Q. Can you see the document shared on my screen?

A. I can.

Q. And you see at the top that says this is the "Statement of the Honorable Douglas A. Collins, Secretary of Veterans Affairs, Department of Veterans Affairs (VA), Before the Committee on Veterans' Affairs, United States House of Representatives on Opportunities with VHA Reorganization, February 11, 2026," correct?

A. I see that, yes.

Q. Would you like a moment to review this document?

A. Do you want me to focus on some

specific part of it?

Q. Sure. Let me scroll down and find the section.

So I'm on page 2 and I'm looking at the first full paragraph, second sentence. Do you see that it says:

"This is the same conclusion we have heard for years from the VA's Office of Inspector General, the Government Accountability Office, and many in Congress - all of whom have repeatedly underscored the need to reorganize VHA."

Correct?

MR. KLOTZBUCHER: I'm going to object to foundation to this question and likely future questions because Mr. McIlroy is testifying to sources of funding of benefits programs administered by VBA, and this refers to the Veterans Health Administration.

So, Mr. McIlroy, you may answer with that caveat.

Objection. Foundation.

MR. VANSLYKE: I will rephrase before I proceed.

THE WITNESS: Okay.

BY MR. VANSLYKE:

Q. Mr. McIlroy, would you agree that in your role you oversee budgetary functions pertaining to VHA?

A. I do.

Q. Do you believe that you are informed as to the budget of the VHA?

A. I am.

Q. Can you speak with knowledge to the budget of the VHA?

A. I can.

Q. Thank you.

And do you see in this paragraph the sentence that I read previously?

A. "This is the same conclusion we have heard for years from VA's OIG, GAO, and many in Congress - all of whom have repeatedly underscored the need to reorganize VHA."

Q. Correct.

A. I see that sentence.

Q. Thank you.

And do you see -- excuse me -- in the first bullet it says:

"In 2016, GAO identified 'deficiencies in VHA's organizational structure and recommended significant restructuring, including eliminating and consolidating program offices and reducing VHA central office staff"?

A. I do see that sentence.

Q. And then the third bullet that says: "In 2019, GAO noted VHA's lack of a comprehensive policy to define Veterans Integrated Service Network roles and responsibilities."

Correct?

A. I see that sentence as well.

Q. Are you familiar with the Veterans Integrated Service Network?

A. Yes, I am generally familiar with VISN.

Q. Could you describe for me what that is?

A. VISN is kind of geographic area responsibility for, you know, providing guidance and oversight to the health care facilities within its geographic regional responsibility.

Q. Does this include both the VA health care system and the Community Care Network?

A. So the Community Care Network is administered through an office called IVC, Integrated Veteran Care, and they have lead responsibility for interacting with the third party administrators who assemble a network of community care providers.

Q. So am I understanding correctly that the VISN pertains to the VA health care directly and that the Community Care Network is not part of this -- part of this network?

MR. KLOTZBUCHER: Objection. Foundation.

You may answer.

THE WITNESS: You can -- you got VHA people on your list. You can ask them about these things.

BY MR. VANSLYKE:

Q. Are you telling me that you don't know the answer?

A. What was the question?

Q. Am I understanding correctly that the regions you described under the Veterans Integrated Service Network do not apply to the Community Care Network?

MR. KLOTZBUCHER: Same objections.

BY MR. VANSLYKE:

Q. Go ahead and answer.

A. VISNs are primarily responsible for the VA direct care system.

Q. Thank you.

And the last paragraph on this page says:

"Chairman Moran said last year that, 'The VA needs reform. If the status quo were working, we would not have spent two weeks hearing from VSOs on way the VA needs to improve.'"

Correct?

A. I read that sentence there, yes.

Q. Do you have any understanding of what his statement is referring to?

A. VSOs are Veterans Service Organizations. They have a lot to say about how the VA should operate and about the ways VA can improve, and Chairman Moran appears to have held hearings and the VSOs came to those hearings and told Chairman Moran about ways the VA could improve.

Q. So scrolling back up to the first full paragraph, chairman -- I'm sorry, not chairman -- Secretary Collins' statement says, "You do not have to take my word for it," and then proceeds to list these examples.

And this page ends with the statement from Chairman Moran, correct?

A. All those things are on the page. That is true. Yes.

Q. Would you understand that to mean that Secretary Collins' statement here is endorsing the statement by Chairman Moran?

A. Secretary Collins believes the VHA should reorganize. So does Chairman Moran, I guess.

Q. And on the next page, the second paragraph says:

"So there is widespread agreement that VHA needs reorganization and reform, and that is exactly what we are doing."

Does that reflect the statement that you just gave me?

A. That is the statement of Secretary Collins.

Q. That you believe Secretary Collins believes that the VHA needs reform?

A. He put it in his testimony. Yes, I think he does believe that. That's what he testified to.

Q. Thank you.

I will stop sharing this document.

Are you aware of the VHA being restructured to date?

A. Generally, yes. I've read about VIPER. I've heard the hearings.

Q. Has the VA -- excuse me. Strike that.

Has the VHA already been restructured?

A. The VHA has restructured multiple times over the course of its existence.

Q. Could you describe examples of what you're referring to as a restructuring of the VHA?

MR. KLOTZBUCHER: Objection. Foundation.

BY MR. VANSLYKE:

Q. You can still answer.

A. So previous Under Secretaries have

reorganized. Dr. Stone when he was the Under Secretary reorganized. Yeah. So all variations on, you know, how best to organize lines of reporting and organizational structures.

Q. As far as Secretary Collins' statement that he wishes to reorganize the VHA, do you understand that as a desire to improve efficiency and reduce costs?

MR. KLOTZBUCHER: Objection. Foundation again to line of questioning referring to the VHA.

Mr. McIlroy, you may answer.

THE WITNESS: Yes, I think that's what the Secretary thinks he will do.

BY MR. VANSLYKE:

Q. Are you aware of any similar discussions to restructure VBA benefits?

A. No, but -- no.

Q. Are you aware of any discussions to reduce costs stemming from VBA benefits?

A. All federal leaders should be focused on reducing costs.

Q. And if an agency undertakes an

organization with the goal of cost reduction, that can include examining whether current benefit structures are sustainable, correct?

A. Can you rephrase the question?

Q. If you are looking at a government program in attempts to reduce the cost as you -- I'll rephrase again.

You stated that you believe federal programs should be looking towards reducing costs, correct?

A. Good managers should look at their costs, yes.

Q. And if -- excuse me.

If a manager is undertaking to reduce costs, that could include examining whether the current benefit structures and relevant appropriations are sustainable, correct?

A. A good manager should look at everything. So yes.

Q. From a -- from a budgeting perspective, do you believe that agencies should review whether current benefit structures and appropriations are sustainable?

A. Yes.

Q. Just checking in. I'm in a different time zone at the moment, but I believe it's about noon where you are, correct?

A. 12:09. Yes.

Q. Would you like a short lunch break?

A. I would.

MR. VANSLYKE: All right. Now would be a good time. So we'll go off record.

THE VIDEOGRAPHER: All right. We're going to go off record at 12:09 PM.

(Whereupon, at 12:09 PM, a luncheon recess was taken.)

AFTERNOON SESSION

(1:02 PM)

ANDREW MCILROY

called for continued examination and, having been previously duly sworn, was examined and testified further as follows:

EXAMINATION (CONTINUED).

THE VIDEOGRAPHER: We're back on the record. The time is 1:02 PM.

BY MR. VANSLYKE:

Q. Okay. So, Mr. McIlroy, you have described at points today different accounts within the VBA budget, correct?

A. Correct.

Q. Could you explain to me what is the difference between an account and a benefits program?

A. So an account is how Congress appropriates funding and accounts may contain several programs within it. So, for example, the rehabilitation benefits accounts, the RB account contains a variety of education benefits programs within it.

Q. And I believe you have described

compensation and benefits as one distinct account; is that correct?

A. Compensation and pension is an account. C&P.

Q. Apologies. I misspoke.

To rephrase for clarity.

Compensation and pension is one VA account, correct?

A. That's correct. Yes.

Q. Are those two separate programs, compensation versus pension?

A. Yes.

Q. Could you describe the difference between those two programs?

A. So compensation is -- compensation program is related to the payments to veterans for their service-connected injuries or disabilities, and the pension program is for families for other, you know, additional benefits paid to families or veterans.

Q. Would an example of that be the DIC benefits we discussed earlier?

A. Yes.

Q. Are the pensions paid under this VA

account distinct from military pensions?
A. Yes.
Q. Am I correct that the VA itself does not pay military pensions?
A. That is true. Yes.
Q. Am I correct that VHA services are not funded through the compensation and pension account?
A. That is true. Yes.
Q. What would be the account that governs those services?
A. They are generally --
MR. KLOTZBUCHER: Objection.
You may answer.
THE WITNESS: Generally four accounts that fund VHA operations. Those are the four medical care accounts: Medical Services, Medical Community Care, Medical Facilities, and Medical Support and Compliance.
BY MR. VANSLYKE:
Q. Could you briefly explain the distinction between those accounts?
MR. KLOTZBUCHER: Objection.

Foundation.

You may answer.

THE WITNESS: In general, Medical Services supports the cost of health care providers in VHA, the VHA direct care system. The Medical Community Care account funds the cost of care in the community, so in non-VHA facilities.

Medical Support and Compliance is, in general, the administrative functions that go to run the nation's largest integrated health care system.

And Medical Facilities are the cost of maintaining our facilities across the country. So replacements of chillers and those kind of things, as well as the staff that support the buildings.

BY MR. VANSLYKE:

Q. So I think I'm still unclear on the distinction between the first and third accounts.

Am I correct that you said the first account funds the VHA facilities themselves and the third account also funds the VHA facilities

themselves?

A. So the first account was the Medical Services accounts -- account and that's primarily where we pay for doctors and nurses, pharmaceuticals, contracts that support the running of hospitals, and those kind of things.

And in the Medical Support and Compliance account is where we would fund the headquarters staff here at VACO in the Veterans -- Veterans Health Administration, as well as the VISN staff, the regional management offices -- what we call VISNs -- as well as, like, hospital center directors, as well as the police are paid out of that account at a -- at a hospital.

So all the things that go to support health care delivery but are not actual, say, doctors and nurses and drug benefits and those kind of things.

Q. And all of those medical services costs themselves would be attributed to the first account that you described?

A. That is correct.

Q. Are those services provided at the VA facilities administered under a managerial cost

accounting system?

MR. KLOTZBUCHER: Objection. Foundation.

You may answer.

BY MR. VANSLYKE:

Q. You can answer.

A. Yes.

Q. Could you explain what that means?

A. So as part of the budget process, we look at the estimated costs for caring for veterans at a relatively detailed level based on the expected health care needs of veterans, and those health care needs are based on full cost accounting.

So if you go to the doctor -- if a veteran goes to the doctor at his or her VA medical center, we would estimate the cost of care based on the full cost of care, which would include, you know, the building, electricity, you know, the guards at the front door of the hospital. All those associated costs.

All those associated costs are collected and processed through the managerial cost accounting system.

Q. You understand what I mean when I describe those two categories as direct and indirect costs?

A. Yes.

Q. Would you agree that those are appropriate labels for the distinction you just described?

A. Yes.

Q. Are the indirect costs also under the same account?

A. So you could find indirect costs in the Medical Services account.

Q. Are there portions of the indirect costs that come from another account?

A. Can you rephrase?

Q. Do I understand correctly that you've described the first account for medical services at VA facilities as including all of the costs for medical services at VA facilities, correct?

A. So we pay for the cost of providing care at VA facilities through three accounts: Medical Services, Medical Support and Compliance, and Medical Facilities. You can't have care

without a building. The Medical Facilities account pays for the building costs.

Q. And would a portion of the building costs be reflected as indirect costs?

A. Some accountants would do that, yes.

Q. Is it fair to assume that direct costs would be attributable to the Medical Services account?

A. In general, yes.

Q. But that the indirect costs may be more broad and may include some expenditures from other accounts, correct?

A. That is true. Yes.

Q. So in the process of administering this managerial cost accounting system, is it fair to say that the VA maintains internal data reflecting the average cost of providing care within its own facilities?

MR. KLOTZBUCHER: Objection. Foundation.

You may answer.

BY MR. VANSLYKE:

Q. You can answer.

A. That is true. Yes.

Q. And I believe you described the second account as the source of funding for the Community Care Network, correct?

A. That is true. Yes.

Q. Is that administered by something other than a managerial cost accounting system?

MR. KLOTZBUCHER: Objection. Foundation.

You may answer.

THE WITNESS: Can you rephrase?

BY MR. VANSLYKE:

Q. Would you say that there are differences in how the VA administers costs under the Community Care Network versus costs under VA Facilities?

MR. KLOTZBUCHER: Same objection.

You may answer.

THE WITNESS: So VA collects costs for care from these two pathways of care -- care provided through the direct care system, care provided through the community -- and VA collects those two

cost streams and analyzes those costs and uses those cost streams -- care provided in the community, care provided in the direct care system -- to project future care costs.

BY MR. VANSLYKE:

Q. What is the purpose of those projections of future costs?

A. They're used for a variety of things, including making budget estimates and also using for estimating demand and helping VA plan how care is provided.

Q. Do those projections have any impact in determining the actual costs of future care?

A. What determines the actual cost of future care is the actual costs.

Q. Is that equally true for care provided at VA facilities and care provided through the Community Care Network?

A. Actual costs, no matter where they are provided, are determined by the actual costs.

Q. Does the VA set the costs at VA facilities?

A. So VA determines how many health

care providers to hire. VA determines, you know, what services it will provide in the direct care system. And those factors go to determine the actual costs. Other factors, such as the cost of electricity, are not set by VA but, you know, VA can decide to turn the lights on and off.

Q. So some of the factors are set by VA and some of them are outside of the VA's control, fair?

A. That's true. Yes.

Q. Would you say that the VA sets the costs for services provided under the Community Care Network?

A. So those costs are negotiated. Many of them -- most costs are paid at Medicare rates for care provided in the community. There are some cases where we pay more.

Q. What would determine whether it's the Medicare rate or not?

A. Depends on the service and the location or the negotiated rate that we set with that provider for that need.

Q. So if I'm understanding correctly, the VA negotiates and sets those rates, but it is

based on the rates that Medicare has negotiated, correct?

A. Medicare rates are the basis for what we pay in general for community care. That is true.

Q. So if those negotiated rates are based on the Medicare rates, they are not based on the VA's internal managerial cost accounting for services provided at VA facilities, correct?

A. Yes, that is true.

Q. And when your office is preparing future budget projections involving the Community Care Network, you would use the projected reimbursement rates that we just described, correct?

A. Yes.

Q. So is it fair to say that your future budget projections related to the Community Care Network are also based on the Medicare payment rates?

A. Yes.

Q. Going back to the VA facilities directly, am I understanding your description correctly that there are essentially fixed costs

based on determinations for how many providers to hire, for example, rather than the costs varying based on the number of services provided?

A. So for VA care provided through the direct care system, there are both fixed and variable costs.

Q. Would the variable costs vary based on, for example, whether one patient or two patients are seen in a given day?

A. It depends based on the nature of services.

Q. Could you give me an example of when that would make a difference versus when it would not?

MR. KLOTZBUCHER: I'm going to object to foundation --

THE WITNESS: Yeah.

MR. KLOTZBUCHER: -- for this question and any one in the future that has to do with VHA-related budgetary issues.

MR. VANSLYKE: I understand your objection, counsel.

MR. KLOTZBUCHER: You may

answer.
BY MR. VANSLYKE:
Q. You can still answer.
A. So what's the question? Can you rephrase?
Q. You said that sometimes there would be variable costs based on the services provided, correct?
A. That is true. Costs vary based on the services provided.
Q. Could you give me an example of a scenario where the amount of services provided would or would not change the costs?
A. So, for example, if you were a veteran and you went to a VA medical center for a flu shot, that is a relatively inexpensive treatment versus if you went for open heart surgery. That's a very expensive treatment. So there you have to have two variable cost scenarios based on the nature of care provided.
Q. So under your example, if there were a vaccination day where the staff were already allocated, the vaccines have already been purchased, it would not change the costs based on

how many veterans showed up, correct?

A. Under that scenario, you could -- you could describe the costs in that way under that scenario.

Q. But if two heart surgeries had to be performed in the same day, there would be more costs involved than if it was only one heart surgery, correct?

A. Essentially because there are additional supplies involved in providing heart surgeries. You know, there are a variety of variables that go into estimating costs.

Q. I know we have discussed the actuarial analysis for VBA benefits.

Am I understanding correctly that there are also actuaries analyzing future costs for VHA?

A. That is true. Yes.

MR. KLOTZBUCHER: Objection. Foundation.

You may answer. Sorry to talk over you.

THE WITNESS: No.

That is true. Yes.

BY MR. VANSLYKE:
Q. Would the same be true for the Community Care Network?
MR. KLOTZBUCHER: Objection. Foundation.
You may answer.
THE WITNESS: Actuaries also analyze costs in the community.
BY MR. VANSLYKE:
Q. And would you agree that other entities, such as GAO, have also analyzed costs under both the VHA and Community Care Network?
A. That is true. Yes.
MR. KLOTZBUCHER: Objection.
BY MR. VANSLYKE:
Q. Would you agree that Community Care Network reimbursement rates would tend to reflect higher per-service costs than the incremental cost of providing that care at VHA facilities?
A. That's a very complicated question.
MR. KLOTZBUCHER: Objection. Foundation.
BY MR. VANSLYKE:
Q. Can you explain to me why that's

complicated?

A. So it depends on how you calculate the cost.

Q. How so?

A. So, for example, you know, we're not always comparing apples to apples. VA provides additional services that are not always provided in the community, and those go to the cost of the total VA direct care system.

So, for example, VA provides certain services to help veterans schedule their appointment. VA provides certain services related to transportation to and from appointments, be they in the community or in the direct care system.

VA provides a variety of benefits that are not always available in the community, and the community provides a variety of benefits that the VA doesn't always provide. For example, maternal care. VA is not in the business of delivering babies. So there's no comparable cost there, for example.

So that's why it's complicated.

Q. So I understand that there are some

medical services provided through the Community Care Network that are not provided through VA facilities, correct?

A. That is true. Yes.

Q. So there would be no way to compare the costs between those two programs if only one of them provides that service, correct?

A. That is true. Yes.

Q. And when you describe things like transportation that the VA provides, that would be the opposite scenario where the VA provides something that the Community Care Network does not, correct?

A. Yes.

Q. So there would be no way of comparing those services for the same reason because they are provided through the VA but not through the Community Care Network?

A. That is true. Yes.

Q. And I understand you're saying, depending how you calculate the cost of services provided at the VA, it might include those additional services that are not provided by the Community Care Network, correct?

A. That is true. Yes.
Q. So if that is true, then there are some things that cannot be apples to apples.
Would it be fair to say that the price for a service under the VA facility may not be a direct comparison to the price for the same service under the Community Care Network?
MR. KLOTZBUCHER: Objection. Foundation.
You may answer.
THE WITNESS: Can you restate the question?
BY MR. VANSLYKE:
Q. If the cost of a heart surgery at the VA includes the cost of transportation to and from the heart surgery, there would be a disconnect between comparing that to the cost of a heart surgery through the Community Care Network, correct?
MR. KLOTZBUCHER: Same objection.
You may answer.
THE WITNESS: Yes. It is -- it is difficult sometimes to

compare costs for apparently like procedures.

BY MR. VANSLYKE:

Q. Would you agree that over the last five years community care spending has grown faster than direct care spending?

MR. KLOTZBUCHER: Objection. Foundation.

You may answer.

THE WITNESS: That is true. Yes.

BY MR. VANSLYKE:

Q. And on the note of costs that may be different between the two programs, would you agree that there can be administrative costs for services provided under the Community Care Network that would not be billed in the same way for care through the VA?

A. Yes.

Q. Would it be a closer analogy if you were looking at the indirect cost total rather than the direct cost total?

A. There are many ways to do cost accounting. It would depend on the cost

accounting approach.

Q. Would it be inappropriate to compare the reimbursement rates through Community Care Network to Medicare costs?

A. You know, it depends on what you are doing and the comparison made. I can't say if something is appropriate if I don't know what it is that is being compared for what purpose.

Q. So when you described the managerial cost accounting for the VA facility services, you described that as including the additional costs beyond the medical services themselves, correct?

A. That is true. Yes.

Q. And you said that the Community Care Network services are based on Medicare rates, correct?

A. In general, yes.

Q. Is it fair to say that since the Community Care Network services are based on the Medicare services, they are not based on the VA's accounting for the indirect costs in the way that you do for the VA facilities directly?

A. If you want to know how Medicare determines their rates, you should go talk to

them, but, in general, they are trying to pay reasonable fees for the services provided.

Q. Just to clarify, what you're saying is: Medicare may take those factors into consideration, but the VA does not make those determinations.

The VA pays based on the Medicare negotiated rates, correct?

A. Yes.

Q. Okay. So I'm going to turn back to the VBA disability benefits for now.

We discussed this briefly, but the disability rates are adjusted annually for cost of living, or COLA, correct?

A. That is true. Yes.

Q. And at present, those adjustments are tied to the Consumer Price Index, correct?

A. Tied to Social Security COLA, which is, I believe, tied to the CPI.

Q. Thank you.

There are other measures that could be substituted instead of CPI or instead of the Social Security COLA, correct?

A. Certainly. Anything you want.

Q. And is it fair to say that those annual adjustments are based on statutes that require those adjustments?

A. The COLA is enacted by an annual act of Congress. The COLA happens because of an annual act of Congress.

Q. So each year Congress has to approve the cost-of-living adjustment to VBA disability benefits?

A. Yes.

Q. So presumably it is within Congress's authority to not do so?

A. Presumably, yes.

Q. And in your experience at the VA, have those rates always increased?

A. Yes.

Q. Have they always increased by the Social Security COLA?

A. To my knowledge, yes.

Q. Have those adjustments always been the same or has the Social Security COLA fluctuated over time?

A. Changes over time.

Q. Does inflation play a role in the

Social Security COLA?

A. Yes.

Q. Is it fair to say that in a year with higher inflation the COLA will be higher?

A. Yes.

Q. In general, you are aware that VBA disability benefits are awarded under a rating schedule, correct?

A. I am aware, yes.

Q. And is it your understanding that this rating schedule is essentially the criteria for assigning a disability percentage to a particular veteran?

A. Yes, that's my understanding.

Q. Has the rating schedule ever been revised?

A. Yes.

Q. And when the rating schedule is revised, that can change how the criteria apply to a particular veteran, correct?

A. It's true. Yes.

Q. So if the rating schedule is revised, a veteran's rating could go up or down depending on how the new criteria applies to them,

correct?

A. That would depend on the rating but, theoretically, yes. The rating schedule but, theoretically, yes.

Q. So even for a veteran who is currently rated as 100 percent disabled, there is no guarantee that the rating schedule will not change in a way that reduces their rating, correct?

A. VA would have a variety of ways to implement such a rating change. They might grandfather the veteran but -- so that veterans wouldn't receive a reduction in ratings but, you know, there's a variety of ways to implement such changes if they were to be made.

Q. Am I understanding correctly that you're saying it is possible for a change to have that effect?

A. It is possible, yes.

Q. And that it may be possible for the VA to essentially nullify that effect through other means; is that correct?

A. That is true. Yes.

Q. But there is also no way to

guarantee that the VA would take such an action, correct?

A. There's no way to predict the future. That is true.

Q. And would you agree that it is within the authority of Congress to change the rating schedule such that the VA cannot nullify the effect?

A. Yes.

Q. When we have discussed the actuarial analysis, is that analyzing trends over a population?

A. (Video malfunction).

Q. Can you hear me?

MR. KLOTZBUCHER: I'll object to form. Can you rephrase?

THE VIDEOGRAPHER: I think he's frozen.

MR. VANSLYKE: Can you hear me now?

THE VIDEOGRAPHER: I hear you, but I don't think the witness -- I think the witness is frozen.

MR. VANSLYKE: Ah.

THE VIDEOGRAPHER: Should we go off the record?

THE WITNESS: Mr. McIlroy.

THE VIDEOGRAPHER: Yeah, he jumped off.

All right. We're going to go off the record at 1:40 PM.

(A recess was taken.)

THE VIDEOGRAPHER: Back on the record at 1:40 PM.

BY MR. VANSLYKE:

Q. Okay. I will restate my question. We have discussed the actuarial analysis that the VA uses to project for future budgetary needs, correct?

A. We have, yes.

Q. Is it fair to say that that analysis is conducted on the entire population of recipients?

A. Yes.

Q. As opposed to being calculated for one plaintiff -- one benefit recipient individually, correct?

A. Correct. It looks at the entire

population.

Q. Would you agree that you cannot predict with certainty what any individual veteran will be paid over their remaining lifetime through VBA benefits?

A. So the premise of actuaries is that you can make reasonable estimates over future costs, but of course individual benefits and individual payments will vary.

Q. So you have agreed with me that Congress has the authority to change eligibility rating criteria, benefit formulas, and the cost-of-living adjustment, correct?

A. That is true. Congress can change the law.

Q. And is it fair to say that changes implemented by Congress can be prospective in the sense that they apply to future benefits?

A. That is true. Yes.

Q. Are you aware that the VA at times provides retroactive awards of benefits?

A. I am aware.

Q. Could Congress enact changes to benefits that would otherwise be awarded

retroactively?

A. Yes.

Q. So as an example, if Congress were to enact means testing for disability compensation, as the Congressional Budget Office has studied, that could reduce or eliminate benefits for some veterans that are currently receiving them, correct?

A. It would depend on the law.

Q. But you would agree that that's at least possible?

A. Congress can make whatever law it likes, yes.

Q. And if that means testing were to be applied to retroactive awards, it could also affect benefits that would otherwise be awarded retroactively, correct?

A. Congress can make retroactive changes. That is true. Yes.

Q. And if Congress decided to freeze cost-of-living adjustments for a period of years, they would have the authority to do so, correct?

A. They do, yes.

Q. And from what I understand from your

earlier testimony, they would not even have to affirmatively freeze it. They would just not enact it in a given year.

Correct?

A. Yes, that would be true.

Q. And if Congress froze or reduced a cost-of-living adjustment for a given year, that would effectively reduce the real value of the benefits in present time, correct?

A. Depends on the state of the economy. You know, so if we were in an inflationary period, it would, but if we weren't in an inflationary period, it wouldn't.

Q. So assuming that there is inflation, the real value of a benefit remaining at the same dollar value would reduce absent a cost-of-living adjustment, correct?

A. Buying power would be reduced, yes, in an inflationary period with no COLA.

Q. And if Congress were to narrow the criteria for secondary service condition, that could also reduce the benefits received by a particular veteran, correct?

A. Could you clarify the question?

Q. Do you understand what a secondary service connection rating is?

A. Can you explain it?

Q. My understanding is that the VA will label a condition as a secondary service condition if, for example, the VA determines that a veteran's kidney cancer is service connected, and then subsequently determines that diabetes was developed secondary to the kidney cancer which has been rated as service connected.

Do you understand my description at least?

A. That is my understanding as well, yes.

Q. Okay. So you understand and agree with my description of secondary service connection, correct?

A. I do, yes.

Q. So if Congress were to narrow the criteria for injuries to be rated as a secondary service connection, that could reduce the benefits received by individual veterans, correct?

A. Well, certainly that potential exists.

Q. And you have no role in deciding whether Congress will or will not make those types of changes, correct?

A. We do support the estimates of potential costs when Congress considers legislation, including changes to benefits, but that is the limit of my role in that process.

Q. Am I understanding correctly that if Congress is considering implementing legislation that would affect VA benefits, the VA will provide an estimate of the additional or saved costs that would result from those changes?

A. That is true. We frequently would.

Q. But the VA would not ultimately decide whether or not Congress will implement those changes, correct?

A. Congress decides. VA -- Congress would no doubt ask VA as the implementing agency, you know, what are the pros and cons of the considered legislation, but ultimately Congress decides.

Q. Do you play a role in providing that advice?

A. For things that are financial

related, the Office of Management, including the Office of Budget, does provide analysis of those potential issues.

Q. Am I understanding correctly that your office would provide the cost estimate but not the pros and cons analysis?

A. You know, pros and cons come from a variety of perspectives or a variety of -- I don't know -- viewpoints. We would certainly say, for example, if a legislation was extremely complicated, complicated is bad because it drives costs and we would point that out.

Q. Would your office provide advice as to whether or not it would be good for veterans to make a certain change?

A. So whether it would be good for veterans or not is a matter of a beholder. Right?

Q. Would your office provide its perspective on whether or not it is good for veterans or would it defer to legislators?

A. In a sense, it's the job of the Secretary to provide his perspective. We provide advice to the Secretary. The Secretary asks us what we thought. We tell them what we think, but

ultimately it's the Secretary's job to offer the department's viewpoint on anything related to veterans.

Q. I think I'm understanding that the primary role that your office would play would be the cost analysis; is that correct?

A. Yes.

Q. Okay. Are you familiar with the VA's Financial Policy Documents?

A. I am.

Q. Could you describe what the Financial Policy Documents are?

A. So the Financial Policy Documents for the VA, like all federal agencies, describes how we are to administer the funds that are provided to VA, and they kind of run the full gamut from very high level to very specific, you know, like how to process travel vouchers, for example.

Q. Have you reviewed the VA's Financial Policy Documents?

A. I have.

MR. VANSLYKE: I am placing a file in chat and I will screen share it

in just a moment, and I will mark this as Exhibit Number 11.

(Document marked for identification as McIlroy Exhibit 11.)

BY MR. VANSLYKE:

Q. Okay. Can you see that I'm sharing my screen?

A. I can. Chapter 6.

Q. So this is Volume VI Chapter 6 of the VA Financial Policy Documents, correct?

A. Yes.

Q. I will scroll down. Give me just a moment.

Okay. So I'm starting on page -- the bottom of page 5. You see 0605 Policies?

A. Yes.

Q. So this is describing essentially the requirement to estimate and report on the VA's liability to pay federal employees and veterans benefits, correct?

A. Correct.

Q. And under bullet B I see "OAS."

Do you recall what that acronym stands for?

A. Office of Actuarial Services.
Q. So it says:
"OAS actuaries will calculate the present value of the Veterans Benefits Liabilities using standards established by Actuarial Standards Board and FASAB, for compensation, burial, and education benefits for recordation in VA's accounting system."
Correct?
A. It says that, yes.
Q. And is this referring to the same actuarial analysis that we have discussed previously?
A. This is slightly different.
Q. Could you explain how it's different?
A. So previously we discussed specifically in the case of veterans benefits, primarily talking about compensation benefit -- compensation and pension benefits, the estimates used for preparing the budget request.
This is talking about estimate of liabilities that is reported in the accounting statements and in the annual audit.

Q. Would you say there's a difference in how the analysis is performed or a difference in the purpose for the analysis?

A. The difference is in the purpose for the analysis.

Q. Is it fair to assume that all of the actuarial analysis that we have been discussing would follow the same standards established by Actuarial Standards Board and FASAB?

A. In general, yes.

Q. Do you know what FASAB stands for?

A. Federal Accounting Standards Board or something like that. It's up there. The FASAB. Federal.

Like the FASAB is the GAO, the Treasury or -- no.

Q. If I represent that it's the Federal Accounting Standards Advisory Board --

A. Yes.

Q. -- would you agree with that?

A. Yes. There you go.

Q. Okay. Okay. Give me one moment.

I'll stop sharing instead of making everybody dizzy, and I'll put it back up in a

second.

I can be done with that document, actually. So we'll move on.

Just to confirm, you are familiar with that volume and chapter of the Financial Policy Documents generally, correct?

A. I am.

Q. And you would agree that that addresses the process by which the VA identifies the federal employees' and veterans' benefits liabilities, correct?

A. Yes, it's for different purposes. We previously talked about budgeting. That's for financial reporting, but they are related.

Q. Okay. And you are generally familiar with the actuarial analysis even though you are not yourself an actuary, correct?

A. That is true. Yes.

Q. Do you understand them well enough to understand the actuarial analysis and interpret what it means for the budget?

A. Yes.

Q. Would you agree that actuarial analysis is based on probability models?

A. Yes.
Q. Would you agree that actuarial analysis, in this context at least, is based partially on life expectancy tables?
A. That is true. Yes.
Q. Are you aware that the VA uses veteran-specific life expectancy tools?
A. Yes.
Q. If I refer to the Veteran Eligibility Trends and Statistics sometimes abbreviated as USVETS, do you understand what I'm referring to?
A. USVETS or VetPop?
Q. Yes.
A. Yes.
Q. If I refer to the United States Veterans Life Tables, do you understand what I'm referring to?
A. Generally, but I've never seen them.
Q. But you are aware that they exist, correct?
A. Yes.
Q. And would you agree that this is distinct from general life expectancy tables?

A. The degree to which they differ I don't.

Q. But would you agree that they are not one in the same thing?

A. I understand them to be different because they have different names.

Q. And do you understand that the VA actuaries rely on veteran-specific life expectancy tools such as these?

A. It's my understanding, yes, that the assumptions in the veteran benefits calculations, as well as the veteran health care calculations, rely on the characteristics of veterans including their life expectancy.

Q. And you stated that using this actuarial analysis, the VA is able to reasonably estimate the future benefits to be provided, correct?

A. Yes.

Q. Are actuaries -- I'll rephrase my question.

Would you agree that the role of the actuaries in providing this analysis is to account for variables in the future?

A. Yes, that's part of their job. Yes.
Q. Would you agree that when accounting for variables in the future, there is inherently a degree of uncertainty?
A. Yes.
Q. Would some of those variables include future changes in laws or regulations?
A. Future laws and regulations could change in the future. That is true.
Q. Would those variables include changes in veteran mortality and life expectancy?
A. So the estimates about future mortality and life expectancy are based on historical trends. So they would assume -- it would be unreasonable to assume something anomalous that wasn't supported by the data.
Q. Apologize. Let me rephrase that question.
The variables accounted for by the actuaries would include fluctuations in veteran mortality and life expectancy averaged across the data that they're looking at, correct?
A. That's an inherent part of the job is to use the data to make estimates about future

life expectancy and other characteristics.

Q. Does the actuarial analysis include changes in disability ratings such as reevaluations and appeals?

A. So those things are part of the historical records. So they would be included in estimates going forward.

Q. And would the actuarial analysis also include economic factors affecting cost-of-living adjustments?

A. The actuaries make assumptions about future cost-of-living adjustments, yes.

Q. And is it fair to say that the actuaries are inherently limited by the potential that those assumptions could be incorrect?

MR. KLOTZBUCHER: Objection. Form and foundation.

BY MR. VANSLYKE:

Q. You can still answer.

A. Can you restate the question?

Q. Is it fair to say that actuarial analysis is limited by the assumptions we have discussed, such as cost-of-living adjustment, for example, and that those assumptions may turn out

to be incorrect in the future?

MR. KLOTZBUCHER: Same objection.

You may answer.

THE WITNESS: So actuarial estimates about the future are based on assumptions and assumptions may or may not be correct.

BY MR. VANSLYKE:

Q. Do you believe that the VA's actuarial analysis is of high quality?

MR. KLOTZBUCHER: Objection.

THE WITNESS: Yes.

BY MR. VANSLYKE:

Q. Do you believe that they meet the standards required?

MR. KLOTZBUCHER: Objection to form.

You may answer.

THE WITNESS: So I know that there are certain standards to be -- to be an actuary, and the actuaries here at the VA meet those standards, which are like accreditation by the Actuarial

Standards Board or something like that. You should ask the actuaries themselves these questions.

BY MR. VANSLYKE:

Q. When providing budgeting information for the VA, would you place greater trust in the actuarial analysis performed by the VA's actuaries than you would in projections from an economist unfamiliar with VA benefits?

MR. KLOTZBUCHER: Objection. Foundation.

You may answer.

THE WITNESS: Yeah. I don't know about anonymous economists, but it's certainly logical that the VA actuaries, who deal every day with VA data and have a deep and rich understanding of the programs, can make reasonable estimates based on that deep and rich understanding of the data.

BY MR. VANSLYKE:

Q. Would you agree that VA actuaries developed specialized knowledge of the VA benefits provided?

A. Yes.
Q. Would you agree that that specialized knowledge would enhance their future projections about those benefits?
MR. KLOTZBUCHER: Objection. Foundation.
You may answer.
THE WITNESS: So the quality of estimates is certainly improved by, you know, a better understanding of how the program functions.
BY MR. VANSLYKE:
Q. Is there any other specialized knowledge that you believe would be relevant to those projections?
A. Not currently. I mean -- yeah. So let's say that. The answer is no.
Q. Do you believe that projecting future benefits provided by the VA is a simple process?
A. It is complex.
Q. Do VA actuaries project future benefits to be received by individual plaintiffs?
A. VA actuaries project costs for the

program.

Q. Is it fair to say that that represents an average across all recipients, not one recipient individually?

A. It is the sum of all estimates, yes. So it's for the population as opposed to an individual.

Q. And none of your testimony today seeks to guarantee the scope or duration of any individual plaintiff's benefits, correct?

A. No.

Q. You are also not testifying to the payments that will be received in the future for any individual recipient, correct?

A. That is correct.

Q. If I were to ask you to do so, could you?

A. If you were asking me to do what?

Q. If I were to identify an individual recipient of benefits from the VA and ask you to tell me the value of the benefits they will receive in the future, could you do that?

A. No.

Q. Why not?

A. I don't have the proper data. I don't know anything about the individuals.

Q. And if you were trying to answer that question, that would also be subject to the same sorts of legislative action that we've discussed previously, correct?

A. Can you rephrase the question?

Q. If you were attempting to identify the value of benefits to be received by an individual recipient in the future, any projection could also be altered by the legislative actions we've discussed that could change VA benefits at large, correct?

A. Future benefits means could change as the result of congressional actions. That is true.

Q. Excluding retroactive payments, is it true that disability compensation is paid monthly?

A. That is true. Yes.

Q. And when a veteran dies, do those disability payments stop?

A. Yes.

Q. And any benefits to survivors, such

as the DIC benefits we discussed earlier, you said are separate entitlements, correct?

A. Correct.

Q. Do you know whether those entitlements, DIC specifically, have their own eligibility criteria separate from the now deceased veteran's disability criteria?

A. It is my understanding that they are -- that they have separate criteria.

Q. Do you know whether the payment amounts differ between DIC benefits and veterans disability benefits?

A. They do differ, but I am not intimately familiar with all the details.

Q. Is it fair to say that if a veteran is receiving a certain monthly payment and the veteran were to pass away, you would not assume that any DIC benefits would be in the same amount, correct?

A. That is true. Yes.

Q. Is it fair to say that the total amount of disability compensation a veteran receives will be impacted by how long the veteran lives?

A. Yes.
Q. And if you are looking at the benefits received by an individual veteran, would you be able to predict how long that veteran will live?
A. Would I? I have no basis to make those kind of judgments.
Q. Would you agree that benefits can also be stopped or reduced while the veteran is alive?
A. There are a variety of factors that could change veteran benefits. That's true. Yes.
Q. If the VA reevaluates the veteran's condition and reduces the rating, would that be one way that that could happen?
A. That is possible, yes.
Q. If subsequent medical documentation led the VA to conclude that an injury is not service connected, could that change the benefits being provided?
A. It's my understanding that that is true, yes.
Q. If a veteran's dependency status changes, such as a spouse passing away, could that

change the amount of benefits being provided?

A. To my understanding, yes.

Q. If the veteran becomes incarcerated could that change the amount of benefits being provided?

A. It's my understanding, yes.

Q. So even assuming that the veteran does not pass away, there are multiple ways that a veteran's benefits can change in duration or amount, correct?

A. There are some limited ways that benefits could change. That is true.

Q. And given those potential changes, the actual duration of benefits provided to an individual veteran is uncertain because of the possibility of those changes, correct?

A. It is true that a veteran's benefits may change over time.

Q. And if the duration of benefits changed but the payment amount stayed the same, then the total amount of payment would also change according to the duration, correct?

A. Basic math? Yeah.

Q. If I were to ask you to identify the

total value of disability benefits provided to a veteran from any time in the past, could you identify that number?

A. Could I? No.

MR. KLOTZBUCHER: Objection. Form.

Sorry for talking over you. You may answer.

THE WITNESS: Yeah, I would -- I don't have that data. I mean, like could VA report how much we have paid to a veteran? Yes. Could I? No.

BY MR. VANSLYKE:

Q. You would agree that the VA would have access to a record of payments provided to a veteran, correct?

A. Yes, that is true.

Q. And those payments would be documented, correct?

A. That is my understanding, yes.

Q. And there would be a fixed value attributable to those payments, correct?

A. You could sum up all the payments and, you know, reach a sum.

Q. And that is different than projections for future payments, correct?

A. Yes.

Q. Because the future payments are subject to the uncertainties we've discussed, but the past payments are not, correct?

A. Because the future is the future. That is true.

MR. VANSLYKE: Thank you.

I think I would like to take a short break, and then I think we're getting close to the end.

So can we go off the record?

THE VIDEOGRAPHER: All right. We're going to go off record at 2:20 PM.

(A recess was taken.)

THE VIDEOGRAPHER: Back on the record. Time is 2:30 PM.

BY MR. VANSLYKE:

Q. Mr. McIlroy, I know we've talked about a lot of topics today, and I just want to clarify which things you have stated an opinion on.

So I believe you have provided

testimony based on the VA's budget and appropriation process, correct?

A. Yes.

Q. And the distinction between mandatory and discretionary funding, correct?

A. Correct.

Q. And a sub-distinction where the VA's mandatory funding is still subject to annual appropriations, correct?

A. That is true. Yes.

Q. And the sources of funding of certain VA programs, correct?

A. Correct.

Q. And some details, I'm sure not exhaustive, of how those different funding sources are managed, correct?

A. Yes.

Q. And we've spoken about certain uncertainties within calculations of projected future benefits, correct?

A. That is true. Yes.

Q. And I understand you are not testifying about what offsets should or should not be applied in this litigation, correct?

A. Yes. No -- no -- no knowledge or opinions of that.

Q. And likewise, no knowledge or opinions of the legal standards for damages or offsets in this litigation?

A. Correct.

Q. And are you providing any testimony as to any individual plaintiff in this litigation's medical conditions?

A. I am not.

Q. Any testimony as to any individual plaintiff's life expectancy?

A. No.

Q. Any testimony as to any individual plaintiff's future benefit entitlements?

A. No.

Q. Do you have any opinion on whether any plaintiff's future VA benefits should be used to reduce their damages award in the Camp Lejeune litigation?

A. I have no opinions on that.

Q. If the court or the parties were to decide to use VA benefits to reduce the plaintiffs' damages award, do you have any opinion

on how those benefits should be applied in order to accomplish that reduction?

A. It's a complicated question. That would depend on the nature of whatever the settlements or the agreements and, you know, the bounds of the law and the practicalities of our own financial systems and our capabilities.

Q. Is it safe to say any opinion you provided on that topic would be limited to the value under certain variables?

A. That's infungible, yes.

Q. Are there any other topics that you believe you will express an opinion on in this litigation, other than the things we've just discussed?

A. I'm here at the pleasure of the court on this. So if asked, I will provide my opinion, but I expect to -- I do not expect to be called again.

Q. At this point in time, do you believe that we have covered the full scope of topics upon which you will provide an opinion?

A. To the extent of my knowledge, yes.

Q. Is there anything that we have

discussed today that you believe I am misunderstanding?

A. So you asked me about my ability to estimate future costs for individuals.

I personally cannot do that because I don't have that data but, you know, it's a mathematical calculation. Somebody could if they had the proper data.

Q. Are you referring to identifying the value of an individual recipient's benefits?

A. Yes.

Q. Is it fair to say that if the appropriate person made such a calculation, it would still be subject to the assumptions inherent in a future projection?

A. That is true. Yes.

Q. Is there anything that you would like to clarify or expand on from any of your earlier answers?

A. No.

Q. Have I asked you any questions that at this time you still do not understand?

A. No.

MR. VANSLYKE: Okay. I will

pass the witness.

MR. KLOTZBUCHER: Mr. McIlroy, thank you for your time. I appreciate that you are a very busy man and that you were in the hot seat today. I have nothing further.

MR. VANSLYKE: Likewise, thank you for your time and your expertise.

THE WITNESS: All right.

THE VIDEOGRAPHER: All right. This ends today's deposition. We're going to go off the record at 2:36 PM.

MR. VANSLYKE: Standing order is fine for the transcript.

MR. KLOTZBUCHER: And same for the defense.

(Signature not waived, the deposition concluded at 2:36 PM.)

* * *

ERRATA SHEET

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

DECLARATION UNDER PENALTY OF PERJURY

I declare under penalty of perjury that I have read the entire transcript of my Deposition taken in the captioned matter or the same has been read to me, and the same is true and accurate, save and except for changes and/or corrections, if any, as indicated by me on the DEPOSITION ERRATA SHEET hereof, with the understanding that I offer these changes as if still under oath.

Signed on the _____ day of _____, 2026.

_____

ANDREW MCILROY

CERTIFICATE OF REPORTER

DISTRICT OF COLUMBIA)

I, Denise Dobner Vickery, a Registered Court Reporter and Notary Public of the District of Columbia, do hereby certify that the witness was first duly sworn remotely by me.

I do further certify that the foregoing is a verbatim transcript of the testimony as taken stenographically by me at the time, place and on the date herein set forth, to the best of my ability.

I do further certify that I am neither a relative nor employee nor counsel of any of the parties to this action, and that I am neither a relative nor employee of such counsel, and that I am not financially interested in the outcome of this action.

DENISE DOBNER VICKERY, CRR,RMR
Notary Public in and for the
District of Columbia

My Commission expires: March 14, 2028

&

& 3:4,14 9:17 10:4 21:1 22:8

0

0 111:10
0000000001 5:18 38:9
01 12:23
06 7:6
0605 162:15
09 5:18

1

1 5:9 6:16 13:2 13:4,17 113:12 113:12
1-4 7:3
10 6:19 45:22 67:13 111:9,14 117:7,9
100 81:1,2 111:10 152:6
100,000 31:7,22
10:44 69:12
11 7:3,4 117:20 162:2,4
1100 4:8
114 6:17
116.3 77:8,11 77:22
11th 117:1
12 45:18
125 31:2
128 5:4
12:09 127:4,11 127:12
13 5:9 6:4
135,000 109:4
14 45:18 187:24
140 77:9
140.1 77:8,11 77:21
15207 187:20
157.5 77:16,20
16 5:11
162 7:4
166.9 79:17,20
17 5:16
172 45:17
18 41:22
1990 18:2
1993 18:5
1997 18:9
1:02 128:2,9
1:40 154:7,10

2

2 5:11 6:13 14:6 15:20 16:2 48:10 49:15 52:17 67:6 118:4
2.9 5:20 40:18 41:16 101:7
2/24/26 7:5
20 22:15 45:22 50:22 92:18
200,000 31:5
20005 4:9
2001 18:20
2006 19:5,8 24:11
201 28:21
2011 20:23
2012 38:19 39:4
2013 22:6
2016 23:2 79:16 79:19 120:1
2018 24:19,23 28:18 39:20
2019 24:16 25:8 28:22 29:2 120:8
202.532.5193 4:10
2022 32:15 34:2 77:6,15 78:18
2023 6:4 48:1 48:10,11 49:15
2024 6:18 25:11 25:12 40:14,19 41:17 47:20 101:6 102:22
2025 5:23 6:15 6:18 34:2,5 48:9 49:12 67:13 70:8 91:7 107:9
2026 1:16 2:8 7:3 8:9 28:22 29:3 69:19 70:4 77:7,16 79:19 79:22 84:19 85:5 117:1,20 186:16
2027 80:24 92:13,17,19
2028 92:17 187:24
2034 6:18 107:9
23 107:23 108:11
24 1:16 2:8 8:8
24th 3:7
25 31:6
26 6:13 52:17 110:15
27 5:23 109:7
28144 3:17
29 47:23
2:20 179:15
2:30 179:18
2:36 184:12,18

3

3 5:16 16:24 17:5 52:21 70:13
30 23:6 92:19 111:16,17
301.2 77:16,20 84:20
3011 3:7
31 38:19 108:11 108:15,20

313.800.4170 3:9
34 110:15
35 109:8
3a 51:21,23

4

4 5:19 38:9 41:3 41:5 107:13
4.1 6:1 44:14
40 112:21
400 40:3
4055 4:8
41 5:19
44 5:24
441 28:22
441.2 79:20
45 96:23 97:9
47 6:5
48202 3:8
49 6:16 112:22

5

5 5:24 38:11 44:2,4 162:15
50 34:1 45:20 85:5
51 6:10
52 49:11
525 3:16
54 48:8
55 111:20 112:5

6

6 6:5,7 47:1,3 47:12 162:8,9
60 45:20
630 6:13 52:17
65 111:21
67 31:18
69 6:14

7

7 6:10 28:12 51:23 52:1 81:23 113:12 113:16
702 53:12
703 53:12
704.633.5244 3:18
705 53:13
7887232 1:23
7:23 1:4

8

8 6:14 69:20,22 113:12,12,16
897 1:4

9

9 5:3 6:17 114:4 114:6
9:01 1:17 2:9 8:9

a

abbreviated 166:11
ability 68:15 87:1 88:23 103:14 183:3 187:11
able 20:6 30:4 31:1,14,20 45:10 51:8,11 85:10 100:11 167:16 176:4
above 31:5 48:18 109:4
absent 80:23 157:16
academic 18:11
accelerate 30:13
acceptable 33:19,20
access 12:18 13:13 178:15
accomplish 182:2
account 61:14 61:17 63:13,16 65:5,6,15 85:2 85:9 89:12 94:22,22 98:8 102:8,11 106:4 106:4,5 128:16 128:18,21 129:1,4,8 130:1 130:8,10 131:7 131:23,24 132:2,3,8,14,21 134:10,12,14 134:17 135:2,8 136:2 167:23
accountability 118:9
accountants 135:5
accounted 168:19
accounting 26:22 34:11 76:16 133:1,14 133:24 135:15 136:6 139:8 147:24 148:1 148:10,21 163:8,23 164:12,18 168:2
accounts 32:6,8 65:9,18 76:23 77:2 90:7 94:23 95:5 106:6 128:12,19,21 130:16,17,23 131:21 132:3 134:22 135:12
accreditation 170:24
accrual 58:11

accurate 22:4 40:11 42:9 62:18 64:8 66:19 70:20 101:20 186:8
accurately 39:8 54:4
acronym 62:6 162:23
act 32:14,19 33:6 37:18 79:12 82:19 89:9 90:23 91:3 92:22 93:3 98:5 150:4,6
acting 25:12 26:13,19,20 67:12
action 71:15,18 74:19,20 153:1 174:5 187:14 187:17
actions 68:22 174:11,15
activities 96:8 96:12
activity 57:14
actual 132:16 137:14,15,16 137:20,21 138:4 177:14
actually 24:19 33:15,17 165:3
actuarial 26:23 27:3 28:6,7,9 91:9 142:14 153:10 154:13 163:1,5,12 164:7,9 165:16 165:20,23 166:2 167:16 169:2,8,21 170:5,11,24 171:7
actuaries 27:4 27:6,8,15,24 142:16 143:7 155:6 163:3 167:8,20,23 168:20 169:11 169:14 170:22 171:2,7,15,22 172:22,24
actuary 28:3,4 165:17 170:22
adapting 51:5
adas 25:20,24
addition 78:19 98:13
additional 6:8 20:8 31:11 33:3 33:16 47:15 85:5 96:2 101:22,22,23 102:19 103:3 129:19 142:10 144:7 145:23 148:11 159:11
addresses 165:9
adequate 29:24 45:24
adjust 88:15 89:6
adjusted 149:13
adjustment 110:3 150:8 155:13 157:7 157:17 169:23
adjustments 87:2 88:19,20 88:23 99:5 100:21 149:16 150:2,3,20 156:21 169:10 169:12
administer 161:15
administered 53:14 55:22 118:17 121:2 132:24 136:5
administering 135:14
administers 136:14
administration 26:16,17 30:14 30:21 31:6,11 37:21 45:10 114:15 115:23 116:17 118:19 132:10
administrations 50:24 89:3,7 114:18 115:9
administrative 37:5 131:11 147:15
administrators 121:5
adopt 114:15 114:18
advance 90:7,9 90:17,19,20,22 91:13 92:2,10 94:24 95:1,6 97:6,9,13,23 98:7,11 102:12
advice 159:23 160:13,23
advisor 39:23
advisory 21:9 21:15 164:18
affairs 6:21,22 6:23 24:18 25:1 26:2,5,21 27:6 29:15,17,18 39:18 41:11 49:14 70:4 116:24 117:16 117:17,18
affect 100:17 156:16 159:10

affecting 169:9
affirmatively 157:2
affordable 60:9
afternoon 5:4 128:1
age 27:11 45:19 45:21
aged 31:23
agencies 6:9 47:16 76:24 93:4 126:21 161:14
agency 6:2 23:4 44:15 94:7 125:24 159:18
agent 99:20
agents 20:12
aging 6:3 44:15
agree 27:23 31:18 37:15 50:18 54:8,24 55:4 67:16 77:19 81:9 93:14 101:1,10 103:4,9 119:3 134:5 143:10 143:16 147:4 147:15 153:5 155:2 156:10 158:15 164:20 165:8,23 166:2 166:23 167:3 167:22 168:2 171:22 172:2 176:8 178:14
agreed 8:17 32:1 155:10
agreement 123:18
agreements 182:5
agriculture 23:4 107:17
ah 24:21 46:13 153:24
ahead 15:11 16:4 41:1 43:23 64:2 122:4
aid 103:21
akron 18:5
alive 176:10
allocate 33:21 89:2
allocated 74:15 74:24 91:13 98:11 141:23
allocation 46:21
allocations 88:16 89:6
allow 95:17 96:1 97:14
allowances 99:9
allowed 32:7
allows 74:21
altered 174:11
alternative 55:24 109:10
alternatives 21:10
amend 98:14
america 4:3
amount 68:8 78:15 79:2 88:12 91:1,4,6 93:7 95:1 97:22 100:17 103:15 112:13,17 141:12 175:18 175:22 177:1,4 177:10,20,21
amounts 78:22 97:11 103:10 103:12 175:11
analogous 64:5
analogy 147:20
analysis 21:10 27:3,22 28:6,7 28:9 29:24 47:24 91:9 142:14 153:11 154:14,17 160:2,6 161:6 163:12 164:2,3 164:5,7 165:16 165:20,24 166:3 167:16 167:23 169:2,8 169:22 170:11 171:7
analysts 29:6 29:22 103:19 104:9
analyze 143:8
analyzed 143:11
analyzes 137:1
analyzing 18:22 142:16 153:11
andrew 1:14 2:12 5:2,10,14 5:16 8:14 9:4 10:9 13:19 15:23 41:23 45:11 49:12 128:3 186:19
annual 32:5 48:17 53:18 54:10,19 58:11 58:21 59:14,17 59:21 69:15 71:15,17,21,23 72:2,7,21 73:2 73:3,10 75:16 75:20 76:8,9,12 76:20 80:9 82:18,20 84:12 96:9 104:23 105:3,6,8,18,23 106:1 110:1,4,7 150:2,4,6 163:24 180:8

annually 40:3 73:7 149:13
anomalous 168:16
anonymous 171:14
answer 11:3,19 11:20 23:15 35:12 43:4,19 50:14 56:17 61:4 62:24 63:24 64:19 66:5 72:5 75:4 83:8,16 86:1 93:20 101:15 103:24 104:6 115:3,14,16 116:11,13 118:21 121:13 121:19 122:4 124:23 125:12 130:14 131:2 133:4,6 135:21 135:23 136:9 136:19 141:1,3 142:21 143:6 146:10,22 147:9 169:19 170:4,19 171:12 172:7 172:17 174:3 178:8
answers 183:19
antideficiency 92:22 93:3
apologies 14:11 62:5 129:5
apologize 168:17
apparently 64:15 147:1
appeals 169:4
appear 16:6 50:19 107:13
appearance 9:20
appearances 3:1 4:1
appearing 8:17
appears 25:3 28:1 41:10,16 41:22 47:11 122:21
apples 144:6,6 146:3,3
application 59:19
applications 32:21
applied 98:23 99:5 105:18 156:15 180:24 182:1
applies 93:1,3 94:2 151:24
apply 121:23 151:19 155:18
appointed 26:18
appointment 144:12
appointments 144:13
apportioned 88:12
apportionment 88:7,9
apportionments 88:15,19 89:10
apportions 87:23
appreciate 184:3
approach 148:1
appropriate 73:7 91:18,19 101:2 134:6 148:7 183:13
appropriated 33:9 34:7 82:6 82:19,20 83:23 84:15 85:6 90:4 91:3,15,16,23 92:10 93:7,10 93:11 97:22 98:7 100:6 102:12 103:10 103:12,16
appropriately 35:1
appropriates 54:22 91:17 128:19
appropriation 59:17,22 71:15 71:18,21,23 72:2,8,22 73:3 75:21,21 76:10 76:12,20 84:8 84:12,17 87:19 90:8,23,24 91:3 95:1,7 96:16 97:10,19 98:2 180:2
appropriations 35:3 40:7 50:11 53:19,19 54:11 55:1 58:12,22 59:14 70:18 71:5,9,13,14,16 73:10,16 75:17 76:8 80:10 82:19 84:7 86:11 87:9,9,13 87:22 89:9 90:2 90:11 92:2 93:2 93:5,16 95:19 97:13 98:5,13 100:18 101:7 102:24 105:23 126:17,23 180:9
approval 32:10 89:13,20,22,23

89:23 102:15
approve 150:7
approves 87:4
approving 96:10
approximately 39:19 45:17 80:2
april 24:16 25:8
area 120:19
article 42:24 43:24 44:14,19 44:24
arts 18:4
asked 101:22 182:17 183:3 183:21
asking 10:20 88:21 173:18
asks 5:24 44:14 160:23
assemble 121:5
assets 26:23
assigning 151:12
assistant 25:4,9 25:12,16,18,19 26:2,8,9,12,14 39:21 41:24 45:12 67:12
associate 25:4 25:16,19 26:9
associated 37:4 133:21,22
assume 42:24 67:22 135:6 164:6 168:14 168:15 175:17
assuming 157:14 177:7
assumptions 167:11 169:11 169:15,22,24 170:7,7 183:14
attached 5:7
attachment 14:15,15
attempting 174:8
attempts 126:6
attributable 135:7 178:22
attributed 44:23 132:20
audiences 34:14,20
audit 163:24
auditing 19:20
audits 5:19 41:12
august 48:24
authority 50:20 87:15,20 88:15 88:18 89:6 103:5,5,8 150:12 153:6 155:11 156:22
authors 47:24
automatic 102:23
automatically 80:5
available 49:8 49:15,19,23 74:16 91:16,20 95:2 144:17
average 27:11 27:11 45:19,21 78:15,22 79:1,4 135:17 173:3
averaged 168:21
award 181:19 181:24
awarded 151:7 155:24 156:16
awards 155:21 156:15
aware 15:12 40:21 42:10 46:18 51:14 54:1,3,5 62:9 63:19 75:10 79:1,10 98:17 103:18 106:20 106:21,24 114:13,17 116:23 124:8 125:17,20 151:6,9 155:20 155:22 166:6
166:20

b

b 38:18 53:19 60:16 66:19 68:4 162:22
ba 17:23
babies 144:21
back 24:14 42:15 60:15 68:2 69:11 79:16 84:18 89:13 110:14 123:1 128:8 139:22 149:10 154:9 164:24 179:17
background 18:12
backlog 30:22 31:3,4,4,13,21
bad 160:11
bar 70:22 71:3
bars 78:17
barton 3:5
based 53:16 89:7 91:8 92:3 92:4 95:9,11 100:22 101:11 109:2 110:1 111:10 133:11 133:13,18 139:1,7,7,19 140:1,3,7,10 141:7,9,20,24

148:15,19,20
149:7 150:2
165:24 166:3
168:13 170:6
171:19 180:1
basic 177:23
basis 59:6
82:20 88:19,21
93:8 139:3
176:6
bates 38:8,10
began 24:17,24
beginning 38:6
begins 111:21
behalf 9:17
10:4
beholder
160:17
believe 16:18
17:17 37:19
39:7 43:7 48:16
82:1 113:24
114:8 119:7
124:1,4 126:8
126:21 127:2
128:24 136:1
149:19 170:10
170:15 172:14
172:18 179:24
182:13,21
183:1
believes 123:13
124:2
ben 9:16
beneficiaries
59:10
benefit 68:8,12
80:17 81:21
100:16 126:2
126:16,22
154:22 155:12
157:15 163:19
181:15
benefits 5:23
7:7 20:7 27:15
27:19 30:13,14
30:23,24 31:10
32:21 33:4,11
35:7 36:2,9,15
36:22 37:1
41:18 53:14,18
53:20 54:9 55:2
55:21 56:23
59:13 60:17,22
61:7,16,21 62:1
62:8,9,12,20,21
63:5,5,9,10,15
64:24 65:1,4
68:23 73:8
78:12,14,15
79:8 80:6,7
82:5,15,18 83:3
83:3,11 84:12
84:14 85:5,7,11
85:21 86:4,7
95:13,13,14,21
95:23 96:2,3,8
96:14 97:14
98:2,15,20,23
99:2,6,9,12,12
99:16,24 100:3
100:7 101:1,3
103:15,20
105:23 106:23
108:23 109:2,5
109:24 110:12
111:7,7,13,16
111:18 112:7,8
112:11,12
114:23 115:5
118:17 125:18
125:21 128:16
128:21,22
129:1,19,22
132:17 142:14
144:16,18
149:11 150:9
151:7 155:5,8
155:18,21,24
156:7,16 157:9
157:22 158:21
159:6,10
162:20 163:4,7
163:18,20
165:10 167:11
167:17 171:9
171:23 172:4
172:19,23
173:10,20,21
174:9,12,14,24
175:1,11,12,18
176:3,8,12,19
177:1,4,9,12,14
177:17,19
178:1 180:20
181:18,23
182:1 183:10
benjamin 3:5
best 63:15
125:3 187:11
better 20:7
64:12 172:10
beyond 31:2
103:10,12
148:12
bib 6:16,16
70:13
bid 81:24
big 35:1,4 55:15
biggest 77:14
bill 9:19 75:17
75:22 87:13
97:20 99:24
billed 147:17
billion 5:21 6:1
28:21,22 34:1
40:3,18 41:16
44:14 77:8,8,9
77:16,17,20,20
77:21,22 79:17
79:20,20 81:1,2
84:20 85:5
101:7
binding 95:16

bit 71:7
board 163:6 164:9,12,18 171:1
borrow 80:21
borrowing 53:22 55:3,12 55:18 58:2 60:18,21,24 63:11,17 65:3
bottom 47:8 70:7 162:15
boulevard 3:7
bound 89:8
bounds 182:6
branch 4:5
break 11:2,4 46:11 69:5 127:5 179:11
brief 6:15 69:15 69:20 70:8
briefly 8:20 13:22 20:2 21:14 25:15 27:2 45:14 53:1 54:13 55:5 65:11 130:22 149:12
brings 52:21
broad 135:11
broader 104:13 114:23 115:5
bucket 105:24
budget 6:14,15 18:12,20,23 19:1,8,14,17,23 20:9,17,24 21:5 22:7,12,15,16 22:21,23 23:3,7 23:21,24 24:3,5 25:5,9,17,18,22 25:23 26:3,5,8 26:9,13,22 28:8 28:12,21 29:1,6 29:7,22 34:8,15 35:19 39:17,22 39:23 40:2,6,10 41:24 43:16 45:12 48:9,19 48:21,22 49:4 49:13,24 50:10 50:19,23 54:16 54:20,21 69:15 69:19 70:5,7 76:17 79:17 80:1,8 82:3 86:13,16,22 87:4,6,14,20 92:6,9 94:10 97:23 100:15 100:22 103:5 103:19 104:8 104:13,22 105:6,8,11,12 105:14,15 106:7,10,14,15 106:22 107:6 107:20 114:10 114:13 119:8 119:11 128:13 133:9 137:10 139:12,18 156:5 160:2 163:21 165:21 180:1
budgetary 29:24 48:17 50:5 119:4 140:20 154:15
budgeteers 34:22,23
budgeting 6:6 20:4 42:19 43:9 46:19 47:12 65:13 76:16 126:20 165:13 171:5
budgets 19:11 19:20 24:13 25:20 65:9 115:6
building 3:6 133:19 135:1,2 135:3
buildings 131:18
bullet 19:22 28:10 29:5 30:10 33:23 60:16 66:19 119:24 120:7 162:22
bullets 32:11 68:4
bureau 110:5
burial 163:6
business 144:20
busy 184:4
buy 56:6
buying 157:18
bvanslyke 3:10

c

c 8:1
c&p 129:4
calculate 110:6 144:2 145:21 163:3
calculated 154:21
calculating 110:4
calculation 183:7,13
calculations 68:18 81:7 112:9 167:11 167:12 180:19
calendar 92:17
call 31:3 59:3 70:20 90:11 132:12
called 9:5 33:7 82:13,20 110:2 121:2 128:4 182:19

camp 1:7 8:12 51:16 52:7,9 181:19
cancer 158:7,9
canteen 59:1,4
capabilities 182:7
capable 28:5 66:16
capital 26:22
caps 104:23 105:4,18,21 106:1
captioned 186:6
care 27:7,9,10 27:12 32:23,23 33:5,11 36:24 45:18,23 46:1 63:20 64:5,21 64:22 65:6,17 65:18,19,21 80:18 90:7,12 95:5 113:9,10 113:18,21 120:21,24,24 121:1,3,6,8,9 121:24 122:6 130:17,18 131:5,6,7,8,13 132:16 133:12 133:13,17,18 134:22,24 135:17 136:3 136:15,21,22 136:22,23,23 137:2,3,4,5,12 137:14,16,17 137:18,19 138:1,2,13,16 139:4,13,19 140:4,5 141:20 143:3,12,16,19 144:9,14,20 145:2,12,18,24 146:7,18 147:5 147:6,16,17 148:3,14,19 167:12
cared 113:17
career 18:19 50:22
caring 133:10
carnegie 18:8
carolina 1:2 52:12
case 6:8 32:8 47:15 55:17 65:14 66:24 67:23 68:1 71:19 72:12 73:5 90:6,10 92:7 94:23 97:8 102:5 163:18
cases 1:10 31:1 32:7 91:22 95:3 138:17
categories 134:2
caveat 118:21
cbo 6:17 108:6 109:3 111:12 112:4,8 113:15 114:9
cbo's 112:15
center 132:13 133:17 141:15
centers 45:18
central 120:5
certain 88:5 96:15 105:10 105:13 110:3 144:10,12 160:15 170:21 175:16 180:12 180:18 182:10
certainly 35:3 115:4 149:24 158:23 160:9 171:15 172:9
certainty 155:3
certificate 14:13 187:1
certified 2:20
certify 187:5,7 187:12
cfo 25:13 26:15 26:18,18,19,20 26:21 29:20 30:2
chairman 122:10,21,23 123:2,3,7,12,14
change 23:9 78:1,8 95:14,20 96:15 98:19,22 99:1,4,8,11,17 100:8,15,24 141:13,24 151:19 152:8 152:11,17 153:6 155:11 155:14 160:15 168:9 174:12 174:14 176:12 176:19 177:1,4 177:9,12,18,21 185:3,5,7,9,11 185:13,15,17 185:19,21,23
changed 24:3 177:20
changes 80:23 95:14 99:15,23 100:2 115:10 150:23 152:15 155:16,23 156:19 159:3,6 159:12,16 168:7,11 169:3 176:24 177:13 177:16 186:9 186:12

chapter 7:6 162:8,9 165:5
characteristics 167:13 169:1
chat 12:14,18 12:22 15:19 16:23 41:2 44:1 46:24 51:19 69:19 107:1 117:4 161:24
checking 127:1
chief 39:22 114:13
children 62:13
chillers 131:16
choice 37:18
choose 85:21 86:4
chooses 73:6
chronologically 77:10
citation 48:3
cite 50:19
cited 41:24
civ.p. 6:13
civil 4:5 52:17
claims 30:24 31:3,4,12,23 33:4,10 96:5,10 96:10,11,21,24 97:11
clarification 33:16
clarify 29:10 30:17 31:24 92:12 101:19 149:3 157:24 179:22 183:18
clarity 129:6
classified 36:4 36:19
classify 63:4
clear 32:20 33:2
clearly 60:22
clja 5:18 38:8
close 179:12
closer 147:20
closing 6:2 44:15
coffee 46:14 59:5
cola 110:3 149:14,18,23 150:4,5,18,21 151:1,4 157:19
colleague 9:23
collected 133:23
collects 55:8 136:20,24
college 17:24
collins 6:20 116:21,23 117:5,16 123:3 123:11,13,24 124:1 125:5
columbia 2:22 187:2,5,22
come 36:18 42:15 134:14 160:7
comes 55:9 72:7 81:10
coming 48:22
commission 187:24
commitments 105:7
committee 6:23 21:9,15 117:1 117:17
committees 40:7 87:10
community 50:10,19 63:19 64:4,20 65:17 65:21 66:7 120:24 121:1,6 121:9,24 130:18 131:7,8 136:3,15,24 137:3,19 138:12,16 139:4,12,18 143:3,8,12,16 144:8,14,17,18 145:1,12,18,24 146:7,18 147:5 147:16 148:3 148:14,19
comp 65:14
comparable 144:21
comparative 6:7 47:13
compare 145:5 147:1 148:2
compared 148:8
comparing 144:6 145:16 146:17
comparison 146:6 148:6
compensation 53:17 54:9,17 54:23 55:17 61:6,12,16,23 62:8 63:13 65:16 75:20 76:7 78:11,14 78:23 81:21 82:2 84:24 85:2 85:8 87:18 90:6 90:14,16 91:22 92:7 94:23 95:4 97:5,10 98:7 102:8,11 106:3 108:1 109:24 110:12,18 129:1,3,7,11,15 129:15 130:7 156:5 163:6,19 163:20 174:18

175:22
completed 111:3
completely 8:21 91:24
complex 172:21
compliance 21:18 130:20 131:10 132:8 134:23
complicated 27:22 28:1 34:13 37:18 58:8 61:19 143:20 144:1 144:23 160:11 160:11 182:3
comply 88:8
component 23:10 49:7 82:3 104:22 105:10 105:12
components 26:1,4 48:21 49:4
comprehensive 120:9
compromise 30:12,18,19 32:2
concern 101:12
concerned 102:22
concerns 104:9
conclude 176:18
concluded 184:18
conclusion 118:7 119:16
condition 157:21 158:5,5 176:14
conditions 181:9
conducted 154:18
confirm 12:21 13:12 17:8 165:4
confirming 88:22
congress 31:18 32:3,6,9 33:6 33:12 54:19,20 57:20 68:24 71:15,18 73:5,6 74:13,19,20 80:15 85:17,18 85:20 86:5 87:6 87:8,12,19 89:14 90:1,5 91:17 93:15,22 97:18,21 98:6 98:14,17,19,22 99:1,4,8,11,19 99:23 100:11 100:13,24 101:2 102:19 102:23 103:15 105:19 114:10 115:17 118:10 119:18 128:18 150:5,6,7 153:6 155:11,14,17 155:23 156:3 156:12,18,20 157:6,20 158:19 159:2,5 159:9,15,17,17 159:20
congress's 86:3 99:16 150:12
congresses 50:24 115:9
congressional 29:18 34:16 35:2 40:7 53:18 54:10 58:22 59:14 68:22 72:21 76:15,16 76:17 80:10 89:22 98:1 106:14,21 107:6,20 156:5 174:15
connected 129:17 158:7 158:10 176:19
connection 158:2,17,21
cons 159:19 160:6,7
consensus 34:14
consideration 149:5
considered 50:1 96:11,21 159:20
considering 159:9
considers 87:8 159:5
consistent 72:11,16,17
consolidated 29:11 30:3
consolidating 30:4 120:4
consolidation 29:6,21
constitution 74:17
constrained 103:15
construction 6:2 44:15
consumer 149:17
contain 128:19
contained 58:21
contains 128:22

contention 29:23
contents 107:11
context 83:1 84:3,5 105:5 166:3
continue 11:22 69:5 90:9 96:12 97:1,3,14
continued 4:1 34:6 128:4,7
continuing 87:13 93:23 94:2,6,9,15 95:16,24 96:1 97:17,20 98:6
contracts 132:5
contrast 106:8
contributes 80:18
contributor 79:13
control 47:22 103:14 138:8
controlling 114:24
convenience 13:12 59:4
conversation 11:22 114:23 115:6
coordinate 40:5
coordinating 11:14
copyright 47:20
corp 6:5
corporate 55:11 56:8
corporation 46:16,19,24 47:9
corpus 57:13
correct 12:24 17:14,24 18:1,3 18:6,9,10,13,21 18:24 19:2,6,11 19:17,24 20:20 20:21 21:2,6 22:9,10,13,17 23:5,7,21,22,24 24:1,6,18 25:1 25:2,6,10,14 26:7,10 28:13 28:14,23,24 29:8 30:15,16 32:15 34:3,17 34:18 36:14,17 38:16,17,20,21 38:24 39:5,6,19 39:23,24 41:13 41:14,19,20 42:14 47:13,17 47:20 50:24 51:6,7,9,12,13 51:22 52:12,18 59:12 62:17 63:17,18 65:23 66:14,15 67:13 68:4,14,19,23 70:5,8,9,18,19 71:1,2,5,6 74:10,24 77:8 77:11,17,18 78:23 79:8,17 79:18,21 81:10 81:15,18 82:3 84:21,22 85:1,7 85:11,17 86:14 86:15,18,23,24 87:6,15,20,21 87:24 88:4,9 89:3,4,14,20,21 89:24 90:4,13 90:18 91:10 92:14 93:23 95:10 98:11,12 98:15 99:17,21 100:7,12,19 101:3,24 102:8 102:16 103:1 103:16 104:10 106:2,11 107:6 107:9,16 108:1 114:2,11,24 115:10 117:20 118:12 119:20 120:11 122:14 123:7 126:3,10 126:17 127:3 128:13,14 129:2,8,9 130:3 130:6 131:22 132:22 134:20 135:12 136:3 139:2,9,15 141:8 142:1,8 145:3,7,13,24 146:19 148:12 148:16 149:8 149:14,17,23 151:8,20 152:1 152:9,22 153:2 154:15,23,24 155:13 156:8 156:17,22 157:4,9,17,23 158:17,22 159:3,16 161:6 162:10,20,21 163:9 165:6,11 165:17 166:21 167:18 168:22 170:8 173:10 173:14,15 174:6,13 175:2 175:3,19 177:10,16,22 178:16,19,22 179:2,6 180:2,5 180:6,9,12,13 180:16,20,24 181:6
corrections 186:9

correctly 11:10 20:16 21:12,24 28:2 36:7 53:23 55:20 68:6 72:19 92:15 97:24 121:7,21 134:16 138:23 139:24 142:15 152:16 159:8 160:4
cost 34:11 65:19 99:5 110:2,11 126:1 126:6 131:4,7 131:15 132:24 133:13,17,18 133:24 134:21 135:15,17 136:6 137:1,2 137:15 138:4 139:8 141:19 143:18 144:3,8 144:21 145:21 146:14,15,17 147:21,22,23 147:24 148:10 149:13 150:8 155:13 156:21 157:7,16 160:5 161:6 169:10 169:12,23
costs 27:7,13 37:5,13,16 55:17 65:17 80:17,18 110:8 113:19,19 125:8,21,23 126:9,12,15 132:20 133:10 133:21,22 134:3,9,11,14 134:19 135:2,4 135:4,7,10 136:14,15,21 137:1,5,8,14,16 137:20,21,22 138:4,12,14,15 139:24 140:2,6 140:7 141:7,9 141:13,24 142:3,7,12,16 143:8,11,18 145:6 147:1,13 147:15 148:4 148:11,21 155:8 159:5,11 160:12 172:24 183:4
counsel 8:22 11:7,11,13,17 12:19 29:16 140:23 187:13 187:15
count 78:18
counter 59:3
counterintelli... 20:14
counterterrori... 20:13
country 131:16
couple 26:1
course 32:10 42:7 91:21 124:17 155:8
court 1:1 8:24 12:19 52:11 113:24 181:22 182:17 187:4
covered 182:21
cpi 149:19,22
cr 95:2,4,20 96:7,12,13,22 96:23 97:3,9,14 98:3,10
create 103:5
created 37:19
creates 33:12 94:10,14 100:5
creating 95:19
creation 70:10 110:4
credible 43:8
crimes 20:14
criteria 82:15 88:7 98:20,22 151:11,19,24 155:12 157:21 158:20 175:6,7 175:9
cromwell 4:7 9:23
crr 1:24 187:21
crs 97:12
current 17:14 21:18 38:15 68:12 91:14 97:15 100:5 108:24 114:14 126:2,16,22
currently 14:6 46:6 103:7 108:23 111:6 111:13 112:7 152:6 156:7 172:16
curriculum 5:16
customs 21:1
cv 1:4 17:3,8,14 17:16
cyber 20:15
cycle 86:12

d

d 8:1
d.e. 6:13 52:17
damage 68:18
damages 51:19 181:4,19,24
data 135:16 168:16,22,24 171:16,20 174:1 178:10 183:6,8
date 8:8 38:19 38:22,23 39:2,3

91:14 92:3 124:9 187:10
david 4:14 8:5
day 96:23 140:9 141:22 142:6 171:16 186:15
days 31:2 96:23 97:9
dc 2:13 4:9
deal 171:16
death 27:11
debate 77:2 104:13
deceased 175:7
december 6:18 22:6 25:11 31:8
decide 138:6 159:15 181:23
decided 156:20
decides 159:17 159:21
deciding 159:1
decision 22:3
declaration 186:1
declare 186:4
decrease 112:17
deep 171:17,19
defendant 10:1
defense 77:1,3 184:16
defer 160:20
deficiencies 120:2
deficit 6:18 58:1 80:13,14 81:2,6,13,18 104:14,19 107:9 114:11 115:10
deficits 106:19
define 60:22 120:9
definition 58:7
degree 94:17 167:1 168:4
deliberates 54:21
delivering 144:21
delivery 36:24 37:1 132:16
demand 137:11
demands 46:1
demonstrated 20:11
denise 1:24 2:19 9:1 187:3 187:21
department 4:4 6:21 9:24 21:22 22:9 23:4 24:17 24:24 26:1,4,20 27:5 29:14 39:18 41:11 49:14 70:4 117:16
department's 161:2
departments 88:17
depend 57:15 147:24 152:2 156:9 182:4
dependency 62:7 99:8 176:23
depending 145:21 151:24
depends 56:3 57:12 82:24 84:3 94:22 138:20 140:10 144:2 148:5 157:10
deponent 8:14
deposed 10:10
deposition 1:13 2:12 5:6,9,13 8:11,16 10:13 10:19 11:14,18 12:1,4,5,9,12 12:15 13:10,19 15:22 66:23 184:11,18 186:6,10
deputy 19:7 20:24 25:4,9,12 25:13,16,17,19 26:2,7,9,12,14 26:15,18,20,21 30:21 39:21 41:23 45:12
describe 20:2 21:14 27:2 28:1 32:17 45:14 53:6 54:4,13 57:9 58:24 60:3 64:16 65:11 66:1 83:2 91:12 92:24 94:13 101:24 108:3 110:22 111:4 113:6 120:17 124:18 129:13 134:2 142:3 145:9 161:11
described 36:21 42:5 60:19 65:21 71:13,16 74:8 75:14 76:6 82:23 89:11 114:9 121:22 128:12,24 132:21 134:7 134:17 136:1 139:14 148:9 148:11
describes 71:21 161:14
describing 20:5 49:19 85:13 112:4 162:17

description 5:17 15:3 17:3 17:9 38:6,10,13 38:16,23 39:8 64:13,15 139:23 158:11 158:16
desire 125:7
despite 102:10
detail 53:7 66:17
detailed 133:11
details 60:7 175:14 180:14
determinations 140:1 149:6
determine 96:6 102:4 138:3,18
determined 102:2 137:21
determines 137:15,24 138:1 148:24 158:6,8
determining 137:14
detroit 3:8
developed 30:12 34:11 158:9 171:23
developing 19:1
development 32:20
devoted 30:6
diabetes 158:8
dic 62:1,7,11 63:5,9 99:12 129:21 175:1,5 175:11,18
died 62:14
dies 174:21
differ 167:1 175:11,13
difference 25:16 26:12 56:12 71:10 77:19,21 128:16 129:13 140:13 164:1,2 164:4
differences 65:8,12 136:14
different 22:22 27:5 35:9 55:16 56:19 58:9 63:7 63:8 65:5,14,20 71:22 76:13,14 82:22 88:17 127:2 128:12 147:14 163:14 163:16 165:12 167:5,6 179:1 180:15
differently 76:15
difficult 146:24
direct 122:6 131:6 134:2 135:6 136:22 137:4 138:2 140:5 144:9,14 146:6 147:6,22
directed 22:15
directing 50:3
directly 30:2 100:17 121:8 139:23 148:22
director 20:24 22:7,16 23:3 67:12
directors 132:13
disabilities 111:8 129:17
disability 53:17 54:9,22 61:6,11 61:12,15,22 62:20 63:4 79:4 82:5 83:2,10 98:23 108:1,23 109:5 110:17 110:19 111:9 111:14 112:8 113:13,13 149:11,13 150:8 151:7,12 156:4 169:3 174:18,22 175:7,12,22 178:1
disabled 152:6
disagree 42:12 83:4,12,18,20
disbursed 58:3
disclosure 6:11 52:15
disclosures 51:20
disconnect 146:17
discretionary 35:21 36:1,9 37:11,14 38:1 71:4,8,12 76:13 76:18,23 77:1,3 77:7 78:2 79:23 104:24 105:9 105:11,12,21 106:5,6,7,10 180:5
discussed 11:17 17:2 22:20 24:10 53:7 63:6 66:18 82:17 91:9 99:12 102:15 106:1 129:22 142:13 149:12 153:10 154:13 163:12 163:17 169:23 174:6,12 175:1 179:5 182:15 183:1

discussing 11:21 39:15 101:8 164:7
discussion 105:6,20 106:5
discussions 104:15 105:16 125:18,20
distinct 62:20 129:1 130:1 166:24
distinction 84:6 130:23 131:21 134:6 180:4,7
distinguish 83:23
district 1:1,2 2:22 52:11,11 187:2,5,22
division 1:3 4:5 8:7
dizzy 164:24
dobner 1:24 2:20 187:3,21
doctor 133:15 133:16
doctors 45:23 66:6 132:4,17
document 1:9 12:5,22 13:2,3 13:6,14,23 14:4 14:19 16:1,15 17:4,8,10 24:15 39:13 41:2,3,4 41:8,10,15 42:16 44:3,21 47:2 48:15 49:3 51:24 52:7,9 53:4 60:15 67:7 67:17 68:3 69:21 70:3,11 77:6 88:7 107:1 108:7,18 109:19 111:2 112:3 113:4 114:5 117:8,11 117:23 124:7 162:3 165:2
documentation 176:17
documented 178:19
documents 5:14 7:4 12:3,8 12:11,17 13:11 14:16 15:5,7,23 17:1 48:6 50:3 50:6 106:18 108:16 161:9 161:12,13,21 162:10 165:6
dod 6:9 47:16
doing 29:23 40:5 77:12 98:17 123:20 148:6
doj 11:9,13,17 15:12 76:24
dollar 157:16
dollars 35:15 35:16
door 133:20
doubt 74:18 159:18
doug 116:20
douglas 6:20 117:15
dr 125:1
drawn 74:18,21
driver 78:10
drives 160:11
drug 132:17
due 8:18 85:9 95:13
duly 9:6 128:5 187:6
duration 96:22 173:9 177:9,14 177:19,22
duties 28:16 51:12
duty 62:14

e

e 8:1,1
earlier 85:16 89:11 91:10 93:9 95:8 99:13 101:5 102:16 129:22 157:1 175:1 183:19
early 48:20
earning 111:11
eastern 1:2,17 2:9 8:10 52:11
economic 169:9
economist 171:8
economists 171:14
economy 157:10
education 17:22 78:12 99:24 107:18 128:22 163:7
effect 152:18 152:21 153:8
effectively 157:8
efficiency 22:8 125:8
electricity 133:19 138:5
eligibility 96:6 98:20 100:16 107:24 110:17 111:15 155:11 166:10 175:6
eligible 33:1 62:13
eliminate 156:6
eliminating 120:4
employee 187:13,15

employees 7:6 59:24 96:4,5,23 162:19 165:10
enables 90:9
enact 87:19 97:18 155:23 156:4 157:3
enacted 87:23 97:19 150:4
encompasses 55:21
endorsing 123:12
ends 123:6 184:11
energy 22:8,8,9
enforcement 21:2
enhance 172:3
enroll 113:10
enrolling 113:16
ensure 8:20 40:10 102:23
entire 26:5 27:1 90:24 91:4,5 94:19 154:18 154:24 186:5
entirely 85:21 86:4
entirety 15:6
entities 143:11
entitled 82:16 95:12,21,22
entitlement 82:14,23 83:3 100:6
entitlements 82:6,21 83:11 83:23 175:2,5 181:15
equally 137:17
errata 185:1 186:11
esq 3:5,15 4:6,7
essentially 20:17 22:1,20 22:24 27:16 64:6 94:5 139:24 142:9 151:11 152:21 162:17
established 33:7 57:20 163:5 164:8
estimate 27:6 27:17 54:17 111:11 133:17 159:11 160:5 162:18 163:22 167:17 183:4
estimated 46:2 90:24 91:4,6 97:7,11,22 101:21 133:10
estimates 27:9 91:6,8 92:1,3,4 92:6 110:7 137:10 155:7 159:4 163:21 168:12,24 169:7 170:6 171:18 172:9 173:5
estimating 65:15,19 137:11 142:12
evaluations 5:20 41:13
event 102:21
everybody 12:18 164:24
evidence 53:12
evolve 18:16
exactly 123:20
examination 5:2 9:5,11 128:4,7
examined 9:6 128:5
examining 126:2,15
example 56:4 56:10 59:2,6,15 72:24 97:17 98:19 99:19 128:20 129:21 140:2,8,12 141:11,14,21 144:5,10,19,22 156:3 158:6 160:10 161:19 169:24
examples 73:8 123:5 124:18
exceed 80:20 93:5
exceeds 40:3
except 59:7 90:5 186:9
excepted 96:11 96:21
excluded 112:7
excluding 110:18 174:17
excuse 22:5 52:7 71:11 119:23 124:12 126:13
execute 23:7 33:15
executing 23:24 24:5,13
execution 6:6 22:16 40:2 47:12
executive 25:21
exhaustive 180:15
exhibit 5:9,11 5:16,19,24 6:5 6:10,14,17,19 7:4 13:2,4,17 15:20 16:2,24 17:5 41:3,5 44:2,4 47:1,3

51:23 52:1 69:20,22 114:1 114:4,6 117:7,9 162:2,4
exhibits 5:6
exist 166:20
existence 124:17
exists 158:24
expand 183:18
expanded 32:23 33:11 99:20
expect 66:20 182:18,18
expectancy 166:4,7,24 167:8,14 168:11,13,21 169:1 181:12
expected 53:11 53:15 54:2,5 92:5 133:12
expend 93:6
expended 91:17 91:23
expenditure 91:21
expenditures 36:19 55:13 80:19,20 135:11
expensive 34:24 35:1 141:18
experience 150:14
expert 1:13 2:11 6:11 22:2 50:11 51:15 52:16 66:13 67:3
expertise 50:16 184:8
expires 187:24
explain 20:7 25:15 26:11 33:18 34:20 48:14 49:22 55:5 56:12 62:3 64:2 71:9 72:10 76:11 78:7 82:10,12 94:1 104:18 105:3 128:15 130:22 133:8 143:24 158:3 163:15
explained 34:13
explaining 50:3
explanation 33:17 62:10
exposed 36:24 37:2,4,6
exposures 32:13 33:8 35:8 36:12,16,20,23 37:8,13 78:20
express 182:13
expressing 104:9
extend 27:13 31:2
extent 20:6 182:23
external 103:19 104:8
extremely 160:10

f

f 47:22
faced 102:7
facilities 6:3 44:16 45:8,15 45:24 46:3 64:22 120:21 130:19 131:9 131:14,15,23 131:24 132:24 134:18,19,22 134:24 135:1 135:18 136:16 137:18,23 139:9,22 143:19 145:3 148:22
facility 65:23 146:5 148:10
fact 102:3 114:21
factors 81:6 138:3,4,7 149:4 169:9 176:11
fail 101:2
failed 93:15
fails 90:1
fair 12:7 24:8 37:7,12 46:4 50:9 62:19 66:1 73:21 77:24 79:23 105:17 135:6,15 138:9 139:17 146:4 148:18 150:1 151:3 154:17 155:16 164:6 169:13,21 173:2 175:15 175:21 183:12
fairly 27:21 53:6
familiar 46:15 92:21 106:13 120:13,15 161:8 165:4,16 175:14
families 129:18 129:19
family 65:16
far 71:8 125:5
farm 23:3
fasab 163:6 164:9,11,14,15
fashion 49:5
fashions 91:18
fast 104:21

faster 106:9 147:6
fbi 19:8 20:11 20:12 24:11
feature 47:22 98:3
february 1:16 2:8 7:3 8:8 117:1,20
fed.r. 6:12
federal 6:9 7:6 18:16 19:11 21:19,19 35:19 46:20 47:16 50:23 52:16 53:12,21 55:3,7 55:9,12,15 56:1 56:21 57:24 58:4 60:18,21 60:23 63:11,17 65:2 76:24 80:19,19,21 88:17 93:4,4 104:13,22 105:6 106:10 106:19 112:6 125:22 126:8 161:14 162:19 164:12,14,17 165:10
fee 59:19
feel 13:13 16:13
fees 149:2
field 33:17
file 12:23 30:24 51:21,22 117:4 161:24
financial 7:4 20:14 21:11,17 21:19 26:24 27:1 103:13 159:24 161:9 161:12,13,20 162:10 165:5 165:14 182:7
financially 187:16
find 45:24 118:2 134:11
fine 46:14 184:14
finished 16:14 16:17 44:20 53:3,5 108:15 109:18 111:1 112:2 113:3
first 17:13 19:22 22:14 24:14 28:10 41:23 47:8 53:2 118:5 119:24 123:1 131:21 131:22 132:2 132:20 134:17 187:6
fiscal 28:21,22 29:2,2 40:19 41:17 48:9 49:12 51:3,12 69:19 70:4 77:6 77:15,15 80:24 84:20 85:4 90:21 92:5,13 92:16 93:16 101:5
fisher 3:6
five 147:5
fixed 139:24 140:5 178:21
floor 3:7
flow 55:18
flu 141:16
fluctuate 95:9
fluctuated 150:22
fluctuations 168:20
focus 76:18 104:14 117:24
focused 125:23
folks 33:17
follow 89:8,15 164:8
followed 14:13
following 34:10 37:20 53:9,16
follows 9:7 128:6
food 72:24
footnote 41:22 48:8 49:11
force 80:21
foregoing 187:8
forged 34:14
forgetting 62:5
forgotten 114:1
form 23:14 35:11 43:3,18 50:13 56:16 58:14 62:23 66:4 72:14 74:2 75:2 78:5 83:14 84:1 101:14 115:2 153:16 169:17 170:18 178:6
formal 114:14
formulas 99:1 100:16 155:12
formulated 32:12
formulation 22:16,23 28:12 40:1 86:14
forth 187:10
forward 169:7
foundation 56:16 57:4 61:3 63:23 64:10,18 66:4 72:4,14 73:13 76:2 81:4 83:6,14 84:1 85:23 93:19 115:12 116:3 116:10 118:14

118:22 121:12 124:21 125:10 131:1 133:3 135:20 136:8 140:16 142:20 143:5,22 146:9 147:8 169:17 171:11 172:6
four 130:15,17
free 13:13 16:13 62:12 66:9
freeze 156:20 157:2
frequently 71:16 159:13
front 13:9 133:20
froze 157:6
frozen 153:18 153:23
fulfill 51:11
full 10:8 34:22 90:20,22 93:15 94:16 96:16 97:17,19 98:5 102:15 118:5 123:2 133:13 133:18 161:16 182:21
function 96:20 96:21
functions 24:9 30:1,3 119:4 131:12 172:11
fund 32:13 33:8 33:8 35:6,8 36:1,3,4,13,16 36:20,21,23 37:8,13 53:20 55:1,14,19,21 56:2,5,8,9,11 56:13,14,19,22 57:2,10,11,12 57:14,16,22 58:1,6,7 61:8 61:13 65:7 73:22 76:7 78:20,23 80:13 81:10,13,22 82:2 84:24 85:21 86:4 130:16 132:8
funded 37:24 46:6,8 53:18,20 54:10 55:2 59:6 59:9 60:17,20 60:22 61:7 63:10,16 65:1,6 75:11 86:6 90:17 130:7
funding 18:23 20:12,18,20 31:11,19 32:12 32:18 33:3,7,13 33:24 34:1,12 35:9,17,20,22 35:23 36:2,8,9 36:15,22 37:19 45:7,15 50:11 53:14 55:14 56:1,12 57:13 70:15 71:1,17 71:20,22,24 72:7,12,20,24 73:7,9 74:23 75:24 76:18 78:19 79:14 82:17 84:16 85:6,10,14 90:2 91:14 94:2,7,17 94:18,20 95:2 101:12,22,23 101:24 102:3,6 118:17 128:19 136:2 180:5,8 180:11,15
funds 5:21 31:14 32:5,7 33:9,15,18,21 34:6 38:1 40:18 41:17 54:22 55:9,16 56:20 56:22 58:2,21 59:13 73:23 74:10,14,16,18 74:21 75:11,15 76:12,13 77:3,7 80:15 87:23 88:6 89:2,12 90:4 91:3,12,15 91:17,19,20 93:9,10 97:6 98:7,10 101:3 102:11,20 103:3,12 105:24 131:7 131:23,24 161:15
further 14:15 16:10 62:10 128:6 184:6 187:7,12
future 27:14,20 68:8,16,22 69:1 100:6,8,18 115:8,24 116:17 118:15 137:4,8,14,16 139:12,18 140:19 142:16 153:4 154:14 155:7,18 167:17,24 168:3,7,8,9,12 168:24 169:12 170:1,6 172:3 172:19,22 173:13,22 174:10,14 179:2,4,7,7 180:20 181:15 181:18 183:4 183:15
fy2024 5:22

fy2026 6:14
fy25 90:22,23 97:16 98:4
fy26 34:7 91:1 91:2,5 92:6 97:11,23
fy27 34:9 91:4 91:6 92:8,11,18

g

g 8:1
gamut 161:17
gao 119:17 120:1,8 143:11 164:15
gap 46:5,7
gas 56:6
gasoline 56:6
gcpi 110:10
general 29:16 33:14 37:22 40:14 41:12 46:17,22 49:15 49:19,23 50:1 53:20,21 55:1,2 55:10,14,19,21 56:2,8,9,13,19 56:20,20 57:9 57:16,22 58:1 59:7,9,16,21 60:7,18,20,23 61:7 63:10,16 65:2,7 71:11,12 80:13 81:10,12 93:4 118:9 131:3,11 135:9 139:4 148:17 149:1 151:6 164:10 166:24
generally 33:14 48:24 86:5 103:18 104:11 104:16 120:15 124:10 130:12 130:15 165:6 165:15 166:19
geographic 120:19,22
getting 179:12
gi 99:24
give 31:18 44:18 64:12 109:17 110:24 140:12 141:11 162:12 164:22
given 60:19 88:3 95:15 140:9 157:3,7 177:13
gives 18:15
go 15:11 16:4 39:3 41:1 43:22 43:23 54:16 57:6 59:2 64:2 69:6,8 73:15 81:6 89:13 102:15 108:6 112:21 122:4 127:8,11 131:12 132:15 133:15 138:3 142:12 144:8 148:24 151:23 154:2,6 164:21 179:13,15 184:12
goal 30:22 31:6 126:1
goes 31:13 55:14 56:5,7,9 87:9 111:9 133:16
going 12:14,17 17:19,21 38:5 39:12 45:8 46:13 69:8 79:16 118:13 127:11 139:22 140:15 149:10 154:6 169:7 179:15 184:12
golkow 8:6
good 9:14,15 10:24 91:23 126:11,18 127:8 160:14 160:16,19
governing 98:14
government 19:11 55:7,9,15 56:1,21 57:24 58:4 80:21 90:10 112:6 118:9 126:5
governs 130:11
grab 46:12
graham 3:14 10:4
grand 3:7
grandfather 152:12
granted 102:6
graph 70:21,22 70:22 71:3 77:5 79:23 84:19
graphic 48:18
great 50:16
greater 66:17 77:21 93:6 171:6
green 78:17
group 3:3,13 9:18 113:11,12 113:12,12,16
grow 80:5,8 110:1,9
growing 28:21 103:20 104:21 106:9
grown 31:4 110:10 147:5
growth 76:22 76:22 77:1,3 105:10,13,14 105:15

guarantee 152:7 153:1 173:9
guaranteed 59:16
guards 133:20
guess 109:4 123:15
guidance 48:10 48:15,17 49:2 49:14 120:20

h

hand 40:9
happen 84:13 176:15
happened 20:10
happens 84:16 93:22 150:5
hard 116:1
headquarters 132:9
health 27:6,8 27:10,12 32:22 32:23 33:5,11 36:24 64:22 65:6,18,19 80:18 90:6,12 107:18 113:9 113:10,18,20 118:19 120:21 120:23 121:8 131:5,13 132:10,16 133:12,13 137:24 167:12
hear 75:5 76:21 116:7 153:14 153:19,21
heard 8:21 82:5 104:2,7 118:8 119:17 124:11
hearing 117:6 122:12
hearings 54:21 122:22,22 124:11
heart 141:17 142:5,7,10 146:14,16,18
heinz 18:9
held 2:12 8:12 28:17 122:21
help 144:11
helping 137:11
hereof 186:11
high 161:17 170:11
higher 111:17 143:18 151:4,4
highlighting 46:5
hire 138:1 140:2
historic 6:1 44:14
historical 168:14 169:6
historically 86:6 97:16 110:10
history 17:24 18:5,12 53:7 71:1 79:15
hold 28:3 54:20 84:16 85:13 105:9,10
home 59:15 112:12,18
honest 42:14
honorable 6:19 117:15
honoring 32:14
hospital 45:19 45:21 59:2,5 132:12,14 133:21
hospitals 66:7 132:6
hot 184:5
hour 46:11
house 6:24 116:24 117:18
housing 100:2 107:17
hr 29:19 39:1
hypothetical 83:6

i

ice 21:16
identification 13:4 16:2 17:5 41:5 44:4 47:3 52:1 69:22 114:6 117:9 162:4
identified 20:18 51:15 106:22 120:1
identifies 67:8 165:9
identify 31:14 103:19 173:19 174:8 177:24 178:3
identifying 107:20 183:9
iii 6:12 52:16
immigration 21:1
impact 96:13 112:19 137:13
impacted 175:23
implement 152:11,14 159:15
implementation 26:24 32:14
implemented 32:12 155:17
implementing 159:9,18
important 104:19

impound 88:6
improve 122:13 122:21,24 125:7
improved 19:23 172:9
improving 30:7
inadequate 64:16 101:12
inappropriate 148:2
incarcerated 177:3
include 53:13 61:10,22 75:20 87:5 120:23 126:2,15 133:19 135:11 145:22 168:7 168:10,20 169:2,9
included 19:1 51:2,5 63:9 64:24 82:17,18 92:9 98:10 105:24 112:9 169:6
includes 12:18 12:20 18:12 29:13 61:12 84:20,24 146:15
including 60:12 120:4 134:18 137:10 148:11 159:6 160:1 167:13
income 55:12 56:9 108:24 109:2 112:5,6,9 113:13
incomes 109:4
incorrect 169:15 170:1
increase 45:9 78:22 79:7 80:14,15 81:1,2 81:18 112:5
increased 20:9 20:12 29:1 78:14 79:2,5,11 79:20 81:17 95:18 96:2 112:12 150:15 150:17
increases 95:23
increasingly 104:14
incremental 143:18
increments 111:10
indemnity 62:7
index 5:1 109:10 149:17
indicated 16:7 16:19 78:21 186:10
indicates 44:10
indirect 134:3,9 134:11,13 135:4,10 147:21 148:21
individual 56:8 68:8,13 155:3,8 155:9 158:22 172:23 173:7 173:10,14,19 174:10 176:3 177:15 181:8 181:11,14 183:10
individually 154:23 173:4
individuals 43:15 81:20 174:2 183:4
inexpensive 141:16
inflation 109:10 110:1,7 110:8 150:24 151:4 157:14
inflationary 157:11,12,19
information 22:2 31:15 43:8 43:16 46:19 48:1 49:7,9 53:16 171:5
informed 119:7
infungible 182:11
inherent 98:3 168:23 183:14
inherently 168:3 169:14
injuries 62:15 129:17 158:20
injury 176:18
inspector 40:14 41:12 118:8
instance 98:1
instructions 73:22 95:10
insurance 59:8 59:10,23 60:3,5 60:8,9,10,11,12 64:7
integrated 120:9,14 121:3 121:23 131:13
intended 36:20
interacting 121:4
interest 57:14 57:17,23 58:11 59:20
interested 187:16
internal 49:13 50:2 135:16 139:8
interpret 165:20

interview 40:17 42:1,4
interviewed 40:13,15 42:6,8
interviews 42:11
intimately 175:14
introduce 12:16 107:24
introductory 41:22
intrusions 20:15
investment 45:8,15 46:3
involved 32:1 70:10 86:19 105:8 142:7,10
involves 37:8
involving 139:12
issue 45:11
issued 48:10 67:4
issues 140:21 160:3
items 17:20 37:9,10
ivc 121:2

j

jadine 67:9,11 67:14,19,20
january 31:6
job 1:23 15:3 17:3,9 24:9 28:16,17 38:6 38:10,12,15,22 39:8 51:12 53:6 160:21 161:1 168:1,23
jobs 24:20
judgments 176:7
july 19:5,8 23:2 25:11 48:23
jump 77:13,14
jumped 154:5
june 20:23 24:19,23 28:17
justice 4:4 9:24
justification 19:24 20:17,19 35:5
justify 34:12

k

keep 14:9,12 20:22 46:13
keeping 14:7
key 71:4
kicks 49:3
kidney 158:7,9
kind 11:24 27:4 27:10,11 29:13 37:4 48:18 50:5 56:7 57:11 111:11 120:19 131:17 132:6 132:18 161:16 176:7
klotzbucher 4:6 9:21,22 11:19 23:13 35:10 43:2,11 43:17 50:12 56:15 57:3 58:13 61:2 62:22 63:22 64:9,17 66:3 72:3,13 73:12 74:1 75:1 76:1 78:4 81:3 83:5 83:13,24 85:22 93:18 101:13 103:23 115:1 115:11,15 116:2,9 118:13 121:11 122:1 124:20 125:9 130:13,24 133:2 135:19 136:7,17 140:15,18,24 142:19 143:4 143:14,21 146:8,20 147:7 153:15 169:16 170:2,12,17 171:10 172:5 178:5 184:2,15
know 10:22 16:14 22:19 27:10 29:23 39:1,2 43:5,21 44:20 46:13 53:2 56:3 57:6 57:13 58:1,3 59:3 64:12 67:14,19 69:15 71:7 74:17,18 76:22 80:20 81:20 82:24 91:13 94:16 104:24 105:13 105:19 108:5 108:15 109:18 111:1 112:1 113:2 116:20 116:22 120:20 121:19 125:3 129:19 133:19 133:20 138:1,5 142:11,13 144:5 148:5,7 148:23 152:14 157:11 159:19 160:7,9 161:18 164:11 170:20 171:14 172:10 174:2 175:4,10 178:24 179:20 182:5 183:6
knowledge 63:15 68:10

88:14 119:10 150:19 171:23 172:3,14 181:1 181:3 182:23

l

l 4:8
label 158:5
labeled 72:1
labels 134:6
labor 110:5
lack 120:8
lane 4:14 8:5
language 73:17 74:9,12,13 75:15
lapse 90:2,11
large 104:21 174:13
larger 106:9
largest 82:2 131:13
law 32:5 82:14 88:5 89:15,17 95:12,13,14 100:5,6,8 103:7 155:15 156:9 156:12 182:6
lawrence 30:22
laws 68:12 95:18 168:7,8
lay 106:18
layers 89:19
lead 20:8 121:3
leaders 28:11 125:22
leadership 3:3 3:13 9:18 29:14
leading 21:5 23:21 24:4
leads 40:1 86:13
led 23:6 28:11 29:6 176:18
left 26:18
legal 103:13 181:4
legislation 73:22 159:6,9 159:20 160:10
legislative 29:18 95:10 174:5,11
legislators 160:20
lejeune 1:7 8:13 51:16 52:10 181:19
level 77:2 94:7 94:18,20 95:20 113:13,14 133:11 161:17
levels 97:15
liabilities 7:5,7 163:4,23 165:11
liability 162:19
life 60:7,8,10 166:4,7,17,24 167:8,14 168:11,13,21 169:1 181:12
lifetime 68:13 155:4
lights 138:6
likely 34:7 118:15
likes 156:13
likewise 35:2 91:2 181:3 184:7
limit 159:7
limited 169:14 169:22 177:11 182:9
limits 88:2
line 22:14 24:23 62:14 79:15 125:10 185:3,5 185:7,9,11,13 185:15,17,19 185:21,23
lines 125:3
list 107:12,16 121:15 123:5
listed 52:22
litigation 1:7 8:13 51:16 52:10 66:13,21 67:4 68:19 180:24 181:5 181:20 182:14
litigation's 181:9
little 71:7
live 27:17 176:5
lives 175:24
living 99:5 110:2 149:14 150:8 155:13 156:21 157:7 157:16 169:10 169:12,23
loan 59:15,16 59:19 75:18
location 2:13 138:21
locations 45:18
logical 81:19 171:15
logo 44:10 47:9
long 24:12 27:17,18,19 175:23 176:4
look 27:9,16 38:2 60:6 73:2 75:16 79:3,14 90:23 97:21 98:4 107:23 126:11,18 133:10
looked 21:20 43:15
looking 45:2 48:8 49:11

60:15 77:5 79:15,22 84:19 109:7 118:4 126:5,9 147:21 168:22 176:2
looks 18:11 19:4 24:16 38:18 79:16 108:12 154:24
loss 111:11
lot 104:16 122:19 179:21
low 110:18
lower 105:14 110:8,9,11
lunch 59:3,3 127:5
luncheon 127:13
luxenberg 3:4 9:17

m

made 40:21 42:11 90:24 92:5,6,8,10 99:23 100:2,21 101:6,11 102:18 148:6 152:15 183:13
main 3:16
maintaining 131:15
maintains 135:16
make 9:19 14:7 84:18 87:1 88:18,23 90:3 96:6 140:13 149:5 155:7 156:12,18 159:2 160:15 168:24 169:11 171:18 176:6
maker 22:3
makes 35:8 54:19
making 90:9 137:10 164:23
malfunction 153:13
man 184:4
managed 180:16
management 18:8,20 21:19 25:13 26:14 27:1 29:20 34:15 40:6 132:11 160:1
manager 126:14,18
managerial 132:24 133:23 135:15 136:6 139:8 148:9
managers 126:11
mandatory 35:17,21 36:3,4 36:10,13,16,19 37:8,9,16,20 71:4,8,16,20 72:1,6,12,20,24 73:1,3,7 74:11 75:11 76:11 78:1,8,11,18 79:22,24 80:4 80:24 81:9,17 82:3 84:20 87:18 90:3 95:8 95:11,19 103:21 104:13 104:19 105:18 106:4,8 107:12 107:15,21 109:11 114:24 180:5,8
march 5:23 6:4 25:7 67:13 187:24
mark 13:1 15:20 16:24 41:3 44:1 47:1 51:23 69:20 114:1,3 117:6 162:1
marked 13:3 16:1 17:4 41:4 44:3 47:2 51:24 69:21 114:5 117:8 162:3
master 18:4,7
material 19:24 20:17
materials 15:1
maternal 144:20
math 77:12 80:3 177:23
mathematical 183:7
mathematically 77:23
matter 8:12 22:1 84:6 137:20 160:17 186:6
mcilray 38:8
mcilroy 1:14 2:12 5:2,6,10 5:15,16,18 8:15 9:4 10:7,9 12:16 13:4,7,20 13:24 14:18 15:24 16:2,6 17:5,7 23:16 38:9,12 41:5,7 41:23 44:4 45:11 46:10 47:3,23 48:1,10 49:12 52:1 53:11,15 66:12 69:14,22 114:6 114:8 117:9 118:16,20

119:3 125:12 128:3,11 154:3 162:4 179:20 184:2 186:19
mean 57:1,12 74:14 84:10 90:20 108:4 109:15,22 111:5 113:7 123:10 134:1 172:16 178:10
meaning 53:20 55:1 61:21 63:10
means 20:3 27:3 31:12 39:3 54:14 55:6 88:2 94:6 107:24 108:5 133:8 152:22 156:4 156:14 165:21 174:14
measure 109:10
measures 115:23 149:21
mechanism 102:23
media 42:18,22 43:15,22
medical 6:3 44:16 45:18 60:12 65:18,23 95:5 130:17,18
130:18,19,19 131:4,6,10,14 132:2,7,19 133:17 134:12 134:17,19,23 134:23,24 135:1,7 141:15 145:1 148:12 176:17 181:9
medicare 138:15,19 139:1,3,7,19 148:4,15,20,23 149:4,7
meet 11:17 33:3 45:24 82:15 170:15 170:23
mellon's 18:9
members 60:2 62:14 65:16
merit 2:21
methodologies 34:13
mi 3:8
michael 4:7 9:23
michael.w.cr... 4:12
midsummer 48:23
military 130:1 130:4
military.com 5:24 43:24 44:11
million 31:19 81:23
mischaracterize 89:17
misspoke 129:5
misunderstan... 183:2
models 165:24
modify 99:9
moment 13:8 38:3 44:18 47:6 62:4,6 108:14 111:22 112:23 117:22 127:2 162:1,13 164:22
money 20:5,6,8 30:6 55:8,9 58:3 84:9,11 90:8 91:5
monthly 61:23 62:12 96:4,9 97:1 174:19 175:16
moran 122:10 122:21,23 123:7,12,14
morning 9:14 9:15
mortality 27:12 27:16 168:11 168:13,21
move 10:19 32:5,7 165:3
moved 19:7 20:23 22:6 23:2
moving 32:11 67:6 68:2
multiple 40:16 42:6,8 50:23 89:19 124:16 177:8
multiyears 91:21

n

n 3:16 8:1
name 8:5 9:22 10:8 47:23 52:20,22
names 167:6
narrow 110:17 111:15 157:20 158:19
nation's 131:12
nature 8:19 11:24 140:10 141:20 182:4
nc 3:17
necessary 73:18,23 74:10 74:21 75:15,19 83:22
need 20:18 45:7 45:15 46:2 101:12,21,23

118:11 119:19 138:22
needed 20:20 31:10,11 46:8 74:16 100:18
needs 27:12 46:5 54:17 122:11,13 123:19 124:2 133:12,13 154:15
negative 105:14
negotiated 138:14,21 139:1,6 149:8
negotiates 138:24
neither 187:13 187:15
network 63:20 64:5,6,21 65:22 120:10,14,24 121:1,5,9,10,23 121:24 136:3 136:15 137:19 138:13 139:13 139:19 143:3 143:12,17 145:2,12,18,24 146:7,18 147:16 148:4 148:15,19
never 166:19
new 21:11 26:24 30:20,21 31:5 32:12,17 32:21,22 33:7 33:13,13,24 34:11,12,23,24 35:4 36:5 103:5 108:13 151:24
news 42:23 76:19
non 6:9 47:16 64:22 131:8
nondefense 76:22 77:4 105:11
nonretained 51:15
noon 127:3
normal 97:18
north 1:2 52:11
notary 2:21 187:4,21
note 147:13
noted 8:22 120:8
notice 2:19 5:9 5:12 12:15 13:19 14:1 15:22
notification 32:9
notify 32:6
noting 31:22
nullify 152:21 153:7
number 5:8 30:5 73:19 75:21 78:13 79:7 92:9 95:22 107:14 108:11 113:17,20 140:3 162:2 178:3
numbers 89:9
nurses 132:4,17
nw 4:8

o

o 8:1
oas 162:22 163:3
oath 10:17 186:13
obama 37:20
object 35:10 43:2 56:15 57:3 58:13 115:1 118:14 140:16 153:15
objection 11:20 23:13 43:11,17 50:12 61:2 62:22 63:22 64:9,17 66:3 72:3,13 73:12 74:1 75:1 76:1 78:4 81:3 83:5 83:13,24 85:22 93:18 101:13 103:23 104:1 115:11 116:2,8 116:10 118:22 121:11 124:20 125:9 130:13 130:24 133:2 135:19 136:7 136:18 140:23 142:19 143:4 143:14,21 146:8,21 147:7 169:16 170:3 170:12,17 171:10 172:5 178:5
objections 5:12 15:21 122:2
obligate 88:3 88:11 93:6
obligated 91:24
obligating 33:18
obligation 91:20
obtained 43:1
obtaining 60:10
occupancy 38:24
occupy 39:9
october 38:19
offer 53:11 54:2,6 66:20 161:1 186:12

offering 68:7 68:11,17,21
office 5:19 18:20 19:14 20:24 21:5 22:7 22:8,12 23:21 25:21 29:7,15 29:16,17,17,19 31:15 34:15 39:18 40:1,6,14 41:12,12 42:21 86:13 89:2 106:22 107:6 107:20 118:8,9 120:5 121:2 139:11 156:5 160:1,2,5,13,18 161:5 163:1
office's 106:14
officer 19:8
offices 29:7,13 29:14,19,22 30:8 37:24 120:5 132:11
officials 40:10
offsets 180:23 181:5
oh 61:18
oig 5:19 40:15 40:22 42:1,6,11 42:13 119:17
oit 31:18 37:23
okay 10:23 11:5 13:10,15,16 14:10 16:13,16 24:14 35:13 38:2,4 44:6,22 45:4 46:15 68:2 69:2 89:19 108:10 109:17 109:20 110:14 110:21 112:4 113:2,5 114:3 119:1 128:11 149:10 154:12 158:15 161:8 162:6,14 164:22,22 165:15 183:24
olaf 17:24
old 21:16 45:20
om 29:19
omb 31:17 32:3 32:10 34:22 49:1 54:18 86:17,22 87:4 87:23 88:2,14 88:18 89:13,23 102:18,19
omb's 49:2 88:9 88:16
once 87:4,12
open 12:22 141:17
operate 57:16 58:6,8,11,21 59:6 122:20
operated 59:13
operates 57:24 59:8,17,21 81:13
operating 57:23 80:13
operation 59:1
operational 35:22 36:8
operations 27:1 56:20 130:16
opinion 68:7,12 68:17,20,21 179:22 181:17 181:24 182:8 182:13,18,22
opinions 53:13 53:16 66:20 181:2,4,21
opportunities 7:1 117:19
opposed 77:1 98:2 154:21 173:6
opposite 145:11
option 60:10 107:23 108:11 108:22 109:7 109:22 110:15 111:5,20 112:5 112:21 113:7
options 6:17 19:17 21:20 106:15,22 107:8,20 114:9 114:15,19,21
orange 99:21
order 31:9 182:1 184:13
organization 126:1
organizational 120:2 125:4
organizations 6:7 47:13 122:19
organize 125:3
originally 32:24,24
outcome 85:12 187:17
outlines 33:14
outside 138:8
overlap 28:16
oversee 26:8 119:4
oversight 120:21
overtime 31:12 31:12
owed 85:6
own 93:1 103:6 135:18 175:5 182:7

p

p 8:1
pa 3:14

pact 32:14,19 33:6 79:12
page 5:2,8 14:5 14:5,6 17:13 24:15 38:11 41:21 44:10 45:1,3 47:8,19 47:23 52:21 67:6 70:13 107:13,14 108:11,11,12 108:13,15,20 109:8 110:15 111:21 112:22 118:4 122:8 123:6,8,16 162:14,15 185:3,5,7,9,11 185:13,15,17 185:19,21,23
pages 7:3 38:8
paid 55:18 61:13,16 63:12 65:4,5 90:20 97:15 108:24 111:8 129:19 129:24 132:13 138:15 155:4 174:18 178:11
pandemic 59:7
paragraph 45:5 53:2,10 118:5 119:14 122:8 123:2,17
parameters 88:5
parents 62:13
part 24:3,3 38:5 49:22 71:20 76:23 105:15 112:14 114:23 115:5 118:1 121:9,10 133:9 168:1,23 169:5
partially 166:4
participants 59:11
particular 53:15 151:13 151:20 157:23
parties 8:16,21 30:18 32:1 181:22 187:14
party 121:5
pass 90:1 93:15 175:17 177:8 184:1
passed 94:6 96:17 97:12
passes 87:12 93:23
passing 176:24
past 178:2 179:6
pathways 136:21
patient 140:8
patients 140:9
paul 30:21
pause 8:20 93:10
pay 55:13 56:4 56:6,6 59:18,20 59:20 68:7 84:11 85:10 96:1 101:3 103:14 130:4 132:4 134:21 138:17 139:4 149:1 162:19
paying 96:3
payment 62:12 96:8 139:20 175:10,16 177:20,21
payments 5:23 41:18 59:10 61:11,13,22 65:15 66:2 81:21 84:17,18 85:9,14 90:3,10 91:4 92:5,7,8 93:10 96:4,6,9 97:1,2,4 129:16 155:9 173:13 174:17,22 178:15,18,22 178:23 179:2,4 179:6
pays 65:22 66:9 135:2 149:7
pdf 107:13
pen 65:15
penalty 186:1,4
pending 11:3
pension 53:17 54:9,18,23 61:6 61:13 63:13 65:17 75:20 76:7 78:11,14 78:23 85:8 90:6 90:15,16 91:22 92:8 94:24 95:4 97:5,10 98:8 102:11 106:4 109:24 110:13 129:3,7,11,18 130:7 163:20
pensions 55:17 81:22 82:2 84:24 85:2 87:18 102:8 129:24 130:1,4
people 39:2 57:7 76:21 80:5 102:17 105:8 121:15
perceived 101:11
percent 111:9 111:10,14,16 111:17 152:6

percentage 151:12
performance 21:1 48:9 49:13
performed 24:6 24:9 68:18 142:6 164:2 171:7
performing 28:5 29:24
period 88:3 95:15,23 96:16 156:21 157:11 157:13,19
periodic 106:14
perjury 186:1,5
person 183:13
personal 55:10
personally 67:14,20 183:5
perspective 18:16 100:15 126:21 160:19 160:22
perspectives 160:8
pertaining 119:5
pertains 121:8
pertinent 38:23
pharmaceutic... 132:5
phase 6:12 52:16
phrase 74:20 75:18
piper 67:9,11 67:20
place 12:14,17 15:19 51:18 88:7 171:6 187:10
placed 12:22 113:11
placing 16:23 69:18 107:1 117:3 161:23
plaintiff 68:9 68:14 154:22 181:8
plaintiff's 173:10 181:12 181:15,18
plaintiffs 3:3 3:13 5:9,12 9:18 10:5 13:19 15:21 172:23 181:24
plan 137:11
planning 6:5 47:12 94:11
plans 19:2
play 150:24 159:22 161:5
please 8:19 9:8 10:7,22 11:3 12:21 13:13 16:13 17:7 44:19 49:4 55:5 71:9 75:9 94:4 108:14 109:17 110:24 111:4 111:24 112:1 113:2,6 114:4
pleasure 182:16
plus 50:22
pm 127:11,12 128:2,9 154:7 154:10 179:15 179:18 184:12 184:18
pocket 112:13
point 10:21 11:1 13:13 19:23 28:10 160:12 182:20
pointed 73:9
pointing 24:21
points 66:19 128:12
police 132:13
policies 162:15
policy 7:4 18:8 18:13 50:10,19 67:12 120:9 161:9,12,13,21 162:10 165:6
political 51:3
politically 26:18
population 27:9 27:13,17 153:12 154:18 155:1 173:6
portion 94:20 135:3
portions 134:13
position 5:17 19:5,8 25:21
possibility 177:16
possible 59:18 85:20 106:18 152:17,19,20 156:11 176:16
post 50:6
potential 99:15 158:23 159:5 160:3 169:14 177:13
potentially 32:22 101:23
power 86:3 99:16 157:18
practical 112:19
practicalities 182:6
practice 33:16
precludes 57:23
predecisional 49:10 50:1

predict 68:15 68:24 85:17,18 100:11,13 116:13,17 153:3 155:3 176:4
predicting 68:22
preexisting 95:9
premise 155:6
preparation 32:5 66:24
prepare 11:18 23:7
prepared 20:19 22:20 66:12
prepares 86:16
preparing 12:4 12:12 19:17 23:23 24:5,13 139:11 163:21
present 149:16 157:9 163:4
president 54:18 87:14 102:19 116:4,13
president's 34:8 50:4 54:20 87:5 97:23
press 31:21 42:21
presumably 81:1 99:7 150:11,13
presumptions 99:20
previous 22:19 23:11 24:6 72:11 100:21 124:24
previously 30:5 37:14,16 54:16 63:14 99:20 100:10 119:15 128:5 163:13 163:17 165:13 174:6
price 146:5,6 149:17
primarily 122:5 132:3 163:19
primary 35:20 78:10 79:12 161:5
prior 29:21 94:8,18,20 95:17
priorities 50:4 50:5 51:3 88:17 89:7
priority 113:11 113:16
private 45:21 57:12 64:7
probability 165:24
probably 59:4
procedural 12:8
procedure 52:17
procedures 147:2
proceed 118:24
proceeds 123:5
process 28:8 30:23 31:1 33:10 35:20 43:1 48:18 49:3 49:24 54:16 71:23 72:8 76:17,20 84:7 86:11,20 96:4,5 96:24 102:15 105:9 133:9 135:14 159:7 161:18 165:9 172:20 180:2
processed 31:13 133:23
processing 30:13 33:4,5 96:9
proclamations 105:7
produce 15:1
produced 15:7 17:2,9
production 5:14 14:17,23 15:2,8,14,23
program 21:1 40:10 59:11,15 59:16 64:7 73:1 73:1,4 109:24 120:4 126:6 128:17 129:16 129:18 172:11 173:1
programming 6:5 47:12
programs 18:16 24:2 26:23 46:20 53:14 55:22 56:1 58:4,5,8 58:10,20 59:8 59:24 60:4,6,8 60:12,13,20 73:22 74:11 75:10,18,19 87:18 90:4 99:16 103:21 104:13 109:11 118:17 126:9 128:20,22 129:10,14 145:6 147:14 171:18 180:12
project 137:4 154:14 172:22 172:24
projected 139:13 180:19

projecting 172:18
projection 174:10 183:15
projections 137:8,13 139:12,18 171:8 172:4,15 179:2
projects 46:6
proper 174:1 183:8
proposal 30:12 112:15,20
proposals 114:14,17
propose 109:1
proposes 112:8 113:15
proposing 110:9 111:12
proprietary 21:17
pros 159:19 160:6,7
prospective 155:17
provide 22:2 33:10,14 34:1 42:18 64:21 66:7 96:24 102:24 111:16 138:2 144:19 159:10 160:2,5 160:13,18,22 160:22 182:17 182:22
provided 15:12 21:22 48:6 63:7 73:9 89:9 90:7 97:6 108:17 132:23 136:22 136:23 137:2,3 137:12,18,18 137:21 138:12 138:16 139:9 140:3,4 141:7 141:10,12,20 144:7 145:1,2 145:17,22,23 147:16 149:2 161:16 167:17 171:24 172:19 176:20 177:1,5 177:14 178:1 178:15 179:24 182:9
provider 64:6 138:22
providers 45:23 121:6 131:5 138:1 140:1
provides 73:22 113:9 144:6,10 144:12,16,18 145:7,10,11 155:21
providing 33:5 87:19 90:8 96:20 120:20 134:21 135:17 142:10 143:19 159:22 167:23 171:5 181:7
provision 98:9
public 2:21 18:8,8 29:17 49:8,15,20,23 50:2,6 187:4,21
publications 106:15
published 114:22 117:5
pull 13:14
purchased 141:24
purpose 137:7 148:8 164:3,4
purposes 56:19 63:8 165:12
pursuant 2:19 6:12 52:16
pursue 115:9 115:23
put 124:3 164:24

q

qualify 80:5
quality 170:11 172:8
question 10:21 10:23 11:3 58:18 74:4 75:8 83:9 86:2 118:14 121:20 126:4 140:19 141:4 143:20 146:12 154:12 157:24 167:21 168:18 169:20 174:4,7 182:3
questioning 125:10
questions 10:20 42:21 118:15 171:3 183:21
quick 44:18
quickly 17:19 30:24 31:2
quo 122:11
quote 43:1 44:23
quoted 40:22 42:23

r

r 8:1
raises 80:15
rand 6:5 46:16 46:18,24 47:9
range 45:20,22 77:10,16
ranging 113:11
rapidly 103:20

rate 59:20 105:10,13,14 105:15 110:2,4 110:8,9,11 138:19,21
rated 111:16 152:6 158:10 158:20
rates 61:23 110:7 138:15 138:24 139:1,3 139:6,7,14,20 143:17 148:3 148:15,24 149:8,13 150:15
rather 58:11 59:11 61:14 140:2 147:21
rating 79:4 111:9,14 113:13 151:7 151:11,15,18 151:22,23 152:2,3,7,8,11 153:7 155:12 158:2 176:14
ratings 98:23 110:19 152:13 169:3
rb 128:21
reach 178:24
read 21:12 44:22 53:23 74:17 76:19 108:6,19 111:6 119:15 122:15 124:10 186:5,7
reading 111:3
readjustment 100:3
reads 53:10 103:7
real 157:8,15
really 20:4
realtime 2:20
reason 145:16
reasonable 35:6 149:2 155:7 171:18
reasonably 167:16
reasons 79:10 93:13
recall 40:13,17 48:5 67:21 101:8 162:23
recalling 42:5
receive 27:18 27:19 28:7 59:19 62:21 80:7 81:21 82:16 95:12 111:13,18 113:20 152:13 173:22
received 15:5 30:8 78:16,22 85:14 157:22 158:22 172:23 173:13 174:9 176:3
receives 58:2 76:9 87:14 94:7 175:23
receiving 27:10 78:13 79:8 96:10,14 156:8 175:16
recent 93:14 114:18
recently 31:21
recess 69:10 127:13 154:8 179:16
recipient 154:22 173:4 173:14,20 174:10
recipient's 183:10
recipients 154:19 173:3
recognized 50:10
recommendat... 18:23
recommended 120:3
record 8:4,9,23 10:8 38:7 46:11 69:6,8,12 127:9 127:11 128:9 154:2,7,10 178:15 179:13 179:15,18 184:12
recordation 163:7
recorded 1:13 2:11
records 169:6
reduce 30:4 31:7,13,20 100:7 106:18 107:21 109:1 110:11 113:17 113:18,19 114:10 115:10 125:8,21 126:6 126:15 156:6 157:8,16,22 158:21 181:19 181:23
reduced 59:20 109:5 157:6,18 176:9
reduces 152:8 176:14
reducing 6:17 30:22 104:18 107:9 113:20 120:5 125:23 126:9
reduction 104:14,20

126:1 152:13 182:2
reevaluates 176:13
reevaluations 169:4
refer 30:17 34:19 45:1 57:1 69:14 83:10 92:16 104:23 166:9,16
reference 28:20 38:7 104:8
referenced 101:5
referencing 48:16
referred 59:23 60:11 82:6
referring 69:16 104:10 105:1 122:17 124:19 125:11 163:11 166:12,18 183:9
refers 82:8 118:18
reflect 123:21 143:17
reflected 135:4
reflecting 135:17
reflects 88:16 114:22
reform 122:11 123:19 124:2
regard 52:7 100:12 108:24
regarding 43:8 43:16 46:20 68:23
regards 117:6
regional 120:22 132:11
regions 121:22
registered 2:21 187:4
regulations 168:7,8
rehabilitation 128:21
reimbursement 139:14 143:17 148:3
reimburseme... 66:2
related 12:8 40:17 42:18 62:15 96:8,22 99:20,23 106:22 112:5 113:8 129:16 139:18 140:20 144:12 160:1 161:2 165:14
relates 1:9 26:5
relations 29:18
relative 187:13 187:15
relatively 133:11 141:16
release 31:22 50:2
released 34:8 91:7
relevant 126:16 172:14
rely 167:8,13
remain 68:12 81:16
remaining 155:4 157:15
remote 1:13 2:11 3:1 4:1 8:11,19
remotely 8:17 8:18 187:6
renewable 22:8
reorganization 7:2 117:20 123:19
reorganize 118:11 119:19 123:14 125:6
reorganized 125:1,2
repeat 83:9
repeatedly 118:10 119:18
rephrase 10:22 23:18 39:16
52:8 58:19 63:2 74:5 75:7 118:23 126:4,7 129:6 134:15 136:11 141:5 153:16 167:20 168:17 174:7
replacement 46:2
replacements 131:16
report 40:22 46:24 66:13 162:18 178:11
reported 1:24 45:19 163:23
reporter 2:20 2:21 8:24 12:19 113:24 187:1,4
reporting 8:19 19:19 30:2 125:4 165:14
reports 67:4 76:20
represent 15:4 17:1 164:17
representatives 7:1 117:19
represented 11:7
representing 3:3,13 4:3 10:1
represents 39:8 79:24 173:3

request 5:21 34:9 40:18 41:17 54:19 86:16,23 87:5 92:10 94:24 100:18 101:7 101:11 102:14 102:18 163:21
requests 14:16 14:16,22 15:2,8 15:13 18:23 22:21 33:4 40:11 48:21 100:22 105:7
require 33:3 150:3
required 32:9 89:20 95:18 170:16
requirement 162:18
requirements 21:18 32:4 100:16
requires 17:17 32:10 33:16 35:5 89:22 96:3 96:5
requiring 105:23
research 37:3
resolution 87:13 93:23 94:2,6,10,16 95:16,24 96:1 97:18,20 98:6
resource 46:20
respond 42:20 42:22
response 15:2,7 15:13,16,19 16:7,18
responses 5:11 15:21
responsibilities 120:10
responsibility 25:22,24 26:3,6 26:21 120:20 120:22 121:4
responsible 24:12 122:5
rest 35:9
restate 86:2 104:5 146:11 154:12 169:20
restrict 100:7
restructure 125:18
restructured 124:9,15,16
restructuring 120:3 124:19
result 159:12 174:15
resumé 15:3 38:5,8
retroactive 155:21 156:15 156:18 174:17
retroactively 156:1,17
revenue 80:20 80:23
revenues 53:21 55:3 60:18,21 60:23 63:11,17 65:2 80:15
review 5:20 12:3,11 13:14 13:23 14:22 16:9,13 17:7 41:16 44:19 48:23 53:1 108:14,16 109:13 110:21 111:22 112:23 117:22 126:22
reviewed 12:7 15:16 16:7,19 66:23 67:3 161:20
reviewing 16:12,17 96:10 109:18
reviews 16:15 17:10 44:21 46:19 53:4 86:22 108:18 109:19 111:2 112:3 113:4
revised 151:16 151:19,23
rich 171:17,19
right 9:21 11:1 39:12 69:7 86:9 108:19 127:7 127:10 154:6 160:17 179:14 184:9,10
rmr 1:24 187:21
road 56:7
role 19:10,13 20:23 21:4,15 22:1,7,11 23:3 23:10,20 24:4,5 24:6 25:17,18 26:12,13 38:24 39:4,9,15 42:17 119:4 150:24 159:1,7,22 161:5 167:22
roles 22:19 24:10 120:10
room 4:8
roughly 79:24
row 38:18
rule 52:17 53:12 115:8,18 115:19,22
run 131:12 161:16
running 132:6

s

s 8:1
safe 67:22 182:8
salisbury 3:17
save 186:8
saved 159:11
saving 30:6
saw 54:15
saying 145:20 149:3 152:17
says 19:23 21:8 22:14 28:11 30:11 33:23 34:10 45:6 48:9 49:3,12 60:16 67:11,17,18 70:3,7 93:5 107:5,8,23 108:6,11 109:9 110:16 117:14 118:6 119:24 120:7 122:9 123:3,17 163:2 163:10
scenario 141:12 142:2,4 145:11
scenarios 141:19
schedule 144:11 151:8 151:11,15,18 151:22 152:3,7 153:7
school 18:9
science 18:7
scope 25:23 26:6 173:9 182:21
screen 13:11,17 16:5,11 38:13 42:2 44:6 47:5 52:4 67:17 68:4 69:3 70:1 107:3 117:12 161:24 162:7
scroll 13:22 14:3 17:21 38:5 108:8 118:2 162:12
scrolled 70:13
scrolling 14:2,9 14:12 20:22 52:14 107:11 109:6 110:14 111:20 123:1
searched 52:20
seat 184:5
second 6:10 29:5 33:22 47:19 52:15 118:5 123:16 136:2 165:1
secondary 157:21 158:1,5 158:9,16,20
secretaries 124:24
secretary 6:20 25:4,9,12,17,18 25:20 26:3,8,9 26:13,14 29:16 30:21 39:22 41:24 45:12 48:24 116:20 116:23 117:5 117:16 123:3 123:11,13,23 124:1 125:2,5 125:14 160:22 160:23,23
secretary's 50:4 161:1
section 41:22 68:3 71:3 108:8 108:12,13 109:14 111:23 112:24 118:3
sector 45:21
security 56:4,5 56:11,13,22,22 57:6,7 109:11 109:23 110:12 149:18,23 150:18,21 151:1
see 10:3 13:6,18 14:12 17:23 19:22 20:23 21:8 22:6,14 23:6,20 24:23 25:3 28:10,20 29:5 30:10 32:11 34:8 38:12,18 41:7 41:21 42:2,3 44:6,9,13,17,23 45:13 47:5,9,19 47:21,23 48:2 48:12,17,23 49:16 52:3,6,13 52:14,19,22 53:9 67:8 68:3 69:24 70:14 71:3 75:17 76:21 77:6,16 97:21 98:6 107:2,5,7,15 109:9 110:16 110:19 117:11 117:14,21 118:6 119:14 119:21,23 120:6,12 162:6 162:15,22
seek 89:13
seeking 32:22
seeks 173:9
seem 112:14
seems 51:8 81:19
seen 13:24 14:18 50:23 140:9 166:19
selected 6:8 47:16

selection 21:10
self 59:6
senior 25:21
sense 155:18 160:21
sent 31:21
sentence 33:22 34:10 118:5 119:15,21 120:6,12 122:15
separate 29:12 129:10 175:2,6 175:9
september 92:19
series 10:20 24:20 54:20 97:12
serve 22:1 39:22
served 21:9 67:12
service 14:13 21:21 23:4 60:2 62:14,15 111:8 120:10,14 121:23 122:18 129:17 138:20 143:18 145:7 146:5,7 157:21 158:2,5,7,10,16 158:21 176:19
services 30:7 65:18,22 66:8,8 66:10 113:21 130:6,11,18 131:4 132:3,19 132:23 134:12 134:18,19,23 135:8 138:2,12 139:9 140:3,11 141:7,10,12 144:7,11,12 145:1,16,21,23 147:16 148:10 148:12,15,19 148:20 149:2 163:1
serving 21:15
ses 5:17
session 5:4 128:1
set 30:22 137:22 138:5,7 138:21 187:10
sets 88:2 138:11 138:24
settled 21:21
settlements 182:5
seven 39:19
several 103:20 128:20
share 13:11 16:4 41:2 43:24 46:23 106:10 161:24
shared 44:6 67:17 117:11
sharing 13:17 15:11 16:22 39:13 41:8 50:8 52:3 69:3,24 86:9 107:2 113:23 124:7 162:6 164:23
sheet 185:1 186:11
shifts 51:2,6
shop 59:5
short 46:11 69:4 127:5 179:11
shortfall 102:7 102:21
shot 141:16
showed 142:1
shutdown 90:11
signature 184:17 187:20
signed 186:15
significant 28:16 31:23 46:2 78:8 120:3
signs 87:14
similar 23:10 23:12 24:9 35:15 36:17 85:12 125:17
similarly 68:11
simple 172:19
simply 82:23 83:3 103:5
single 91:19
sitting 42:10
skeptical 34:13 34:19,21,23 35:2,4
slightly 163:14
smaller 25:22
snap 73:1,8
social 56:4,5,10 56:13,21,22 57:6,7 109:11 109:23 110:12 149:18,23 150:18,21 151:1
somebody 22:2 73:15 183:7
somewhat 35:16
sorry 23:15 25:7 38:9 43:12 75:4 104:5 116:6 123:2 142:21 178:7
sorts 174:5
sought 32:24
sound 35:6
sounds 27:21 62:18 88:22

source 43:8 47:24 56:11 136:2
sources 53:13 55:8,24 118:16 180:11,15
southern 1:3
span 26:6
speak 119:10
speaking 8:20 14:11
special 61:23
specialized 171:23 172:3 172:13
specific 24:2 68:8,22 73:18 75:21 98:1 118:1 161:17 166:7 167:8
specifically 20:13 61:1,5 76:19 97:5 106:3 109:3 163:18 175:5
specified 76:7
specifying 73:23
speculation 115:12
spend 103:10 103:11
spending 20:7 37:8 78:1,2,9 78:11 79:24 80:4,24 81:10 81:17 84:21 89:20 90:13 95:9,11,17,18 104:19,24 105:9,18 106:9 106:11 107:12 107:15,21 114:24 147:5,6
spent 74:22 122:12
spoke 95:8
spoken 67:23 67:24 80:12 86:10 180:18
spouse 176:24
spouses 62:13
st 17:24
staff 19:14 21:5 22:12,15 23:6,9 23:21 24:4 28:11 29:7,13 30:5 34:14,16 35:2,3 37:24 120:5 131:18 132:9,11 141:22
stamp 38:10
stamps 72:24
standards 163:5,5 164:8,9 164:12,18 170:16,21,23 171:1 181:4
standing 184:13
standpoint 103:14
stands 162:24 164:11
start 30:20 31:5 93:16 111:13
started 18:19 25:4
starting 17:13 18:22 24:10 45:11 78:18 162:14
starts 38:10 108:13
state 10:7 116:7 157:10
stated 63:14 72:20 74:23 79:6 81:12 82:1 84:23 85:16 87:17 93:9 100:10 126:8 167:15 179:22
statement 6:19 42:9 65:1 72:11 83:19,21 101:19,21 117:4,15 122:17 123:3,7 123:11,12,21 123:23 125:6
statements 40:21 42:11,13 42:18 163:24
states 1:1 4:3 5:11 6:10,24 15:20 51:14,19 52:10,15 117:18 166:16
statistics 110:5 166:10
status 122:11 176:23
statutes 98:14 150:2
stayed 177:20
stemming 125:21
stenographic 8:23
stenographic... 187:9
stone 125:1
stop 15:11 16:22 39:12 50:8 69:3 86:9 113:15,23 124:7 164:23 174:22
stopped 176:9
store 59:5
strategies 34:12
stream 32:13 32:18 33:7,13 33:24 34:12

35:18 37:19 71:22
streams 35:21 137:1,2
street 3:16 4:8
strike 124:12
structure 100:6 120:2
structures 125:4 126:3,16 126:22
studied 114:22 156:6
studies 6:8 47:16
sub 180:7
subcommittees 87:10
subcomponent 49:6
subject 22:1 50:1 71:14,17 71:22 72:2,21 76:12 80:9 94:18,19 95:16 95:24 174:4 179:5 180:8 183:14
submission 6:14 49:13 70:5
submissions 49:4
submit 48:21 49:1,4
submits 86:17
submitted 87:6
submitting 48:19
subpoena 5:13 14:14,14 15:22
subsequent 33:9 176:17
subsequently 158:8
substance 11:21
substantially 31:7
substituted 149:22
subtitle 47:15
successful 28:12 31:23
successfully 51:9
sufficient 55:13 101:2 102:3
suggest 112:11
suggesting 109:3
suggestions 114:9
suggests 111:14
sum 92:7 173:5 178:23,24
summarize 39:14 108:21 109:21
summary 66:19
summer 48:20
sums 73:17 74:21 75:18
supervising 19:14 22:12
supplemental 5:21 40:18 41:17 101:6,11 102:6,14,24
supplemented 55:11
supplies 142:10
support 5:22 32:13 41:18 53:15 130:19 131:10,18 132:5,7,15 134:23 159:4
supported 168:16
supports 36:23 37:1,3,3,13,15 57:13 131:4
suppose 82:24
sure 14:7 108:9 118:2 180:14
surge 32:21,22 33:3
surgeries 142:5 142:11
surgery 141:18 142:8 146:14 146:16,18
surprised 43:14
surviving 62:13
survivor 99:11
survivors 174:24
sustainable 126:3,17,23
swear 9:1
sworn 8:18 9:6 128:5 187:6
system 21:11 21:17 26:24 113:10,18 120:24 122:6 131:6,13 133:1 133:24 135:15 136:6,23 137:4 138:3 140:5 144:9,15 163:8
systems 21:19 182:7

t

table 70:17,24 79:15
tables 166:4,17 166:24
take 11:4 42:22 69:4 108:14 112:12,18 123:4 149:4 153:1 179:10
taken 69:10 127:13 154:8

179:16 186:6 187:9
talk 23:15 48:5 73:15 76:21 92:1 104:17 142:21 148:24
talked 71:7 105:22 165:13 179:20
talking 163:19 163:22 178:7
tax 56:4,6,9,11 62:12 112:7
taxable 112:6,9
taxes 55:10,10 55:11,18
taxpayer 35:16 53:21 55:2 60:18,21,23 63:11,16 65:2 80:20
taxpayers 58:2
team 42:1
technology 31:15
tef 33:9,19,20 34:24 35:6 36:3 36:5 78:19
tell 109:14 160:24 173:21
telling 11:16 121:18
tend 143:17
terms 74:14
testified 9:6 116:24 124:5 128:5
testifying 66:17 118:16 173:12 180:23
testimony 6:11 52:16 53:12 54:2,5 67:1 124:3 157:1 173:8 180:1 181:7,11,14 187:9
testing 107:24 156:4,14
thank 10:2 14:21 15:10 16:21 17:12 23:1 24:21 30:9 39:11 42:15 46:9 50:7 92:20 111:19 113:22 114:4 119:13 119:22 122:7 124:6 149:20 179:9 184:3,7
theoretically 152:3,4
thing 33:13 63:6 167:4
things 27:5 35:4,4 36:5 39:14 42:9 50:5 65:14 121:16 123:8 131:17 132:6,15,18 137:10 145:9 146:3 159:24 169:5 179:22 182:14
think 20:9 21:21 38:4 50:15 51:10 61:18,19 83:22 101:20 124:4 125:13 131:20 153:17,22,22 160:24 161:4 179:10,11
thinks 43:22 45:10 125:14
third 24:23 45:3,5 120:7 121:4 131:21 131:24
thirds 79:24
thought 160:24
three 28:17 134:22
tied 110:3 113:12 149:17 149:18,19
time 1:17 2:9 8:9,10 11:5,24 18:17 21:16,23 41:23 44:7 54:6 78:13 79:3 85:7 96:16 109:17 110:24 127:2,8 128:9 150:22 150:23 157:9 177:18 178:2 179:18 182:20 183:22 184:3,8 187:10
timeline 48:19 49:5
times 40:16 42:7,8 124:17 155:20
title 41:15 44:13 47:11 52:15 70:14 107:8 109:9 110:16
titled 71:1
titles 28:17
today 8:14,24 10:17 11:2,8,11 12:17 39:7 42:10 46:1 67:1 91:5 106:9 128:12 173:8 179:21 183:1 184:5
today's 8:8 12:4 12:12 184:11
told 11:23 122:23
tools 166:7 167:9

top 44:9 71:4 107:5 117:14
topic 40:23 42:5 182:9
topics 42:19 66:18,18 100:22 179:21 182:12,22
torts 4:5
total 70:17 79:15,16 80:1 80:18 92:7 144:9 147:21 147:22 175:21 177:21 178:1
towards 126:9
toxic 32:13 33:7 35:8 36:12,16 36:20,23,24 37:2,7,13 78:19
toxically 37:3,5
traditionally 36:1,8,10 37:9 37:10,24
training 18:13
transcript 5:7 184:14 186:5 187:8
transcripts 66:24
transfer 31:19 89:12
transferred 31:16
transition 26:17
transitioned 25:8
transportation 21:22 56:7 144:13 145:10 146:15
travel 161:18
treasury 74:19 164:16
treated 76:15
treatment 141:17,18
trends 153:11 166:10 168:14
true 29:9 32:16 34:4 36:11 46:8 51:1 65:7,24 71:19,24 72:8 72:23 74:12 75:23 76:4,8 78:24 79:9 80:11,22 81:14 85:19 87:7,11 88:1,10,13,24 89:16 90:5 93:12,17,24 98:16 99:22 100:9,14,20 101:4 102:9,17 103:2,11,17 106:7,12 114:12 115:6 115:21 116:16 116:19 123:9 130:5,9 135:13 135:24 136:4 137:17 138:10 139:5,10 141:9 142:18,24 143:2,13 145:4 145:8,19 146:1 146:2 147:10 148:13 149:15 151:21 152:23 153:4 155:14 155:19 156:19 157:5 159:13 165:18 166:5 168:9 174:16 174:18,20 175:20 176:12 176:22 177:12 177:17 178:17 179:8 180:10 180:21 183:16 186:8
trump 26:17 115:22 116:5 116:14
trust 56:22 57:2 57:10,11,12,14 58:6,7 171:6
try 30:23
trying 14:7 74:7 149:1 174:3
tuesday 1:16 2:8
turn 138:6 149:10 169:24
two 15:5 17:1 27:4 29:22 32:11 35:20 65:9 71:10 79:24 106:8 122:12 129:10 129:14 134:2 136:21,24 140:8 141:19 142:5 145:6 147:14
types 29:19 72:23 159:2
typically 72:20

u

u.s. 4:4 9:24 41:11 49:14 70:3
ultimately 21:21 54:22 159:14,20 161:1
uncertain 94:12 177:15
uncertainties 94:13 179:5 180:19
uncertainty 94:10,17 95:6 168:4

unchanged 68:13
unclear 131:20
under 10:16 33:22 51:12 53:12 60:16 66:19 78:22 80:4 81:23 121:22 124:24 125:1 129:24 132:24 134:9 136:14,15 138:12 141:21 142:2,3 143:12 146:5,7 147:16 151:7 162:22 182:10 186:1,4 186:12
underlying 101:1
underscored 118:11 119:18
understand 10:13,16,22 11:6,10 21:24 28:2 48:3 49:18 55:20 58:18 62:1,16 66:16 68:6 72:19 74:4 74:7 82:8,11 92:15 97:24 104:9,12,16 106:17 107:19 109:14,22 111:5 112:10 112:16 113:7 123:10 125:7 134:1,16 140:22 144:24 145:20 156:24 158:1,11,15 165:19,20 166:11,17 167:5,7 180:22 183:22
understanding 20:16 36:7 62:11 64:4 108:22 121:7 121:21 122:16 138:23 139:23 142:15 151:10 151:14 152:16 158:4,13 159:8 160:4 161:4 167:10 171:17 171:19 172:10 175:8 176:21 177:2,6 178:20 186:11
understood 86:8
undertakes 125:24
undertaking 126:14
unenroll 113:15
unfamiliar 171:9
unique 35:17
united 1:1 4:3 5:11 6:10,24 15:20 51:14,19 52:10,15 117:18 166:16
university 18:5
unreasonable 168:15
upcoming 90:21
updated 38:23
updating 17:17
usa 5:18 38:8
usda 73:15
usdoj.gov 4:11 4:12
use 27:4,6 28:8 33:19,20 74:9 74:11 109:9 110:10 139:13 168:24 181:23
used 33:10,15 47:22 110:8 137:9 163:21 181:18
uses 74:13 137:2 154:14 166:6
using 21:21 56:10 137:11 163:5 167:15
usually 71:13
usvets 166:11 166:13

v

v 4:6 41:21
va 5:19,24 6:14 6:22 11:11 28:11,21 29:1 33:21 34:1,14 35:22 37:17 40:10,14,22 42:18 43:8,16 44:14 45:16,17 45:19,24 46:5 48:21 49:3 50:11 53:20 55:2 58:5,8,10 58:20 59:1,2,5 59:8,16,24 60:6 60:17,22 61:21 63:10,19 64:22 65:1,5,8,18,22 65:23 66:9 68:7 70:14,17 71:19 71:20,24 72:12 73:5,7 74:23 75:10 76:23 79:15,16 80:4 81:9,17 83:2 86:14,16 87:8 87:14,23 88:3,8 88:11 89:1,3,5 89:7,20,23 90:3 93:1 94:10

95:15,24 96:1
98:14,20 99:16
100:17,22
101:3,6 102:2,7
102:18,22
103:4,9 105:23
108:23 110:1
110:13 111:14
113:8,10
116:20 117:17
120:23 121:8
122:6,11,13,20
122:20,23
124:12 129:7
129:24 130:3
132:24 133:16
134:18,19,22
135:16 136:14
136:15,20,24
137:11,18,22
137:22,24
138:1,5,5,7,11
138:24 139:9
139:22 140:4
141:15 144:6,9
144:10,12,16
144:19,20
145:2,10,11,17
145:22 146:5
146:15 147:18
148:10,22
149:5,7 150:14
152:10,21
153:1,7 154:14
155:20 158:4,6
159:10,10,14
159:17,18
161:14,16
162:10 165:9
166:6 167:7,16
170:23 171:6,9
171:15,16,22
171:23 172:19
172:22,24
173:20 174:12
176:13,18
178:11,14
180:12 181:18
181:23
va's 5:20 35:9
39:22 40:2
41:16 45:12
53:17 54:8
69:14 80:1 82:3
88:15 94:2
103:14 107:24
110:17 114:13
118:8 119:17
138:8 139:8
148:20 161:9
161:20 162:18
163:7 170:10
171:7 180:1,7
vaccination 141:22
vaccines 141:23
vaco 132:9
value 20:11
157:8,15,16
163:4 173:21
174:9 178:1,21
182:10 183:10
vanslyke 3:5
5:3 9:13,16,17
10:2,6 12:2
13:1,5 15:18
16:3,21 17:6
23:19 36:6 41:1
41:6 43:6,13,23
44:5 46:23 47:4
50:17 51:18,22
52:2 56:24 57:8
58:16 61:9 63:3
64:3,14,23
66:11 69:2,13
69:18,23 72:9
72:18 73:20
74:6 75:3 76:5
78:6 81:8 83:7
83:15 84:4
85:24 93:21
101:17 104:4
114:7 115:7,13
115:20 116:6
116:15 117:3
117:10 118:23
119:2 121:17
122:3 124:22
125:16 127:7
128:10 130:21
131:19 133:5
135:22 136:12
137:6 140:22
141:2 143:1,9
143:15,23
146:13 147:3
147:12 153:19
153:24 154:11
161:23 162:5
169:18 170:9
170:14 171:4
171:21 172:12
178:13 179:9
179:19 183:24
184:7,13
variable 140:6
140:7 141:7,19
variables 61:22
81:16 142:12
167:24 168:3,6
168:10,19
182:10
variations 125:2
varied 77:7
variety 21:20
55:8,16 58:8
60:5 91:18
128:22 137:9
142:11 144:16
144:18 152:10
152:14 160:8,8
176:11
various 89:2
105:8

vary 95:11 140:7 141:9 155:9
varying 140:2
vba 31:10,16,20 35:24 37:22 53:14 55:22 59:13 61:10,22 62:20 63:4 67:13 83:11 96:3,5,24 118:18 125:18 125:21 128:13 142:14 149:11 150:8 151:6 155:5
verbatim 187:8
veritext 8:6
versus 25:17 26:13 71:4,8 77:20,22 79:22 129:11 136:15 140:13 141:17
veteran 27:9,12 27:16,18 30:13 30:23 35:7 54:17 64:22 80:17,18 86:7 95:14 109:1 111:7,7 112:7 112:17 121:3 133:16 141:15 151:13,20 152:5,12 155:3 157:23 166:7,9 167:8,11,12 168:11,20 174:21 175:15 175:17,22,23 176:3,4,9,12 177:3,7,15 178:2,12,16
veteran's 151:23 158:7 175:7 176:13 176:23 177:9 177:17
veterans 5:22 6:21,22,23 7:7 24:17,24 26:2,4 26:20 27:5,17 29:15 30:14,24 31:10 32:22 37:1,2,4,6 39:18 41:11,18 46:20 49:14 59:18 60:1 62:21 65:16 66:8 68:23 70:4 78:13,16 79:4,7 80:7 82:14 95:12,21,22 96:2,13 97:2 103:19 106:23 110:18 111:13 113:9,9,16,17 113:20 114:22 116:24 117:16 117:17,18 118:18 120:9 120:13 121:22 122:18 129:16 129:20 132:9 132:10 133:11 133:12 142:1 144:11 152:12 156:7 158:22 160:14,17,20 161:3 162:19 163:4,18 165:10 166:17 167:13 175:11
vetpop 166:13
vha 7:2 35:24 37:23 75:23 76:8,9 113:18 117:19 118:11 119:5,8,11,19 120:5 121:15 123:13,19 124:2,8,14,16 124:19 125:6 125:11 130:6 130:16 131:5,5 131:8,23,24 140:20 142:17 143:12,19
vha's 120:2,8
vi 7:5 162:9
vickery 1:24 2:20 9:1 187:3 187:21
video 1:13 2:11 8:11 153:13
videographer 4:14 8:3,6 9:8 69:7,11 127:10 128:8 153:17 153:21 154:1,4 154:9 179:14 179:17 184:10
viewpoint 161:2
viewpoints 160:9
viper 124:11
visn 120:16,19 121:8 132:11
visns 122:5 132:12
vitae 5:16
volume 6:7 7:5 47:11 162:9 165:5
vouchers 161:18
vsos 122:13,18 122:22

w

w 4:7
waived 184:17
walk 17:19 86:12
wallace 3:14,15 10:4,4

wallacegraha... 3:19
want 9:19 39:2 43:20,21 57:5 60:8 76:21 108:5 117:24 148:23 149:24 179:21
wanted 13:12
wants 73:6 86:6 105:20 115:18
washington 2:13 4:9
water 1:7 8:13 46:12 51:16 52:10
way 14:3 22:22 29:11 35:6 36:17 57:17 74:24 75:12,13 75:14 88:16 101:24 110:4 113:19 122:13 142:3 145:5,15 147:17 148:21 152:8,24 153:3 176:15
ways 35:14 45:9 58:9 80:16 106:18 110:6 114:10 122:20 122:23 147:23 152:10,14 177:8,11
we've 39:15 174:5,12 179:5 179:20 180:18 182:14
website 60:6
websites 50:6
weeks 122:12
weighs 6:2 44:15
weitz 3:4 9:17
weitzlux.com 3:10
went 141:15,17
west 3:7
whitney 3:15 10:3
widespread 123:18
widest 77:10
william 4:6 9:22
william.v.klo... 4:11
wish 13:15
wishes 125:6
witness 2:13 8:18 9:2 11:23 23:17 35:13 43:5,20 50:15 51:21 56:18 57:5 58:15 61:5 63:1 64:1,11,20 66:6 72:6,15 73:14 74:3 76:3 81:5 84:2 101:16 104:2 115:4,17 116:4 116:12 119:1 121:14 125:13 130:15 131:3 136:10,20 140:17 142:23 143:7 146:11 146:23 147:10 153:22,23 154:3 170:5,13 170:20 171:13 172:8 178:9 184:1,9 187:6
word 123:4
words 93:1
work 30:6 31:11 32:2 37:22,23,23,23 40:9 42:7 50:23 51:5 54:18 97:1
worked 11:13 19:4 31:17,19 67:20 102:17
working 19:11 19:16 24:17,24 27:8 39:17 122:12
written 15:13 66:13
wrote 39:2
wwallace 3:19

y

yeah 58:15 59:21 61:18,20 73:11,14 74:3 76:3 77:23 84:2 125:2 140:17 154:4 171:13 172:16 177:23 178:9
year 28:22,22 29:2,2,2 40:19 41:17 45:20,22 48:9,22 49:12 50:22 51:12 54:15 55:7 69:19 70:4 77:6 77:12,13,15,16 80:24 84:20 85:4 87:20 90:8 90:17,19,20,21 90:22 91:19 92:2,5,13,16,17 93:15,16 94:8 94:16,18 97:8 97:17,19 98:5 101:5 102:12 122:10 150:7 151:3 157:3,7
year's 94:20 95:17
years 28:12 33:9 39:19 93:14 118:8 119:17 147:5

156:21

z

zone 127:2

Exhibit 780

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF NORTH CAROLINA
SOUTHERN DIVISION

IN RE: CAMP LEJEUNE WATER LITIGATION,	)	Case No. 7:23-cv-897
This Document Relates to: ALL CASES	)	DEPOSITION TAKEN ON BEHALF OF: PLAINTIFFS

Videotaped DEPOSITION OF HENRY MILLER, PH.D.
(PAGES 1 - 245)
February 20, 2026
VIA ZOOM

REPORTED BY: KELLY R. REXROAT, RPR, CSR, CCR

APPEARANCES

For the Plaintiffs:

WHITNEY WALLACE, ESQ.
WALLACE & GRAHAM, PA
525 North Main Street
Salisbury, NC 28144
wwallace@wallacegraham.com
704.633.5244

and

LESLIE LAMACCHIA, ESQ.
BELL LEGAL GROUP, LLC
219 Ridge Street
Georgetown, SC 29440
llamacchia@belllegalgroup.com
843.546.2408

For the Defendant:

JOSEPH TURNER, ESQ.
TRIAL ATTORNEY
Camp Lejeune Justice Act Section
U.S. Department of Justice
Washington, DC
joseph.b.turner@usdoj.gov
202.436.6895

and

MICHAEL W. CROMWELL, ESQ.
TRIAL ATTORNEY
Camp Lejeuen Justice Act Section
310 New Bern Avenue
Raleigh, NC 27601
michael.w.cromwell@usdoj.gov
919.500.4282

Videographer: Phillip Todd

* * *

INDEX

WITNESS HENRY MILLER, Ph.D.		PAGE
Examination by Ms. Wallace		5
Examination by Mr. Turner		236
Further Examination by Ms. Wallace		240
Certificate:		245
MILLER EXHIBITS		
No. 1	4-8-25 United States Disclosure of Expert Testimony	9
No. 2	12-15-25 United States Second Disclosure of Expert Testimony	9
No. 3	Dr. Miller Notice of Deposition	9
No. 4	United States Objection and Responses to the Notice of Deposition and Requests for Production of Documents to Henry Miller dated February 13, 2026.	9
No. 6	Dr. Miller CV	16
No. 5	2-12-26 Department of Justice Cover Letter re Responsive Documents for Miller Deposition	47
No. 7	BRG Invoices Bates 9-37	47
No. 8	2-17-26 Department of Justice Cover Letter re Responsive Documents	47
No. 9	BRG Invoices	47
No. 10	Summary of Invoices	47
No. 15	12-15-25 Expert Report of Dr. Miller on Jacqueline Tukes	161

Exhibits (Continued)

No. 15B	12-15-25 Dr. Miller Expert Report on Jacqueline Tukes	174
No. 12	12-15-25 Dr. Miller Expert Report of Bruce Hill	187
No. 12B	12-15-25 Expert Report of Dr. Tosic on Bruce Hill	200
No. 13	12-15-25 Dr. Miller Expert Report of Jimmy Laramore	204
No. 14	12-15-25 Expert Report of Dr. Miller on Frank Mousser	207
No. 16	12-15-25 Dr. Miller Expert Report on Gary McElhiney	220
No. 16B	12-15-25 Brod Expert Report on McElhiney	220
No. 17	12-15-25 Dr. Miller Expert Report on Edgar Peterson	220
No. 18	12-15-25 Dr. Miller Expert Report on Diane Rothchild	220
No. 19	12-15-25 Dr. Miller Expert Report on Richard Sparks	220

THE VIDEOGRAPHER: Good morning. We are now on the record. My name is Phillip Todd. I am a videographer for Golkow a Veritext division.

Today's date is February -- today's date is February 20th, 2026, and the time is 8:59 a.m. mountain. This remote video deposition is being held in the matter of Camp Lejeune Water Litigation in the United States District Court for the Eastern District of North Carolina, Southern Division No. 7:23-CV-897.

The deponent today is Dr. Henry Miller. All parties to this deposition are appearing remotely and have agreed to the witness being sworn in remotely.

Due to the nature of remote reporting, please pause briefly before speaking to ensure all parties are heard completely. Counsel will be noted on the stenographic record. The court reporter Kelly Rexroat will now swear in the witness.

HENRY MILLER, Ph.D.

of lawful age, having been first duly sworn to tell the truth, the whole truth, and nothing but the truth, testified as follows:

EXAMINATION

BY MS. WALLACE:

Q. Good morning, Dr. Miller.

A. Good morning.

Q. My name is Whitney Wallace and I represent the Plaintiff Leadership Group in the Camp Lejeune litigation and I will be taking your deposition today.

A. Okay.

MS. WALLACE: Before we get started, there is a Case Management Order 3 that requires both defense counsel and myself to affirm on the record that no communication with the deponent by any means including but not limited to text messaging will occur out of the view of the other parties while the composition is proceeding on the record, and I affirm for the record.

MR. TURNER: I affirm for the record.

Q. (By Ms. Wallace) Dr. Miller, will you please state your full name?

A. Henry Carl Miller.

Q. What is your date of birth?

A. [redacted], 1943.

Q. You have been deposed many times before today; is that true, Doctor?

A. That's true.

Q. You understand the obligation that you are under oath and required to be truthful today?

A. Yes.

Q. Do you have any documents in front of you

today?

A. I do not.

Q. Do you have any documents accessible on the laptop that you are with and open?

A. No documents relating to this case.

Q. And I would ask today not to refer to any documents on your laptop unless I direct you to their attention. Okay?

A. Okay.

Q. Are there any circumstances today that would prevent you from testifying honestly and truthfully?

A. No.

Q. Where do you live and work?

A. Phoenix, Arizona.

Q. Who is your current employer?

A. Berkeley Research Group.

Q. What is your position with Berkeley Research Group?

A. Managing director.

Q. Is that of a certain department?

A. It's within the health analytics practice.

Q. How large is Berkeley Research Group?

A. It's -- Berkeley Research Group is an international firm with about 1600 employees.

Q. Does it have a headquarters?

A. Yes, it does.
Q. Where is that?
A. It was just recently moved. I think will be moved effectively March 1st to Washington D.C.
Q. Are there multiple managing directors in the health analytics department that you're in?
A. Yes.
Q. How many, do you know?
A. Between 15 and 20.
Q. How many persons do you have under you as managing director in the health analytics department at Berkeley Research Group?
A. Berkeley Research Group we refer to it as BRG. BRG doesn't have that kind of structure. So I don't have anybody specifically reporting to me.
We have pools of people who are available to a number of people, and it's all managed by just keeping track of who is working for who at a time.
Q. How many persons are in the Phoenix office that you work in?
A. About a dozen.
Q. Do you know how many offices BRG has throughout the country?
A. Not exactly. Between 40 and 50.
Q. And that's within the country. Do you know

how many are international?

A. I don't know a specific number. At least 15 or so.

Q. I am going to -- the way that I'm going to share documents with you today, Dr. Miller, is I'm going to upload them into the chat feature. Have you done remote depositions before?

A. Yes.

Q. You're comfortable with the chat feature?

A. We'll see.

(Miller Exhibit Nos. 1-4 were marked.)

Q. Please let the record reflect that I have updated four exhibits into the chat feature.

Exhibit 1 is the United States Disclosure of Expert Testimony for Phase 3 dated April 8th, 2025.

Exhibit 2 is the United States Second Disclosure of Expert Testimony for Phase 3 dated December 15, 2025.

The third is PLG's Notice of Deposition and Requests For Documents to Henry Miller dated February 4th, 2026, and the fourth exhibit is the United States Objection and Responses to the Notice of Deposition and Requests for Production of Documents to Henry Miller dated February 13, 2026.

Dr. Miller, you had to produce two rounds of

expert reports in the Camp Lejeune litigation. Do you recall that?

A. Yes.

Q. And the first set you and/or BRG produced in approximately April of 2025?

A. Yes.

Q. And then there was a second production December 15 of 2025?

A. Correct.

Q. Did you have the opportunity to assist in preparing the objections to your notice of deposition in this case?

A. No.

Q. Were you asked to search for any documents related to the -- the notice of deposition that was sent to you?

MR. TURNER: Objection.

A. Well, I did look for documents after that. I'm not sure I understand what you're asking.

Are you asking whether somebody asked me to look for them or I looked for them on my own?

Q. (By Ms. Wallace) Were you asked to respond -- to help respond to the notice that was sent to you by the plaintiffs in response to this deposition today?

MR. TURNER: Same objection.

A. Maybe. I just don't remember. I don't remember whether I was asked, I looked for them or what the specific circumstances were.

Q. (By Ms. Wallace) And were you asked to identify all your billing invoices for -- related to Camp Lejeune?

A. No.

Q. Were you asked to search for the retention letters between you and the government for this case?

A. No.

Q. Were you asked if you have spoken to any of the other retained experts in the Camp Lejeune litigation?

A. I was at some point, yes.

Q. And have you been in contact with other experts in the Camp Lejeune litigation?

MR. TURNER: Objection. Pursuant to Rule 17 substance of communications are privileged. Dr. Miller, to the extent you can answer without discussing the substance of our conversations, you may do so.

A. I had conversations with just one of the other experts Gregory Russo.

Q. (By Ms. Wallace) And Gregory Russo is also

employed with BRG; is that correct?
A. Yes.
Q. He also holds the title of managing director?
A. Yes.
Q. Is that in your same department health analytics?
A. Yes.
Q. Is he at the Phoenix office?
A. No.
Q. Did you consult with any of the economists hired in this case such as anyone by the last name of Tosic, Brod or Younts?
A. Well, in the case of Yount and in the case of Greg Russo, I spoke with them. I would not say that I consulted with them. I never discussed any aspects of the case with them.
Q. And you are referring to Joanna Younts, not a Tricia Yount; is that true?
A. That's true.
Q. You have never spoken to a Tricia Yount who is an economist hired by the DOJ in this case?
A. No.
Q. And Joanna Younts is an individual that also works for BRG?
A. That's correct.

Q. And she is one of the many individuals that assisted you in preparing the reports in the Camp Lejeune litigation?

A. Yes.

Q. Without disclosing the substance of communications with counsel, how did you prepare for the deposition today?

A. I reviewed my reports, reviewed some of the source documentation, and had conversations with the attorneys.

Q. Without disclosing the substance of your communications, can you tell me how many times you met with counsel prior to your deposition today?

A. Three.

Q. Were those remote meetings?

A. Yes.

Q. Can you identify the individuals present?

A. Mr. Turner, Mr. Cromwell were present at all three meetings. There was an additional attorney present at one, but I don't remember her name.

Q. Do you understand that attorney would have been with the DOJ?

A. Yes.

Q. Were any of your colleagues present for those prep meetings?

A. No.
Q. Can you tell me the duration of those meetings to the best of your memory?
A. The first two meetings were about two hours long. The third meeting was about half an hour.
Q. Were there any documents that you reviewed that have not -- and during those meetings or any articles or substances that have not been disclosed on your materials considered list or in response to your notice today?
A. Not to my knowledge, no.
Q. Have you worked with any of the individuals that have helped prep you previously on other cases?
A. Yes.
Q. Which ones?
A. Well, I mentioned Greg Russo and Joanna Younts, and both of them and I have been working together for many years.
In the case of Joanna it's over 30 years, in the case of Greg it's over 20 years that we have worked together and not only at BRG.
Q. Have you worked with any of the individual attorneys before with the DOJ in prior cases?
A. No.
Q. Have you been an expert witness for the

United States prior to the Camp Lejeune litigation?

A. Yes.

Q. How many times do you think you have been an expert witness for the United States?

A. Three. Three that come to mind. I've had a long career, but I can remember three.

Q. Do you recall if the subject matter of your testimony in those cases is similar to the testimony that you are presenting in the Camp Lejeune litigation?

A. I would say that in two of the cases it's similar.

Q. Is it related to offsets in those cases?

MR. TURNER: Objection.

A. No.

Q. (By Ms. Wallace) Do you know the names of those cases?

A. I can look them up, but I don't know them offhand.

Q. Could you describe what you know about them briefly?

A. Sure. One of the cases involved a large nursing home chain that was alleged to have engaged in fraudulent billing to the Medicaid program, and I was an expert for the nursing home chain.

The other two were personal injury cases where the government was being sued by individuals who were injured in accidents involving a federal agency or a federal agency employee. That's it.

(Miller Exhibit No. 6 was marked.)

Q. Thank you. Dr. Miller, I'm going to upload the CV that you provided to the plaintiffs. And it's marked previously as Exhibit 6. And I'm going to ask you about it. Would you like me to put it up on the screen so you can reference it as needed?

A. Yes.

Q. Dr. Miller, do you recognize this document?

A. It looks like my CV.

Q. And for the record, it's Bates stamped at the bottom Miller_U.S.A._1 through 8. Do you see that?

A. I do.

Q. Your educational background is contained on page --

A. You passed it.

Q. I did. On Bates under score page 5. Can you briefly describe your educational background?

A. I have a bachelor's in business administration with a specialty in accounting. It was awarded by City College of New York, which is now -- the school that I went to is now called Baruch

College, and then have I an MBA also from the Baruch College and was part of City College of New York, and then my doctorate was awarded by the University of Illinois. It's a joint degree in accounting and economics.

Q. What year did you achieve that degree?

A. 1971.

Q. And you have your prior work experience. Prior to joining BRG. It looks like the bulk of your work history involves work at the Center for Health Policy Studies from 1979 to 2002?

A. That's correct.

Q. Tell the Court what you did there please?

A. That was my firm. I started it and managed it for those whatever it is 23 years. It was based in Maryland and was involved in doing various projects on contracts for the federal government also for state governments and many in the private sector.

Q. Would you categorize the nature of that work you were a consultant for the federal government and state governments?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) What types of projects did you do for the federal government and state government

at that time as it may relate to what you've done in this case?

A. A lot of the work that I did was related to the costs and the amounts paid for health services. A good deal of the work that I did was for now the Centers for Medicare and Medicaid Services particularly as it relates to the reimbursement systems, the outpatient perspective payment system and the inpatient perspective payment system as well as others home healthcare systems, lab systems.

I was a consultant to the Medicare and Medicaid programs on how those systems should be designed, and then I did a lot of work for other agencies including the most -- the largest piece of the other work was for the health resources and services administration and had to do with the delivery of health services also with reimbursement issues. I redesigned the community health center through the qualified health center reimbursement system for Medicare, but most of the other work was evaluation work. I directed the evaluation of the healthcare for the homeless program, some AIDS programs, some maternal child health programs.

Q. Thank you. Was some of your work for the federal government was it focused on improving

efficiencies or improving reimbursement mechanisms?
A. I think that's a fair way of putting it.
Q. What made you leave -- now, did you own Center for Health Policy Studies?
A. Yes.
Q. Did that dissolve in 2002?
A. No, it was -- I sold it. It was purchased by Navigant Consulting.
Q. I see. And so you basically continued that work with Navigant Consulting from 2002 to 2008?
A. That's correct.
Q. Did you own Navigant Consulting?
A. Well, I was a very small shareholder. Navigant Consulting is a large firm.
Q. Was part of the deal that you stayed on when they bought out your business?
A. Yes.
Q. Did the nature of your work change significantly once it was bought out by a corporation?
A. I would say a little bit. I did less work for the federal government and more work as an expert than as an expert witness, but generally the nature of the work was the same. The setting was somewhat different.
Q. During your careers at Center For Health

Policy Studies, was being hired to testify for litigation a percentage of what you did?

A. Yes.

Q. What percentage would you say?

A. Probably between -- probably no more than 5 or 6 percent. Around there.

Q. Was that usually on behalf of the federal government?

A. No. No, my clients for expert witness work at that time were entirely in the private sector.

Q. Were you typically hired by defendants or plaintiffs for that testimony?

A. There was no real pattern there. Probably -- probably evenly divided.

Q. And how did that change with Navigant Consulting?

A. I think the Navigant Consulting expert witness work tended more towards the defendant.

Q. Would you be able to say a percentage there?

A. Percentages of work that I did or percentage of --

Q. Both. I'm going to ask you both.

A. I would say it was greater -- the expert witness work was probably about 20 percent of my work at Navigant Consulting.

Q. And what percent, if you had to say, was more defense than plaintiff?

A. I'd say it was about 70 percent defense.

Q. Would you be able to recall what percentage the litigation component of your work made up of your like annual earnings throughout that time?

A. Not really. It wasn't -- it wasn't directly related to my earnings.

Q. It was a bonus, you know, extra?

A. Yeah, but the -- I got a salary and a bonus, and the bonus was based on overall contribution and not on any -- it wasn't based specifically on how much work I did in any particular area.

Q. Throughout your time at Navigant Consulting, you did continue to be a consultant for the federal government?

A. Less so, but yes.

Q. And it looks like you had a brief period after Navigant where you went to LECG, LLC as a managing director.

Why did that -- for just two years. Tell us why that transition happened?

A. When the Center for Health Policies Studies was purchased, I became friendly on a personal basis as well as on a professional basis with the person who

ran the health area at Navigant Consulting, and he left and asked me to join him. He left to go to LECG. He asked me to join him, and I did and then we both left together from LECG to BRG.

Q. Did the two of you start that business, LECG, LLC?

A. No.

Q. You just both left to join it. You both left Navigant to join it?

A. That's correct.

Q. And then how did you come to be hired by BRG?

A. Well, the LECG decision turned out not to be a very good one. We had a lot of problems internally, and the company no longest exists.

So at sometime in 2009 we decided that along with one other person who and actually the three of us decided that we would find another opportunity, and we looked at several, and the -- including starting our own firm, but BRG was just getting going at the time, and the -- there was a relationship between the person who I had been working with and the person who was starting BRG, and so we elected to go to BRG together as a group.

Q. Will you share with us how are you -- how were you compensated when you started with BRG and how

does that compensation work now?

A. Sure. I receive a salary and a bonus. The bonus was determined by the three of us that made the change. We had a formula with the firm BRG -- the firm BRG had a formula for determining how much the bonus would be overall, and then we split it however we decided among the three of us, which we decided was evenly. So we just broke it up evenly.

And we also received stock in BRG which also was divided evenly among the three of us.

Q. Is that the same compensation system that you have today?

A. Generally speaking, yes. Last year I sold -- we all did actually -- sold fairly substantial portion of our stock, although we still own stock in the company, but other than that it's the same.

Q. And the formula that you mentioned earlier the bonus formula, is that related to how much money you guys pull in as it relates to litigation?

A. No.

Q. It's unrelated?

A. Well, it's partly related to that, and it's -- it's a complicated formula that identifies not the amount of money that we -- that we brought in, but the gross profit associated with that money as well as

other contributions compared to other people within the firm. So more amorphic, not easy to define contributions, and it's a very collegial firm, and so there has never been an issue in the distribution of bonuses at least not from my end even as the firm has grown.

Q. How did your work change, if at all, when you became employed at BRG?

A. The amount of work associated with expert witness activities increased.

Q. And what percentage would you say that that has been for you of your work, expert witness related activities?

A. I would say over the course of my time at BRG, which is now 15 years, it's been about 50-50, 50 expert witness, 50 other.

Q. What is the other you mentioned?

A. It's a continuation of work that I've done in the past. Some state contract work. I'm just finishing up a two-year contract with the state of California on evaluating healthcare purchases and their potential effect on the market for healthcare services in the state.

So there is some state contracts.

Q. And federal governments?

A. There have been, but I don't have any currently.

Q. For the 50 percent of your time that is expert witness related, can you tell me what percentage is more defense versus plaintiff?

A. It's primarily defense.

Q. 90 percent?

A. That might be a good number.

Q. And you told us earlier that you've been hired, you recall, as an expert witness three times by the United States directly?

A. Yes.

Q. And that was with BRG; correct?

A. Yes.

Q. Your resume indicates that you've previously testified before Congress and legislative bodies?

A. Yes.

Q. Was that -- is that related to the expertise that you have in this case such as rates, you know, reimbursement rates for Medicare, VHA, and TRICARE, or was it unrelated?

A. I would say barely related. It was certainly not the subject, but it was an underlying issue in some of the testimony.

Q. Did any of that testimony have to do with

these three government payors that we're going to be discussing today in your expert reports?

A. Trying to remember. There was -- I would say no. That certainly was -- it involved some discussion of Medicare reimbursement, but it was not the topic.

Q. Okay. I'm going to stop sharing your CV if that's okay. Tell me if you need it back up for any reason.

I want to briefly talk about for the record and just so we're all clear you are not a medical doctor?

A. That's correct.

Q. You're not trained or educated in life care planning?

A. I'm not educated in life care planning. I have reviewed hundreds of life care plans. So I feel reasonably knowledgeable. I don't know if that counts as training.

Q. You're not a licensed or certified life care planner?

A. I am not.

Q. You -- I don't think you have ever worked in a healthcare setting; is that true?

MR. TURNER: Objection.

A. Not as an employee. I've been on the boards

of healthcare companies or healthcare entities as well as being the chairman of the board of healthcare companies.

Q. (By Ms. Wallace) But you have never worked for a healthcare provider in any capacity?

A. As a contractor, yes. As an employee, no.

Q. Understood. You are actually frequently hired by healthcare providers as a consultant?

A. I wouldn't say frequently, but I am.

Q. You do not hold any certifications in coding such as CPT coding, HCPCS?

A. That's correct.

Q. And you've never worked as a certified medical coder?

A. That's correct.

Q. Can you tell me what training you have in CPT coding guidelines?

A. I'm sorry. What was the last word that you used?

Q. Guidelines.

A. Guidelines. Well, I've done a lot of work on coding specifically as it relates to CPT as opposed to ICD-10. I've done a lot of work on ICD-10.

On CPT I've done a number of contracts for the National Center for Health Statistics, and that

included work in evaluating methods used including coding methods in ambulatory care and statistical data gathering, which is based on CPT coding, and I have used CPT coding through much of my career especially in the last 15 or 20 years in a number of cases.

Q. How much experience do you have setting a CPT code based on a service description?

A. A good bit. I may fall short on some occasions, unfortunately for me. One of the people in the Phoenix office who I work closely with who is a certified coder, and if I have questions or I'm not satisfied with my own determination, I ask her.

Q. What is her name please?

A. Lindsay Knutson.

Q. Can you spell that for our court reporter.

A. Well, Lindsay, L-I-N-D-S-A-Y, and Knutson is K-N-U-T-S-O-N.

Q. Because you're not a certified coder, do you defer to certified coders as it relates to the identification of CPT codes?

MR. TURNER: Form.

A. Well, not usually. There are many CPT codes, but probably about 8,000 different CPT codes, but the vast majority of codes are not used on a frequent basis. A small number of codes are used frequently,

and they are pretty much self-explanatory.

So for example, if you see a physician, and you're an established patient, there are five codes that can be used based on characteristics of the visit, and I don't -- I don't need help either vetting them or identifying them.

There are some codes relating to fairly obscure surgical procedures where I may not have the experience where I've seen them before or seen them enough times before to be certain. So those are the ones that I would seek help on, but on the common ones, I don't need to seek help.

Q. (By Ms. Wallace) Do you consider oncology and some of the complex diagnoses related to Parkinson's to be more on the simple coding or complex?

MR. TURNER: Objection. Form.

A. Well, that's an answer where I have to say it depends.

The oncology codes and the Parkinson's codes for that matter are not a simple code. They are -- those are diseases not procedures. The CPT system identifies procedures, and so there are potentially many different procedures that would relate to a patient who has a cancer or who has Parkinson's.

So it's a hard question to answer.

Q. (By Ms. Wallace) Do you have any experience establishing the CPT codes on behalf of a healthcare provider for a patient?

A. Could you explain it a little further exactly how you mean.

Q. Yes. So let's say a patient is in the hospital. Have you ever been the individual that actually developed that patient's CPT codes for any given service?

A. No.

Q. I understand you have a background in healthcare analytics.

Do you have a background in veteran disability benefits?

A. Yes.

Q. Do you have any opinions in this case that relate to veteran disability benefits?

MR. TURNER: Objection.

A. When you say opinions, I think my opinions are clearly stated in my report. The extent of a veteran's disability is a factor that I considered, but I don't have an opinion on it.

Q. (By Ms. Wallace) The only spot where I could have seen it taken into account potentially had to do

with co-pays associated with the VHA.

Do you agree with that?

A. Yes.

Q. So do you have any other opinions that relate to this litigation that involve veteran disability benefits that you can think of?

MR. TURNER: Objection.

A. No, because as it turned out all of the cases which I presented opinions had 100 percent disability determinations. So they're -- there wasn't a need to investigate any further in terms of differences.

Q. (By Ms. Wallace) Did you seek any additional education as it related to the diseases for the individuals that you evaluated who had kidney cancer, bladder cancer, Parkinson's disease and leukemia?

A. Well, in the case of a couple of them I didn't need to because Mr. Hill, Bruce Hill who has chronic lymphocytic leukemia and so do I.

Q. Oh, my goodness. I'm so sorry.

A. That's all right. I'm managing it well.

Q. Good.

A. I was diagnosed about ten years ago so I've been under treatment for it, so I know a lot about it.

Q. Yes.

A. And along those lines my brother who was a

veteran died last year of Parkinson's, and I was his primary not so much caregiver as helper, and so I was with that and the VA --

Q. Yes.

A. -- for five or six years. So I have personal experience at least with those two.

Q. I'm really sorry to hear that, Dr. Miller.

Did your -- it sounds like your brother had medical treatment through the VA?

A. He did.

Q. You don't --

A. He had his Parkinson's was caused by his service in the Vietnam war, so he had 100 percent disability.

Q. What was if you don't mind me asking what was his -- what exposure caused that?

A. His exposure -- he was stationed in Thailand during the Vietnam war working in the Air Force working as a maintenance specialist on an airfield, and the gases and fumes that were used were determined to be a contributor to his Parkinson's.

Q. So you have a -- has all of his treatment been covered by the VA then related to that exposure?

A. Well, no, his federal was typical of the people in this case that most of it was actually --

was actually paid for by Medicare. So he had VA benefits, but he only used the VA benefits in the instances where Medicare wasn't covering something, which was the case because he spent a lot of time his past couple of years in rehab facilities, and he also had comprehensive home care, and Medicare has limits on that coverage.

Q. Right. And so, as you talked about in this case, the VA actually has better coverage for home care than Medicare?

A. Yes.

Q. You don't have VA insurance I don't believe?

A. No, no.

Q. Well, you certainly have a background in those two diseases.

Were there any other that you feel the need to look anything up related to the life care plans?

A. I did in a couple of instances looked up some information on kidney cancers, but I've got at this point more than 50 years of experience in healthcare, and at one point or another, I either seen enough on the each of the diseases that I had to deal with so that I didn't feel a need to do research on them.

Q. And so my understanding of your expert reports is that you are taking the life care plans to

identified by each a plaintiff expert and a defense expert and you are looking at -- you're basically looking at reimbursement rate at the present time for those life care plans. Your opinion is not offering any additional opinions on what type of care that plaintiff will need?

A. That's correct.

Q. Okay. And you're not offering an opinion about which government payor provides the best care for these diseases to the plaintiff; is that right?

A. That's correct.

Q. You don't have an educational or experience background administering these programs on behalf of one of the government entities; correct?

In other words, you have never worked for CMS, VA, or TRICARE; is that true?

A. It's true. I'm certainly not an employee. I have contracted -- been a consultant to each of them, but not as an employee.

Q. And you have also never been an employee for any of the administrative entities such as TriWest that administer TRICARE or CCN program of VHA; is that right?

A. Yeah, that's true, but I -- I did participate in the creation and the review of proposals prepared

by the entities that currently hold the TRICARE contracts. So I'm very familiar with the program, but I never worked as an employee for them.

Q. You are familiar with the third-party administration of -- that TriWest performs for TRICARE and the Community Care Network program?

A. I would say yes.

Q. And is it your testimony you helped to develop that structure?

A. No. In the case of TriWest and specifically TriWest the way -- let me answer the question more completely.

I oversaw the writing of the proposal which included the development of the structure early on for an entity that was seeking one of these contracts, but I was not the TriWest situation.

In the TriWest situation I was retained to evaluate proposals that had been submitted because of the expectation that once the contract was awarded there would be an appeal by the other entities.

These contracts are so large that appeals are almost certain, and so I had the opportunity to review the structure and to analyze the structure and compare the structure from one bidder to another.

Q. And did you make a recommendation then about

one bidder over another?

A. Well, I was retained by one of the bidders. So it was necessary.

Q. Understood. You do not claim to be an expert in legislative forecasting; is that true?

MR. TURNER: Objection.

A. In the general sense of legislative forecasting, no.

Q. (By Ms. Wallace) Do you claim to be an expert in political risk analysis?

MR. TURNER: Objection.

A. No.

Q. (By Ms. Wallace) You discussed earlier 50 percent of your time since 2010, since you joined BRG, has been expert witness related.

Can you think of times where the Court has ever disallowed, limited or stricken your testimony?

A. Yes, I can. There are two instances. One where my testimony was not allowed. That was in the case between Children's Hospital in Central California and Blue Cross of California where I was an expert witness for Blue Cross.

The case involved identifying the rate that was paid by Blue Cross to Children's Hospital across all the services that were provided to Blue Cross

patients.

I had a deposition. I was not allowed to testify in the local court where the case was being tried. The case was appealed and the California Court of Appeals ruled that I should have been allowed to testify, and sent the case back for a retrial and it was settled. So I didn't have to testify again.

Q. What was the reasoning that the lower court wouldn't let you testify about the Blue Cross/Blue Shield rate?

A. California has unique requirements for determining rates in the healthcare environment. There is something called Gould factors, G-O-U-L-D, which identify characteristics of rates that are supposed to be considered. I didn't consider them. Instead I considered what was actually paid for services by each payor group, and the lower court ruled that I needed to refer to the Gould factors and since I didn't, I wasn't allowed to testify.

The Court of Appeals said that was wrong. The Gould factors might be one thing that should be considered, but other things such as the amounts people pay are also relevant. That's why I should have been allowed.

Q. Do you and I know we're going to talk about

the second instance, but let me ask a quick follow-up question.

Do you also consider yourself an expert in establishing paid rates for private insurance?

A. Yes.

Q. That is what you were an expert -- hired as an expert to testify in that case?

A. That's correct.

Q. And you did not do any -- you did not perform any analyses as it relates to private insurance in this case?

MR. TURNER: Objection.

A. That's correct.

Q. (By Ms. Wallace) All right. Tell us about the other instance you can think of where a court has disallowed, limited or stricken your testimony?

A. That was a personal injury case also in California. The plaintiff was -- actually a couple named Pebley, P-E-B-L-E-Y. I don't remember the defense -- the name of the defendant which is odd because they were my client, but the case was known as Pebley, and I did testify.

However, in my testimony I was not allowed to refer to Medicare. The judge specifically said that the jury was not to hear about Medicare.

I'd like to be able to tell you why, but I don't know. It was the judge's decision and so I testified in full, but I did not testify as it related to Medicare.

Q. So the Court found that you were not a sufficient expert in order to testify?

A. No, that was not it at all. The Court believed that if the jury understood that the plaintiff had Medicare that that would influence their judgment as to whether or not to make an award.

Q. It was a collateral source issue?

A. Yes, I'm sorry. I should have said that. Yeah, it was a collateral source issue, although since then I've testified on collateral sources and included them and they've all been allowed to be included in every other case I've testified including at least eight to ten in California.

Q. Throughout your career with BRG, would you be able to estimate how many expert reports you have issued? Would it be over 100?

A. Yes.

Q. Over 200?

A. Yes.

Q. Over 300?

A. Probably not.

Q. Thank you. What percentage of those expert reports would you have been doing something similar to what you've done in this case?

MR. TURNER: Objection.

A. I would say a large percentage. More than half certainly.

Q. (By Ms. Wallace) And so in more than half you would have been identifying the current rate by unit of a Medicare service, a track year service or a VHA service; is that right?

A. Yes, and -- yes.

Q. And do you know like what -- you testified you are 90 percent hired by the defendant. Do you -- what -- why were you hired to do that in so many cases, if you know?

A. The cases that I'm talking about are personal injury cases. Until about 12 years ago I never testified in a personal injury case, and I was asked to testify in one, and I became popular among defense attorneys for cases involving personal injury and the kind of work that we're talking about, identifying how much would be paid not so much identifying how much would be paid, but what was the actual market rate for services as opposed to the charge that a provider might identify.

Q. Yes. So when I was preparing for this deposition, I found you have authored white papers and given presentations for defense attorneys on that issue?

A. That's correct.

Q. And so I just want to make sure we're clear. The white papers that you've issued and the presentations typically when you are being hired to come to develop these rates, you are testifying as it relates to the reasonable value of the healthcare costs; is that correct?

A. Yes.

MR. TURNER: Form.

Q. (By Ms. Wallace) And in this case that was not the assignment; is that true?

A. That's true.

Q. In this case you did not -- you don't have an opinion and it's nowhere in your report that the rates that you've identified are the reasonable value of the service?

A. That's correct.

Q. So in that sense your prior testimony is similar to, but distinguished from what you've done in this case. Is that fair?

A. I think that's fair. I think it's important

to consider that the source of information that I use in both types of cases is similar or, in fact, the same, but the use of the information and what the information was actually used for may be different.

Q. When you say sources, you mean the fee schedules that you have referenced and those types of analyses that you've done?

A. Yes.

Q. I wanted to confirm you have never spoken with any of the life care planners who developed the life care plan that you used in this case. That would be Navarro, Fryar, Hairston, Shahnasarian?

A. That's correct.

Q. Your CV does not list any prior testimony or expertise in the field of offsets; is that true?

A. Hard question to answer. The concept of offset is you may be using it in a specific way, but to me it's a general concept.

Q. Explain your understanding of it.

A. Well, what I'm saying is that an offset is an amount that would be deducted from another amount. So you are offsetting -- in this case an offset is a reduction of damages because of another source paying for them, but offsets can be any reduction of an amount, yeah.

Q. You have never been an expert testifier on legal offsets?

MR. TURNER: Objection.

A. Well, I think that I have, not exactly the same type of offsets that we're talking about, but there have been cases that I've been involved in personal injury cases where trusts were established for injured parties to manage the funds that they might have been awarded and amounts being paid by Medicare or Medicaid particularly Medicaid would be -- would reduce the amounts in the trust because the law requires those -- those payments to still be made, and so those are -- in my mind those are offsets, but that would be the only instance I can think of.

Q. (By Ms. Wallace) In this case you did not calculate a total offset amount. You identified the unit cost per service. Is that accurate?

A. Yes.

Q. And so in this case you're not -- your expertise in your expert report does not quantify an offset amount; correct?

A. You are asking about an overall amount?

Q. Yes, sir.

A. That's correct.

MS. WALLACE: We are at an hour.

Throughout this deposition I'm going to try to take breaks every hour. Would you like a break?

THE WITNESS: Sure.

MS. WALLACE: Okay.

THE VIDEOGRAPHER: We're off the record at 10:08 a.m.

(Break taken from 10:08 to 10:16 a.m.)

THE VIDEOGRAPHER: We're back on the record at 10:16 a.m.

Q. (By Ms. Wallace) Dr. Miller, have you read the Camp Lejeune Justice Act Statute?

A. No.

Q. You, if I understand correctly, you were not expressing an opinion for the Court on how offsets are to be applied under the Camp Lejeune Justice Act; is that correct?

A. That's correct.

Q. Are you expressing an opinion on which government payors should be offset under the Camp Lejeune Justice Act?

MR. TURNER: Objection.

A. No.

Q. (By Ms. Wallace) Can you tell me how it came to be that you were retained in connection with the Camp Lejeune Justice litigation?

A. Before BRG was retained I was contacted by another BRG managing director that was Robin Cantor, and Robin was aware of the work I had been doing on personal injury cases, and she saw the similarity and asked me to participate in the original submission for the Department of Justice of our credentials.

Q. And so are you saying that you submitted your credentials to the United States as opposed to them initially contacting you?

MR. TURNER: Objection.

A. I -- I don't know because I wasn't involved. I submitted my credentials to Robin Cantor, and I don't know whether she was asked to submit them or she submitted them on her own. I have no idea.

Q. (By Ms. Wallace) Can you explain to me one more time who is Robin Cantor?

A. She's another managing director in the firm. She's not in the health analytics practice. She's an economist, and she's --

Q. She's a BRG employee?

A. And she's a BRG employee, yes.

Q. And so you submitted your resume to Robin and then the next thing you knew what happened?

MR. TURNER: Objection. Dr. Miller, to the extent you can answer without discussing any of

the substance of our conversations, you may do so.

THE WITNESS: Sure.

A. Well, absolutely nothing happened for quite a while. And then at some point several months ago -- I don't remember how many -- probably a year, I guess, I was contacted again by Ms. Cantor who wanted me to participate in a discussion with the Department of Justice.

Q. (By Ms. Wallace) The first conversation that you had with the Department of Justice, without telling me any substance of what you talk about, do you remember when that was?

A. I don't. I think it was about a year ago, but I'm not sure.

Q. Was it on a zoom?

A. Yes.

Q. Was it different attorneys than the ones that are involved today?

A. Mostly. I believe that Mr. Cromwell was in that call. Mr. Turner was not and there were other attorneys involved.

Q. Has the scope of what you were asked to do on that call changed over the past year, or is it the same?

MR. TURNER: Objection. Dr. Miller,

again to the extent you can answer without disclosing your conversations, you may do so.

A. I just say the scope is consistent from the beginning.

Q. (By Ms. Wallace) Do you recall if you signed a retainer agreement with the Department of Justice you or BRG?

A. I did not. I assume BRG did.

Q. You have not seen it; is that true?

A. That's true.

Q. Do you know how much BRG has charged the government for the opinions that you hold in this case?

MR. TURNER: Objection.

A. No. Just the way we work, I don't get to see the invoices.

Q. (By Ms. Wallace) In response to your notice of deposition, we the plaintiffs received a number of invoices from BRG that I am going to put in the chat feature.

(Miller Exhibit Nos. 5, 7-10 were marked.)

MS. WALLACE: Please let the record reflect that I have uploaded into the chat feature Exhibits 5, 7, 8, 9 and 10.

Five is the Department of Justice's cover

letter regarding the production of responsive documents for Henry Miller dated February 12th of 2026.

Exhibit 7 are BRG invoices that were provided in response to your deposition notice and they have a Bates stamp number of Miller_U.S.A._9 through 37.

Exhibit 8 is an additional cover letter dated February 17th, 2026, that's this past Tuesday, providing additional responsive documents for Henry Miller.

Exhibit 9 are the additional BRG invoices provided and Exhibit 10 is a summary of the invoices that I have prepared for us to talk about, and I put that up on the screen for you.

Q. (By Ms. Wallace) Actually let's first look at Exhibits 7 and 9, which are the invoices themselves just to confirm that those are your invoices. Okay?

A. Okay.

Q. Do you recognize the invoices in Exhibit 7?

A. Yes.

Q. And I'm going to scroll through those. Do these look like typical invoices that are produced from BRG?

A. Yes, they do.

Q. And as it relates to some of the

descriptions, does BRG typically do such abbreviated descriptions for their expert work?

A. Yes.

MR. TURNER: Objection.

Q. (By Ms. Wallace) Do you know why and let me give you an example. Most of them state, quote, analyze data and reported results, end quote.

A. Yes.

Q. Do you know why that is?

A. Why it's abbreviated?

Q. Yes.

A. I don't. That is the firm policy is done for all invoices. You are not the first to ask questions about it, but it was a corporate decision made quite a while ago.

Q. Does the abbreviated content in the invoices make it difficult for you to know who did what with respect to which reporter?

MR. TURNER: Objection.

A. Not really because I wouldn't rely on the invoices to know that. As you can see from these invoices, the majority of the support was provided by Julian Brock and Ayako Sekiya, and --

Q. (By Ms. Wallace) So do you have some type of internal case files that would tell you the answer to

who did what on which report that is not the invoices?

MR. TURNER: Objection.

A. No, I do not. I -- you know, when the work is being done and reports are being prepared, I'm in contact phone contact with Julian, Julian Brock pretty regularly, and as far as I'm concerned, Julian is the one who is doing the work. Ayako is supporting him, but any information I need as to who is doing what, I can get just by asking.

So the invoices are -- as these descriptions are not really relevant to that question.

Q. (By Ms. Wallace) And so if I asked you which of your colleagues at BRG worked on Bruce Hill's report, would you be able to look up something on your database and tell me that? Would you have to make a phone call? How would you know the answer to that?

MR. TURNER: Objection.

Q. (By Ms. Wallace) Say that again, Doctor.

A. I'd have to call and ask.

Q. Okay. Can I ask you do you know why the Camp Lejeune litigation in the subject heading it says to U.S. DHA in care of U.S. Department of Justice, and then you have the identifier of the case as Blackmer, et al. versus United States of America.

Do you know why it has that title associated

with it?

MR. TURNER: Objection.

A. No, I don't.

Q. (By Ms. Wallace) Did you put that in the invoices or someone else at BRG?

A. It wasn't me.

Q. Do you do your own invoices for your expert work or is that someone else?

A. Well, it depends upon the case. I don't ever do my own invoices, but I review invoices prepared by our billing department for my cases.

When I say "my cases," those are cases where I'm identified as the primary person in charge of the case. I'm not in the case of the Camp Lejeune matter. So I wouldn't -- I literally don't see these invoices.

Q. So you have not reviewed the Camp Lejeune invoices that are on the screen in Exhibit 7?

A. No.

Q. But do you recognize that they are with respect to this case?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) How can you tell that they're for this case?

A. Well, while you may and I for that matter may

know why the case is labeled as Blackmer, that's what we call it.

Q. Internally that's what you call the case this Camp Lejeune litigation is Blackmer?

A. Blackmer, yeah.

Q. And you do not know if that is a Camp Lejeune plaintiff?

A. I assumed it was.

Q. But as we sit here today, you don't know where that name comes from?

MR. TURNER: Objection.

A. That is correct.

Q. (By Ms. Wallace) Can I assume that because you have not seen these invoices, you have not tallied them up?

A. Yes, that's correct.

Q. Okay. Let's look quickly at Exhibit 9, which is an additional set of invoices that we received this week.

Do you recognize these invoices?

A. Well, this invoice, yes.

Q. It looks like it's an invoice from with the date of February 10th, 2026, here?

A. Yes.

Q. Are you aware of any other invoices that BRG

has sent to the government with respect to this case than the ones that you've been shown?

MR. TURNER: Objection.

A. I'm pretty sure that other invoices have been submitted. The invoices you showed me only relate to work that I did, but I know that others are working on the case too.

Q. (By Ms. Wallace) Do you mean so these invoices that I just showed you -- I'm going to put Exhibit 9 back up -- they identify multiple individuals that have been involved in this case.

Do you see that?

A. I do.

Q. Are you saying that there are other invoices as well?

A. I'm saying I don't know. I'm assuming that there are. These invoices relate only to the work that I did for the preparation of my reports and preparation for this deposition.

Q. I see, okay. Let me see if I'm understanding you. Greg Russo also issued an expert report in this litigation.

Is that perhaps what you are talking about these only are invoices related to the expert reports of Henry Miller?

A. That's what I'm saying.
Q. Thank you. I got it now. All right. So for your invoices -- so that would be an entire different set of invoices related to the expert reports of Russo?
A. That's correct.
Q. All right. I'm going to put up on the screen Exhibit 10, which I will represent to you is a summary of the invoices that are contained within Exhibit 7 and 9. Can you see that, Dr. Miller?
A. Not really well.
Q. Let's see if I can zoom on this. Let's zoom in on the big chart. Can you see that?
A. Yes.
Q. Do you recognize and I just counted including yourself 17 individuals have -- and you can see that on the right side of the screen. Let me see if I can scroll over.
These 17 individuals worked on your reports based on your recollection. Is that accurate?
A. No.
MR. TURNER: Objection.
Q. (By Ms. Wallace) No. Which ones do you recognize did not work on your report?
MR. TURNER: Objection.

A. Greg Russo, Natasha Brecht, Andrew Sandler, Jaylen Jordan, Lucas Robertson, Victoria Miller, Noah Spain, JoAnna Younts, Madison Yonash -- Madison might have done some work early on. I'm not sure. Danielle Fazio, Nikisha Small, Ellen Chinn, and Genevieve Aziz.

Q. (By Ms. Wallace) And so that leaves which persons is it your testimony assisted in preparing your reports?

MR. TURNER: Objection.

A. Julian Brock and Ayako -- Ayako Sekiya.

Q. (By Ms. Wallace) And you just the top --

A. And me of course.

Q. -- just the top three persons?

A. Yes.

Q. Do you -- do you know why all these other persons were identified in your billing?

MR. TURNER: Objection.

A. No. That would not be my billing or interpreting that as being billing for the -- for my work on the case. They may have done other things relating to the Camp Lejeune matter, but not my reports.

Q. (By Ms. Wallace) What is your testimony with regard to why the individuals identified in your invoices have been produced to us in connection with

your reports?

MR. TURNER: Objection.

A. I don't know.

Q. (By Ms. Wallace) With regard to the individuals that you testified assisted you Julian Brock and Ayako Sekiya, does the amount of time look accurate that they spent on the Henry Miller reports?

A. Yes.

Q. Does your amount of time look accurate?

A. Yes.

Q. And so Julian Brock is a senior associate with BRG according to the invoices with an hourly rate of $415 and $430 per hour, and she (sic) spent approximately 213.6 hours in connection with your reports. Is that accurate?

A. Not exactly. For part of the time until maybe January, Julian was a senior associate. He was promoted to consultant which is the next level up recently. So the 415 rate is for the rate for a senior associate, and the 430 rate is the rate for as a consultant.

Q. And in Exhibit 10 do you see the chart right beneath the summary chart?

A. Yes.

Q. Does that accurately reflect approximately

when his rate changed? It looks like the first time he had the 430 rate was 12-10, 2025?

A. Yes.

Q. For Julian, do these -- does the quantity of time look consistent with the quantity of time you know him to have put into helping to develop your reports?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) And so Julian billed approximately $89,740.50?

A. Yes.

Q. Did you assemble Julian to assist you with your reports or was he assigned to you within BRG?

MR. TURNER: Objection.

A. Could you ask that question again.

Q. (By Ms. Wallace) Did you get to chose Julian to work with you, or did BRG, like, assign you to work with you?

A. No. A good question. Just the way it works. I asked for Julian to work with me. Julian is very sharp, and but I did have to ask and he was then assigned to me.

Q. What is his background educationally and experience wise?

MR. TURNER: Objection.

A. He has a bachelor's degree in economics. I don't remember from where. I'm probably going to lose the opportunity to use him in the not too distant future because he wants to get a master's degree.

Q. (By Ms. Wallace) Because he does have a master's degree?

A. No, because he wants to get one.

Q. I see.

A. That's about all I know about his educational background.

Q. Is he a certified coder?

MR. TURNER: Objection.

A. No.

Q. (By Ms. Wallace) Can you tell me -- now, it looks like he spent over three times the amount of time on your reports than you did.

Is that a fair assessment from the billing invoices?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) What did he spend his time doing?

MR. TURNER: Objection. Dr. Miller, to the extent you can answer without discussing any

privileged communications or conversations, you may do so.

A. Okay. He and I did the research the looking up of the rates and filling in tables. That's the bulk of the work.

Q. (By Ms. Wallace) Did they do -- you have a number of footnotes in your reports. Did they assist with your source materials in the footnotes?

MR. TURNER: Objection.

A. Yes. Yeah, there certainly were instances where I said to them, I have seen this somewhere. Could you find it. So that would be the nature of the identifying the footnotes.

Q. (By Ms. Wallace) Let's talk briefly about Ayako Sekiya. What is her educational background? Is it a she? I'm sorry.

A. Definitely a she.

Q. Okay.

A. I don't know her educational background. I do know that she has a bachelor's degree. I don't know from what in and where.

Q. Did you recruit her or was she assigned to you?

A. No, Julian recruited her. Once I got Julian to work with me, his immediate response was given the

timeframe that we have I need help, and I said well, who do you want, and he said he wanted Ayako, and I didn't know Ayako before this case, so he obtained her.

Q. Yeah. We're going to talk about the timeframe making a note for myself.

So do you know if Ayako is a certified coder?

MR. TURNER: Objection.

A. She is not, but I want to make something clear that may not have been stated. The three of the four life care planners that submit the life care plans for the -- for the plaintiff that we analyzed included CPT codes in their -- in their life care plans and we used their CPT codes.

Q. (By Ms. Wallace) Yes, sir. And one of the four did not. Which one was that?

A. I think Hairston. It was either Hairston or Navarro.

Q. And so for the life care planners that did not identify CPT codes, would you or Julian or Ayako have been the individuals who had to identify the appropriate CPT code?

MR. TURNER: Objection.

A. Yes, but again there isn't that much variation in the CPT codes used across the plaintiffs.

So the same services would have been identified in other life care plans, and like I said before, they're not he is tier Rick. They're not unusual services. They're services and CPT codes that we see every day. So it wasn't a complex process.

Q. (By Ms. Wallace) Some of the plaintiffs had more complicated life care plans than others more specifically the Parkinson's and leukemia patients?

MR. TURNER: Objection.

A. Correct.

Q. (By Ms. Wallace) Did which of the three of you was responsible for looking up CPT codes that were missing from a life care plan?

MR. TURNER: Objection.

A. The primary responsibility went to Julian Brock, and if he was really unsure -- and that only happened a couple of times -- he would ask me, but him being unsure in this case meant one or another.

You know, the description of the service was not specific enough to be -- to match up to a -- match up to a CPT code. So we had to make some decisions, and those decisions were made jointly, but that only happened once or twice.

Q. (By Ms. Wallace) You -- neither of the three of you consulted with a certified coder or a physician

for choosing those CPT codes?

A. I didn't, but Julian may have. I don't know, but you make it sound as though picking these CPT codes is a really complicated process. It's not. They're pretty straightforward.

Q. We talked earlier about Ayako's educational background and you said you think she has a bachelor's?

A. I know she has a bachelor's degree. I just know where she got it.

Q. You don't what it's in?

A. No.

Q. Do you know how long she's been with BRG?

A. I think two years. Over two years, but not three.

Q. Do you know if she came to BRG with a background relevant to the work that she performed?

MR. TURNER: Objection.

Q. (By Ms. Wallace) I'm sorry. Did you answer, Doctor? I must have missed the answer.

A. I'm sorry. I answered no.

Q. (By Ms. Wallace) Thank you. Do you know how long Julian Brock has been with BRG?

A. I think three years.

Q. Do you know if he came to BRG with a

background relevant to the work that he performed?

MR. TURNER: Objection.

A. I don't know.

Q. (By Ms. Wallace) For Ayako, she spent 169.8 hours at a rate of $415 per hour for a total of $70,467 in connection with your reports; is that true?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) And your rate as managing director is $825 an hour; is that correct?

A. Yes.

Q. And you spent approximately 63 hours in preparation for your reports totalling $51,975?

A. That is for preparation of the report and for January and February after which the reports had already been submitted and it doesn't include February.

Q. Understood. So there is a percentage of that time or a number of that time that was actually spent just preparing for deposition as opposed to preparing your report?

A. Yes, that's correct.

Q. And so as it relates to the three of you preparing the reports, are you in more of a oversight and, you know, essentially is like editing role as it

relates to the reports, or help me understand how it works?

MR. TURNER: Objection.

A. Well, it's pretty straightforward for all the work that I do. The objective is to not have me at my high rate doing work that could be done at a lower rate and done effectively, and so what I do is I outline the reports. I write specific sections that can be written particularly as it relates to the methodology and then assign Julian who works with Ayako to find the rates that need to be found and to find other information that will be going into the tables and to prepare the tables, and then I review the tables and I may have discussed items in the tables with them prior to reviewing them and giving direction on that and then in a few instances -- in a few instances Julian prepared drafts of paragraphs as they related to the data and the methodology and then I review the whole thing.

Q. (By Ms. Wallace) Would you say -- oh, I'm sorry.

A. You'll note that the reports are fairly similar.

Q. Yes. Yes.

A. Which means that I don't -- once I prepare

the initial effort the outline basic sections, they don't have to be redone each time. We pretty much adapt what we've written for the first time into the subsequent reports.

Q. There are -- so as far as the manual process of looking up the rates for each of the government payors, that job is more administrative and was assigned to Julian and Ayako as opposed to you as a higher billing rate?

MR. TURNER: Objection.

A. I wouldn't describe it as administrative. It is, but it requires a judgment that you couldn't just have a clerical assistant look up the rates. That person could probably find some of them, but it takes a little bit more understanding to accurately identify the rates, but yes, the answer to your question was yes.

Q. (By Ms. Wallace) The source material that you and your team have cited, can I ask has -- given how often BRG is an expert consultant, does BRG have some type of a program in place where you can look up the CPT -- you can enter the CPT code and it kinds of gives you the rate?

MR. TURNER: Objection.

A. If only. No, we don't have that. I don't

know that such a thing exists because if it did we'd probably want to buy it, but no.

Q. (By Ms. Wallace) So is it all done -- is there a reason a program -- what would be the reason like a program couldn't be established for something like this?

MR. TURNER: Objection.

A. Well, a program is established for each individual payor. The Medicare professional fee schedule, which is what we use for many of the rates in the reports is a -- is an application where you identify the CPT code, identify where the CPT code is being applied the region where they the geographic area, and then you can -- it will just give you the rate. So we don't need to develop our own for that.

It would be nice if there was software that would allow you to have all of the payors in one place and look under the rates that way, but that's what doesn't exist. There is separate software for separate application available for veteran's health, and a separate one for TRICARE.

Q. (By Ms. Wallace) Is that -- so there is software by government payor that you can put in the CPT code in the geographic area and it spits out the rate?

A. Yes.
Q. So it's -- go ahead.
A. But it's more complicated in some ways. For example, in the Medicare fee schedule, it will give you a rate whether the service is being performed in a physician office versus in a hospital, and the rates often are similar. Sometimes they're different. And the rate is the total allowed amount, which is the total amount that is going to be paid.

If it's a Medicare part B service, meaning that it's an ambulatory service, then a co-pay is involved, and so a portion of the rate identified in the Medicare fee schedule has to be reduced to identify the co-pay.

Q. You mean you have to actually subtract out the patient contribution?
A. In this case, yes.
Q. Did you and your team keep any of that math as it relates to the subtraction of patient payments for any of these government payors?

MR. TURNER: Objection.

A. I did not and normally -- well, I don't know that that is normally.

It was not something that I asked to be done. It may have been done, but I don't know. I don't

believe so.

Q. (By Ms. Wallace) As it relates to the selection of rates that occur by Julian Brock and Ayako Sekiya, did you verify the rates that they selected, or was that -- or did you trust them to do that appropriately?

MR. TURNER: Objection.

A. Well, I definitely trusted them to do it appropriately. This is certainly not the first time they've done this. They are very experienced in doing it in this context. I spot check some of the rates. I certainly reviewed all of the rates to make sure they made sense and they did, but in other work where a similar look-up process has taken place, they did not.

So in my experience it's best I may review all of the rates, I didn't need to look most of them because they seem correct.

Q. (By Ms. Wallace) Do you know if any form of artificial intelligence was used preparing your report, sir, looking up the rates?

A. No form of AI was used.

Q. Does BRG have a policy on that?

A. I would say it's under development.

Q. If one of the rates that was selected by

Julian or Ayako was incorrect, that would affect the total analysis once the economists quantified it all. Would you agree with me?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) The fee schedules and rates that were selected, do those represent what the Medicare, VHA and TRICARE rates are at the present time?

MR. TURNER: Objection.

A. Some of them do. We consistently follow the process of identifying the most recent available rate and some of the rates and certainly some of the key rates are our 2026 rates. Some of them are 2025 -- well, some of them are 2025. Probably most 2025. Reports were written in 2025.

There are one set of rates that is -- well, at least one that is earlier than that. The medication rates are 2023 rates because those were the latest available.

Q. (By Ms. Wallace) You and your team did not do any future projections about how those rates might change in the future. Is that accurate?

A. Yes.

Q. Yes, you did not?

A. It is accurate, we did not.
Q. And all of the opinions that you expect to render to the Court in this case are contained within your expert reports; is that true?
MR. TURNER: Objection.
A. All of the opinions as of now as of everything I know are in my report. If I'm asked by DOJ to look at something else, you know, I'll do that, but as of now, my opinions are in my reports.
Q. (By Ms. Wallace) Would you describe in your own words the scope of your assignment in this case as was articulated to you by the DOJ please?
MR. TURNER: Objection. And Dr. Miller, you can answer to the extent you don't discuss any of your communications or our conversations.
A. The scope is to take the life care plans that were prepared for each plaintiff that we received and identify how much a government program in this case it would be Medicare, VHA or TRICARE would pay for those services or products.
We had a plaintiff life care plan and a defense life care plan for each of the -- for each of the plaintiffs that we reviewed, and we did that work for both the plaintiff and defense life care plans.
Q. (By Ms. Wallace) The information that you

received by the government, did they -- are they the ones that told you which government payors applied to which plaintiff?

MR. TURNER: Objection.

A. Yes, we received that information from the government.

Q. (By Ms. Wallace) Did you make any efforts to verify the eligibility of each of the plaintiffs of the government payor that was identified?

MR. TURNER: Objection.

A. We did not because the information as to which payors they used which payors we included I should say, were based on payors that each of the plaintiffs had actually used. So we knew they were eligible.

Q. (By Ms. Wallace) In the case of one of the plaintiffs Welch, do you recall that you had issued a report for Welch when you issued your April reports and then did not issue one for the December reports?

MR. TURNER: Objection.

A. Yes, I recall that.

Q. (By Ms. Wallace) Why is that?

MR. TURNER: Objection. Dr. Miller, to the extent you can answer without discussing your conversations or communications, you may do so.

A. I can only answer by saying that we in the December reports we included all of the plaintiffs that we were asked to review. We were not asked to review Welch.

Q. (By Ms. Wallace) So essentially the assumption that Welch had VHA and Medicare was withdrawn from your -- from the information given to you by the DOJ?

MR. TURNER: Objection.

A. No. I mean, that was not what would happen. We were simply given the life care plans and reviewed with the Department of Justice which ones we should be examining, and Welch was not included. I don't have any idea what the reasons were.

Q. (By Ms. Wallace) I noticed that some of the government payors changed from your first round of reports in April to your second round of reports in December.

Do you recall which ones you added on government added or subtracted government payors for?

MR. TURNER: Objection.

A. No.

Q. (By Ms. Wallace) Did if -- let's just say there was an addition for Bruce Hill, for example, did you get like a new round of assumptions from the

government to make that change, or how did you get that new information to add a government payor?

MR. TURNER: Objection.

A. It would have been -- we got a new set of assumptions.

Q. (By Ms. Wallace) Have you -- in what form did that come to you in?

MR. TURNER: Objection.

A. I'm trying to remember whether it was written or discussed and I don't remember. Actually I think it was both.

Q. (By Ms. Wallace) Are your assumptions were they included in your reliance materials for each of the plaintiffs?

A. I don't know. I have to look.

Q. We both agree that you are relying on whatever document it is that you are referencing to know which government payor is applicable to which plaintiff; correct?

A. Yes.

Q. And if your reliance materials don't have any reference to that document, they might should. Is that fair?

MR. TURNER: Objection.

A. Not necessarily. I'm having difficulty

remembering whether the information was passed on during the phone call versus a document. So it's quite possible that it was just phone calls, although there may be a document in the materials considered.

Q. (By Ms. Wallace) And if there is not, there should be?

MR. TURNER: Objection.

A. Well, if there was one, there should be.

Q. (By Ms. Wallace) If one exists, then it should be?

A. Yes.

Q. Okay. You state numerous times in your report that the rates that you and your team have developed can all be supported by publically available reimbursement data. Is that accurate?

A. Yes.

Q. There is no secret formula or proprietary BRG formula or proprietary BRG information that you have relied upon to form the rates; is that true?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) When the government gave you the payor -- payor's government related, did they disclose to you whether or not each of the plaintiffs that you evaluated had private insurance as well?

MR. TURNER: Objection.

A. They did not.

Q. (By Ms. Wallace) If one or more of the individuals that you performed reports for had private insurance, would you agree with me that that private insurance could be primary for some of the medical services identified in the life care plans?

MR. TURNER: Objection.

A. There are circumstances where it could be primary.

Q. (By Ms. Wallace) So if the economist had taken your numbers for the rates and developed a full offset value based on the government payor, if there are individuals who also have private insurance, there is a possibility that the private insurance would pay for that future care as opposed to the government payors?

MR. TURNER: Objection.

A. That's a more complicated question than it sounds. It is possible, but as to who is the primary payor and who is the secondary payor it can depend upon the contract that the individual has with their insurance company or the specifics of the service that is provided, but it's possible.

Q. (By Ms. Wallace) That would require another

analysis if there was a private payor paying on future care in the future?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) And the same would be true if an individual that you've analyzed later obtains private insurance after the dates of your report, we would have to do a reanalysis as to which payor would be primary and secondary to properly determine what the likely government benefits would be for that life care plan. Do you agree?

MR. TURNER: Objection.

A. Well, we have to be more specific. Most of the plaintiffs that are included in our reports have Medicare, and if they have Medicare, they could not get private insurance. Private insurance companies stop offering their programs after age 65 and you have to enroll in Medicare. So for those plaintiffs that wouldn't be the case.

Any plaintiffs under age 65 could have private insurance until they're 65, but I don't recall if there are any or how many if there are.

Q. (By Ms. Wallace) And so in -- so in the case I'm thinking of my mother specifically. She's 71. She's the managing partner of this law firm. We have

Blue Cross and Blue Shield insurance. She's not allowed to have her own insurance. She would be -- how does that work?

A. That's, you know, I have to say I'm glad that it's so complicated because it's given me a career, but the way it would work is when you are age 65, you get Medicare part A for free and that is everybody gets it at age 65.

So if you have private insurance within the firm, for your mother it does not include hospitalization. If she's hospitalized, then it's covered by Medicare. All other services, however, not inpatient services are covered by the insurance.

If you have Blue Shield, it would be by Blue Shield, and once she stops being a member of the firm because she's a member of a group, and group insurance is different than individual insurance.

Once she's no longer a member of the group, then she has the opportunity to purchase the part B and part D coverage from Medicare.

Q. So your prior testimony about Medicare over age 65 is only in reference to part A Medicare?

MR. TURNER: Objection.

A. No. I treated each of the plaintiffs as individuals and not as members of a group. To the

extent that any of them are working or are members of a group insurance plan, what you said is true, but I didn't have any information on that.

Q. (By Ms. Wallace) So based on the information you have been given on the plaintiffs, you're unaware if any of them would be eligible for private insurance in the future?

MR. TURNER: Objection.

A. That's correct.

Q. (By Ms. Wallace) And if they were eligible for private insurance in the future, that would require a relook at who -- at what entity might pay for the future medical treatment identified on the life care plans?

MR. TURNER: Objection.

A. Well, that also is a complicated question. It really it depends on the private insurance, and it depends upon the plaintiff's decision as to how they want to approach it.

If they have alternative coverage like VHA coverage or TRICARE and private insurance, they can elect which one they want to use, and also the provider has a role in it too. So it's a hard question to answer.

Q. (By Ms. Wallace) Do you have any idea how

the plaintiffs that you evaluated might chose to elect their coverage in the future?

MR. TURNER: Objection.

A. Could you repeat that question.

Q. (By Ms. Wallace) Do you have any idea as to how the plaintiffs that you evaluated might chose to elect their coverage in the future?

MR. TURNER: Same objection.

A. No.

Q. (By Ms. Wallace) I understand that there are certain parts of Medicare that are optional such as part B and part D; is that correct?

A. Yes.

Q. Were you given information on whether the plaintiffs have elected to participate in part B and D?

MR. TURNER: Objection.

A. No. I assume that they did or would.

Q. (By Ms. Wallace) So all of your numbers were making the assumption that that Medicare recipient is participating in part As, B and D?

MR. TURNER: Objection.

A. That's correct. But assumption was not that they were participating in that, but that they would make rationale economic decisions, and the rationale

economic decision for each of these plaintiffs given their conditions is that they would chose insurance coverage and that would be the insurance coverage available.

Q. (By Ms. Wallace) One of the reasons that part B and D are optional I believe is because they carry with it premium costs; is that true?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) So sometimes individuals can't afford those premiums; is that true?

MR. TURNER: Objection.

A. That's true. However, if they can't afford the premiums, then given their conditions, they certainly can't afford to pay for the care. The premiums are a lower cost option for them certainly not by definition, but in the greatest likelihood, and if they did not have access to funds to purchase part B and part D, they might be eligible for Medicaid in which case the services would be paid for by a different government program, which was not included in this -- in the analysis I did.

Q. (By Ms. Wallace) Right. So you did no analysis as it relates to Medicaid or Medicare part C; is that correct?

A. That's correct. Didn't -- we did, but it wasn't just something we decided. In the case of Medicaid to the best of my knowledge and the information that we received, none of the plaintiffs that we studied had Medicaid opportunity, and I forgot the second part.

Q. Medicare part C?

A. Oh, Medicare part C. Medicare part C is an alternative to A, B and often D.

You can chose to have coverage from a private contractor, private insurance company that's under contract through Medicare and that would cover -- that would cover all your health insurance needs, and so in order to do an analysis, you have to consider using A, B and D or C, not both.

And since most of the part C plans that exist pay at the Medicare rate or lower, it was more appropriate to use A, B, and D, plus the data for A, B and D. There is no data for C, although my experience, and it's a considerable amount, is that they pay the same rates.

Q. So your plan in your expert reports was limited to an evaluation of Medicare parts, A, B, D for the reasons you just stated?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) You did not do any type of analysis on the life care plans related to whether the treatment was medically necessary or reasonable; true?

MR. TURNER: Objection.

A. That's true. We assumed that if the life care planner had included it, it would be identified as medically necessary.

Q. (By Ms. Wallace) And you have a sentence in each report that states that you do not have an opinion on whether their exposure -- the plaintiff's exposure at Camp Lejeune was causative to their disease. You're not expressing a causation opinion in this case; correct?

A. That's correct.

MS. WALLACE: Are we at an hour. Would you like another break, Dr. Miller?

THE WITNESS: Sure.

MS. WALLACE: Okay. We'll just take maybe -- want to come back at like 1:30?

THE WITNESS: That's fine.

MS. WALLACE: I'm sorry and that's 11:30.

THE WITNESS: 11:30.

MS. WALLACE: Yes.

THE VIDEOGRAPHER: We're off the record at 11:21 a.m.

(Break taken from 11:21 to 11:30 a.m.)

THE VIDEOGRAPHER: We're back on the record at 11:30 a.m.

Q. (By Ms. Wallace) Dr. Miller, for the particular scope of this project, it did not require your expertise in accounting; is that true?

MR. TURNER: Objection.

A. Well, I may have a much broader definition of accounting than you, but if you mean bookkeeping and preparation of financial statements, no.

Q. (By Ms. Wallace) It didn't require your Ph.D. expertise?

A. Oh, I wouldn't say that because my Ph.D. --

Q. In accounting?

A. The accounting part of it, I think it did. I mean, this is a -- to understand the structure of the rates, particularly Medicare rates that are used, you do have to have an understanding of accounting.

In my work for CMS, I played a role in the development of that structure of physician rates as well as some others, and I would say my knowledge of accounting was helpful. I have a much broader understanding -- broader definition of what accounting

is.

Q. And if I'm understanding you correctly, that doesn't have as much to do with the numbers that you produced themselves as much as it does understanding the government plan application?

MR. TURNER: Objection.

Q. (By Ms. Wallace) Or did I misunderstand?

A. No, perhaps. The government Medicare numbers for physician services actually consist of three parts, and the way in which they're structured is definitely -- it definitely helps if you have an accounting background.

The work that I did could be done simply by just taking the number and applying it in reports, but understanding what that number means is to me a part of it and understanding it requires some accounting knowledge.

Q. And when you say understanding what that number means, can you help me understand what you mean?

A. Sure. The physician payment rate includes three components: a work component how much work a physician actually puts into a particular CPT code, and it includes an administrative component one of the other costs associated with the -- with the CPT code.

So for example, if you have a radiologist doing something in their office, the cost of the equipment, the cost of the office, the cost of the auxiliary staff are all included in that second component, and then there is a third component which is just the malpractice insurance component which is different by specialty and therefore by CPT code.

So all of those go together. The administrative component is the methodology. The administrative component is something I designed 20-some years ago 25 years ago -- oh, this is 2026, maybe 30 years ago, and the -- definitely the skills that I have in accounting were critical to that and so I see them as important.

Q. So what you just described, is that relative to identifying the proper CPT code or identifying the proper fee schedule rate? Where does that fall in the mix of the numbers that you came up with?

MR. TURNER: Objection.

A. It certainly has no relationship to the CPT code that would be a given in any of the analyses that I've discussed. The rate, it does have to do with the rate. It doesn't have to do with the amount in the rate the specific numbers, but it has to do with understanding what those numbers represent.

Q. (By Ms. Wallace) Is it important -- so but the final rate that is -- that you guys selected, it's tied to a CPT code. Is it important for the Court to understand what that number represents?

MR. TURNER: Objection.

A. Maybe. I don't know. The Court may say, well, how did they get that number and then I can explain it.

Q. (By Ms. Wallace) But the number itself is pursuant to the fee schedule?

A. Yes.

Q. That has a complicated analysis behind it, but at the end of the day, the number is what the number is?

MR. TURNER: Objection.

A. That's correct.

Q. (By Ms. Wallace) Okay. For the scope of this particular project, did you use your economics background?

MR. TURNER: Objection.

A. I would say yes, but I can't give you specific examples. In my doctoral program, I took courses in macroeconomics, and in the macroeconomics courses, we discussed the components of government expenditures and that's part of the report. So I

think and you are asking the questions. I'm responding by defending my accounting and economic background, but to me it's different than what many people may think, but that's what I think.

Q. (By Ms. Wallace) Your fee schedule rates that you developed in this case, you did not do any present value calculations or any type of an economics application to those numbers; is that true?

MR. TURNER: Object to form.

A. That's true.

Q. (By Ms. Wallace) And as it relates to the persons that the economists for the DOJ that took your rates and applied them to the life care plan durations, did you do any -- did you check those economists' math at all? Did you ever see those reports?

MR. TURNER: Objection.

A. No.

Q. (By Ms. Wallace) Did you -- I think the answer is no, but did you calculate what the same services would cost if purchased privately?

A. No.

Q. Is that because that was not a part of the scope of your assignment?

A. That's correct.

Q. And did you calculate private pay rates or uninsured rates for uncovered services?

MR. TURNER: Objection.

A. Yes. There were very few that applied, but there were certainly -- yeah, there was some services in one of or more of the life care plans that were not covered by somebody that was one of the payors involved in that life care plan, and in that case we used other methods which in effect would be private pay methods.

We calculated them, but they didn't -- I'm sorry. I should have made it clear. I didn't mean to go off on a tangent. If the services weren't covered, then they're not included. There is no rate included for them.

Q. (By Ms. Wallace) There is a zero dollar --

A. Right.

Q. -- entry by your team for that service?

A. Right.

Q. And so in the event that the applicable government payor to that plaintiff doesn't cover a service that is represented in the life care plan, your answer on that is zero; correct?

A. Correct.

Q. But you didn't look into what that might cost

the plaintiff if he or she was -- had no other insurance or was paying out-of-pocket or had a private insurance?

A. No, because all I was calculating was how much the government would pay.

Q. Okay. And so we don't know -- you're not offering any testimony on what the reasonable value of uncovered services would have been; correct?

MR. TURNER: Objection.

A. That's correct.

Q. (By Ms. Wallace) For -- I want to talk about the assumptions that might be applicable to your report.

So in order for your numbers to be helpful to the Court, the Court would first need to accept at least one of the life care plans either the plaintiff's life care plan or the defense life care plan; correct?

MR. TURNER: Object.

A. The Court is going to decide however it sees fit. I can't say whether they would look at my numbers without picking one or the other life care plans. I don't know.

Q. (By Ms. Wallace) All of your numbers are based on either the plaintiff or the defendant's life

care plan?
A. That's correct, yes.
Q. And without those plans, your numbers don't mean very much?
MR. TURNER: Objection.
A. Well, that's --
Q. They lost their context.
A. Exactly.
Q. Okay. For your reports, do you assume that each plaintiff is going to remain eligible for the applicable government program for the entire duration of the life care plan?
MR. TURNER: Objection.
A. Well, I didn't have to make that assumption. My assignment was to identify how much the government would be paying for those services. I didn't have to identify how long those services were going to be provided or how long the government payment was going to go.
Q. (By Ms. Wallace) Well, you did review the life care plans which note how long the -- which reflect future care sometimes decades into the future for each of the plaintiffs; correct?
A. Yes.
Q. And so again if someone were to take your

numbers which I do understand are a point in time. They're the point in time that we are right now, but if someone; i.e., the DOJ economist is going to take your numbers and apply them into the future, would you agree with me that that -- the assumption would be that that plaintiff is remaining eligible for those government programs for the duration of the life care plan?

MR. TURNER: Objection.

A. If that person used the numbers throughout the patient's life, the answer would be yes.

Q. (By Ms. Wallace) If that person applied the life care plan using your numbers and the durations identified, the assumption underlying that is that that plaintiff is still receiving that government program into the future?

A. That's not my assumption, but the answer is yes.

Q. Whose assumption is it?

A. It's the person who is making it.

Q. You mean, it's the economist's assumption?

A. Yes.

Q. And so does that mean -- so for each of your expert reports where you have two tables for each of the plaintiffs, you don't have an opinion as to

whether those rates would apply into the future?

MR. TURNER: Objection.

A. No, my opinion is what the rates are and which would be paid for the service. I'm not providing an opinion on how long they'll be provided.

Q. (By Ms. Wallace) And so for tables 1 and 2 for all the plaintiffs, the unit rates identified represent the current applicable rate for that program. They do not reflect whether those unit costs might be subject to change in the future; is that right?

MR. TURNER: Object.

A. That's correct.

Q. (By Ms. Wallace) Do you -- if the economist took your numbers and applied them throughout the plaintiff's life expectancy or for the life of the life care plan, would the economist be assuming that the plaintiff maintains eligibility for those programs?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) The tables that are in your expert reports and I generally want to understand this -- sometimes they have CCN and VHA rate and then in the column right beside it they have a Medicare

rate, and sometimes the amounts are really similar and sometimes they are different.

How if the economist was going to take your rates and apply it for the life of the life care plan, which rates are they supposed to use when there is two columns identified?

MR. TURNER: Objection.

A. That's their decision. Generally --

Q. (By Ms. Wallace) Are they supposed to -- go ahead, sir. I'm sorry.

A. No, I was going to say generally speaking the VHA rates are higher and they cover more services.

The Medicare rates are lower. Most often they're the same, but when there are two different rates, that's the relationship, but as far as what the economist does, I don't know. The economist is going to make their own decision. I'm offering the information, but it's their decision.

Q. Your identification of two different or three different sets of rates, it was not intended to be stacked? For example, does that -- does my question make sense?

MR. TURNER: Objection.

A. By stacked give me a definition of stacked. I think I know.

Q. (By Ms. Wallace) Yes. My understanding is that if you got a life care plan and you got two different columns, one has the VHA rates, one has the Medicare rates.

You're not supposed to add together both -- or you did not -- your analysis didn't tell the economist which to use for which. You are just doing a if only VHA was used to pay for these services, these are the rates, and if only Medicare was used to pay for these same services, these are the rates.

You did not give the economist any instructions specifically as to how those might interplay together or whether they're supposed to be added together. So help make that clear for myself and the Court if you don't mind.

MR. TURNER: Objection.

A. I'm just offering the rate and nothing more than that.

Q. (By Ms. Wallace) So the two different rates, they don't interplay together. You're not -- that's not -- for example, like if you had Mr. McElhiney has all three. There is no instruction that you have given to the economist or to the Court as it relates to the interplay between those three government payors; is that true?

MR. TURNER: Object.

A. Yes.

Q. (By Ms. Wallace) And so quite simply, your expertise is just to identify if the plaintiff choose Medicare to pay for her whole life care plan, these are the rates. If the plaintiff chose VHA to pay for her life care plan, these are the rates; correct?

MR. TURNER: Objection.

A. Sort of. The answer to the question is yes in the context in which it's asked. However, it's important to understand that the plaintiff in all likelihood would not be making that decision.

In most instances when the plaintiff seeks care, they're asked the question of who is -- what is your coverage, you know, what insurance do you have, and if they answer completely and they have Medicare and VHA and TRICARE, the decision on who to bill for the services is really the provider's decision.

Most of the time I think they would bill Medicare simply because it's easier for them, but it's not -- it is as though the plaintiff is going and saying, I have these three coverages, but you bill TRICARE. I suppose that could happen, but that's not the way it usually happens.

Q. (By Ms. Wallace) And as we sit here today,

we don't know the provider's decisions in the future as to which government payor they're going to select; is that correct?

MR. TURNER: Objection.

A. No, it's hard to know the future.

Q. (By Ms. Wallace) But for those plaintiffs that have multiple government payors that you analyzed, we don't know which one will apply to which service; is that true?

MR. TURNER: Objection.

Q. (By Ms. Wallace) We don't know which rate whether it's a Medicare rate or the VHA rate will end up covering that service assuming that they use that insurance?

MR. TURNER: Same objection.

A. Well, I'm assuming everybody is going to behave rationally in an economic sense and they're going to use the rates that they determine are appropriate, but there is -- what I prepared is what is possible and what actually happens is dependent upon the plaintiff and the provider.

Q. (By Ms. Wallace) If the plaintiff choses not to continue with one of their government benefits into the future, then that column of rates wouldn't be applicable; correct?

MR. TURNER: Objection.

A. Well, if we're talking about Part A Medicare benefits, it's not a decision that the plaintiff would make. You don't -- you can't deny them. I suppose you could. You could deny that you have them, but you can't deny them. If you are over age 65 and are -- and meet the other eligibility requirements for Medicare, you've got part A.

If they elect not to enroll in part B in the future, that's true, but we're talking about -- what you said was true, but we're talking about situations that where that just wouldn't make sense. We're talking about people who have serious illnesses and they can't get other insurance. Their option is part B and part D for Medicare if they are eligible for it. You can't get private insurance if you are eligible for Medicare.

So why would they opt to not purchase that. It's going to cost them a lot more if they don't. So yes, I would make the assumption that they are going to continue to purchase it.

Q. (By Ms. Wallace) Well, I guess, my example was more focused on a Medicare versus a VHA. You know, if they declined to continue -- if they have Medicare and they decline to continue with their VHA

coverage, then that column -- that VHA column is no longer applicable?

MR. TURNER: Objection.

Q. (By Ms. Wallace) Is that true?

A. That's true, but it's irrational, but it's true.

Q. Well, only one is going to pay; right? I mean only one of them is going to pay for the service in most cases; correct?

A. Well, yes. Well, there are some services where two may pay, but it will only be the total amount of the bill. You won't get paid -- they won't pay twice.

Q. If a plaintiff obtained other insurance in the future, how would that effect your analysis related to the TRICARE rates?

MR. TURNER: Objection.

A. Well, what other insurance would we be talking about? If -- are you asking me if someone only had TRICARE and was under age 65?

Q. (By Ms. Wallace) Yes.

A. And they decided they didn't want TRICARE. They wanted to get private insurance. Again, most often that would be an irrational decision. You have to end up paying more, and we don't assume that people

normally like to pay more.

So it's very unlike to happen, but if it did happen and they didn't have the TRICARE they only had the other insurance, the other insurance would pay.

Q. And my question was if they had both, you know, you testify in your reports there is certain services that aren't covered by certain insurance programs and so sometimes persons like to seek supplemental care or alternative insurance, and TRICARE is a secondary payor.

So I had assumed you were going to say if a plaintiff is under 65 of and has TRICARE and decides to get other insurance for coverage reasons, the TRICARE numbers will no longer be relevant because it's a secondary payor. That's what I thought you were going to say; is that true?

MR. TURNER: Objection.

A. That's a much more complicated question than I thought you were asking.

Q. (By Ms. Wallace) Do you agree with that or disagree with it?

A. No, I'm just trying to think of circumstances where that would occur, and that's hard to do, but if it occurred the way you describe it, the answer to the question is yes.

Q. Did you do any analysis to ensure that the providers in the plaintiff's geographic area accept payment from those government programs?

A. No.

Q. And so all of your analysis assumes that they can get the outlined care within their geographic area being paid for by one of the applicable government payors; correct?

MR. TURNER: Objection.

A. Well, that's correct, but keep in mind that the vast majority of providers close to 95 percent except Medicare. There may be some specialties where the numbers is not as good. There may be issues as it relates to veterans health benefits with TRICARE, but those are not -- it's not as though they would get no coverage at all. The coverage might be different if under those circumstances you outlined. I don't see that as a major problem either.

Q. (By Ms. Wallace) You don't see what as a major problem?

A. I kind of lost track.

Q. No, it's okay.

A. Ask the question again.

Q. I think that you meant -- well, you've actually distinguished most -- let's just say a

plaintiff is in a rural area. Even in a rural area most providers are paying -- are accepting Medicare. That's not always the case for VHA and TRICARE. I think that was what your testimony was?

A. Yes.

Q. Okay.

A. Again keep in mind that these people the plaintiffs are already receiving services under VHA or TRICARE.

Q. That was an assumption you were given; is that true?

A. Well, they have the opportunity to. I wasn't given the assumption that they were actually receiving those benefits, but they're eligible to receive them, and I don't see how that would change, but what you are saying is if people don't -- if people don't want those benefits, they want something else, sure, it will change.

Q. Well, my question was about provider access, and so I think we agree you didn't do -- you nor your two assistants Julian and Ayako as a part of your analysis you did not do a geographical survey to see if the actual treatment needed by the plaintiffs as outlined in their life care plan existed with government payor accepting providers in their

geographic area; is that true?

MR. TURNER: Objection.

A. Definitely not, yes.

Q. (By Ms. Wallace) For those rates to be used related to future care, we would assume the continued existence of the government payors of Medicare, VHA and TRICARE; is that true?

A. Yes.

Q. And your analysis -- would you agree with me that all of those rates have been throughout your 50-year career subject to change over the years?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) And that's why your job is so valuable because you are the person that could come in at any given point in time and tell a Court the current rate associated with those services; correct?

A. Well, that's correct, along with discussions of how the rates have changed in the past and how they may change in the future.

Q. And I did not see you issue an opinion on how the rates in your tables might change in the future in this case; is that right?

A. That's correct.

Q. I wanted to talk to you for a moment about

out-of-pocket costs related to these programs by patients.

Could you have, if you had been asked, could you have had a column that quantified the amount of patient payments associated with these CPT codes and payors?

A. I could have, but it's not what I was asked to do.

Q. Understood.

A. I was asked to calculate how much government agencies would pay.

Q. For part B and D Medicare do you know would you be able to tell me off the top of your head which potential co-pays -- let me not use the word co-pays. I want to use the word patient contributions -- would apply to Medicare's part B and D.

MR. TURNER: Objection.

Q. (By Ms. Wallace) Such as premiums, deductibles, co-pays, co-insurance?

A. I could tell you what they were, yes.

Q. Which ones apply to Medicare part B and D?

A. Well, all three. There are premiums, deductibles and co-pay.

Q. And if you had been asked to quantify the amounts of patient contributions related to the life

care plan, do you have the skills and expertise that you could have done that?

MR. TURNER: Objection.

A. Yes. That is very much the nature of the work that involves the determination of reasonable value that we discussed earlier.

Q. (By Ms. Wallace) And based on my understanding of your analysis, your team tried to exclude those amounts from the amount that the government would pay for the service; is that true?

A. Yes.

Q. Was that done 100 percent for all three payors you were able to quantify the amount of a patient contribution and make sure it was not included in the rates that you identify?

A. To the extent we could.

Q. Where was that a challenge?

MR. TURNER: Objection.

A. It was a challenge -- the biggest challenge was in terms of Medicare and the deductible. We would have no way of knowing what other bills a patient may have, what other services they may have and when, in fact, they received specific services because those are the factors that would affect the deductible.

So it's not -- it's not very easy to

determine the deductible amount and so we did not, but we did address co-pays. Those are straightforward and included in program regulations and premiums as well.

Q. (By Ms. Wallace) So if I have the 2025 annual report from CMS that quantifies the amount of deductibles by year, would that be something that you would utilize if you wanted to know the deductible subtraction to apply to the Medicare eligible plaintiffs?

A. It would give you an average, but it wouldn't give you a really good average because there would be a lot of younger Medicare patients say ages 65 to 75 who have very few bills and they are combined with those patients 75 and older who have lots of bills and whose deductibles would be met earlier. The problem is the deductible is an individual issue and not a general issue. The co-pay -- the co-pay is general. Co-pays apply to all patients. The deductibles are specific to the range of care that a patient gets.

So you could use it, but it seems to me that it wouldn't be very accurate.

Q. If you had been assigned to determine -- if you had been asked to say please make sure you deduct any patient contribution from your Medicare rates or analysis, how would you have gone about doing that?

A. I would have to assume that all of these patients met their deductible. Most efficiently the yellow to make that a reasonable assumption.

Q. And assuming they met the deductible, you know where to find that deductible?

A. Yes.

Q. Where would that be?

A. Well, the deductible is in statutes and Medicare regulations. The deductible for inpatient care for part A is different. That's on a per-visit basis or per-stay basis.

So for those plaintiffs that would have inpatient visits, that would be calculated separately.

Q. So let's -- just so I understand.

So let's say an example of one of our Medicare plaintiffs let's say the economist fully calculated out your rates for the existence of the life care plan and let's say that the economist quantified $500,000 to represent the amount that Medicare would pay for the services identified in the life care plan.

If the Court then wanted to subtract any patient contributions from that total number, how would -- how would we do that?

MR. TURNER: Objection.

A. I assume you are asking that your question is if you have a total amount that Medicare is identifying as its allowed amount which would be the total paid by the patient and the -- and the program the Medicare program, how would I reduce that to address the deductible?

Q. (By Ms. Wallace) Yes.

A. I could take the deductible and amount and simply reduce it each year. It would not be a very substantial portion of the $500,000. It would be a small amount, but that could be done. The problem.

Q. I'm sorry, sir.

A. The problem with it is you don't know which services it would be applied to. There would be a total amount. Yeah, I guess, you could do it.

Q. Okay. So just so we're clear, so the -- and I'm speaking only of Medicare payor.

The Medicare rates identified in tables 1 and 2 for the plaintiffs that you evaluated as stated now they do not include a deduction or removal of any patient contributions?

A. Yeah, it's the rate that is paid for that service, so no, the deductible is not addressed.

Q. And so if we took all of those tables that you created the economists applied it throughout the

lifetime of the life care plan, we're not -- if the Court wanted to just award the amount the government paid as opposed to also awarding the amount the plaintiff contributed, we don't have -- we don't have that number. Your rates bake in potential patient contributions?

MR. TURNER: Objection.

A. Well, I wouldn't put it that way.

Q. (By Ms. Wallace) Maybe they don't subtract for them?

A. Well, they present what they're supposed to present, which is the rate. It does not address the impact that the deductible on that rate, but that wasn't my responsibility.

Q. Well, in some of your other government payors you do provide a removal of certain patient contributions; correct?

A. Well, in Medicare I do as well.

Q. But you don't on the deductible patient contribution?

A. That's correct.

Q. And a deductible it would not be hard to find how the deductibles change over the years based on which plan is paying?

MR. TURNER: Objection.

A. That's correct.

Q. (By Ms. Wallace) Can you think of any other -- so we talked about Medicare has part B and D have premiums which you actually quantified in your report. You said the current rate of a Medicare part B premium is $185?

A. Yes.

Q. Which is approximately $2,200 per year?

A. Yes.

Q. Is that -- if we assumed that that premium remained the same, is that also a number that we weren't able to deduct from the Medicare rates?

MR. TURNER: Objection.

A. Well, you wouldn't deduct it from the Medicare rate. You are trying to do something that was outside of the scope of my work. My work was to identify the Medicare rate, not to calculate the patient contribution.

Q. (By Ms. Wallace) But sometimes you are able to subtract for it and sometimes you weren't and I'm just trying to get a clear understanding of what might still be included as far as patient contributions in that number because you have to keep in mind that an economist took your rates and has expounded it for the life of the plaintiff. So at this point some of these

life care plans go over 14 years, and so they're large numbers.

So I'm just trying to understand -- I imagine the Court will want to know what patient contributions might need to be deducted from these amounts?

MR. TURNER: Objection.

A. Well, the answer I gave you just before was related to the premium. The premium is not related specifically to the care that was provided or the service that was provided.

Q. (By Ms. Wallace) Understood.

A. It's a general amount. So there are two different things. So I wouldn't have had any reason to address it.

Q. But the deductible would?

A. That's correct.

Q. Okay. Is there -- oh, I'm so sorry. Please finish.

A. What I have done is the co-pay for each service has been addressed so that the amount shown for Medicare is not the amount in the fee schedule. It's the amount in the fee schedule less the co-pay amount.

Q. Other than Medicare deductibles, can you think of another category that we should be aware of

that could potentially be a patient contribution that's not deducted from your rates?

A. No.

Q. There is a Medicare 20 percent co-insurance that the plaintiff must pay out of pocket unless a secondary payor covers it?

A. Yes, for part B.

Q. Does that have -- is that service -- is that related to services?

A. Yes.

Q. Is that another example?

A. No, that's what I meant before. In the case of co-pay, that 20 percent co-pay whatever the fee schedule showed we reduced by the 20 percent.

So if the fee schedule said the allowed amount by Medicare was $100, we only used 80.

Q. You've already reduced for that in your charts?

A. The co-pay, yes.

Q. All right. So the 20 percent is already reduced, the deductible is not. We don't have a quantification for the Medicare deductible, but one is available if needed; is that right?

A. It's correct. But I'm saying that my understanding that one would be available. I didn't

make an effort to do that.

Q. Understood. As it relates to TRICARE and patient contributions, I understand that TRICARE beneficiaries pay most -- most that are not active service members they pay premiums and their co-pays, deductibles, co-insurance; is that right?

A. Yes.

Q. Were you asked to quantify or deduct any of the patient payments applicable to TRICARE as it relates to your rates identified in tables 1 and 2 of each plaintiff report?

MR. TURNER: Objection.

A. The method used for TRICARE is the same as the method used for Medicare. The charge that we were given was to calculate how much the government would pay for the specific services in the life care plan, and the government would pay the fee schedule amount, less the co-pay requirement and we did that consistently. We didn't consider insurance. Clearly that's a patient contribution and nobody -- I'm certainly not denying it, but that's outside the scope of my report.

Didn't include the deductible because of the variation I felt was -- was too significant to be able to apply it, and more importantly, the amount that is

shown in the report is the amount paid for the service. If there are deductible amounts that are involved, it's outside the scope of my work, but I'm not denying that there are deductibles.

Q. (By Ms. Wallace) And so related to both Medicare and TRICARE we don't know what the deductible patient contributions would be for the services identified on the life care plans; is that right?

A. That's correct.

Q. And because these are life care plans that are forecasted sometimes decades into the future, a deductible could potentially be met throughout that time period on an annual basis; is that true?

A. Yes.

Q. For VHA, I noticed that you have -- you and alluded to this earlier. There are co-pays that veterans are sometimes required to pay under the VHA, but they get waived if a plaintiff is more than 70 percent disabled; is that true?

A. Yes.

Q. And based on the individuals you evaluated who had assumed eligibility for the VHA insurance, you assessed that each of them had service connected disability exceeding the 70 percent meaning they would not have the co-pay; is that true?

A. Correct.

Q. That would not -- that doesn't have to necessarily be the case for other veterans under the VHA health program; right?

A. Right.

Q. Okay. Are there other patient contributions under the VHA that patients pay and I'm including in my question Community Care Network, TriWest, do you know the answer to that question?

MR. TURNER: Objection.

A. I don't know of any others, but that's something that I have recently investigated.

Q. (By Ms. Wallace) You have?

A. I have not.

Q. Do you know if TriWest requires additional patient contributions for care that occurs outside of a VA facility?

A. Typically they do.

Q. And I notice that your rates do not distinguish between whether the care is to be received in a VA hospital versus whether it's to be received under the Community Care Network program and by a provider that is outside of a VA hospital; is that true?

A. That's true.

Q. And so just -- and we're going to talk about that later, but just as it relates to co-pays or patient contributions, we're not able to know what patient pay contributions might be applicable to the VHA services that are identified because we don't actually know whether those services are going to be received at a VA facility or whether those services are going to be received by a provider and paid by the VHA and paid by the Community Network Program; is that true?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) And again your report did not perform any analysis to try to quantify future patient payments related to VHA --

MR. TURNER: Objection.

Q. (By Ms. Wallace) -- for the life care plans?

A. Correct.

Q. Okay. Would you agree with me that under your framework identified in tables 1 and 2 your reports do not represent the cost to the plaintiffs of future care?

MR. TURNER: Objection.

A. No, that's not that purpose.

Q. (By Ms. Wallace) Your reports don't

represent the costs of -- that the plaintiffs may pay for the future care outlined in the life care plan?

A. That's correct.

Q. The program that you talked about earlier as it relates to looking at the rates associated with certain CPT codes and you testified that there is a program, but it's by a governmental payor, is that -- is that some type of a proprietary program to BRG or to you, or again is that you and your staff utilizing publicly available look-up?

A. It's publicly available.

Q. Do you get notified by any of the government payors when there are rate changes? How do you and your staff go about knowing if there has been a rate change to a service?

A. Well, we're like everybody else. We will see it in the press that a rate has been changed.

For Medicare they generally occur once a year when the new regulations come out, and well, that's true for all three for TRICARE and VHA. So when a change is announced, which usually is announced as a change in the federal regulation, we would see it in the trade literature.

Sometimes changes are made for individual services at different points in the year, but those

two are announced and there are people who look for them.

Q. Do you keep up with the legislative policy as it relates to sequestrations from Medicare?

MR. TURNER: Objection.

A. In a general sense.

Q. (By Ms. Wallace) Will you describe what sequestration means, if you will?

A. Well, it means that Medicare is going to -- well, I'm talking about Medicare specifically, but it means that the government is going to withhold a small portion of payment.

Q. To the provider?

A. To the provider, yes.

Q. How often have you seen sequestrations throughout your 50-year career?

A. I have no idea. Not often, but certainly they occur. I have no idea how many times.

Q. And so my understanding is what that does is it could sometimes takes rates such as the ones you have identified in tables 1 and 2 it could apply, for example, a percentage reduction to those rates for a period of time?

A. Yeah, and it's a small percentage of 1 or 2 percent reduction.

Q. And you don't -- we don't know when those sequestrations are going to occur. That decision is made by Congress?

A. That's correct.

MS. WALLACE: We're at an hour break. Do you guys want to take 5 or 10 minutes and come back at 2:40?

THE WITNESS: I'd like to take a little bit more because --

MS. WALLACE: Oh, it's lunchtime there.

THE WITNESS: For me it's lunchtime.

MS. WALLACE: Okay.

THE VIDEOGRAPHER: Shall we go off the record first?

MS. WALLACE: Yes.

THE VIDEOGRAPHER: We're off the record at 12:30 p.m.

(Break taken from 12:30 to 12:53 p.m.)

THE VIDEOGRAPHER: We're back on the record at 12:53 p.m.

Q. (By Ms. Wallace) Doctor, your analysis in your expert reports does not measure the cost to deliver the care; is that true?

MR. TURNER: Objection.

A. That's true.

Q. (By Ms. Wallace) As it relates to the Medicare reimbursement structure or system, that reimbursement program is established by statute and regulation; correct?

A. Yes.

Q. And you testified earlier that the reimbursement rates have been revised repeatedly over time?

A. Well, yes, but by repeatedly, I mean, annually.

Q. Yes. They're revised annually?

A. Yes. And some rates may be -- some individual rates may be revised during the course of the year, but the general approach is to revise them annually.

Q. Based on your 50-year career, has Congress altered the payment methodologies in the past?

MR. TURNER: Objection.

A. Not often, but yes.

Q. (By Ms. Wallace) Have payment amounts been reduced through competitive bidding and sequestration over the course of your career?

MR. TURNER: Objection.

A. In some instances.

Q. (By Ms. Wallace) Yes?

A. Yes, for competitive bidding in some instances, and for sequestration when sequestration occurs, that's the purpose of it. It reduces payment rates.

Q. Have conversion factors changed annually?

MR. TURNER: Objection.

A. That's what changes, yes.

Q. (By Ms. Wallace) Have drug reimbursement methodologies changed for Medicare over the course of your career?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) Have coverage determination for Medicare changed over the course of your career?

MR. TURNER: Objection.

A. Yes, but not substantially.

Q. (By Ms. Wallace) Have provider participations changed with the Medicare system over the course of your career?

MR. TURNER: Objection.

A. Once the provider community adjusted to the existence of Medicare, the overall participation has not changed very much, but the -- obviously the participation for individual providers may have changed.

Q. (By Ms. Wallace) Are medical providers under the Medicare system are generally paid some of the lowest competitive rates compared to other insurance payors. Do you agree with that?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) Your expert reports did not model the possibility of reimbursement restructuring for the government payors; is that correct?

A. Yes.

Q. Do you have an understanding as to how an economist might go about taking your rates, which are the current rates and applying those into the future?

MR. TURNER: Objection.

A. I have a general understanding.

Q. (By Ms. Wallace) Did you -- were you asked to perform that analysis in this case?

A. No.

Q. How might an economist do that and I ask because you are an economist?

A. Thank you. There are a couple of different ways, but the way I would do it would be to look at how the rates have changed from year to year within the program. There are price indices that are available to look at how rates change in general

consumer price indexes, produce price indexes there are different index that are available, but there is also data that is available on how much rates have increased by Medicare from year to year, and I would use that information to show an increase, and the rates -- there is for the past several years the rates have been 2 to 3 percent increases.

Q. Are you referring to Medicare rates?

A. Yes.

Q. And are you referring to rates on a macro scale not on an individual scale; is that right?

A. Yes.

Q. Did you analyze how the rates historically have been set based on the services identified in the plaintiffs' life care plan reports?

MR. TURNER: Objection.

A. Would you ask me that question again. I'm not sure I followed.

Q. (By Ms. Wallace) Did you do a historical analysis on how the rates for the services have changed based on the services in the plaintiffs' life care plan reports?

A. No.

Q. Do you know if the government's economists performed that analysis?

MR. TURNER: Objection.

A. I don't know.

Q. (By Ms. Wallace) Would that inform how or could inform how the rates may change in the future?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) In each of the plaintiff's expert reports, you testified earlier there is a very similar boiler plate paragraph as it relates to Medicare; correct?

A. Yes.

Q. And did you draft that paragraph?

A. Yes.

Q. And it looks like you make a statement in it that funding from Medicare is entrenched in U.S. tax law and support for the program is widespread across the political spectrum.

Do you remember that statement?

A. I do.

Q. And it looks like you rely on a survey to support that, the political spectrum support.

Do you recall the details of that survey?

A. No, not the details.

Q. What do you mean by support for the program is widespread across the political spectrum?

A. Republicans and Democrats.
Q. And are you referring to -- it's members of Congress that control the Medicare program; is that true?
A. At the ultimate level, yes.
Q. And so do you know if your citation has to do with congressional political support or the general public?
MR. TURNER: Objection.
A. I'm sorry. I don't remember.
Q. (By Ms. Wallace) And if it were -- if your report -- if the survey that you cited had to do with the general public, those are not the individuals that get to make decisions on changes or funding to the Medicare program; correct?
MR. TURNER: Objection.
A. They are not, but you would hope that the congressional members who do make those decisions follow the feelings and directions of their -- of the people they represent.
Q. (By Ms. Wallace) Correct. But it's often more complicated than that for Congress men and women related to budgeting issues. Would you agree with me?
A. I do.
Q. You also stated that the federal government

funds Medicare through mandatory or direct spending which does not require annual congressional approval.

Do you remember that statement?

A. Yes.

Q. For Medicare mandatory funding does not mean the program is unchangeable; is that true?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) It means that Congress does not have to pass a new appropriations bill every year for Medicare to operate; correct?

MR. TURNER: Objection.

A. Correct.

Q. (By Ms. Wallace) And we've talked about this, but in any given year when Congress goes to set Medicare rates, they could change the payment formulas; correct?

MR. TURNER: Objection.

A. They could.

Q. (By Ms. Wallace) The reimbursement percentages; correct?

MR. TURNER: Same objection.

A. Yes.

Q. (By Ms. Wallace) The eligibility rules?

MR. TURNER: Same objection.

A. Yes.
Q. (By Ms. Wallace) The benefit structures and design?
MR. TURNER: Same objection.
A. Yes.
Q. (By Ms. Wallace) Conversion factors?
MR. TURNER: Same objection.
A. Yes.
Q. (By Ms. Wallace) The DOG methodology?
MR. TURNER: Same objection.
A. Yes.
Q. (By Ms. Wallace) Productivity adjustments?
MR. TURNER: Same objection.
A. Yes.
Q. (By Ms. Wallace) They could change the payroll tax rates within the funding, the funds; is that correct?
MR. TURNER: Same objection.
A. Yes.
Q. (By Ms. Wallace) And they could control patient payment contributions to that program; is that true?
MR. TURNER: Same objection.
A. Yes.
Q. (By Ms. Wallace) And so you wrote also

Medicare rates which are published by CMS determine how much the Medicare program will reimburse a provider for a specified medical service.

That is done by amending the underlying statute, not through the annual appropriation's bill; is that correct?

MR. TURNER: Objection.

A. I'm sorry. Ask me that question again.

Q. (By Ms. Wallace) The Medicare rates, those are not changed through the annual appropriations bill?

MR. TURNER: Objection.

A. No, they are not.

Q. (By Ms. Wallace) How are they changed?

A. Well, they're changed by recommendations that come up through the process. Congress gets the opportunity to make its evaluation annually based upon information provided to them by CMS as well as by MedPAC, which is the Medicare Payment Advisory Commission, and others who may offer information, and then they make the decision based on that.

Q. Do you recall the Budget Control Act of 2011?

MR. TURNER: Objection.

A. Not much of it.

Q. (By Ms. Wallace) Do you recall that it

imposed across the board sequestration on some of the mandatory programming including Medicare?

MR. TURNER: Objection.

Q. (By Ms. Wallace) What was your answer, sir? I'm sorry.

A. I said yes.

Q. You have a statement in your Medicare paragraph in the plaintiff's expert reports that states CMS updates rates at least annually, and rates can be expected to increase over time even amid limits on Medicare spending such as budget neutrality requirements under the Medicare Access and CHIP Reauthorization Act of 2015, MACRA.

Did you make that statement?

A. Yes, I did.

Q. Is that statement based on historical trend observations?

A. Yes.

Q. And it's more of a general macro level observation of rates over time; is that true?

MR. TURNER: Objection.

A. I assume you mean when you say macro that that's an overall rate of increase as opposed to increases on individual services and that would be correct.

Q. (By Ms. Wallace) Thank you. Have -- in some years have rates been reduced?

A. In a small number of years -- I don't remember exactly how many -- the rates have been reduced, but by small amounts and for different types of services.

Q. You have a statement in your Medicare paragraph that says, In addition to increasing costs leading to high physician payments, congressional action and other policies have historically resulted in physician payment reductions suspensions and/or increases in physician payments.

Can you tell me what you mean by that sentence?

A. Yeah. It sounds worse when read aloud. The budget neutrality requirements that we briefly mentioned before included a formula for changes in physician payment, and in many instances well, for several years that formula resulted in a reduction in payment rates, but when Congress came to making the decision as to what the payment rates would be, they opted in most instances not to apply the formula, but to instead apply a small increases.

Q. And that is a great segue to the current state of the HI funding. Have you been keeping up

with the 2025 annual report of Medicare as it relates to the state of HI funding which is one of the primary funding sources for the Medicare part A system?

MR. TURNER: Objection.

A. Not in detail, but in general.

Q. (By Ms. Wallace) Are you aware that the HI trust fund has been issued a warning?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) Tell me what you know of it please.

A. Well, just that they're going to run out of money at the current -- they're going to run out of money given the current circumstances.

Q. Did you read the 2025 annual report that was issued by Medicare as a part of your expertise?

A. I would say I reviewed it. I didn't read the whole thing.

Q. We deposed -- earlier this month we deposed the deputy chief financial officer and deputy director of the office of financial management for CMS whose name is Larry Young.

Are you familiar with Mr. Young?

A. Not personally.

MR. TURNER: Objection.

Q. (By Ms. Wallace) What did you say? I'm sorry.

A. I said not personally.

Q. Are you familiar with his role and job title?

A. Yes.

Q. He testified that the HI trust fund faces, quote, several challenges and headwinds with respect to its financial solvency going forward.

Based on your expertise with Medicare, do you agree with that?

MR. TURNER: Objection.

A. Given current circumstances, I agree.

Q. (By Ms. Wallace) He also acknowledged that under current law the projected 75-year funding gap for Medicare is approximately $3.1 trillion.

Is that also your understanding?

A. I certainly have never attempted to make that calculation. That's his office's calculation. I assume it's correct. I don't know.

Q. He also acknowledged that the present value of trust fund taxes minus expenditures turns negative in the year 2033. Were you aware of that, Dr. Miller?

A. Yes.

Q. Would you agree that based on the projections by the CMS actuaries this reflects a short-term

problem that Congress will need to make amendments to the Medicare system in order to address?

MR. TURNER: Objection.

A. I would say that's likely.

Q. (By Ms. Wallace) Do you agree that the cost of the Medicare system are outpacing income for the foreseeable future?

MR. TURNER: Objection.

A. I don't know. I haven't done that analysis.

Q. (By Ms. Wallace) Mr. Young testified that for Medicare to maintain financial viability -- and I'm speaking of the HI trust fund specifically -- he said, quote, something has to change.

Do you agree with that?

MR. TURNER: Objection.

A. Well, I don't know what he meant by something has to change. There need to be -- there need to be changes.

I guess, the best way to put it would be something has to be done. Congress has to act, but there are so many options that it's hard to know what he means by "something has to change."

Q. (By Ms. Wallace) And some of the options that we talked about during Mr. Young's testimony one of the options is to reduce provider pay.

Would you agree?

MR. TURNER: Objection.

A. That's an option.

Q. (By Ms. Wallace) And if provider pay is reduced, would you agree with me that two things happen. One, your tables would change if it affected those rates; is that true?

MR. TURNER: Objection.

A. What you are asking me is if the rates change, would my tables change, and the answer to that is yes.

Q. (By Ms. Wallace) And the second thing that might happen is that providers might decline participating in the Medicare system in the future.

So there could become an access to care issue for Medicare beneficiaries. Would you agree?

MR. TURNER: Objection.

A. That's clearly that's an issue that Congress is going to have to address and it's the -- it's a key issue in healthcare. You have to have rates that providers will accept. So I guess, the answer is yes, that's among the options that were the result of options that would be considered.

Q. (By Ms. Wallace) And provider participation in the Medicare system is voluntary; correct?

A. Yes.
Q. Are you aware in your field that Medicare is in its 9th consecutive year of a funding warning?
MR. TURNER: Objection.
A. I haven't been counting, but it sounds right.
Q. (By Ms. Wallace) Do you agree with me that the funding issue affecting Medicare is a concern in the short term --
MR. TURNER: Objection.
Q. (By Ms. Wallace) -- meaning within the life expectancy of the plaintiffs in this litigation?
A. Yes.
Q. Another possibility of Congress to respond to the identified funding deficits that were identified by CMS in the annual report could be a reduction in the services offered under Medicare that are compensated; is that true?
MR. TURNER: Objection.
A. That is true.
Q. (By Ms. Wallace) And so if one of the services compensated for in your report is cut on Medicare, that would put a zero by that service as it relates to your chart analysis; is that true?
MR. TURNER: Objection.
A. Well, it would depend. It would depend on

whether or not the plaintiff had other coverage VHA or TRICARE and whether VHA and TRICARE made similar changes. The only reason the zero would be there is if the service was completely uncovered.

Q. (By Ms. Wallace) And so as it -- and I'm talking about Medicare specifically right now.

So if we're looking at the column that has the Medicare numbers in it and one of the changes that Congress decides to do to address the funding shortage is to eliminate that service from its offerings, your chart in column Medicare would have a zero by that service; is that correct?

A. That's correct, but it's also important that that would be an extremely unpopular decision by Congress when easier decisions are available.

Congress can also address the funding problem by increasing the percentage by which people are taxed, which would not have an impact on the senior citizens who are using Medicare services.

Q. I agree. And we don't know which direction Congress might go as we sit here today. Would you agree?

MR. TURNER: Objection.

A. I agree.

Q. (By Ms. Wallace) Would you agree with me

that predicting how Congress may address the funding issues on our part would be speculative?

MR. TURNER: Objection.

A. Well, speculative is a -- is a word that has pretty broad definition. I think that there are people, not me, but people who are experts in political analysis who might say they could assign probabilities to different options that could be available, but as far as I'm concerned, we don't know what Congress is going to do.

Q. (By Ms. Wallace) And you're not one of those experts in political analysis?

A. I am not.

Q. So as it relates to your opinion, it would be speculative?

MR. TURNER: Objection.

Q. (By Ms. Wallace) Is that right?

A. Well, I just would never use the word "speculative," but --

Q. It's a buzz word?

A. Exactly. But we don't know.

Q. Understood. As we sit here today, Medicare's future reimbursement levels or rates depend on legislative and policy decisions that have not yet been made. Do you agree?

MR. TURNER: Objection.

A. To a limited extent. You know, the issue that we're facing now with shortfalls in the Medicare and Medicare funding is not -- it's somewhat unique or different, but it has happened before and in fact, is all during my 50-year year there has been considered about the adequacy of Medicare funding, and in all that time, there have -- the Medicare program has acted consistently.

So certainly we don't know exactly what is going to happen, but based on past history -- and the past history is substantial -- it is likely that the Medicare program will continue to operate at least similarly to what it does now.

Q. Did you, based on your resume, you were in your current role during the DOGE-related press; is that true?

A. Yes.

Q. Among -- and DOGE for the record stands for Department of Government Efficiency; is that right?

That was the program that was led by Elon Musk on behalf of President Trump. Do you recall that program?

A. I do.

Q. Were there concerns amongst healthcare

experts such as yourself that there were going to be DOGE-related cuts to the Medicare program?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) And DOGE leaders signaled an ambition to cut $2 trillion from the federal budget which would have put large entitlement programs such as Medicare of concern?

MR. TURNER: Objection.

A. That's true. I never took that $2 trillion number to be serious, but what you said is true.

Q. (By Ms. Wallace) There were broad talks during that time about federal health spending cuts as a part of the DOGE efforts to increase government efficiency; is that right?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) And so your report does not conduct an analysis of past or future political risk related to these programs; is that right?

MR. TURNER: Objection.

A. Well, it was not within the scope of what I was asked to do. So no, they're not included.

Q. (By Ms. Wallace) And you weren't asked to develop any type of a contingency analysis as it

relates to these programs; correct?

A. That's correct.

Q. I want to talk about the veteran health administration program. You stated in -- did you prepare the paragraphs in your reports related to VHA?

A. I did.

Q. In each report where VHA applies as a program, you wrote, VHA coverage is expected to -- let me rephrase because I want to quote directly.

VHA coverage are expected to continue for the foreseeable future; is that right?

A. Yes.

Q. Can there be changes to individuals' eligibility to VHA medical benefits over time?

A. Yes.

Q. Did you analyze any of those changes of the plaintiffs as a part of your expert report work?

A. Any of the changes that may have occurred in the past?

Q. Yes.

A. I did not.

Q. I asked you questions about DOGE-related cuts that were considered for Medicare.

Did you keep up with the DOGE-related proposed cuts to the VHA system?

MR. TURNER: Objection.

A. Only in the broadest general way. I didn't think that DOGE was going to be very successful, and I turned out I was right.

Q. (By Ms. Wallace) Do you recall if it was proposed to cancel hundreds of contracts under the VHA as a result of efficiency recommendations by DOGE?

MR. TURNER: Objection.

A. I don't remember that, no.

Q. (By Ms. Wallace) Do you remember if there was a proposal to change staffing funding related to the DOGE analysis?

MR. TURNER: Objection.

A. I don't remember the specific changes for VHA.

Q. (By Ms. Wallace) Do you keep up with the VA secretary Doug Collins' testimony before Congress to the House Veterans Affairs Committee?

MR. TURNER: Objection.

A. In a general way.

Q. (By Ms. Wallace) Are you -- he appears annually before the House Veterans Affairs Committee. Are you aware of that?

A. Yes.

Q. And just as recently as this month,

February 11th, 2026, he appeared before that committee to testify. Did you know that?

A. No.

Q. Are you aware that he is currently advocating for a long awaited reorganization plan of the VA system?

MR. TURNER: Objection.

A. Yes, I was aware of that.

Q. (By Ms. Wallace) Tell us what you know about it, if you will?

A. Not much. Only that there has been a lot of discussion about reorganization of the system. It's a very large system with lots of emphasis on inpatient care, and there is a need to recognize changes to promote more outpatient services. I know that's part of it, but that's all I know.

Q. Are you aware that part of his proposal would shift medical personnel to facilities that have a higher demand and reduce staffing where veteran populations are shrinking?

MR. TURNER: Objection.

A. Yes, I'm aware of that.

Q. (By Ms. Wallace) How might that effect access to care for plaintiffs in lower veteran populations --

MR. TURNER: Objection.

Q. (By Ms. Wallace) -- communities?

A. That's a -- we got a small number of people. That would depend on each person and their reliance on those benefits. So I don't know.

Q. Would it surprise you to know that he testified before Congress on February 11th, 2026, that the VA is not fully staffed and has not been fully staffed in 15 years?

MR. TURNER: Objection.

A. Not a surprise.

Q. (By Ms. Wallace) What are the concerns based on your expertise as it relates to access to providers and care under the VA system?

MR. TURNER: Objection.

A. Well, this is pretty far afield from the work that I've done in this case, but my primary concerns relate to access to services.

The VA is actually a very good healthcare system especially in certain areas, but it's heavily dependent upon the availability of access to hospitals, and that's -- that's an area of concern because the hospitals are not geared to provide a lot of the services that are now being provided on an outpatient basis.

Q. (By Ms. Wallace) So when you list a VHA rate in your tables 1 and 2 for the plaintiffs, you're not giving any opinion that they're going to be able to receive that care at a VA hospital or facility?

MR. TURNER: Objection.

A. Not exactly. Whether or not they can receive it at a VA facility or in the community, that's the rate that would be paid. So if they became part of the CCN, then the rate that is shown there would be the rate that the provider would be paid anyway.

So it wasn't something I was concerned about.

Q. (By Ms. Wallace) Say that one more time.

A. It wasn't something I was particularly concerned with.

Q. You weren't concerned with whether they received that care at a VA facility or paid for by the VA at a facility outside of the VA. Is that what you are testifying?

MR. TURNER: Objection.

A. Yes, I'm testifying about the rate.

Q. (By Ms. Wallace) Exactly. Let's talk about how you set the VA rates.

Would you agree with me that when a patient gets treatment and care inside of a VA facility, bills are not generated internally or for the patient; is

that true?

A. Yes.

Q. No money is changing hands when a patient is receiving care at a VA facility?

A. That's correct.

Q. Yet the rates that you have put in your tables for the VA are reimbursement rates; is that true?

A. Yes.

Q. And so in this case the government provided a managerial accounting method of quantifying past paid medicals of the plaintiff, meaning they had an expert Daniel Clark who you actually cite in your report, and he took the past medical services that were provided and he applied a managerial cost accounting of what that actually cost the government to provide that care inside of a VA facility.

MR. TURNER: Objection.

Q. (By Ms. Wallace) Would that be the most accurate measure or a more accurate measure of accounting for care that occurred inside of a VA facility?

MR. TURNER: Objection.

A. Maybe. The responsibility I had was to identify the payment rate, and I wasn't concerned with

what the cost was, although I'm very familiar with the methods that I use. I did the same study he did to price the Medicare hospital outpatient prospective payment system that 30 years ago, but those are the rates that were put into effect.

And that's the way Medicare does it. Medicare does the same managerial cost accounting to arrive at the rate. Now, the rate may be modified or policy changes may occur as it relates to primary care versus specialty care, but the underlying approach is that managerial cost accounting approach, but in any event it's not relevant to my work because my work deals with how much is actually paid which in the case of a VA is really the Community Care Network rate, which is in a published database.

Q. (By Ms. Wallace) Right. But the problem is you don't know in the future whether the veteran is going to achieve that care inside of a VA where it would be no money that changes hand, no bill or outside of the VA hospital or facility where it would be the reimbursement rates that you have calculated as they relate to the Community Care Network program.

Do you agree with that?

MR. TURNER: Objection.

A. I agree with what you said, but it's

important to keep in mind that the VA has relied on Medicare ratings for the vast majority of its services, and certainly the only time I used VA rates the CCN rates was when a service was not covered by Medicare, but covered by VHA. There is a much smaller universe of services.

Q. (By Ms. Wallace) For each one of these unit rates that you identify for VHA, you are assuming that the care is occurring under the Community Care Network program, meaning not inside of a VA facility; is that true?

MR. TURNER: Objection.

A. That was not the -- so not the operating assumption that I had, but it turns out that way, yes.

Q. (By Ms. Wallace) And so we don't know whether that is the appropriate rate for these plaintiffs because we don't know in the future whether they're going to receive their care inside of a VA system or under the Community Care Network program, which is the rates that you identified; is that right?

MR. TURNER: Objection.

A. We don't, but I wish I could remember the citation, but somewhere within the materials that I've listed is a statement that the VA considers the rates to be CCN versus VA hospital rates.

Q. (By Ms. Wallace) But in this case we're trying to quantify or the government is trying to quantify the amount that the VA may pay out in the future for VA-related care, and the truth about it is that you cannot quantify the future unit rates for care accurately if the care occurs in a VA facility; correct?

MR. TURNER: Objection.

Q. (By Ms. Wallace) Because no money will be paid out. It's just cost to the government. Do you agree?

MR. TURNER: Same objection.

A. Money will be paid out. It will be paid out in terms of salaries and other costs, but any -- there is no way to determine what the costs in a VA facility are from my perspective.

Certainly the VA can determine that if they wanted to go through that process, but I feel comfortable relying on the CCN service -- rates rather.

Q. (By Ms. Wallace) You feel comfortable relying on those for services that occur under the TriWest and CCN program?

A. And also in VA hospitals.

Q. Well, didn't you just testify that there is

no way to reliably discern what the cost to the government will be if the care occurred -- occurs in the VA facility?

MR. TURNER: Objection.

A. I do, but what I'm saying is that I felt it was appropriate to use the CCN rate as equivalent to what it would cost in a VA facility.

Q. (By Ms. Wallace) Do you know how the TriWest and the Community Care Network rates that you used do you know how they compare to the managerial accounting of the VA for those same services?

MR. TURNER: Objection.

A. I do not.

Q. (By Ms. Wallace) And so if we're trying to estimate what the government will pay in the future for care that occurs in a VA facility, you agree with me we don't have a reliable way to assess that future cost?

MR. TURNER: Objection.

A. I think that's true. It could be higher or lower than the CCN rate, but we don't have the ability to determine that.

Q. (By Ms. Wallace) And the only way -- the testimony of Daniel Clark on that tissue is that to do a proper managerial accounting estimate, you have to

look at the geographic area where the care occurs, the actual VA facility. You have to look at how many doctors and nurses were in the facility at that moment. Sometimes they look at landscape costs for that VA.

It's a very -- it's actually a fairly precise analysis as it relates to the actual costs of the government to provide that care in any given month in any given treatment area such as oncology or knee replacement surgeries. Do you -- is that also your understanding?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) He describes it as an activity based cost allocation system that generates the estimates of the cost of individual VA hospital stays and healthcare encounters.

Did you have the materials necessary to perform that type of an accounting as it relates to VA hospital stays and healthcare encounters for the plaintiffs' life care plans?

MR. TURNER: Objection.

A. No.

Q. (By Ms. Wallace) And so that's why you use the only resource that you had available to you to try

to estimate what that cost might be, and it is your testimony that that is what the VA would pay out under the Community Care Network for that care; is that correct?

A. That's correct.

Q. But if the Court really wanted to understand the actual cost to the government in the future for VA hospital stays and VA health encounters, we don't have the data to be able to give them that cost to the government --

MR. TURNER: Objection.

Q. (By Ms. Wallace) -- in the future?

A. Well, I would hope that the Court would look at it from the standpoint of each individual plaintiff and the services that they require because the VA rates that we're talking about apply to only a small number of services in my reports, but otherwise the statement that you made is correct.

Q. As it relates to the Community Care Network rate that you identify, that is your analysis is of the current VA rates not projecting into the future; correct?

A. Yeah, that's correct.

MS. WALLACE: We have a break coming up in three minutes. Do you want to take a break? I

hear is that -- is the dog on your end?

THE WITNESS: Yes. She never barks. She decided now is a good time.

MS. WALLACE: No worries. Let's take like a 5- to 10-minute break and you do what you need to do with your animal.

THE WITNESS: If you can tell me what that is I'll be --

THE VIDEOGRAPHER: We're off the record at 1:47 p.m.

(Break taken from 1:47 to 1:59 p.m.)

THE VIDEOGRAPHER: We're back on the record at 1:59 p.m.

Q. (By Ms. Wallace) Doctor, before the break we were talking about VHA, and I was hoping that you could describe for me the methodology that you identify in your report as it relates to VHA please.

A. It's straightforward. And similar to the Medicare methodology. As I indicated, for most services VHA uses the Medicare rate. They tie into the Medicare system, but there are services they provide -- VHA provides that Medicare doesn't and so with some exceptions, they have a rate schedule as well that's available on the VA website, and it's a look up kind of thing where if you know the CPT code,

you can get their rate.

There are some -- some things that are a little different. For skilled nursing facilities, the Medicare rate only covers the first 100 days. Medicare only covers 100 days a year of skilled nursing facility care. The VHA covers more and it has its own rate per day for each day following that, and since there are a lot of adjustments in the Medicare system for individual characteristics of the patient, there are similar adjustments for the characteristics of veterans in the period behind 100 days and there is a formula to use.

Q. So I'll tell you something I'm fuzzy on. In your reports for plaintiff that have two columns one for the Medicare rate and one for the VHA rate.

Unless it's one of those -- typically the VHA rate, as you calculate it, is the Medicare rate, but I noted a lot -- and let me give you an example. I noticed a lot of discrepancies and I would have thought they would have been more similar based on your methodology.

So here is Bruce Hill PET scan per visit, Medicare rate $1,166.80, VHA rate $1,458.50, and so I know that Medicare has a rate because it's listed there, but yet -- and I would have thought that would

have carried over and been the VHA rate.

So can you help me understand why it was not.

A. No. VHA has decided to calculate its own rate. I'm sure there is some history behind it. I don't know what it is.

We used the most conservative approach each time. So we used the Medicare -- not using it. We're identifying the Medicare rate, but noting that there is also a separate VHA rate, and that's occurred and I don't know -- like I say, I don't know why. I'm sure it has to do with timing as to when the rate was set.

Q. So it's not -- so I just want to make sure I understand. So you're not -- for VHA you're not applying the Medicare rate for anything. You're applying the VHA rate. You are saying usually it follows Medicare, but sometimes it adjusts; is that right?

A. That's correct.

Q. So that's why. So you wouldn't look -- when you're establishing a VHA rate, you are not looking at the Medicare fee schedule. You are looking at some type of a different source that is VHA only?

A. Yeah, the CCN source that I mentioned before.

Q. Okay. And what is that source?

A. It's a VA.govVHAbenefits/CCN. I can get that

to you. It's actually in the materials considered.

Q. Okay. No problem. All right. And explain -- you used the word "conservative" earlier.

You meant -- did you mean that you are assigning a lower rate or you are just assigning the rate exactly as you see it in the VHA source material?

A. No. When there is an option we're always assuming the lower rate.

Q. Okay. And are there typically two options for any given CPT code?

A. Well, no, because the Medicare rate is going to be the rate in the VHA and also as frequently in TRICARE. So there are a lot of instances we're at the same rate. Now, it doesn't appear to be as common as you might see because the volume of the service is not separately indicated. It's identified in the tables, but not separately indicated. So the most common procedures that occur the most often are the ones where the Medicare rate is used.

So the Medicare rate is used much more often than any other rate, but, you know, so the primary service regarding volume is the physician office visit, and that's going to be the Medicare rate across the board, but when it comes to specific surgeries other specific services where coverage is not the same

they'll be more than one rate.

Q. Is that more than one rate within a government payor? Are you saying more than one rate between CMS versus VHA?

A. The latter.

Q. But I guess, I'm still a touch confused because you listed both. You weren't conservative.

You listed both the Medicare rate and you listed the VHA rate; correct?

A. Yes.

Q. And as it relates to plaintiffs who have two or more governmental payors, we have no way of knowing or your expert opinion does not distinguish as to which amount will be paid.

It could be if the plaintiff used her VHA insurance and let's just assume that she got the treatment outside of a VA hospital or he -- she or he -- they might pay $1,458.50 and if Mr. Hill got that same PET scan and had Medicare and Medicare picked it up, it would be $1,166.80; is that right?

MR. TURNER: Objection.

A. Yes. We're providing information as information that is being made available to others particularly the economists to use. So we're providing as much information as we can.

Q. (By Ms. Wallace) Did you dictate or develop a plan as to how the economists were to use your rates?

A. No.

Q. In a situation and I'm going to put -- I'm going to talk about Bruce Hill specifically, but one more question.

Just the next line down on Mr. Hill's table 2, there is a CT scan of the abdomen, and the Medicare rate is lower this time than the VHA rates. It's $103.62 versus a VHA rate of 129.52, and so my question is: There is no -- again there is no way of knowing of taking a blanket conservative approach as it relates to this. The Medicare rate could be higher for some services or lower for some services. There is no way for the Court to really or for the economists to know which one of these rates will be selected and ultimately paid by the government payor. Do you agree?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) Okay. Let's talk about the TRICARE methodology. How does the TRICARE methodology work?

A. Similarly to the VHA methodology. TRICARE

relies on Medicare rates for most -- certainly for common services. It has its own rates for specialty services.

Q. Is this -- go ahead.

A. It has its own rates for services that aren't covered by Medicare.

Q. And is this a situation where you look to the Medicare fee schedule to set a TRICARE rate, or does it have its own unique system just like VHA where you are looking it up in a different place?

A. It has its own system.

Q. And so as you state in your report, it's just that the system usually follows Medicare rates?

A. Exactly.

Q. Is that right?

A. Yes.

Q. TRICARE is administered by the Department of Defense; is that right?

A. Yes.

Q. And we talked earlier, TRICARE is always a secondary payor when a beneficiary has other health insurance; correct?

A. Yes.

Q. I noticed for one of the plaintiffs that you combined TRICARE with Medicare. I think it was for

Ms. Tukes or McElhiney.

Do you want me to direct your attention to that before I ask you a question about why you did it that way?

A. Yes.

(Miller Exhibit No. 16 was marked.)

Q. Give me one moment. Yes, it is McElhiney. Okay. I'm going to upload into the chat your report on Mr. McElhiney, which I have previously marked as Exhibit 16, and I'm going to put it on the screen for you. And I'm going to search by -- I really just need to get to table 1, which is on page 14.

Do you see the category there for Mr. McElhiney entitled Medicare rate with TRICARE as secondary coverage?

A. Yes.

Q. Why did you put that together for Mr. McElhiney and the TRICARE doesn't have its own column?

A. Well, because the Medicare rate has a co-pay, and so the Medicare rate doesn't include the co-pay amount, but McElhiney also has TRICARE which functions like a supplemental policy in this case and picks up, I'm pretty sure, all of the co-pay. So government programs Medicare and TRICARE combined are covering

those services.

Q. And but you didn't quantify any co-pays in your reports; correct?

A. No, but in this case a different government program TRICARE is paying the co-pay, so therefore it's included. If the individual is going to pay the co-pay, then it wouldn't be included.

Q. For this -- for this plaintiff TRICARE doesn't have a reimbursement amount that the government paid. It's just Medicare?

A. I believe that's correct.

Q. Because even though the plaintiff Mr. McElhiney has TRICARE, TRICARE is not paying anything on this case on his future service assuming he maintains all of his government payor insurance programs because Medicare would be -- Medicare or VHA would be primary and TRICARE wouldn't pitch in except as it relates to patient contributions?

MR. TURNER: Object.

A. That's my understanding.

Q. (By Ms. Wallace) Is that right?

A. I believe so.

Q. So there wasn't a need to calculate a TRICARE column because you were pretty certain that it wouldn't have paid. Is that why you did it that way?

A. Well, because what it amounts to is this Medicare rate with TRICARE is secondary is the full Medicare rate. So there isn't a need for a second column.

What TRICARE would pay would be 20 percent of that and Medicare pays 80 percent.

Q. And 20 percent would represent if the plaintiff had not had TRICARE what they would have paid inpatient contribution; is that right?

A. That's correct.

Q. And so let me ask you this. For Medicare would I be able to take 20 percent of that rate and calculate patient contributions for your -- using your charts?

A. Yes.

MR. TURNER: Objection.

Q. (By Ms. Wallace) And so for all of your Medicare charts 20 percent of the rate listed would represent a patient payment?

A. No.

Q. No.

A. No, because the amount that would be shown as the Medicare rate would be less 20 percent. So you had to add 20 percent.

Q. Right. So I would take let's just say

116.91, I would do my math like I do for tips. I would come up with $22 and I would add that to -- I would add that -- that would have been the patient contribution; is that right?

A. Yes, that's correct.

MR. TURNER: Objection.

Q. (By Ms. Wallace) Where you had, oh, you had two plaintiffs with TRICARE, Ms. Tukes and Mr. McElhiney, both of which had Medicare as an assumed garner eligibility.

Would the same be true for Ms. Tukes as it relates to what we're looking at in table 1 for Mr. McElhiney?

MR. TURNER: Objection.

A. It should.

(Miller Exhibit No. 15 was marked.)

Q. (By Ms. Wallace) So based on the chart -- let's take a look at it really quick so it's clear for the Court. So it looks like on Ms. Tukes report which I'm about to upload for you we did two separate columns. So let's just take a look and make sure I understand the difference.

I am uploading into the chat what has been previously marked as Plaintiff's Exhibit 15, which is the report of Henry Miller for plaintiff Jacqueline

Tukes, and I'm going to put it on the screen for you.

Do you recognize this report, Dr. Miller?

A. Yes.

Q. Let's scroll down to table 1, which appears on page 13. Actually it starts on page 11.

So do you see that the charts are done a little bit differently for Ms. Tukes?

A. Yes, I see that.

Q. What differences do you want the Court to understand about the two different ways that you analyze the TRICARE plus Medicare for those two plaintiffs?

MR. TURNER: Objection.

A. What I described before is correct. It's true. Here looking at the first item on the physician care, the nephrologist there is a difference in the rate first because it's an average between 99.213, 214 and 215 which are just different codes for office visits.

There is actually a 99.211 and a 99.212, which are simpler visits less resource intensive, and the reason we use 3 here as opposed to 1 in the McElhiney table is because the life care planner used 3, and identified 3. So we just -- and without getting any indication as to which visit would be 213,

214 or 215. So we just averaged them.

And the Medicare payment rate is 80 percent of the 123, 123.82, which is the same concept as in the McElhiney table, and the TRICARE rate is pretty much developed on that assumption that it's going to pick up the deductible -- the co-pay, I'm sorry, which it does here.

So in the end the visits for the nephrologist are priced at 123.82 as opposed to the visit we're look at for McElhiney which was priced at $116. There is no particular reason to show the TRICARE rate separately here. I felt it made things a little clearer.

Hopefully that's true, but the concept methodology is the same. The presentation is a little different.

Q. (By Ms. Wallace) Do I understand correctly that if this plaintiff has both Medicare and TRICARE, there would only be one payor paying and we know that Medicare is primary. So it would really just be the Medicare column?

A. No.

MR. TURNER: Objection.

Q. (By Ms. Wallace) Okay.

A. No. Medicare would pay 80 some dollars --

I'm sorry. 90 some dollars and TRICARE would pay the difference. Medicare's payment rate would be less than -- would not include the co-pay component so that the physician in this case has to bill both Medicare and TRICARE. When they bill Medicare, they're going to get a portion of that 123.82 and TRICARE is going to come up with the difference.

Q. If these were -- so you did not design the chart to demonstrate how the benefits would work together in tandem; is that true?

MR. TURNER: Objection.

Q. (By Ms. Wallace) Because otherwise it would be Medicare $123.82 and then it would be the 20 percent that TRICARE was paying; is that true?

MR. TURNER: Objection.

Q. (By Ms. Wallace) Not true. Okay. Help me understand.

A. The total amount paid by the government is $123.82 per visit. Of that about $99 is going to be paid by Medicare. That's 80 percent of the 123.82 and then about $24, $25 would be paid by TRICARE.

It's what the government is going to pay -- what the table is intended to mean is what the government is going to pay is 123.82 if the primary payor is Medicare and would pay the same amount if the

primary payor was TRICARE.

Q. There are two different departments that control Medicare, which is CMS and TRICARE which is the Department of Defense; correct?

A. Correct.

Q. And so this money will be coming out of two different governmental payor pockets. Is that accurate?

A. Yes.

MR. TURNER: Objection.

Q. (By Ms. Wallace) And so the way that your chart is set up, it's not actually telling me which payor is going to pay which part of that visit. I think the way you have it organized is if it was only TRICARE that this plaintiff had for this nephrologist specialty visit, TRICARE would pay 123.82, and if it was only Medicare that paid for this visit, the Medicare would pay 123.82.

What I don't have or I what I think that you did not calculate was how those two programs, assuming they continue for this plaintiff into the future, how they might work together to make that payment. Is that true?

MR. TURNER: Objection.

A. No, not really. I think it's important to go

through the process of what actually happens.

The plaintiff goes to the doctor the nephrologist, presents their Medicare coverage Medicare ID and their TRICARE ID, and the physician -- the physician's office bills both for the services and identifies the -- identifies the service being provided, but also identifies secondary insurance.

So on the Medicare bill it would indicate that TRICARE was secondary. On the TRICARE bill it would indicate that Medicare was also an insurer, and then between the provider, but mostly through Medicare and TRICARE they would combine as a whole system of payment based on secondary payor that is used, and they would combine -- not literally. Medicare would pay its amount and let TRICARE know how much it had paid and TRICARE would pay the balance.

Q. (By Ms. Wallace) And that analysis is not reflected in this chart?

MR. TURNER: Objection.

A. Well, it wasn't what I wanted to show. I hadn't anticipated the line of questioning you have right now. I just wanted to show how much the total payment would be if Medicare were used or TRICARE were used. That would be the government rate per visit, which is what I was looking to provide.

Given your line of questioning it probably -- I just didn't anticipate it, wasn't thinking about it, but it would be appropriate to provide more detail to answer the questions you are asking me now.

Q. (By Ms. Wallace) Well, the questions I'm asking you now just have to do with how what we can do with your rates.

So I think we are limited based on -- and this is totally fine that we're limited, but we are limited by we don't know what amount, as we sit here today, Medicare might pay for these service lines, and we don't know which amount TRICARE might pay for these service lines.

The way that your chart has it set up it's just either/or -- you calculated a rate for either/or to pay and we don't know whether Medicare is going to pay for the service or TRICARE is going to pay for the service?

MR. TURNER: Objection.

A. That's sort of true, but you are asking a different question than I'm answering. I'm answering the question of how much are government programs going to pay for that service, and for each visit the government programs are going to pay $123.82, and that was the intent of the table.

If you wanted to -- I didn't have a reason in what I was doing to divide it up between how much TRICARE was going to pay and how much Medicare was going to pay. You could calculate it because it's 20 percent of the number up there.

Q. (By Ms. Wallace) But it's not calculated in your current reports?

A. No, no. It wasn't my intent and it's not calculated.

Q. And so when an economist takes a chart like Mrs. Tucks, he or she is only able to calculate the total amount that Medicare would pay for the service or the total amount that TRICARE would pay for the service and he or she would not be able to in a real life application determine if the plaintiff had both insurances how much would pay which and how much would pay the other?

MR. TURNER: Objection.

Q. (By Ms. Wallace) Is that a fair characterization?

MR. TURNER: Objection.

A. I don't know. I don't know what the economist did. My intent was to provide them with information as to how much government would pay and they have that information right there.

Q. (By Ms. Wallace) How much the government would pay if it was all paid under one government payor versus another government payor?

A. Well, it's the same, yeah.

Q. Right?

A. Yes.

Q. And so assuming that the economist is receiving all of her rate information from your charts, she can't make a determination as to how these two programs would work together for the life care plan?

MR. TURNER: Objection.

Q. (By Ms. Wallace) If she projected the numbers for the life of the life care plan?

MR. TURNER: Objection.

A. I don't see why there is a problem. I guess, I'm not following what you are saying.

Q. (By Ms. Wallace) She would have to -- go ahead.

A. The government is paying $123.82. I don't know why the economist would need to know or identify how much TRICARE was paying versus how much Medicare was paying.

Q. Well, because there are -- what we talked about earlier, there is different buckets of payors

for the TRICARE program and the Medicare program, and so if we wanted to actually quantify the projected reimbursement rates of one versus the other, we would have to have a little more detailed information on how the two programs worked together?

MR. TURNER: Objection.

A. I'd say what you are saying is correct, but I would need to know more about exactly what the economists were trying to do and how it all fit together. I don't have that information.

Q. (By Ms. Wallace) Turning back to the TRICARE program, TRICARE does not pay the full billed amount if another insurer is primary. Do you agree?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) Does if a primary insurer does not cover a service, TRICARE's own eligibility rules and coverage rules would apply to determine whether that they compensated -- TRICARE compensated for that service?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) In a situation where no government payor covers the service, did you -- do you have any opinion on how that service would be

compensated by the plaintiff?

MR. TURNER: Objection.

A. You are asking me if there is no government payment?

Q. (By Ms. Wallace) Yes, sir.

A. It would be part of the patient's responsibility, and I wouldn't calculate it.

Q. And in a circumstance where the only government -- the only insurance that the plaintiff had is government, does that mean the plaintiff would personally have to cover costs of that care if he or she wanted to receive it?

MR. TURNER: Objection.

A. I'm not clear on what you are asking me.

Q. (By Ms. Wallace) I'm asking if for in the tables 1 and 2 if it's zeros across the board --

A. Okay.

Q. -- is that a situation where the plaintiff is going to have to come up with the money to pay for that care?

MR. TURNER: Same objection.

A. Yes.

Q. (By Ms. Wallace) You have a paragraph for TRICARE in the applicable plaintiffs sections. Did you draft that yourself --

A. Yes.
Q. -- called the TRICARE coverage?
A. Yes.
Q. And in those paragraphs you state that the Department of Defense -- I'm sorry, TRICARE is funded through the annual defense appropriations bill.
Explain to the Court how that differs from the way that Medicare is funded?
A. Well, Medicare is funded independently. TRICARE is funded as part of the DOD budget.
Q. And Medicare is -- do you know if TRICARE requires every year an annual appropriation in order to continue running?
MR. TURNER: Objection.
A. No, I don't know.
Q. (By Ms. Wallace) Of our -- of the three payors, would you say any of the three are more difficult than the other as it relates to determining the applicable fee schedule or is it all the same?
MR. TURNER: Objection.
A. Interesting question. I look at the Medicare fee schedule much more often so that one is really easy for me.
The VHA and the TRICARE I look at less frequently, so it seems to take a little more effort,

but basically they're all the same.

Q. (By Ms. Wallace) I want to ask you about the aggregations that were done by the economists relying on your charts.

You have testified earlier that you have never seen those analyses?

MR. TURNER: Objection.

Q. (By Ms. Wallace) Is that right?

A. Yes.

Q. If there are -- if their charts take the number that you've quantified and project it for the life expectancy articulated in the life care plan and they do that for each governmental payor, can you clarify for the Court that only one of the governmental payors will be paying on that amount as opposed to a stacking it or an adding up of multiple aggregates?

MR. TURNER: Objection.

A. Well, more than one government payor may pay on each amount, but the total amount paid will not allow for any duplication so that what is shown as we were looking at McElhiney or Tukes the total amount shown on a per-visit basis by Medicare is the total amount that is going to be paid. A portion would be paid by Medicare and a portion would be paid by

TRICARE.

So they wouldn't be stacked, but it may be more than one payor contributing to the total payment.

Q. (By Ms. Wallace) So if the economist stacked the numbers that would be improper? That would be an improper use of your chart; is that right?

MR. TURNER: Objection.

A. I have to see how they made their calculation to answer that question.

(Miller Exhibit No. 15B was marked.)

Q. (By Ms. Wallace) Let's take a look at -- I had previously uploaded Jacqueline Tukes's expert report. I'm going to upload what has been previously marked as Exhibit 15B, which is the Yount economist report for Ms. Tukes, and I'm going to share the pertinent chart on the screen for you, Dr. Miller.

Can you see my screen?

A. I can. I mean, it would be nice if it was a little bigger.

Q. I'd be happy to. How is that?

A. Okay.

Q. Please let the record reflect that I'm showing the witness -- oh, they're not numbered. They're not Bates stamped. This is page 9 of 18, table 2 entitled Jacqueline Tukes cost to government

projected medical offsets. Do you see this chart?

A. I do.

Q. And are you able to tell how Ms. Yount calculated the total cost identified?

MR. TURNER: Objection.

Q. (By Ms. Wallace) It appears that it has both columns for annual cost of TRICARE as well as annual cost of Medicare. Do you see that?

A. I do.

Q. Does it appear that she stacked your chart analysis in her numbers?

MR. TURNER: Objection.

A. No, I'm pretty good at doing math in my head, but not this good. It doesn't look like they stacked them.

Q. (By Ms. Wallace) What do you think that she did based on your economics background and review of the chart?

MR. TURNER: Objection.

A. Well, the annual cost of the nephrologist is $239 and it's for 17 years. The total would be 17 times 239, which is about $3,800, but there is a 2.05 percent increase per year. That would give you the 4,793.

If you had stacked them, the number would be

much higher. It would be 239 plus 239, which would be 478 for 17 years, which would be closer to -- well, it would be double the 4,793. So just looking at that one, it doesn't look like it's stacked.

Q. (By Ms. Wallace) What about -- do you know which cost she's using in her report? Do you know if he's using the TRICARE identified costs or the Medicare identified costs?

MR. TURNER: Objection.

A. Well, for the therapeutic needs it doesn't matter. You are using one or the other because they're the same.

Q. (By Ms. Wallace) But some of the numbers are different?

A. Right.

Q. Pretty significantly so?

A. The annual cost for your analysis -- most of them are actually not that different with the exception of a couple. Urinalysis is quite different?

Q. Is the difference between $446 and $38?

A. Yeah.

Q. And this Tacrolimus for the drugs is the difference between $7,643 and $1,591?

A. Yes. On the drugs there is more of a difference.

Q. Do you know which one she used if she's --
MR. TURNER: Objection.
A. I don't.
Q. (By Ms. Wallace) And so let's look at Tacrolimus to see if we can figure it out.
If you take 1,000 -- the Medicare is 1,591 times 17 years, that's an amount of $27,047, which is less than the total present value of that figure.
So can we assume that she's applying the higher reimbursement number?
A. No.
MR. TURNER: Objection.
A. No, because the higher number the 7,643 that would be 129,000. So the higher number is much -- would produce a much higher number than here. I think if you took -- if you take the average of the two, it comes out to 78,000, which is a lot higher.
So I don't know -- I can't tell you what she did here. But she did not use the higher number and she didn't use the lower number.
Q. (By Ms. Wallace) You don't know the methodology by the economist that relied on your charts. Is that accurate?
MR. TURNER: Objection.
A. That's correct.

Q. (By Ms. Wallace) And therefore, you don't have an opinion as to whether the totals or present values are accurate as it relates to the projected medical offsets identified by the economists.

Do you agree with that?

MR. TURNER: Objection.

A. I couldn't tell you whether they're accurate or inaccurate based on the data in front of me.

Q. (By Ms. Wallace) And without more analysis, you can't tell me whether your charts were applied on the aggregate as you intended or whether they have not been?

MR. TURNER: Objection.

Q. (By Ms. Wallace) Is that true?

A. Yes, I can't tell you that.

Q. We do know based on your charts that only one -- we do know that your charts did not analyze how the government benefits would work together to pay for the services identified in the life care plan; correct?

MR. TURNER: Objection.

A. That was outside my scope. Correct.

Q. (By Ms. Wallace) And so as we look at this economist's chart, we're really not reliably able to tell which government payor would cover which service

in the future unfortunately?

MR. TURNER: Objection.

Q. (By Ms. Wallace) Is that true?

A. Other than the chart intending to show that and you certainly couldn't do it.

Q. If the chart is intending to give the Court an offset amount based on your rates in the future, do you have any way of knowing based on this chart whether that's the total offset that would go to Medicare versus TRICARE?

MR. TURNER: Objection.

A. Not from this chart.

Q. (By Ms. Wallace) And the economists wouldn't have had what they needed to be able to make that distinction based on your charts; is that true?

MR. TURNER: Objection.

A. I don't have any idea what the economists knew or didn't know.

Q. (By Ms. Wallace) Assuming the economists only had your chart and they testified that they relied on your charts and your testimony and your expert report, they would not have had what they needed in order to show what Medicare would pay for the services in conjunction with TRICARE?

MR. TURNER: Objection.

A. I think that's -- that's correct. I think they made their own set of assumptions and I don't know what they are.

Q. (By Ms. Wallace) Let me ask you one more question about Exhibit 15B. Table 3 represents the cost according to Ms. Yount the cost to government of Fryar's life care plan.

That is one of the life care plans that you evaluated for Ms. Tukes; correct?

A. Correct.

Q. And we see again that table 3 has inserted your rates under TRICARE. Is that true?

MR. TURNER: Objection.

A. Well, I'd have to go back and check them. They look like that's the case.

Q. (By Ms. Wallace) We have just looked at the nephrologist per visit rate, and it was the $123.82. Do you recall that?

A. Yes.

Q. Is that -- do you see that on here?

A. No.

Q. Do you know how she took your $123.82 and extrapolated it for this chart?

MR. TURNER: Objection.

A. I do not.

Q. (By Ms. Wallace) It looks like it's -- so you don't how the 1,610 was reached?

MR. TURNER: Objection.

A. Not looking at this chart, I do not.

Q. (By Ms. Wallace) The chart that you have for Ms. Tukes indicated under frequency as described in the LCP 13 outpatient clinic visits in total.

Do you have any opinion on how that should have been applied to the unit cost that you identified in your chart?

MR. TURNER: Objection.

A. No, I have not only not read this report, I haven't seen this report. I can't tell you how it relates to my report without doing that.

Q. (By Ms. Wallace) And again in the table 3 we don't know which -- we don't know which payor or the contributions of each would be accurate in the future for Ms. Tukes; is that true?

MR. TURNER: Objection.

A. I wouldn't say we. I don't know. I'm sure that Ms. Yount knows.

Q. (By Ms. Wallace) You are sure she knows what?

A. What the answer to your question, what the accurate amounts are. You are asking me about

something I don't know anything about.

Q. Well, it's like a little bit of a circular argument because we've taken her testimony and she said that all of her opinions regarding this chart are fully reliant on you and your rates, but the two don't seem to be working together.

MR. TURNER: Objection.

Q. (By Ms. Wallace) My question for table 3 is that do you have any professional opinion as to whether the projected medical offsets within Ms. Yount's report for Ms. Tukes are reliable and racket?

MR. TURNER: Objection.

A. I have no opinion on it.

Q. (By Ms. Wallace) And it would require much more time and analysis in order to make the determination as to whether you agree with her charts in whole or in part. Is that fair?

MR. TURNER: Objection.

A. I don't know that it would take much more, but certainly some more.

Q. (By Ms. Wallace) Are your numbers for the unit rates as you've put them on your chart today intended to be averaged together?

MR. TURNER: Objection.

A. They made no assumption one way or the other about that. I just presented the numbers.

Q. (By Ms. Wallace) And the way that you identified your charts is you have put Medicare rates in one bucket and TRICARE rates in another bucket. There wasn't any intent for those costs to be averaged as it relates to your charts?

MR. TURNER: Objection.

A. I didn't have such intent one way or the other whether they be average or not.

Q. (By Ms. Wallace) And you also don't give any direction as to in your charts which rate should apply to which service in whole or in part. That would be an exercise that someone else would have to make or a determination someone else would have to make if they wanted to quantify the future cost for the government. Is that fair?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) So you have not independently verified the -- that your rates were used properly within the DOJ economists' reports; is that true?

MR. TURNER: Objection.

A. That's true.

Q. (By Ms. Wallace) And you haven't performed any economics analysis as it relates to the life expectancy used for the duration in the economists' charts or any of the calculation assumptions that were applied?

MR. TURNER: Objection.

A. That was not within the scope of my work.

Q. (By Ms. Wallace) So you are not offering an opinion that the projected medical offsets in the plaintiffs' report are accurate; is that correct?

MR. TURNER: Objection.

A. I'm not offering any opinions on the economists' report whatsoever.

Q. (By Ms. Wallace) You are offering an opinion that the rates identified in your report are accurate as of the time that you pulled them related to each governmental payor; is that right?

A. Yes, that's correct.

MS. WALLACE: I can't believe we're at an hour again. I'm having so much fun, Dr. Miller. We're going to take a 5- to 10-minute break.

THE WITNESS: Okay.

THE VIDEOGRAPHER: We're off the record at 3 p.m.

(Break taken from 3:00 to 3:14 p.m.)

THE VIDEOGRAPHER: We're back on the record at 3:14 p.m.

Q. (By Ms. Wallace) Before the break, Dr. Miller, we were looking at the economist's report associated with Ms. Tukes. Do you recall that?

A. I do.

Q. And I'm going to share 15B on the screen for you. One more moment and I'm going to read to you her language under the paragraph entitled offsets future medical expense.

Henry Miller, Ph.D. managing director in the health analytics practice of Berkeley Research Group, LLC provided a report dated December 15, 2025, identifying the amount of Mr. Shahnasarian's reports that would be paid by Medicare and TRICARE on behalf of Ms. Tukes.

Utilizing the same growth rates and discount rates described above, the total present value of the cost provided in Dr. Miller's report equals $110,100 (table 2.) This represents the amount of offset to apply to the present value of future medical care as presented in Dr. Shahnasarian's report?

Are we able to glean any additional information from that paragraph to explain how Ms. Yount approached the development of the charts

that we just reviewed?

MR. TURNER: Objection.

A. I don't think so.

Q. (By Ms. Wallace) As it relates to Medicare and TRICARE, does it appear that she has analyzed those payment sources in tandem?

MR. TURNER: Objection.

A. I don't -- I don't know. Her sentence says -- just picking up in the middle of it identifying the amounts in Dr. Shahnasarian's report that would be paid by Medicare and TRICARE on behalf of Ms. Tukes. That doesn't tell me anything about how she did it. Does it appear from that language that she calculated both of those together.

MR. TURNER: Objection.

A. I don't know. Not to me.

Q. (By Ms. Wallace) Do you have an opinion on how she calculated them separately?

MR. TURNER: Objection.

Q. (By Ms. Wallace) Did you answer, Doctor? I'm sorry.

A. I said no.

Q. Oh, okay. Thank you. I thought you were thinking.

A. No, sorry.

Q. No problem. The second paragraph similarly will you read that and let me know if that provides you any additional foundation to understand how the economist utilized your rates?

MR. TURNER: Objection.

A. It does not.

(Miller Exhibit No. 12 was marked.)

Q. (By Ms. Wallace) Thank you. I wanted to take a look at your expert report in the matter of plaintiff Bruce Hill, and I will upload into the chat his report which I have previously identified as Exhibit 12.

Do you recognize this report?

A. Yes.

Q. This is the second report you produced for Mr. Hill; is that right?

A. That's correct.

Q. And if you go to the content section, it appears that this was a -- you were asked to make the assumption that Mr. Hill had both Medicare and VHA as a government payor; is that right?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) And the -- we talked earlier about each of your reports contains the same

structure such as an introduction, background of the case, scope of report, and then depending upon the government payor, you have a section that describes that program; is that right?

A. Yes.

Q. And in the case Plaintiff Hill for Medicare I see that you noted in the second paragraph that he has a $2,220 annual premium for part B; is that right?

A. Yes.

Q. And does he have a premium for part D coverage to your knowledge?

A. I imagine he does, but that -- that can vary.

Q. And it doesn't have a standard like the part B one that you've identified?

MR. TURNER: Objection.

A. Not in the same way, no.

Q. (By Ms. Wallace) Not in the same way?

A. Correct.

Q. And then for paragraph 5 you have a summary of the Veteran's Health Administration coverage we've talked about earlier in your testimony?

A. Yes.

Q. And then we go down to your methodology sections, and you have two separate methodologies identified, one for Medicare and one for VHA rate.

Were those used, as you described them earlier in your testimony?

A. Yes.

Q. And finally we get to your tables. Table 1 is the application of Michael Fryar's life care plan to Mr. Hill; is that right?

A. Yes.

Q. And for this particular plaintiff there were a number of uncovered services in his life care plan identified by Mr. Fryar.

Do you agree with me?

MR. TURNER: Objection.

A. I do.

Q. (By Ms. Wallace) So both Medicare and VHA do not cover the housekeeping services or landscaping services identified in Michael Fryar's report?

A. That's correct.

Q. And attendant care services were not covered by Medicare, but are covered by VHA. Is that accurate?

A. Yes, it is.

Q. The rate that you identify there $36, is that per hour? Help me understand that rate.

A. That's an hourly rate.

Q. And is that for a qualified home health aide

or certified nursing assistant, or what rate did you and your team use for VHA on that?

A. Well, as you can see, it's for a home health aide for a certified nursing assistant, and those are credentials and so it's for somebody with that credential.

Q. And Medicare would not cover any of that cost for this plaintiff?

MR. TURNER: Objection.

A. That's correct.

Q. (By Ms. Wallace) And there is a distinction between the reimbursement rate for skilled -- is it skilled nursing? What does SNF stand for? I should know that.

A. A skilled nursing facility.

Q. Facility. Thank you. So for skilled nursing facility there is a different rate for Medicare than VHA with VHA being a higher rate for the first 100 days and then the only rate available after 100 days; is that true?

A. Yes.

Q. Do you know how the economists used the numbers that you identified in this chart in order to come up with the projected offset amount?

MR. TURNER: Objection.

A. No.

Q. (By Ms. Wallace) Do you know if the economist was able to combine the two insurance payors to understand which payor would pay for which services or in what proportions?

MR. TURNER: Objection.

A. No.

Q. (By Ms. Wallace) And stated simply in your -- in your summary of opinion section, which is on page 15 of your report.

This report is based on information known to me as of this date. I have analyzed the information provided to me for Mr. Hill and assessed publically available data to arrive at my opinion as to the rates for care covered by Mr. Hill's insurers.

And I wanted to confirm these are the rates for Medicare and VHA at the present time and you did not do any projections of how those rates may change in the future; is that right?

A. Yes. They're they are for the latest available time period, and I did no projections on future rates.

Q. The life care plan identified by Ms. Navarro was a little more detailed in this case according to your chart?

A. Yes.

Q. All of the CPT codes listed, do you know if those were provided by Ms. Navarro or by you and your team?

A. I believe they were provided by Ms. Navarro, but I don't know that I remember specifically, but I think she provided them.

Q. When the two asterisks that you have on your report that states functions denote how rates were included CPT codes should be combined, can you tell me what that means?

A. Yeah, there are certain services -- let's see what we got here. I guess that's on the other page.

Q. It looks like it's at the top of your CPT code.

A. Yes. I guess you can see for the blood analysis there are multiple rates.

Q. What does that mean functions denote? Like is it some kind of a calculation?

A. Right. Well, the functions aren't the purpose of the service or the tests. Those tests are all done together, but they have different CPT codes. So you need to combine them.

Q. You issued in your report a statement that you are not certain whether Mr. Hill elected part D

coverage and yet we have the rates of the drugs analyzed in this report, and I just wanted to confirm that your reports are making the assumption that Mr. Hill is a part D elected beneficiary?

MR. TURNER: Objection.

A. Yes, that's correct.

Q. (By Ms. Wallace) So if he does not elect part D, these reimbursement rates would not apply?

MR. TURNER: Objection.

A. Well, if he doesn't have part D, he would have to pay it himself.

Q. (By Ms. Wallace) Right. For personal care attendant I noticed that the VHA rates states $36 and I wanted to confirm that's per hour; is that right?

A. Yeah, and it says that in the third column.

Q. I see it. Thank you. And the same here then the daily rate is $456.40 for skilled nursing facility for the first 1 to 100 days?

A. Correct.

Q. What happens if the skilled nursing facility has charges in excess of that number?

MR. TURNER: Objection.

A. Within the first 100 days?

Q. (By Ms. Wallace) Yes.

A. Well, it doesn't work like that. Sorry.

Little confused by the question.

Q. Well, and what I'm asking is would somebody else have to pick up the extra --

A. No.

Q. -- cost? No. Let me ask it in the reverse and see if this makes more expense.

What if Medicare paid for the first 1 to 100 days at the skilled nurse facility at a rate of $395.07, would VHA kick in to pay more, or it also does not work that way?

MR. TURNER: Objection.

A. No, it doesn't work that way.

Q. (By Ms. Wallace) Either one or the other pay?

A. Either one or the other, yes.

Q. Okay.

A. And if the amount of the charge is higher, it doesn't matter. That's the rate.

Q. Understood. Thank you. Did you analyze for Mr. Hill how what proportion of Medicare and VHA rates like how they would work in tandem, or do these two payors not work in tandem similar to the TRICARE and Medicare example that we used earlier?

MR. TURNER: Objection.

A. They would work in tandem.

Q. (By Ms. Wallace) Do we or the economists have an understanding based on your charts of how those two programs might work together in reality for this patient?

MR. TURNER: Objection.

A. Well, my report doesn't address that. As far as the economists' reports go, I don't know. Like I said I haven't seen them.

Q. (By Ms. Wallace) And so from your chart we're not able to tell which government payor will pay for which of these services into the future?

MR. TURNER: Objection.

Q. (By Ms. Wallace) Is that right?

A. That's correct.

Q. And you testified earlier you have no knowledge as to how the economists may have used your chart; right?

MR. TURNER: Objection.

A. That's correct.

Q. (By Ms. Wallace) The other costs that are identified as zero such as adaptive aids, personal care attendant, lawn maintenance services for Medicare, if -- do you know if Medicare does not cover those and VHA does, would you -- do you make the assumption that the VHA would pay for that or not

necessarily?

A. You are talking specifically about the line miscellaneous adaptive aids?

Q. Let's talk about the line personal care attendant.

A. I'm not -- I don't know what you are referring to.

Q. If Medicare doesn't cover the personal care attendant, can we assume -- can we assume that the VHA would pick that up or that's not exactly how it works?

A. No, I think we can assume that.

Q. Did -- there are certain criteria that come into play based on Medicare reimbursement policy as it relates to home healthcare. Do you agree with me?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) Did you do any type of an analysis to discern whether the plaintiff in the future might meet those criteria in order to have that reimbursement covered?

MR. TURNER: Objection.

A. Well, sort of. The analysis wasn't made as to what the patient would need in the future. The analysis was made as to what is included in the life care plan. So I assume, you know, we're talking about

the future, and there is no home care in here. It's all personal care attendant. So there is no home care covered by Medicare. So it would only be covered by VHA.

Q. (By Ms. Wallace) Or let me ask you that question more broadly then. Did you perform an analysis for any of the plaintiffs as to whether they would meet the criteria of for Medicare to cover their home health aide?

MR. TURNER: Objection.

A. The criteria would not -- wouldn't matter. If the service required was a home health aide, it would not be covered. A home health aide is a type of personal care attendant as-is a certified nursing assistant.

In order for it to be covered by Medicare, there has to be a nurse or an LPN that is supervising care, and then there can be an assistant below that, but that assistant wouldn't a personal care attendant.

So to the extent that that information was relevant, it was included.

Q. (By Ms. Wallace) Medicare requires patients to be homebound to qualify for home health services?

MR. TURNER: Objection.

A. Well, yes. But if they're homebound and do

not require the care of a registered nurse or a licensed practical nurse, it doesn't matter that they're homebound. They have to require that care in order to be covered by Medicare.

Q. (By Ms. Wallace) And you don't have any of the details for how -- or if they can meet that criteria in the future; is that true?

MR. TURNER: Objection.

Q. (By Ms. Wallace) I mean, you would assume that they do?

MR. TURNER: Objection.

A. The -- I did have information to support that. If the life care plan identifies a nursing need and identifies a cost of a nurse, then that would be what I'd be looking for.

In this case for Hill it only identifies a personal care attendant and no other home health provider. So I know that that's not covered by Medicare. Once I see an RN or LPN, I know it can be covered by Medicare.

Q. (By Ms. Wallace) So and the difference between the rates that the life care plan identified versus the rates that you've identified is yours is payor specific, and each payor has their own rules and criteria in order to qualify for this service, and so

I'm asking you whether you are able to predict in the future whether the home health rates -- the home healthcare as the plaintiff will receive it is how they might meet the criteria of the government payors?

MR. TURNER: Objection.

A. Well, the life care planners have made that decision. If the life care planners identify home healthcare that includes nursing supervision, that's all I need to know to know whether it is covered.

I'm using whatever is in the life care plan. Life care planner is saying that that's a Medicare covered service, and so I'm picking it up from there.

If they don't have nursing supervision, then they don't qualify for Medicare. There may be some other things involved as well, but that's the key -- the key issue.

Q. (By Ms. Wallace) You so you are assuming base on the life care plan that they meet the criteria to pay for that by the government payor?

MR. TURNER: Objection.

A. I'm not assuming it. I'm picking up on the life care planner's assumption. If they assume it, then I'm assuming it.

Q. (By Ms. Wallace) Okay. But there are different eligibility criteria for getting certain

services paid for by Medicare. You agree with that?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) Okay. And you didn't have access to any of the medical records to better understand the need or criteria of the plaintiffs; is that true?

MR. TURNER: Objection.

A. That's correct.

Q. (By Ms. Wallace) You did not calculate any patient responsibilities or payments for this plaintiff; correct?

MR. TURNER: Objection.

A. Well, for this plaintiff or any other plaintiff.

Q. (By Ms. Wallace) Right.

A. That's correct.

Q. And the extent of your opinions are contained within this report. You did not do a projected offset related to either of these government payors; correct?

MR. TURNER: Objection.

A. Yes.

(Miller Exhibit No. 12B was marked.)

Q. (By Ms. Wallace) Okay. Let's take a quick look at Exhibit 12B, which I am uploading into the

chat feature.

This is the economist's report associated with your tables, and this is from a different economist. This is actually from an economist with the last name Tosic. You've not had any conversations with this economist?

A. I know who she is because she also works at BRG, but no, I've not had any conversations with her about this work -- actually any work.

Q. Do you have any understanding of how she took your tables and applied them to this estimated present value projection using low quantity range?

A. No.

MR. TURNER: Objection.

Q. (By Ms. Wallace) And so you don't have an opinion on the reliability or accuracy of her totals?

MR. TURNER: Objection.

Q. (By Ms. Wallace) Or offsets?

A. Well, this is the first time I'm seeing it, so no.

Q. And the same would be true for her tables 9, 10, 11, 12, 13, 14, 15, 16?

MR. TURNER: Objection.

A. Well, all I see is 9 and 10, but I'm sure it applies to the other tables as well.

Q. (By Ms. Wallace) Okay. And she did something a little bit different than Yount. She separately calculated VA rates versus Medicare rates, and I can scroll down and show you that and she came up with different totals.

Do you have any idea how she projected VA and Medicare to work in tandem in the future to cover the future medical costs?

MR. TURNER: Objection.

A. No.

Q. (By Ms. Wallace) Do you know whether both the VA and Medicare would pay on for Mr. Hill in the future or whether it's one or the other?

MR. TURNER: Objection.

A. Generally speaking it's one or the other. There probably are exceptions to that.

Q. (By Ms. Wallace) And to what extent one will pay versus the other in the future that is not a calculation that you performed; correct?

MR. TURNER: Objection.

A. That's correct.

Q. (By Ms. Wallace) She calculated a low quantity range and a high quantity range for certain services. Do you have any idea why she did that?

MR. TURNER: Objection.

A. No.
Q. (By Ms. Wallace) All of the VA rates for Bruce Hill as well as all of the other plaintiffs again they -- your analysis made no distinction as to whether that care occurred in a VA facility versus if it occurred outside of a VA facility; correct?
MR. TURNER: Objection.
A. That's correct.
Q. (By Ms. Wallace) And so the VA numbers in your chart are the reimbursement figures associated without of the VA facility care; is that true?
MR. TURNER: Objection.
A. I don't know what you mean.
Q. (By Ms. Wallace) The rates that you used for the VHA, they are the rates that are used if a -- if a patient receives care not in a VA facility?
A. That's correct.
Q. If the DOJ economists used the rates in your charts that just represented a point the current rate for that service, do you have any idea how she adjusted for the unpredictability of rate changes to the Medicare and VA system in the future?
MR. TURNER: Objection.
A. No.
Q. (By Ms. Wallace) Is that the same for all of

the plaintiffs?

MR. TURNER: Objection.

A. Yes.

(Miller Exhibit No. 13 was marked.)

Q. (By Ms. Wallace) Let's look at the expert report for Jimmy Laramore. I'm going to upload into the chat Exhibit 13. Mr. Miller, is this your second expert report for Jimmy Laramore?

A. Yes.

Q. And we found out from the second page that -- I think that might be a typo. It says in 6.1 methodology for services and supplies within Medicare and CCN/VHA rate. But your assumptions for Mr. Laramore are VHA and CCN?

MR. TURNER: Objection.

A. I'm sorry. That is a typo.

Q. (By Ms. Wallace) No worries. And so you analyzed just VHA benefits for Mr. Laramore; correct?

A. Yes.

Q. Do you have any knowledge as to whether Mr. Laramore typically receives his medical treatment within the VA hospitals surrounding him or through the Community Care Network program?

MR. TURNER: Objection.

A. No.

Q. (By Ms. Wallace) Did you do any type of an assessment for physician availability within his geographic area as it relates to the services on his life care plan?

MR. TURNER: Objection.

A. No.

Q. (By Ms. Wallace) Is this another example where the costs that you developed for Mr. Laramore follow the Community Care reimbursement rates as opposed to an independent determination on what the costs would be to the government if he received the care inside of a VHA facility?

MR. TURNER: Objection.

A. The answer to that question is yes.

Q. (By Ms. Wallace) And it looks like in Table 1 for Mr. Fryer's life care plan you have identified the Community Care Network rate which would be paid for by the VHA for options 1 and 2; is that right?

A. Yes.

Q. Do you have any knowledge as to how the economists applied your numbers for projections in the future based on his life care plan?

MR. TURNER: Objection.

A. No.

Q. (By Ms. Wallace) So you cannot testify or

opine as to the accuracy of what the economists did with your identified rates?

MR. TURNER: Objection.

A. No.

Q. (By Ms. Wallace) You can confirm that all of the services identified on the life care plan would be paid for by the VHA in this case?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) Do you have any knowledge as to whether Mr. Laramore has access to any other medical insurance?

MR. TURNER: Objection.

A. I don't have any such information.

Q. (By Ms. Wallace) And for table 2 Ms. Navarro's life care plan added two services of cystoscopies and CT urograms; correct?

A. Yes.

Q. Do you know whether these CPT codes were provided by Ms. Navarro or your team assisted in pulling those?

A. I don't remember. I'd have to go back and look.

Q. Do you have any other opinions related to Mr. Laramore that are not contained within your

report?

MR. TURNER: Objection.

A. No.

Q. (By Ms. Wallace) Are you offering the tables in your report as a measure of damages or merely as information regarding how much the government programs would reimburse?

MR. TURNER: Objection.

A. The latter, how much the government programs would reimburse. It was outside the scope of my work to measure damages.

(Miller Exhibit No. 14 was marked.)

Q. (By Ms. Wallace) Let's look at the expert report for Mr. Mousser, which I'm going to upload in the chat as Exhibit 14.

Do you recognize this document as your second report for Frank Mousser?

A. I do.

Q. And we found out in the second sentence that he has it's just VHA coverage even though the methodology mentions Medicare?

A. Yeah.

Q. And that was an assumption given to you by the DOJ?

MR. TURNER: Objection.

A. That's correct.

Q. (By Ms. Wallace) And it looks like you compared or you itemized the reimbursement rates for two life care plan reports for Mr. Michael Fryar and Michael Shahnasarian?

A. Yes.

Q. Do the -- did you apply the same methodology to the VHA rates and Mr. Mousser's report as you've testified to earlier today?

A. Yes.

Q. We are looking now at Table 1 which extends two pages for Mr. Mousser.

The CPT codes, do you know if those were in Mr. Fryar's life care plan for CPT codes you and your team pulled?

A. They were in Mr. Fryar's report.

Q. For Mr. Fryar's life care plan, there is one item of home cleaning service that VHA does not cover.

Was that -- is that accurate based on the read of your chart?

A. Yes.

MR. TURNER: Objection.

A. It is.

Q. (By Ms. Wallace) And so if the plaintiff needs that due to his disability and cancer condition,

it would not be covered under the VHA. He would need to pay for that out of pocket or through another source?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) Would you expect the VHA benefit to Mr. Laramore to last for the remainder of his life expectancy?

MR. TURNER: Objection.

Q. (By Ms. Wallace) If you know.

A. I assume it would.

Q. For Table 2, which is much smaller than the Fryar life care plan, you quantified the unit reimbursement rates for a one-time urologist follow-up and a cystoscopy and one-time CT scan of the bladder?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) Do your charts differentiate whether the plaintiff will receive the services identified inside a VA facility or outside of a VA facility?

MR. TURNER: Objection.

A. No.

Q. (By Ms. Wallace) Like the other plaintiffs that we've discussed, are you able to opine as to the

accuracy of the economist's evaluation of the life care plan and projections based upon your charts?

MR. TURNER: Objection.

A. I cannot.

Q. (By Ms. Wallace) Let's look at -- we already looked at Ms. Tukes. Let me make sure I don't have any other questions for you on that one. Okay.

Ms. Tukes, yes, let's look at Ms. Tukes one more moment. She is I'm going to repull up on the screen for you Exhibit 15. I want to direct your attention to -- I'll show you the paragraph. It starts with -- here it is on page 7.

It says, Ms. Tukes will always have both Medicare and TRICARE coverage that will act as primary or secondary insurance. Ms. Tukes became eligible for Medicare prior to turning 65 due to her diagnosis of end-stage renal disease in June 2023.

Let me ask you a question about that briefly. She since, as you indicated in the next sentence, she received a transplant.

Does she always stay eligible before 65 because she was ever diagnosed with end-stage renal disease or if she gets a transplant and is no longer in end-stage renal disease, does she lose Medicare eligibility for that reason?

MR. TURNER: Objection.

A. I believe she retains eligibility if she's had a kidney transplant.

Q. (By Ms. Wallace) Did you use the word retains or regains?

A. Retains.

Q. Retains. Meaning so just because she got a kidney transplant and is no longer in end-stage renal disease you opine that she'll be able to keep her Medicare despite not yet being 65?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) And continuing on in the paragraph you said Medicare is expected to become her primary insurance when she turns 65 on February 2030 and is the assumption there that until that time TRICARE is primary?

A. Yes.

Q. And so interestingly she flops again. Let's keep reading. She's a complicated case.

It says -- in my mind -- rates have been provided in Tables 1 and 2 to identify the difference between what Medicare and TRICARE would pay for each service. The amount that will be paid will be determined based on where Ms. Tukes seeks medical

care. And why is that?

A. Well, it's really the provider. It is certainly possible for a plaintiff to go to a provider and only present Medicare coverage or only present VHA coverage, but that's not the way it usually works.

They'll present both and the provider will actually decide who to bill. The plaintiff doesn't make that decision.

Q. So oh, I'm on sorry. I thought you were finished.

A. So it's wherever she gets her care that is going to be the determinant because that's where the provider is.

Q. The amount that will be paid will be determined based on where Ms. Tukes seeks medical care and which insurance provides primary coverage?

A. That's correct.

Q. And so when we're -- let's assume that an economist is trying to project which entity government payor is going to pay for her treatment in the future TRICARE or Medicare.

Do you have any way of knowing which one will pay for the treatment identified on her life care plan?

MR. TURNER: Objection.

A. I don't.

Q. Which rate will be payable depends on where and when Ms. Tukes will receive the recommended care; is that true?

MR. TURNER: Objection.

A. That's correct.

Q. (By Ms. Wallace) And as we sit here today, it's impossible to know at which point she'll need which service and which government payor will be primary at that point in time; is that true?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) And in a circumstance such as Ms. Tukes she has both Medicare and TRICARE at the same time, but because of the very interesting interplay between her eligibility for Medicare and TRICARE and which one is primary during which period it's a heightened difficulty making that prediction in this particular case. Would you agree?

A. Yeah, I agree.

Q. I wanted to also ask you this paragraph in Ms. Tukes's report. It's on page 9 and it's under the section methodology for services and supplies with the TRICARE rate.

I determined TRICARE rates for physician

services, radiology services and laboratory services using TRICARE's Champus maximum allowable charges fee schedule which is based on the maximum amount TRICARE is allowed to pay for each procedure and are tied by law to Medicare's allowable charges.

Does the maximum allowable amount is that -- how reasonably do we know if that's the amount that would be paid under TRICARE?

MR. TURNER: Objection.

A. Well, unless there is a mistake, that's the amount that would be paid.

Q. (By Ms. Wallace) Okay. And so they always pay the maximum allowable amount; is that right?

MR. TURNER: Objection.

A. Yeah. It's the maximum amount that TRICARE is allowed to pay. So it is conceivable that TRICARE's -- it's within the realm of possibility that TRICARE's maximum amount is lower than the Medicare fee schedule amount or allowed amount. It's possible, but very unlikely. So for the vast majority of instances, the Medicare rate which would be the allowable charge as described here would be the amount paid.

Q. (By Ms. Wallace) The Medicare rate would be the amount paid because the Medicare rate equals the

maximum amount TRICARE is allowed to pay?

MR. TURNER: Objection.

A. In almost -- well, in most instances. I would say almost all I'd say that's fair.

Q. (By Ms. Wallace) Your next sentence states these rates do not represent coverage policy or payment approval. Rather, they reflect calculated amounts based on Medicare data or TRICARE claims history which is specific to procedure locality and year.

Will you help me understand that sentence please?

A. Well, it's the rate. It does not -- if there are aspects of coverage policy for a specific service or procedure that those would not be considered here. These will be the rates that would be paid under the vast majority of instances, and as far as the payment approval goes, it's, you know, there is the issue of the whether or not the service is approved, and there are other similar distinctions relating to the reasonableness of service being provided in some instances.

So what it says that -- I'm using the full payment rate, although there could be exceptions for coverage policy or payment approvals, but it doesn't

say this. I'm doing it because those would be unusual.

Q. But they do occur?

A. They can occur.

Q. Your rates that you've identified in the plaintiff's tables 1 and 2 you are not guaranteeing payment approval for those rates by the government agencies; correct?

MR. TURNER: Objection.

A. That's correct.

Q. (By Ms. Wallace) And you don't have an opinion about any coverage determinations or exception that may be made; is that correct?

MR. TURNER: Objection.

A. Also correct, yes.

Q. (By Ms. Wallace) And TRICARE has it's own list of medical necessity criteria?

MR. TURNER: Objection.

A. Yes, it does.

Q. (By Ms. Wallace) And you did not perform an individual analysis for these plaintiffs on that -- with regard to that; correct?

MR. TURNER: Objection.

A. I did not. If it was in the life care plan, I assumed it was medically necessary.

Q. (By Ms. Wallace) The bottom paragraph on the page, page 9, and I have not seen this in your other reports, I think. It has to do with your methodology to identify TRICARE rates for medications.

I relied on the Express Scripts TRICARE formulary to identify if a medication was covered. Because the formulary only shows coverage, I assume TRICARE would pay the rates listed in Ms. Tukes' life care plan for medications covered in the formulary.

I don't have an understanding -- and I'm hoping that you do -- as to whether the drug coverage under TRICARE is an opt-in election such as part B for Medicare or whether she is automatically enrolled in the trial coverage?

A. My understanding is that she would be automatically enrolled.

Q. Does it depend on the plan that she has for TRICARE?

MR. TURNER: Objection.

A. That's my understanding, yes.

Q. (By Ms. Wallace) And but your charts assumes that she is enrolled in a plan that covers drug care; is that correct?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) Is -- when you say because the formulary only shows coverage, what does that mean?

A. It's -- it shows whether a drug is covered as opposed to what its price might be.

Q. And then you had to go somewhere else to look up the price?

A. Yes.

Q. And that place was the where?

A. Well, it says right there. Using information specified in the life care plans including drug dosage and beneficiary information and then the drug prices are on the Medicare pharmacy.

Q. So you are using Medicare pricing for the drugs not a unique TRICARE fee schedule?

A. Well, I'm using the TRICARE to determine whether or not the drug is covered, but I'm using Medicare as the source for the rate for the fee information.

Q. And didn't you testify earlier that TRICARE has its own rate system it's based on Medicare, but they actually have their own fee schedule?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) So is that different for

drugs?

A. Yes.

Q. That's an exception to that general methodology you gave earlier?

A. Yes.

MR. TURNER: Objection.

Q. (By Ms. Wallace) Are there any other exceptions that we have not talked about as far as that TRICARE methodology?

MR. TURNER: Objection.

A. Well, there is certain services covered by Medicare, and I mean not covered by Medicare.

So therefore there is no Medicare rate, but there may be a TRICARE rate if TRICARE covers it, but that's not a systematic difference. That's just occurs from time to time.

MS. WALLACE: Okay. I think we have to take another break. But I'm very close to being finished if you -- if you guys want to take 5 minutes and then we will push through?

THE VIDEOGRAPHER: We're off the record at 4:15 p.m.

(Break taken from 4:15 to 4:21 p.m.)

THE VIDEOGRAPHER: We're back on the record at 4:21 p.m.

(Miller Exhibit Nos. 16, 16B-19 were marked.)

Q. (By Ms. Wallace) Dr. Miller, for efficiency sake, I am uploading into the chat the last four expert reports for the plaintiffs that we're going to be discussing in this last segment.

That would be the -- your expert reports for Gary McElhiney, Edgar Peterson, Diane Rothchild, Richard Sparks, and I also uploaded as Exhibit -- and those are Exhibits 16, 17, 18 and 19 respectively, and I also uploaded what has been previously marked as Exhibit 16B, which is the economics report for Mr. McElhiney.

And I'm going to put Mr. McElhiney's expert report on the screen for you. Do you recognize this report as your second report for Mr. McElhiney?

A. I do.

Q. And if you recall, Mr. McElhiney is the only plaintiff that had all three government payors. Is that your recollection and also be on the screen on page 2?

A. Yes.

Q. Are you able to tell us which government payor will pay in the future for the life care plans of that were identified for him?

MR. TURNER: Objection.

A. No, as we've discussed that decision is going to happen on the spot at the provider's office.

Q. (By Ms. Wallace) It will happen in present time at the date of the visits; correct?

A. Yes.

Q. And that applies to all of the services in the life care plans that determination will be made contemporaneously on the date and location where and provider location where the services are received; is that right?

MR. TURNER: Objection.

A. In a broad sense. I'm trying to remember McElhiney's plan. If there is a service in there that is not covered, then the determination would be made that there was no coverage and that he paid for it himself, but other than that what you said is correct.

Q. (By Ms. Wallace) And if you recall, Mr. McElhiney's life care plan span over 14 years, and they're related to his Parkinson's disease diagnosis and include ongoing neurology management, medication adjustments, monitoring for syncope therapy services, potential need for advanced Parkinson's intervention such as a deep brain stimulator or an infusion pump therapy.

Based on the provider that provides these services and the date they are received, that's the point in time where we will know which of the three payors will pay on his plans?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) And that's the point in time we'll know which rate applies to which services; correct?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) And again that's the same for all of the plaintiffs in this litigation?

MR. TURNER: Objection.

A. Yes, that's correct.

Q. (By Ms. Wallace) This we talked earlier was the chart that included TRICARE along with Medicare and that's in table 1 on page 14 of your report?

A. Yes.

Q. I want to make sure I understood your prior testimony. Is the TRICARE rate if you had done a separate column for it, is it the same exact rate as is identified in this combo column?

MR. TURNER: Objection.

A. Yes, it is.

Q. (By Ms. Wallace) And so this column does not represent how the two government payors would work together to pay for the future care; correct?

MR. TURNER: Objection.

A. Well, I think as I said earlier, if the case is handled correctly, then Medicare would pay 80 percent and TRICARE would pay 20 percent.

Q. (By Ms. Wallace) But those differences are not itemized in your chart. They're contained within your opinions; is that right?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) The -- these units unit rates reflect the most recent applicable unit rates for the services in the life care plans, and they're not a projection as to any changes that may occur in the rates in the future; is that true?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) For places in your charts where zero is identified, that means that service identified in the life care plans is not covered by that governmental payor, not that there is no cost associated with that service; correct?

MR. TURNER: Objection.

A. Yes.
Q. (By Ms. Wallace) I noted that neither Medicare nor TRICARE compensate for CNA care?
MR. TURNER: Objection.
A. That's correct.
Q. (By Ms. Wallace) And you identified the VHA rate of $1,897.77. Will you explain to me what your unit definition means?
A. It's a monthly rate.
Q. So is that total per month of eight hours per day, seven days per week?
A. No. It's 30 days 28 hours a week.
Q. And that's the maximum total that the VHA will pay?
A. Yes.
Q. Do you know what that hourly rate is for a CNA?
MR. TURNER: Objection.
A. It should be $36, but I'm not sure of that.
Q. (By Ms. Wallace) It looks a little low.
A. Yeah.
Q. Would you agree?
MR. TURNER: Objection.
A. Would I agree as to what?
Q. (By Ms. Wallace) Does it -- do you think

that rate is correct so that's totally fine. I just thought it looked a little low.

A. I agree that it looks a little low, but I would have to go back and correct my calculation to tell you whether it is or isn't.

Q. Do you know if the VA covers CNA care like is that home care or is that inside of a VA facility or is it?

A. No, that would be home care.

Q. Okay. I want to show you it looks like you have a similar rate identified for personal care attendant CNA. That's the same right, right, as before?

A. Yes.

Q. Let me ask you about the calculations, if you don't mind, made by the economist related to Mr. McElhiney's charts.

I'm going to show you on the screen Exhibit 16B. I'm going to show you the conclusion section.

Do you see bottom of page 8, top of page 9 in Exhibit 16B?

A. I do.

Q. The testimony from the economist Brod is that the present value of the Shahnasarian life care plan

is between 1.7 and 2.6 million rounded, and the present value of the future medical offsets is between -- and this is the part that has to be with your charts -- is between $206,210 and $273,874 for Medicare/TRICARE coverage in between $532,501 and $600,401 for CCN and VHA coverage.

And then the economist goes on in G to state, If the Court adopts the plaintiff's life care plan, the present value of future medical offsets to that LCP is between $178,440 and $243,674 for Medicare/TRICARE coverage and between $1,290,196 and $1,372,014 for CCN and VHA coverage.

Do you have any idea how those numbers were reached by the economist as they relied upon your chart?

MR. TURNER: Objection.

A. No.

Q. (By Ms. Wallace) If the Court adopts plaintiff's life care plan and the government economist has identified two different very different numbers for a Medicare TRICARE reimbursement cost versus a CCN/VHA reimbursement cost, in your opinion do we have any idea as we stand here today which government payor is going to pay for that care?

MR. TURNER: Objection.

A. Well, I don't know. I mean, I have only seen the parts of the report that you have shown to me. I don't know if it's -- if what you are asking isn't in the other part of the report.

Q. (By Ms. Wallace) If this economist is relying on your charts, would this economist have any way of knowing which payor is going to pay for the future treatment?

MR. TURNER: Objection.

A. No.

Q. (By Ms. Wallace) And if you were the Court trying to understand which of the amounts to apply if the Court adopted the plaintiff's life care plan, what advice would you have for the Court on how to use these numbers given that they are -- that all three payors are quantified on your charts how should they -- what should they -- how do these numbers work together to create an offset, do you have any idea?

MR. TURNER: Objection.

A. I think that's a question for the economist and not for me, and the economist may have some specific ideas. I don't.

Q. (By Ms. Wallace) Can you tell the Court would you agree that not -- let's just say the Court takes the highest two numbers the 243,674 from

Medicare, TRICARE and 1,372,014 or CCN and VHA coverage, would those quantified rates represent the same services meaning they've duplicated the same rates within the final numbers?

MR. TURNER: Objection.

A. I mean, if the Court added both numbers together is that what you are asking?

Q. (By Ms. Wallace) Correct. That wouldn't be the right thing to do. Can we agree on that?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) Because your charts provide the total amount that each payor would pay independently for the same services; correct?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) And so your charts, as they are today, were never meant to be added together to create a total offset?

MR. TURNER: Objection.

A. Yeah, that's correct.

Q. (By Ms. Wallace) Okay. Let's quickly move on to the last couple reports. I'm going to put on the screen the Peterson report.

Do you recognize this report as your second

report for Mr. Peterson?

A. Yes.

Q. And we find out that Mr. Peterson has both Medicare and VHA coverage according to the DOJ; correct?

A. Yes.

Q. Do the same assumptions and methodology that we've discussed earlier in your deposition apply to this report with respect to those government programs?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) In your charts for Mr. Peterson, which are in tables 1 and 2, similar to the other charts, you did not make any type -- you don't have any opinions as to how these two government payors would work together to compensate for the services provided. The rates are independently issues as if that government payor was the only payor; correct?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) And for all of the services identified under Medicare and/or VHA that state zero, it does not mean that those items don't have a cost. It means that that government payor does not cover the

cost of that service; correct?

A. Yes.

Q. Did you -- do you have any opinions on the reliability or accurateness of the economists who aggregated your charts to quantify the projections for Mr. Peterson?

MR. TURNER: Objection.

A. No, I don't.

Q. (By Ms. Wallace) I am going to show you our second to last report, which is the report of Diane Rothchild.

Do you recognize this report as the second report for Ms. Rothchild?

A. I do.

Q. We see in the second page that she has only Medicare coverage; right?

A. That's correct.

Q. Do you -- her particular services have DME reimbursement, neurology reimbursement codes and therapy. Let's pull that up. Do you see that?

A. Yes.

Q. Have those particular services been subject to rate changes over the years?

MR. TURNER: Objection.

Q. (By Ms. Wallace) If you know?

A. Yes.

Q. And your report only quantifies the rate on the date that you looked at the fee schedule, which is the most current fee schedule in effect right now for Medicare; correct?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) You did not do any projections to try to model how these rates may change in the future?

A. No, I did not.

Q. And we are assuming if the economist took your rates and applied them over the life care plan, he or she would be assuming that these same services would be -- continue to be covered under Medicare in the future; right?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) For any zeros identified under Medicare, that does not mean they don't have a cost. It means Medicare doesn't cover the cost; correct?

A. Yes, that's correct.

Q. Medicare seems to not cover a good bit of costs under the durable medical equipment including

some of the more home care sensitive items such as adult diapers, absorbitant bed pads, automatic pill dispensers, digital blood pressure cuff, queen size sleep number bed with movable base, hand-held shower.

So these are some of the types of services that are very end stage for a disabled person --

MR. TURNER: Objection.

Q. (By Ms. Wallace) -- is that fair?

A. I don't know. If a person is disabled, it doesn't have to be end stage, but it's definitely these are products that a disabled person would use, and they're primarily supply type products which Medicare does not cover as opposed to equipment which it does.

Q. I see. So it's the consistency there is Medicare doesn't cover certain supplies like home supplies for plaintiffs or help me understand that if you don't mind?

A. Well, like diapers and I'm not sure -- this is the first time in this life care plan was the first time I had seen the term "bed cane." I don't know what that is, but like hand-held shower. These are with the exception of the bed fairly low cost items and they're -- I think of them as supplies as opposed to equipment like a wheelchair, but it's just the

Medicare policy to cover supplies -- to not cover supplies and to cover equipment.

Q. And for someone who is no longer able to care for themselves and needs some of these more significant home care and support services such as housekeeping services, bookkeeping, accounting help, financial planner, Parkinson's support group, attendant home care services, none of that is covered by Medicare, meaning that cost will need to be borne elsewhere if the plaintiff is to receive it in the future; correct?

MR. TURNER: Objection.

A. Yes.

Q. (By Ms. Wallace) And the same goes for Medicare doesn't cover home modifications?

MR. TURNER: Objection.

A. No, Medicare does not.

Q. (By Ms. Wallace) Do you have an opinion as to the reliability or accuracy of how the economists took your charts and created projections into the future based on the life care plan?

MR. TURNER: Objection.

A. I have no such opinions.

Q. (By Ms. Wallace) Let's look at the last report. This is Exhibit 19.

Do you recognize this as the your expert report for Richard Sparks?

A. Yes.

Q. Mr. Sparks has VHA insurance only; is that correct?

A. I believe so, yes.

Q. Does the same methodology involving how you came up with his rates apply to this case as it has the previous cases?

A. Yes.

Q. We will look at table 1. For any VHA rates that have been identified as zero, that does not mean those don't have a cost. It means the cost is not covered under the VHA health insurance?

A. That's correct.

Q. Does VHA unlike the other two -- unlike the other entity that we discussed, does it always include medication coverage?

MR. TURNER: Objection.

Q. (By Ms. Wallace) It's not like an opt-in to receive that?

A. Okay. Yeah, I didn't understand what you meant. That's my understanding, yes. It's not an opt-in.

Q. Right. Is -- are you missing a rate on

skilled nurse care?

A. I guess so. I can't tell you how many times this was proofed, but that's true.

Q. No problem. If we look at table 2, Medicare does not cover a power wheelchair maintenance just the wheelchair itself?

A. Where is that?

Q. Here.

A. Trying to remember the maintenance cost may have been included in the price of the wheelchair. This is for Medicare. This is for VHA. It wouldn't -- they're not covering it. I'm sorry. I got a little confused there for a minute.

Q. The zeros reflected in table 2, do they -- they do not reflect that those service items don't have a cost. It's just that it's not covered under VHA coverage rules; correct?

A. Yes.

Q. Do you have an opinion as it relates to Mr. Sparks's claim as to the accuracy and reliability of the economists projected future offset numbers?

MR. TURNER: Objection.

A. No, I do not.

MS. WALLACE: All right. I think for the moment I have no further questions. I know Joey

is just very excited to get started.

MR. TURNER: Can we go off the record for one minute.

THE VIDEOGRAPHER: We're off the record at 4:49 p.m.

(Discussion off the record.)

THE VIDEOGRAPHER: We're back on the record at 4:50 p.m.

EXAMINATION

BY MR. TURNER:

Q. Dr. Miller, earlier you were asked about whether Congress could change different aspects in the future to better fund Medicare, and plaintiff's counsel listed a bunch of options. Are you giving an opinion as to which options Congress will pick or should pick?

A. No.

Q. However, do you have an opinion based on your own experience with Medicare whether it is likely that Medicare will continue to cover healthcare for those 65 and older?

A. I do have such an opinion and I believe that it will.

Q. And in your experience have Medicare reimbursement rates generally increased or decreased

over time?

A. Without question they've increased. The decreases would be -- occurred, but they'd be rare.

Q. And based on your own experience, do you think it is more likely or less likely that Medicare reimbursement rates will increase into the future?

A. Based on my experience, they will definitely increase.

Q. And Dr. Miller, I want to switch gears for a moment. You were asked about your use of Community Care Network rates for evaluating future costs associated with plaintiff's life care plans as covered by the VA. Do you recall that?

A. I do.

Q. You were asked questions about care provided at a VA hospital versus the community.

Do you recall those questions?

A. I do.

Q. And you testified that CCN rates and Medicare rates utilize managerial accounting to determine rates. Can you explain that?

A. Well, sure. The best example I can give is the physician rates I identified as consisting of three parts a work component, a administrative component and a malpractice insurance component.

The work component is based upon industrial engineering studies which I would classify as managerial cost accounting studies of exactly what effort by which people is put into a specific procedure through observation by qualified observers.

The administrative costs component includes all of -- actually it includes the items that Ms. Whitney identifies for the VA hospital study that was done: lawn maintenance. I would just say it doesn't include lawn maintenance, fair, but it includes rent, nursing staff, equipment, and it's just the costs of those items are identified on a per-use basis and calculated just as you would in a managerial accounting context.

So that's how they did it. That's how the rates are established. I actually played a key role on the administrative cost component for CMS, so I know exactly how it was done.

There are certain rate components like drugs and durable medical equipment that are calculated based on rates that are collected. For example, a determination was made by Medicare that the rates made by private sector payors on lab services were equivalent to what would normally be paid, but were equivalent -- I'm sorry. Were equivalent to cost if

you measured it in a managerial cost accounting way, and so that's what they use.

So they may not have done a separate study as they did in the case of physician services, but the same concept is used throughout.

Q. And earlier you also indicated that you thought it was appropriate to use CCN rates for medical care taking place in the future even if you don't know whether an individual will obtain the care at a VA hospital or in the community.

Can you explain what you thought -- why you thought that was appropriate or reliable?

A. Well, the most important reason is we don't know what the costs are in VA hospitals. They vary substantially. We know what they should be, which is what the study that was done identified, but the actual costs in VA hospitals most often are higher than the CCN rates. So I felt we were conservative in using the CCN rates, but in fact, there is just no other option.

Q. Well, Dr. Miller, you were also advised as to what a Mr. Daniel Clark testified about as to how the VA calculated the past costs of healthcare provided to a given plaintiff. Do you recall that?

A. I do.

Q. Okay. What Mr. Clark performed, as you were informed, and what you performed both result in appropriate values to associate costs with the plaintiff's medical care even if not identical?

A. I would say appropriate costs, but then the issue is how are those costs used, and the work that I did I measured hospital outpatient and ambulatory surgery center costs, and they were used to inform the rates that Medicare set.

In the case of Mr. Clark's work, now VA knows what the standard costs are, but they're not actually being used in rates because there are no rates charged.

MR. TURNER: Thank you, Dr. Miller. I don't have any additional questions.

MS. WALLACE: I have just a couple, Dr. Miller.

FURTHER EXAMINATION

BY MS. WALLACE:

Q. You testified just a moment ago that managerial accounting is involved in the setting of VA fee schedule, right, was that your testimony?

A. No. No, I said managerial accounting was used in the setting of Medicare outpatient hospital rates.

I don't think that -- well, managerial cost accounting was done to understand the costs in VA hospitals, but not converted into rates.

Q. And so the VA fee schedule and input that -- managerial accounting was not an input that determined the VA fee schedule?

MR. TURNER: Objection.

A. I don't know that from 100 percent standpoint. The Medicare -- the VA, VHA, CCN fee schedule is primarily drawn from Medicare, so it is based on managerial cost accounting concepts, but for the services that are not covered by Medicare, it's perfectly possible that some effort was made to take advantage of the managerial cost accounting study. I just don't know.

Q. (By Ms. Wallace) And that's actually what I was going to ask you.

VA must reimburse community providers using a statutory hierarchy with the Medicare rates being the first, if the Medicare rate is not available, then it goes to the VA fee schedule, and if neither applies it's a negotiated rate.

So Medicare is the pricing methodology that is the primary anchor for the CCN reimbursement rates. Do you agree with me?

MR. TURNER: Objection.

A. I do.

Q. (By Ms. Wallace) And so when we were talking earlier about Daniel Clark performing a managerial accounting to quantify the cost to the VA of the past medical services of the plaintiff, that truly is a separate analysis then the setting of the VA rates that you performed which primarily fall into the Medicare methodology?

MR. TURNER: Objection.

A. Well, I didn't set the VA rates. I assisted in setting the Medicare hospital outpatient rates. So that's just a correction in how you phrased it.

Q. (By Ms. Wallace) But otherwise you agree?

A. Yes.

Q. Okay. And you testified again that there are no rates charged to the plaintiff when they receive care at a VA facility no reimbursement that occurs; correct?

A. That's my understanding.

MS. WALLACE: That's all the questions I have for you and also wanted to thank you very much for your patience with me today, Dr. Miller.

THE WITNESS: You are welcome.

MR. TURNER: Nothing else from us.

THE VIDEOGRAPHER: The time is now 5 p.m. And this concludes today's testimony from Dr. Henry Miller. We are now off the record.

MS. WALLACE: Yes, I'd like to order according to the standing ordering in the instructions, but also we've been requesting a rough draft, if you don't mind and please make sure I get a condensed version because I can't read all of those pages like individually like all of that.

MR. TURNER: The United States is also good with a standing order, but we do want a rough draft as well.

(Deposition proceedings concluded at 5:00 p.m.)

SIGNATURE PAGE

I, HENRY MILLER, Ph.D., a deponent exercising my right to read and sign my deposition taken on February 20, 2026, place my signature hereon and make the following changes on this _____day of _____, 2026.

(IF THERE ARE NO CHANGES, WRITE "NONE.")

Page	LineReads	Change to	Reason
____	_____		
____	_____		
____	_____		
____	_____		
____	_____		
____	_____		
____	_____		
____	_____		
____	_____		
____	_____		
____	_____		
____	_____		
____	_____		
____	_____		
____	_____		
____	_____		

SIGNATURE LINE - WITNESS

_____

C E R T I F I C A T E

I, KELLY R. REXROAT, a Certified Shorthand Reporter within and for the State of Kansas, Missouri, New Mexico and Arizona hereby certify that the within-named witness was first duly sworn to testify the truth, and that the deposition by said witness was given in response to the questions propounded, as herein set forth, was first taken in machine shorthand by me and afterwards reduced to writing under my direction and supervision, and is a true and correct record of the testimony given by the witness.

I further certify that I am not a relative or employee or attorney or counsel of any of the parties, or relative or employee of such attorneys or counsel, or financially interested in the action.

WITNESS my hand and official seal at Overland Park, Johnson County, Kansas, this 10th day of March, 2026.

Kelly R. Rexroat

_____

KELLY R. REXROAT, RPR, CSR, CCR
Certified Shorthand Reporter No. 1479

&

& 2:3

1

1 1:12 3:8 9:14 16:15 92:6 107:18 112:10 115:20 117:21 117:24 143:2 158:12 161:12 162:4,22 171:16 189:4 193:18 194:7 205:16,18 208:11 211:22 216:6 222:18 229:13 234:11
1,000 177:6
1,166.80 152:23 155:20
1,290,196 226:11
1,372,014 226:12 228:1
1,458.50 152:23 155:18
1,591 176:23 177:6
1,610 181:2
1,897.77. 224:7
1-4 9:11
1.7 226:1
10 3:22 27:23 27:23 47:24 48:12 54:8 56:22 118:6 151:5 184:21 201:22,24
100 31:9 32:13 39:20 104:12 111:16 152:4,5 152:11 190:18 190:19 193:18 193:23 194:7 241:8
103.62 156:11
10:08 44:6,7
10:16 44:7,9
10th 52:23 245:18
11 162:5 201:22
110,100 185:19
116 163:10
116.91 161:1
11:21 83:2,3
11:30 82:23,24 83:3,5
11th 141:1 142:7
12 4:3 40:17 187:7,12 201:22
12-10 57:2
12-15-25 3:9,24 4:2,3,5,6,8,9,11 4:12,14,15
123 163:3
123.82 163:3,9 164:6,13,19,20 164:24 165:16 167:24 180:22
123.82. 165:18 169:20 180:17
129,000 177:14
129.52 156:11
12:30 118:17,18
12:53 118:18,20
12b 4:5 200:23 200:25
12th 48:2
13 3:14 4:6 9:24 162:5 181:7 201:22 204:4,7
14 4:8 110:1 158:12 201:22 207:12,15 221:19 222:18
1479 245:23
15 3:24 8:9 9:2 9:18 10:8 24:15 28:5 142:9 161:16,24 185:13 191:10 201:22 210:10
15b 4:2 174:10 174:14 180:5 185:7
16 3:15 4:9 158:6,10 201:22 220:1 220:10
1600 7:24
161 3:24
169.8 63:4
16b 4:11 220:1 220:12 225:19 225:22
17 4:12 11:19 54:16,19 175:21,21 176:2 177:7 220:10
174 4:2
178,440 226:10
17th 48:8
18 4:14 174:24 220:10
185 109:6
187 4:3
19 4:15 220:1 220:10 233:25
1943 6:18
19517 245:20
1971 17:7
1979 17:11
1:30 82:20
1:47 151:10,11
1:59 151:11,13
1st 8:4

2

2 3:9 9:16 92:6 107:19 112:10 115:20 117:21 117:25 122:7 138:6,10 143:2

156:9 171:16 174:25 185:20 205:18 206:15 209:12 211:22 216:6 220:21 229:13 235:4 235:14
2,200 109:8
2,220 188:8
2-12-26 3:16
2-17-26 3:19
2.05 175:23
2.6 226:1
20 1:12 8:9 14:20 20:24 28:5 85:11 111:4,13,14,20 160:5,7,12,18 160:23,24 164:13 168:5 223:7 244:3
200 4:5 39:22
2002 17:11 19:6 19:10
2008 19:10
2009 22:15
2010 36:14
2011 127:22
2015 128:13
202.436.6895 2:14
2023 69:19 210:17
2025 9:15,18 10:5,8 57:2 69:14,15,15,16 105:4 130:1,15 185:13
2026 1:12 3:14 5:5 9:21,24 48:3,8 52:23 69:14 85:11 141:1 142:7 244:3,4 245:19
2030 211:15
2033 131:22
204 4:6
206,210 226:4
207 4:8
20th 5:5
213 162:25
213.6 56:14
214 162:17 163:1
215 162:18 163:1
219 2:8
22 161:2
220 4:9,11,12 4:14,15
22nd 6:18
23 17:15
236 3:4
239 175:21,22 176:1,1
24 164:21
240 3:4
243,674 226:10 227:25
245 1:12 3:5
25 85:11 164:21
27,047 177:7
273,874 226:4
27601 2:18
28 224:12
28144 2:4
29440 2:8
2:40 118:7

3

3 3:11 6:6 9:15 9:17 122:7 162:22,24,24 180:5,11 181:15 182:8 184:24
3,800 175:22
3.1 131:15
30 14:19 85:12 145:4 224:12
300 39:24
310 2:18
36 189:22 193:13 224:19
37 48:6
38 176:20
395.07 194:9
3:00 184:25
3:14 184:25 185:2

4

4 3:12
4,793 175:24 176:3
4-8-25 3:8
40 8:24
415 56:13,19 63:5
430 56:13,20 57:2
446 176:20
456.40 193:17
47 3:16,18,19 3:21,22
478 176:2
4:15 219:22,23
4:21 219:23,25
4:49 236:5
4:50 236:8
4th 9:21

5

5 3:3,16 16:20 20:5 47:21,24 118:6 151:5 184:21 188:19 219:19 243:2
50 8:24 24:15 24:16 25:3 33:20 36:14 102:11 117:16 119:16 137:6
50-50 24:15

500,000 106:19 107:10
51,975 63:13
525 2:4
532,501 226:5
5:00 243:13

6

6 3:15 16:5,8 20:6
6.1 204:11
600,401 226:6
63 63:12
65 76:17,20,21 77:6,8,22 97:6 98:20 99:12 105:12 210:16 210:21 211:10 211:15 236:21

7

7 3:18 47:24 48:4,16,19 51:17 54:9 210:12
7,643 176:23 177:13
7-10 47:21
70 21:3 113:19 113:24
70,467 63:6
704.633.5244 2:5
71 76:24
75 105:12,14 131:14
78,000 177:17
7:23 1:4 5:9

8

8 3:19 16:15 47:24 48:7 225:21
8,000 28:23
80 111:16 160:6 163:2,25 164:20 223:7
825 63:10
843.546.2408 2:9
89,740.50 57:11
897 1:4 5:9
8:59 5:5
8th 9:15

9

9 3:8,9,11,12,21 47:24 48:6,11 48:16 52:17 53:10 54:10 174:24 201:21 201:24 213:22 217:2 225:21
9-37 3:18
90 25:7 40:13 164:1
919.500.4282 2:19
95 100:11
99 164:19
99.211 162:20
99.212 162:20
99.213 162:17
9th 134:3

a

a.m. 5:5 44:6,7 44:9 83:2,3,5
abbreviated 49:1,10,16
abdomen 156:9
ability 148:21
able 20:19 21:4 39:1,19 50:14 103:13 104:13 109:12,19 112:24 115:3 143:3 150:9 160:12 168:11 168:14 175:3 178:24 179:14 185:23 191:3 195:10 199:1 209:25 211:9 220:23 233:3
above 185:18
absolutely 46:3
absorbitant 232:2
accept 89:15 100:2 133:21
accepting 101:2 101:25
access 80:18 101:19 128:12 133:15 141:24 142:13,18,21 200:5 206:11
accessible 7:3
accidents 16:3
account 30:25
accounting 16:23 17:4 83:8 83:11,16,17,20 83:24,25 84:12 84:16 85:13 87:2 144:11,15 144:21 145:7 145:11 148:10 148:25 149:19 233:6 237:20 238:3,14 239:1 240:21,23 241:2,5,11,14 242:5
accuracy 201:16 206:1 210:1 233:19 235:20
accurate 43:17 54:20 56:7,9,15 69:23 70:1 74:15 105:21 144:20,20 165:8 177:23 178:3,7 181:17 181:25 184:10

184:15 189:20 208:19
accurately 56:25 65:15 147:6
accurateness 230:4
achieve 17:6 145:18
acknowledged 131:13,20
act 2:12,17 44:11,15,20 127:22 128:13 132:20 210:14
acted 137:9
action 129:10 245:16
active 112:4
activities 24:10 24:13
activity 149:15
actual 40:23 101:23 149:2,7 150:7 239:17
actually 22:16 23:14 27:7 30:9 32:25 33:1,9 37:16 38:18 42:4 48:15 63:19 67:15 71:14 73:10 84:9,23 96:20 100:25 101:13 109:4 115:6 142:19 144:13 144:16 145:13 149:6 154:1 162:5,20 165:12 166:1 170:2 176:18 201:4,9 212:7 218:22 238:7 238:16 240:11 241:16
actuaries 131:25
adapt 65:3
adaptive 195:21 196:3
add 73:2 94:5 160:24 161:2,3
added 72:19,20 94:14 206:16 228:6,18
adding 173:16
addition 72:24 129:8
additional 13:19 31:12 34:5 48:7,9,11 52:18 114:15 185:23 187:3 240:15
address 105:2 107:6 108:12 110:14 132:2 133:19 135:9 135:16 136:1 195:6
addressed 107:23 110:20
adequacy 137:7
adjusted 120:21 203:21
adjustments 126:12 152:8 152:10 221:22
adjusts 153:16
administer 34:22
administered 157:17
administering 34:13
administration 16:23 18:16 35:5 139:4 188:20
administrative 34:21 65:7,11 84:24 85:9,10 237:24 238:6 238:17
adopted 227:13
adopts 226:8,18
adult 232:2
advanced 221:23
advantage 241:14
advice 227:14
advised 239:21
advisory 127:19
advocating 141:4
affairs 140:18 140:22
affect 69:1 104:24
affected 133:6
affecting 134:7
affirm 6:7,11 6:13
afford 80:11,13 80:15
afield 142:16
age 5:19 76:17 76:20 77:6,8,22 97:6 98:20
agencies 18:14 103:11 216:8
agency 16:3,4
ages 105:12
aggregate 178:11
aggregated 230:5
aggregates 173:17
aggregations 173:3
ago 31:22 40:17 46:4,13 49:15

85:11,11,12 145:4 240:20
agree 31:2 69:3 73:16 75:5 76:11 91:5 99:20 101:20 102:9 115:19 121:4 124:23 131:10,12,24 132:5,14 133:1 133:5,16 134:6 135:20,22,24 135:25 136:25 143:23 145:23 145:25 147:11 148:16 156:19 170:13 178:5 182:17 189:11 196:14 200:1 213:19,20 224:22,24 225:3 227:24 228:9 241:25 242:14
agreed 5:12
agreement 47:6
ahead 67:2 93:10 157:4 169:19
ai 68:22
aide 189:25 190:4 197:9,12 197:13
aids 18:22 195:21 196:3
air 32:18
airfield 32:19
al 50:24
alleged 15:23
allocation 149:15
allow 66:17 173:21
allowable 214:2 214:5,6,13,22
allowed 36:19 37:2,5,19,24 38:23 39:15 67:8 77:2 107:3 111:15 214:4 214:16,19 215:1
alluded 113:16
aloud 129:15
altered 119:17
alternative 78:20 81:9 99:9
ambition 138:6
ambulatory 28:2 67:11 240:7
amending 127:4
amendments 132:1
america 50:24
amid 128:10
amorphic 24:2
amount 23:24 24:9 42:21,21 42:25 43:16,21 43:22 56:6,9 58:16 67:8,9 81:20 85:23 98:12 103:4 104:9,13 105:1 105:5 106:19 107:2,3,8,11,15 108:2,3 110:12 110:20,21,22 110:23 111:16 112:17,25 113:1 147:3 155:14 158:22 159:9 160:22 164:18,25 166:15 167:10 167:12 168:12 168:13 170:12 173:15,20,20 173:22,24 177:7 179:7 185:14,20 190:24 194:17 211:24 212:14 214:3,6,7,11,13 214:15,18,19 214:19,22,25 215:1 228:13
amounts 18:4 37:22 43:9,11 93:1 103:25 104:9 110:5 113:2 119:20 129:5 160:1 181:25 186:10 215:8 227:12
analyses 38:10 42:7 85:21 173:6
analysis 36:10 69:2 76:1 80:22 80:24 81:14 82:3 86:12 94:6 98:15 100:1,5 101:22 102:9 104:8 105:25 115:14 118:21 121:17 122:20 122:25 132:9 134:23 136:7 136:12 138:19 138:25 140:12 149:7 150:20 166:17 175:11 176:17 178:9 182:16 184:2 192:17 196:18 196:22,24 197:7 203:4 216:21 242:7
analytics 7:21 8:6,11 12:6

30:13 45:18 185:12
analyze 35:23 49:7 122:13 139:16 162:11 178:17 194:19
analyzed 60:12 76:6 96:8 186:5 191:12 193:2 204:18
anchor 241:24
andrew 55:1
animal 151:6
announced 116:21,21 117:1
annual 21:6 105:5 113:13 125:2 127:5,10 130:1,15 134:15 172:6 172:12 175:7,7 175:20 176:17 188:8
annually 119:10,11,15 120:5 127:17 128:9 140:22
answer 11:20 29:18 30:1 35:11 42:16 45:25 47:1 49:25 50:16 58:25 62:19,20 65:16 70:14 71:24 72:1 78:24 87:20 88:23 91:11,17 95:9,16 99:24 110:7 114:9 128:4 133:10 133:21 167:4 174:9 181:24 186:20 205:14
answered 62:21
answering 167:21,21
anticipate 167:2
anticipated 166:21
anybody 8:15
anyway 143:10
appeal 35:20
appealed 37:4
appeals 35:21 37:5,20
appear 154:14 175:10 186:5 186:13
appearances 2:1
appeared 141:1
appearing 5:11
appears 140:21 162:4 175:6 187:19
applicable 73:18 88:20 89:12 90:11 92:8 96:25 98:2 100:7 112:9 115:4 171:24 172:19 223:14
application 66:11,20 84:5 87:8 168:15 189:5
applied 44:15 66:13 71:2 87:13 88:4 91:12 92:15 107:14,25 144:15 178:10 181:9 184:5 201:11 205:21 231:13
applies 139:7 201:25 221:7 222:8 241:21
apply 91:4 92:1 93:4 96:8 103:16,21 105:8,18 112:25 117:21 129:22,23 150:16 170:18 183:12 185:21 193:8 208:7 227:12 229:8 234:8
applying 84:14 121:13 153:14 153:15 177:9
approach 78:19 119:14 145:10 145:11 153:6 156:13
approached 185:25
appropriate 60:22 81:18 96:19 146:16 148:6 167:3 239:7,12 240:3 240:5
appropriately 68:6,9
appropriation 172:12
appropriation's 127:5
appropriations 125:10 127:10 172:6
approval 125:2 215:7,18 216:7
approvals 215:25
approved 215:19
approximately 10:5 56:14,25 57:11 63:12 109:8 131:15

april 9:15 10:5 71:18 72:17
area 21:13 22:1 66:14,24 100:2 100:6 101:1,1 102:1 142:22 149:1,9 205:3
areas 142:20
argument 182:3
arizona 7:14 245:5
arrive 145:8 191:14
articles 14:8
articulated 70:12 173:12
artificial 68:20
asked 10:14,20 10:22 11:3,5,9 11:12 22:2,3 40:18 45:5,13 46:22 50:12 57:21 67:24 70:7 72:3,3 95:10,14 103:3 103:7,10,24 105:23 112:8 121:16 138:23 138:24 139:22 187:19 236:11 237:10,15
asking 10:19,20 32:15 43:22 50:9 87:1 98:19 99:19 107:1 133:9 167:4,6 167:20 171:3 171:14,15 181:25 194:2 199:1 227:3 228:7
aspects 12:15 215:14 236:12
assemble 57:13
assess 148:17
assessed 113:23 191:13
assessment 58:18 205:2
assign 57:18 64:10 136:7
assigned 57:14 57:23 59:22 65:8 105:22
assigning 154:5 154:5
assignment 41:15 70:11 87:24 90:15
assist 10:10 57:13 59:7
assistant 65:13 190:1,4 197:15 197:18,19
assistants 101:21
assisted 13:2 55:7 56:5 206:20 242:11
associate 56:11 56:17,20 240:3
associated 23:25 24:9 31:1 50:25 84:25 102:17 103:5 116:5 185:5 201:2 203:10 223:24 237:12
assume 47:8 52:13 79:18 90:9 98:25 102:5 106:1 107:1 128:22 131:19 155:16 177:9 196:9,9 196:11,25 198:9 199:22 209:11 212:18 217:7
assumed 52:8 82:6 99:11 109:10 113:22 161:10 216:25
assumes 100:5 217:21
assuming 53:16 92:17 96:13,16 106:4 146:8 154:8 159:14 165:20 169:7 179:19 199:17 199:21,23 231:12,14
assumption 72:6 79:20,23 90:14 91:5,14 91:17,19,21 97:20 101:10 101:13 106:3 146:14 163:5 183:1 187:20 193:3 195:25 199:22 207:23 211:16
assumptions 72:25 73:5,12 89:12 180:2 184:4 204:13 229:7
asterisks 192:8
attempted 131:17
attendant 189:18 193:13 195:22 196:5,9 197:2,14,19 198:17 225:12 233:8
attention 7:8 158:2 210:11
attorney 2:12 2:17 13:19,21 245:14

attorneys 13:10 14:23 40:20 41:3 46:17,21 245:15
authored 41:2
automatic 232:2
automatically 217:13,16
auxiliary 85:4
availability 142:21 205:2
available 8:16 66:20 69:12,20 74:14 80:4 111:23,25 116:10,11 121:25 122:2,3 135:15 136:9 149:25 151:24 155:23 190:19 191:14,21 241:20
avenue 2:18
average 105:10 105:11 162:17 177:16 183:10
averaged 163:1 182:24 183:6
awaited 141:5
award 39:10 108:2
awarded 16:24 17:3 35:19 43:9
awarding 108:3
aware 45:3 52:25 110:25 130:6 131:22 134:2 140:23 141:4,8,17,22
ayako 49:23 50:7 55:10,10 56:6 59:15 60:2 60:3,7,20 63:4 64:11 65:8 68:4 69:1 101:21
ayako's 62:6
aziz 55:5

b

b 38:19 67:10 77:19 79:12,15 79:21 80:6,19 81:9,15,18,18 81:23 97:9,15 103:12,16,21 109:3,6 111:7 188:8,14 217:12
bachelor's 16:22 58:2 59:20 62:8,9
back 26:7 37:6 44:8 53:10 82:20 83:4 118:6,19 151:12 170:11 180:14 185:1 206:22 219:24 225:4 236:7
background 16:17,21 30:12 30:14 33:14 34:13 57:24 58:11 59:15,19 62:7,17 63:1 84:12 86:19 87:3 175:17 188:1
bake 108:5
balance 166:16
barely 25:22
barks 151:2
baruch 16:25 17:1
base 199:18 232:4
based 17:15 21:11,12 28:3,7 29:4 54:20 71:13 75:13 78:4 89:25 104:7 108:23 113:21 119:16 122:14,21 127:17,21 128:16 131:9 131:24 137:11 137:15 142:12 149:15 152:20 161:17 166:13 167:8 175:17 178:8,16 179:7 179:8,15 191:11 195:2 196:13 205:22 208:19 210:2 211:25 212:15 214:3 215:8 218:21 222:1 233:21 236:18 237:4,7 238:1 238:21 241:11
basic 65:1
basically 19:9 34:2 173:1
basis 21:24,25 28:25 106:11 106:11 113:13 142:25 173:23 238:13
bates 3:18 16:14,20 48:6 174:24
bed 232:2,4,21 232:23
beginning 47:4
behalf 1:6 20:7 30:3 34:13 137:22 185:15 186:11
behave 96:17
believe 33:12 46:19 68:1 80:6 159:11,22 184:19 192:5 211:2 234:6

236:22
believed 39:8
bell 2:7
belllegalgrou... 2:9
beneath 56:23
beneficiaries 112:4 133:16
beneficiary 157:21 193:4 218:12
benefit 126:2 209:7
benefits 30:15 30:18 31:6 33:2 33:2 76:10 96:23 97:3 100:14 101:14 101:17 139:14 142:5 164:9 178:18 204:18
berkeley 7:16 7:17,22,23 8:12 8:13 185:12
bern 2:18
best 14:3 34:9 68:16 81:3 132:19 237:22
better 33:9 200:5 236:13
bidder 35:24 36:1
bidders 36:2
bidding 119:21 120:1
big 54:13
bigger 174:19
biggest 104:19
bill 95:17,19,22 98:12 125:10 127:5,11 145:19 164:4,5 166:8,9 172:6 212:7
billed 57:10 170:12
billing 11:6 15:24 51:11 55:16,18,19 58:18 65:9
bills 104:21 105:13,14 143:24 166:5
birth 6:17
bit 19:20 28:8 65:15 118:9 162:7 182:2 202:2 231:24
blackmer 50:23 52:1,4,5
bladder 31:15 209:15
blanket 156:13
blood 192:16 232:3
blue 36:21,22 36:24,25 37:9,9 77:1,1,14,14
board 27:2 128:1 154:24 171:16
boards 26:25
bodies 25:16
boiler 123:9
bonus 21:9,10 21:11 23:2,3,6 23:18
bonuses 24:5
bookkeeping 83:11 233:6
borne 233:9
bottom 16:15 217:1 225:21
bought 19:16 19:19
brain 221:24
break 44:2,7 82:17 83:3 118:5,18 150:24,25 151:5,11,14 184:21,25 185:3 219:18 219:23
breaks 44:2
brecht 55:1
brg 3:18,21 8:14,14,22 10:4 12:1,24 14:21 17:9 22:4,11,19 22:22,22,25 23:4,5,9 24:8 24:15 25:13 36:15 39:18 45:1,2,20,21 47:7,8,11,19 48:4,11,23 49:1 50:13 51:5 52:25 56:12 57:14,18 62:13 62:16,23,25 65:20,20 68:23 74:17,18 116:8 201:8
brief 21:18
briefly 5:14 15:21 16:21 26:9 59:14 129:16 210:18
broad 136:5 138:12 221:13
broader 83:10 83:24,25
broadest 140:2
broadly 197:6
brock 49:23 50:5 55:10 56:6 56:11 61:16 62:23 68:3
brod 4:11 12:12 225:24
broke 23:8
brother 31:25 32:8

brought 23:24
bruce 4:4,5 31:17 50:13 72:24 152:22 156:6 187:10 203:3
bucket 183:5,5
buckets 169:25
budget 127:22 128:11 129:16 138:6 172:10
budgeting 124:23
bulk 17:9 59:5
bunch 236:14
business 16:22 19:16 22:5
buy 66:2
buzz 136:20

c

c 80:24 81:7,8,8 81:15,16,19 245:1,1
calculate 43:16 87:20 88:1 103:10 109:17 112:15 152:17 153:3 159:23 160:13 165:20 168:4,11 171:7 200:10
calculated 88:11 106:13 106:17 145:21 167:15 168:6,9 175:4 186:14 186:18 202:3 202:22 215:7 238:13,20 239:23
calculating 89:4
calculation 131:18,18 174:8 184:4 192:19 202:19 225:4
calculations 87:7 225:15
california 24:21 36:20,21 37:4,11 38:18 39:17
call 46:20,23 50:16,19 52:2,3 74:2
called 16:25 37:13 172:2
calls 74:3
camp 1:4 2:12 2:17 5:7 6:2 10:1 11:7,13,17 13:2 15:1,9 44:11,15,19,25 50:20 51:14,16 52:4,6 55:21 82:12
cancel 140:6
cancer 29:25 31:14,15 208:25
cancers 33:19
cane 232:21
cantor 45:2,12 45:16 46:6
capacity 27:5
care 26:13,15 26:16,19 28:2 33:6,10,17,25 34:4,5,9 35:6 42:10,11 50:22 60:11,11,13,19 61:2,7,13 70:16 70:21,22,24 72:11 75:7,16 76:2,11 78:14 80:15 82:3,7 87:13 88:6,8,22 89:16,17,17,22 90:1,12,21,22 91:7,13 92:17 93:4 94:2 95:5 95:7,14 99:9 100:6 101:24 102:5 104:1 105:19 106:10 106:18,21 108:1 110:1,9 112:16 113:8 113:10 114:8 114:16,20,22 115:17,22 116:2,2 118:23 122:15,22 133:15 141:14 141:24 142:14 143:4,16,24 144:4,16,21 145:9,10,14,18 145:22 146:9,9 146:18,19 147:4,6,6 148:2 148:9,16 149:1 149:8,21 150:3 150:3,19 152:6 162:16,23 169:10,14 171:11,20 173:12 178:19 180:7,8 185:21 189:5,9,18 191:15,23 193:12 195:22 196:4,8,25 197:1,2,2,14,18 197:19 198:1,3 198:13,17,22 199:6,7,10,11 199:18,22 203:5,11,16 204:23 205:4,9 205:12,16,17 205:22 206:6 206:16 208:4 208:14,17

209:13 210:2 212:1,11,15,23 213:3 216:24 217:9,22 218:11 220:24 221:8,19 223:3 223:15,22 224:3 225:6,7,9 225:11,25 226:8,19,24 227:13 231:13 232:1,20 233:3 233:5,8,21 235:1 237:11 237:12,15 239:8,9 240:4 242:18
career 15:6 28:4 39:18 77:5 102:11 117:16 119:16,22 120:10,14,19
careers 19:25
caregiver 32:2
carl 6:16
carolina 1:1 5:9
carried 153:1
carry 80:7
case 1:4 6:6 7:5 10:12 11:10 12:11,13,13,16 12:21 14:19,20 18:2 25:19 30:17 31:16 32:25 33:4,9 35:10 36:20,23 37:3,4,6 38:7 38:11,17,21 39:16 40:3,18 41:14,17,24 42:11,22 43:15 43:19 47:13 49:25 50:23 51:9,14,14,20 51:24 52:1,3 53:1,7,11 55:20 60:3 61:18 67:17 70:3,11 70:18 71:16 76:19,23 80:20 81:2 82:14 87:6 88:8 101:3 102:23 111:12 114:3 121:17 142:17 144:10 145:13 147:1 158:23 159:4 159:14 164:4 180:15 188:2,6 191:24 198:16 206:7 211:20 213:19 223:5 234:8 239:4 240:10
cases 1:6 14:13 14:23 15:8,11 15:13,17,22 16:1 28:5 31:8 40:15,16,17,20 42:2 43:6,7 45:4 51:11,12 51:12 98:9 234:9
categorize 17:19
category 110:25 158:13
causation 82:13
causative 82:12
caused 32:12 32:16
ccn 34:22 92:24 143:9 146:4,25 147:19,23 148:6,21 153:23,25 204:13,14 226:6,12,22 228:1 237:19 239:7,18,19 241:9,24
ccr 1:23 245:22
center 17:10 18:18,19 19:4 19:25 21:23 27:25 240:8
centers 18:6
central 36:20
certain 7:20 29:10 35:22 79:11 99:6,7 108:16 116:6 142:20 159:24 192:12,25 196:12 199:25 202:23 219:11 232:16 238:19
certainly 25:22 26:4 33:14 34:17 40:6 59:10 68:9,12 69:13 80:15,16 85:20 88:5 112:21 117:17 131:17 137:10 146:3 147:17 157:1 179:5 182:21 212:3
certificate 3:5
certifications 27:10
certified 26:19 27:13 28:11,18 28:19 58:12 60:7 61:25 190:1,4 197:14 245:3,23
certify 245:5,13
chain 15:23,25
chairman 27:2
challenge 104:17,19,19
challenges 131:7
champus 214:2

change 19:18 20:15 23:4 24:7 69:23 73:1 92:10 101:15 101:18 102:11 102:20,22 108:23 116:15 116:21,22 121:25 123:4 125:16 126:15 132:13,17,22 133:6,10,10 140:11 191:18 231:9 236:12 244:6
changed 46:23 57:1 72:16 102:19 116:17 120:5,9,14,18 120:23,25 121:23 122:21 127:10,14,15
changes 116:13 116:24 120:7 124:14 129:17 132:18 135:3,8 139:13,16,18 140:14 141:14 145:9,19 203:21 223:16 230:23 244:3,5
changing 144:3
characteristics 29:4 37:14 152:9,10
characterizati... 168:20
charge 40:24 51:13 112:14 194:17 214:22
charged 47:11 240:13 242:17
charges 193:21 214:2,5
chart 54:13 56:22,23 134:23 135:11 161:17 164:9 165:12 166:18 167:14 168:10 174:6,16 175:1 175:10,18 178:24 179:4,6 179:8,12,20 180:23 181:4,5 181:10 182:4 182:23 190:23 191:25 195:9 195:17 203:10 208:20 222:17 223:9 226:15
charts 111:18 160:14,18 162:6 169:9 173:4,10 177:23 178:10 178:16,17 179:15,21 182:17 183:4,7 183:12 184:4 185:25 195:2 203:19 209:18 210:2 217:21 223:20 225:17 226:4 227:6,16 228:12,17 229:12,14 230:5 233:20
chat 9:6,9,13 47:19,23 158:8 161:23 187:10 201:1 204:7 207:15 220:4
check 68:11 87:14 180:14
chief 130:20
child 18:23
children's 36:20,24
chinn 55:5
chip 128:12
choose 95:4
choosing 62:1
chose 57:17 79:1,6 80:2 81:10 95:6
choses 96:22
chronic 31:18
circular 182:2
circumstance 171:8 213:13
circumstances 7:10 11:4 75:9 99:22 100:17 130:14 131:12
citation 124:6 146:23
cite 144:13
cited 65:19 124:12
citizens 135:19
city 16:24 17:2
claim 36:4,9 235:20
claims 215:8
clarify 173:14
clark 144:13 148:24 239:22 240:1 242:4
clark's 240:10
classify 238:2
cleaning 208:18
clear 26:10 41:6 60:10 88:12 94:14 107:16 109:21 161:18 171:14
clearer 163:13
clearly 30:21 112:19 133:18
clerical 65:13
client 38:21
clients 20:9
clinic 181:7

close 100:11 219:18
closely 28:10
closer 176:2
cms 34:16 83:21 105:5 127:1,18 128:9 130:21 131:25 134:15 155:4 165:3 238:17
cna 224:3,17 225:6,12
code 28:7 29:21 60:22 61:21 65:22 66:12,12 66:24 84:23,25 85:7,16,21 86:3 151:25 154:10 192:15
coder 27:14 28:11,18 58:12 60:7 61:25
coders 28:19
codes 28:20,22 28:23,24,25 29:3,7,20,20 30:3,9 60:13,14 60:20,25 61:4 61:12 62:1,4 103:5 116:6 162:18 192:2 192:10,22 206:19 208:13 208:14 230:19
coding 27:10,11 27:17,22 28:2,3 28:4 29:15
collateral 39:11 39:13,14
colleagues 13:24 50:13
collected 238:21
college 16:24 17:1,2,2
collegial 24:3
collins 140:17
column 92:25 96:24 98:1,1 103:4 135:7,11 158:19 159:24 160:4 163:21 193:15 222:22 222:23 223:1
columns 93:6 94:3 152:14 161:21 175:7
combine 166:12,14 191:3 192:23
combined 105:13 157:25 158:25 192:10
combo 222:23
come 15:5 22:11 41:9 73:7 82:20 102:15 116:19 118:6 127:16 161:2 164:7 171:19 190:24 196:12
comes 52:10 154:24 177:17
comfortable 9:9 147:19,21
coming 150:24 165:6
commission 127:20
committee 140:18,22 141:1
common 29:11 154:14,17 157:2
communication 6:8
communicati... 11:19 13:6,12 59:1 70:15 71:25
communities 142:2
community 18:18 35:6 114:8,22 115:9 120:21 143:7 145:14,22 146:9,19 148:9 150:3,19 204:23 205:9 205:17 237:10 237:16 239:10 241:18
companies 27:1 27:3 76:16
company 22:14 23:16 75:23 81:11
compare 35:23 148:10
compared 24:1 121:3 208:3
compensate 224:3 229:16
compensated 22:25 134:17 134:21 170:19 170:19 171:1
compensation 23:1,11
competitive 119:21 120:1 121:3
completely 5:15 35:12 95:16 135:4
complex 29:14 29:16 61:5
complicated 23:23 61:7 62:4 67:3 75:19 77:5 78:16 86:12 99:18 124:22 211:20

component 21:5 84:22,24 85:5,5,6,9,10 164:3 237:24 237:25,25 238:1,6,17
components 84:22 86:24 238:19
composition 6:11
comprehensive 33:6
conceivable 214:16
concept 42:16 42:18 163:3,14 239:5
concepts 241:11
concern 134:7 138:8 142:22
concerned 50:6 136:9 143:11 143:14,15 144:25
concerns 137:25 142:12 142:17
concluded 243:13
concludes 243:2
conclusion 225:19
condensed 243:8
condition 208:25
conditions 80:2 80:14
conduct 138:19
confirm 42:9 48:17 191:16 193:2,14 206:5
confused 155:6 194:1 235:13
congress 25:16 118:3 119:16 124:3,22 125:9 125:15 127:16 129:20 132:1 132:20 133:18 134:13 135:9 135:15,16,21 136:1,10 140:17 142:7 236:12,15
congressional 124:7,18 125:2 129:9
conjunction 179:24
connected 113:23
connection 44:24 55:25 56:14 63:6
consecutive 134:3
conservative 153:6 154:3 155:7 156:13 239:18
consider 29:13 37:15 38:3 42:1 81:14 112:19
considerable 81:20
considered 14:9 30:22 37:15,16,22 74:4 133:23 137:6 139:23 154:1 215:15
considers 146:24
consist 84:9
consistency 232:15
consistent 47:3 57:5
consistently 69:11 112:19 137:9
consisting 237:23
consult 12:10
consultant 17:20 18:11 21:15 27:8 34:18 56:18,21 65:20
consulted 12:15 61:25
consulting 19:8 19:10,12,14 20:16,17,25 21:14 22:1
consumer 122:1
contact 11:16 50:5,5
contacted 45:1 46:6
contacting 45:9
contained 16:17 54:9 70:3 200:18 206:25 223:9
contains 187:25
contemporan... 221:9
content 49:16 187:18
context 68:11 90:7 95:10 238:14
contingency 138:25
continuation 24:18
continue 21:15 96:23 97:21,24 97:25 137:13

139:10 165:21 172:13 231:15 236:20
continued 4:1 19:9 102:5
continuing 211:13
contract 24:19 24:20 35:19 75:22 81:12
contracted 34:18
contractor 27:6 81:11
contracts 17:17 24:24 27:24 35:2,15,21 140:6
contributed 108:4
contributing 174:3
contribution 21:11 67:16 104:14 105:24 108:20 109:18 111:1 112:20 160:9 161:4
contributions 24:1,3 103:15 103:25 106:23 107:21 108:6 108:17 109:22 110:4 112:3
113:7 114:6,16 115:3,4 126:21 159:18 160:13 181:17
contributor 32:21
control 124:3 126:20 127:22 165:3
conversation 46:9
conversations 11:21,23 13:9 46:1 47:2 59:1 70:15 71:25 201:5,8
conversion 120:5 126:6
converted 241:3
corporate 49:14
corporation 19:19
correct 10:9 12:1,25 17:12 19:11 22:10 25:13 26:12 27:12,15 34:7 34:11,14 38:8 38:13 41:5,11 41:21 42:13 43:21,24 44:16 44:17 52:12,16
54:6 61:10 63:10,22 68:18 73:19 78:9 79:12,23 80:25 81:1 82:14,15 86:16 87:25 88:23,24 89:8 89:10,18 90:2 90:23 92:13 95:7 96:3,25 98:9 100:8,10 102:17,18,24 108:17,21 109:1 110:16 111:24 113:9 114:1 115:18 116:3 118:4 119:4 121:9 123:10 124:15 124:21 125:11 125:13,17,21 126:17 127:6 128:25 131:19 133:25 135:12 135:13 139:1,2 144:5 147:7 150:4,5,18,22 150:23 153:18 155:9 157:22 159:3,11 160:10 161:5 162:14 165:4,5 170:7 177:25 178:20,22
180:1,9,10 184:10,18 187:17 188:18 189:17 190:10 193:6,19 195:14,19 200:9,12,17,20 202:19,21 203:6,8,17 204:18 206:17 208:1 212:17 213:6 216:8,10 216:13,15,22 217:23 221:5 221:17 222:9 222:15 223:3 223:24 224:5 225:1,4 228:8 228:14,21 229:5,19 230:1 230:17 231:5 231:22,23 233:11 234:5 234:15 235:17 242:19 245:11
correction 242:13
correctly 44:13 84:2 163:17 223:6
cost 43:17 80:16 85:2,3,3 87:21 88:25 97:19 115:21

118:22 132:5 144:15,16 145:1,7,11 147:10 148:1,7 148:18 149:15 149:16 150:1,7 150:9 174:25 175:4,7,8,20 176:6,17 180:6 180:6 181:9 183:16 185:19 190:7 194:5 198:14 223:23 226:21,22 229:24 230:1 231:21,21 232:23 233:9 234:13,13 235:9,16 238:3 238:17,25 239:1 241:1,11 241:14 242:5

costs 18:4 41:11 80:7 84:25 92:9 103:1 116:1 129:8 147:14 147:15 149:4,7 171:11 176:7,8 183:6 195:20 202:8 205:8,11 231:25 237:11 238:6,12 239:14,17,23 240:3,5,6,8,11 241:2

counsel 5:15 6:7 13:6,13 236:14 245:14 245:15

counted 54:15

counting 134:5

country 8:23 8:25

counts 26:17

county 245:18

couple 31:16 33:5,18 38:18 61:17 121:21 176:19 228:23 240:16

course 24:14 55:12 119:13 119:22 120:9 120:14,19

courses 86:23 86:24

court 1:1 5:8,16 17:13 28:15 36:16 37:3,4,8 37:17,20 38:15 39:5,7 44:14 70:3 86:3,6 89:15,15,20 94:15,23 102:16 106:22 108:2 110:4 150:6,13 156:16 161:19 162:9 172:7 173:14 179:6 226:8,18 227:11,13,14 227:23,24 228:6

cover 3:17,20 47:25 48:7 81:12,13 88:21 93:12 170:17 171:11 178:25 189:15 190:7 195:23 196:8 197:8 202:7 208:18 229:25 231:21,24 232:13,16 233:1,1,2,15 235:5 236:20

coverage 33:7,9 77:20 78:20,21 79:2,7 80:3,3 81:10 95:15 98:1 99:13 100:16,16 120:13 135:1 139:8,10 154:25 158:15 166:3 170:18 172:2 188:11 188:20 193:1 207:20 210:14 212:4,5,16 215:6,14,25 216:12 217:7 217:11,14 218:2 221:16 226:5,6,11,12 228:2 229:4 230:16 234:18 235:17

coverages 95:22

covered 32:23 77:12,13 88:7 88:13 99:7 146:4,5 157:6 189:18,19 191:15 196:20 197:3,3,13,16 198:4,18,20 199:9,12 209:1 217:6,9 218:4 218:17 219:11 219:12 221:15 223:22 231:15 233:8 234:14 235:16 237:12 241:12

covering 33:3 96:13 158:25 235:12

covers 111:6 152:4,5,6 170:24 217:22 219:14 225:6

cpt 27:11,16,22 27:24 28:3,4,6

28:20,22,23 29:22 30:3,9 60:13,14,20,22 60:25 61:4,12 61:21 62:1,3 65:22,22 66:12 66:12,24 84:23 84:25 85:7,16 85:20 86:3 103:5 116:6 151:25 154:10 192:2,10,14,22 206:19 208:13 208:14
create 227:18 228:19
created 107:25 233:20
creation 34:25
credential 190:6
credentials 45:6,8,12 190:5
criteria 196:12 196:19 197:8 197:11 198:7 198:25 199:4 199:18,25 200:6 216:17
critical 85:13
cromwell 2:16 13:18 46:19
cross 36:21,22 36:24,25 37:9 77:1
csr 1:23 245:22
ct 156:9 206:17 209:15
cuff 232:3
current 7:15 40:8 92:8 102:17 109:5 121:13 129:24 130:13,14 131:12,14 137:16 150:21 168:7 203:19 231:4
currently 25:2 35:1 141:4
cut 134:21 138:6
cuts 138:2,13 139:22,25
cv 1:4 3:15 5:9 16:7,13 26:6 42:14
cystoscopies 206:17
cystoscopy 209:15

d

d 28:16 37:13 77:20 79:12,16 79:21 80:6,19 81:9,15,18,19 81:23 97:15 103:12,16,21 109:3 188:10 192:25 193:4,8 193:10
d.c. 8:4
daily 193:17
damages 42:23 207:5,11
daniel 144:13 148:24 239:22 242:4
danielle 55:4
data 28:2 49:7 64:18 74:15 81:18,19 122:3 150:9 178:8 191:14 215:8
database 50:15 145:15
date 5:4,4 6:17 52:23 191:12 221:5,9 222:2 231:3
dated 3:14 9:15 9:17,20,24 48:2 48:7 185:13
dates 76:7
day 61:4 86:13 152:7,7 224:11 244:3 245:18
days 152:4,5,11 190:19,19 193:18,23 194:8 224:11 224:12
dc 2:13
deal 18:5 19:15 33:22
deals 145:13
decades 90:22 113:11
december 9:18 10:8 71:19 72:2 72:18 185:13
decide 89:20 212:7
decided 22:15 22:17 23:7,7 81:2 98:22 151:3 153:3
decides 99:12 135:9
decision 22:12 39:2 49:14 78:18 80:1 93:8 93:17,18 95:12 95:17,18 97:3 98:24 118:2 127:21 129:21 135:14 199:7 212:8 221:2
decisions 61:21 61:22 79:25 96:1 124:14,18 135:15 136:24
decline 97:25 133:13
declined 97:24

decreased 236:25
decreases 237:3
deduct 105:23 109:12,14 112:8
deducted 42:21 110:5 111:2
deductible 104:20,24 105:1,7,16 106:2,4,5,8,9 107:6,8,23 108:13,19,22 110:15 111:21 111:22 112:23 113:2,6,12 163:6
deductibles 103:19,23 105:6,15,18 108:23 110:24 112:6 113:4
deduction 107:20
deep 221:24
defendant 2:10 20:18 38:20 40:13
defendant's 89:25
defendants 20:11
defending 87:2
defense 6:7 21:2,3 25:5,6 34:1 38:20 40:19 41:3 70:22,24 89:17 157:18 165:4 172:5,6
defer 28:19
deficits 134:14
define 24:2
definitely 59:17 68:8 84:11,11 85:12 102:3 232:10 237:7
definition 80:17 83:10,25 93:24 136:5 224:8
degree 17:4,6 58:2,5,7 59:20 62:9
deliver 118:23
delivery 18:17
demand 141:19
democrats 124:1
demonstrate 164:9
denote 192:9,18
deny 97:4,5,6
denying 112:21 113:4
department 2:13 3:16,19 7:20 8:6,11 12:5 45:6 46:7 46:10 47:6,25 50:22 51:11 72:12 137:20 157:17 165:4 172:5
departments 165:2
depend 75:21 134:25,25 136:23 142:4 217:17
dependent 96:20 142:21
depending 188:2
depends 29:19 51:9 78:17,18 213:2
deponent 5:10 6:8 244:2
deposed 6:19 130:19,19
deposition 1:6 1:11 3:11,13,17 5:6,11 6:3 9:19 9:23 10:11,15 10:25 13:7,13 37:2 41:2 44:1 47:18 48:5 53:19 63:20 229:8 243:13 244:2 245:7
depositions 9:7
deputy 130:20 130:20
describe 15:20 16:21 65:11 70:10 99:24 117:7 151:16
described 85:15 162:14 181:6 185:18 189:1 214:22
describes 149:14 188:3
description 28:7 61:19
descriptions 49:1,2 50:10
design 126:3 164:8
designed 18:13 85:10
despite 211:10
detail 130:5 167:3
detailed 170:4 191:24
details 123:22 123:23 198:6
determinant 212:12
determination 28:12 104:5

120:13 169:9 182:17 183:15 205:10 221:8 221:15 238:22
determinations 31:10 216:12
determine 76:9 96:18 105:1,22 127:1 147:15 147:17 148:22 168:15 170:18 218:16 237:20
determined 23:3 32:20 211:25 212:15 213:25 241:5
determining 23:5 37:12 172:18
develop 35:9 41:9 57:6 66:15 138:25 156:1
developed 30:9 42:10 74:14 75:12 87:6 163:5 205:8
development 35:14 68:24 83:22 185:25
dha 50:22
diagnosed 31:22 210:22
diagnoses 29:14
diagnosis 210:16 221:20
diane 4:14 220:8 230:10
diapers 232:2 232:19
dictate 156:1
died 32:1
difference 161:22 162:16 164:2,7 176:20 176:23,25 198:21 211:22 219:15
differences 31:11 162:9 223:8
different 19:24 28:23 29:24 42:4 46:17 54:3 67:7 77:17 80:21 85:7 87:3 93:2,14,19,20 94:3,19 100:16 106:10 110:13 116:25 121:21 122:2 129:5 136:8 137:5 152:3 153:22 157:10 159:4 162:10,18 163:16 165:2,7 167:21 169:25 176:14,18,19 190:17 192:22 199:25 201:3 202:2,5 218:25 226:20,20 236:12
differentiate 209:18
differently 162:7
differs 172:7
difficult 49:17 172:18
difficulty 73:25 213:18
digital 232:3
direct 7:7 125:1 158:2 210:10
directed 18:21
direction 64:16 135:20 183:12 245:11
directions 124:19
directly 21:7 25:11 139:9
director 7:19 8:11 12:3 21:20 45:2,17 63:10 130:20 185:11
directors 8:5
disability 30:15 30:18,22 31:5,9 32:14 113:24 208:25
disabled 113:19 232:6,9,11
disagree 99:21
disallowed 36:17 38:16
discern 148:1 196:18
disclose 74:24
disclosed 14:8
disclosing 13:5 13:11 47:1
disclosure 3:8 3:10 9:14,17
discount 185:17
discrepancies 152:19
discuss 70:14
discussed 12:15 36:13 64:14 73:10 85:22 86:24 104:6 209:25 221:2 229:8 234:17
discussing 11:21 26:2 45:25 58:25 71:24 220:6
discussion 26:4 46:7 141:12 236:6
discussions 102:18

disease 31:15 82:13 210:17 210:23,24 211:9 221:20
diseases 29:22 31:13 33:15,22 34:10
dispensers 232:3
dissolve 19:6
distant 58:4
distinction 179:15 190:11 203:4
distinctions 215:20
distinguish 114:20 155:13
distinguished 41:23 100:25
distribution 24:4
district 1:1,1 5:8,8
divide 168:2
divided 20:14 23:10
division 1:2 5:3 5:9
dme 230:18
doctor 6:20 26:11 50:18 62:20 118:21 151:14 166:2 186:20
doctoral 86:22
doctorate 17:3
doctors 149:3
document 1:6 16:12 73:17,22 74:2,4 207:16
documentation 13:9
documents 3:13,17,20 6:25 7:3,5,7 9:5,20 9:23 10:14,18 14:6 48:2,9
dod 172:10
dog 126:9 151:1
doge 137:16,19 138:2,5,14 139:22,24 140:3,7,12
doing 17:16 40:2 45:3 50:7 50:8 58:23 64:6 68:10 85:2 94:7 105:25 168:2 175:13 181:14 216:1
doj 12:21 13:22 14:23 70:8,12 72:8 87:12 91:3 183:22 203:18 207:24 229:4
dollar 88:16
dollars 163:25 164:1
dosage 218:11
double 176:3
doug 140:17
dozen 8:21
dr 3:11,15,24 4:2,3,5,6,8,9,12 4:14,15 5:10,24 6:14 9:5,25 11:20 16:6,12 32:7 44:10 45:24 46:25 54:10 58:24 70:13 71:23 82:17 83:6 131:22 162:2 174:16 184:20 185:4,19,22 186:10 220:3 236:11 237:9 239:21 240:14 240:17 242:23 243:3
draft 123:12 171:25 243:7 243:12
drafts 64:17
drawn 241:10
drug 120:8 217:11,22 218:4,11,12,17
drugs 176:22 176:24 193:1 218:15 219:1 238:19
due 5:13 208:25 210:16
duly 5:19 245:6
duplicated 228:3
duplication 173:21
durable 231:25 238:20
duration 14:2 90:11 91:7 184:3
durations 87:14 91:13

e

e 38:19,19 245:1,1
earlier 23:17 25:9 36:13 62:6 69:18 104:6 105:15 113:16 116:4 119:6 123:8 130:19 154:3 157:20 169:25 173:5 187:25 188:21 189:2 194:23 195:15 208:9 218:20 219:4 222:16 223:5 229:8 236:11 239:6 242:4

early 35:14 55:4
earnings 21:6,8
easier 95:20 135:15
eastern 1:1 5:8
easy 24:2 104:25 172:23
economic 79:25 80:1 87:2 96:17
economics 17:5 58:2 86:18 87:7 175:17 184:2 220:12
economist 12:21 45:19 75:11 91:3 92:14,17 93:3 93:16,16 94:7 94:11,23 106:16,18 109:24 121:12 121:19,20 168:10,23 169:7,21 174:4 174:14 177:22 187:4 191:3 201:4,4,6 212:19 225:16 225:24 226:7 226:14,20 227:5,6,20,21 231:12
economist's 91:21 178:24 185:4 201:2 210:1
economists 12:10 69:2 87:12,15 107:25 122:24 155:24 156:2 156:17 170:9 173:3 178:4 179:13,17,19 183:22 184:3 184:13 190:22 195:1,7,16 203:18 205:21 206:1 230:4 233:19 235:21
edgar 4:13 220:8
editing 63:25
educated 26:13 26:15
education 31:13
educational 16:17,21 34:12 58:10 59:15,19 62:6
educationally 57:24
effect 24:22 88:9 98:15 141:23 145:5 231:4
effectively 8:4 64:7
efficiencies 19:1
efficiency 137:20 138:15 140:7 220:3
efficiently 106:2
effort 65:1 112:1 172:25 238:4 241:13
efforts 71:7 138:14
eight 39:17 224:10
either 29:5 33:21 60:17 89:16,25 100:18 167:15 167:15 194:13 194:15 200:20
elect 78:22 79:1 79:7 97:9 193:7
elected 22:22 79:15 192:25 193:4
election 217:12
eligibility 71:8 92:18 97:7 113:22 125:24 139:14 161:10 170:17 199:25 210:25 211:2 213:16
eligible 71:15 78:6,10 80:19 90:10 91:6 97:15,16 101:14 105:8 210:15,21
eliminate 135:10
ellen 55:5
elon 137:21
emphasis 141:13
employed 12:1 24:8
employee 16:4 26:25 27:6 34:17,19,20 35:3 45:20,21 245:14,15
employees 7:24
employer 7:15
encounters 149:17,20 150:8
engaged 15:23
engineering 238:2
enroll 76:18 97:9
enrolled 217:13 217:16,22

ensure 5:14 100:1
enter 65:22
entire 54:3 90:11
entirely 20:10
entities 27:1 34:14,21 35:1 35:20
entitled 158:14 174:25 185:9
entitlement 138:7
entity 35:15 78:12 212:19 234:17
entrenched 123:15
entry 88:18
environment 37:12
equals 185:19 214:25
equipment 85:3 231:25 232:13 232:25 233:2 238:11,20
equivalent 148:6 238:24 238:25,25
especially 28:4 142:20
esq 2:3,7,11,16
essentially 63:25 72:5
established 29:3 43:7 66:5 66:8 119:3 238:16
establishing 30:3 38:4 153:20
estimate 39:19 148:15,25 150:1
estimated 201:11
estimates 149:16
et 50:24
evaluate 35:18
evaluated 31:14 74:25 79:1,6 107:19 113:21 180:9
evaluating 24:21 28:1 237:11
evaluation 18:21,21 81:23 127:17 210:1
evenly 20:14 23:8,8,10
event 88:20 145:12
everybody 77:7 96:16 116:16
exact 222:22
exactly 8:24 30:5 43:4 56:16 90:8 129:4 136:21 137:10 143:6,21 154:6 157:14 170:8 196:10 238:3 238:18
examination 3:3,4,4 5:22 236:9 240:18
examining 72:13
example 29:2 49:6 67:4 72:24 85:1 93:21 94:21 97:22 106:15 111:11 117:22 152:18 194:23 205:7 237:22 238:21
examples 86:22
exceeding 113:24
except 100:12 159:17
exception 176:19 216:12 219:3 232:23
exceptions 151:23 202:16 215:24 219:8
excess 193:21
excited 236:1
exclude 104:9
exercise 183:14
exercising 244:2
exhibit 9:11,14 9:16,21 16:5,8 47:21 48:4,7,11 48:12,19 51:17 52:17 53:10 54:8,9 56:22 158:6,10 161:16,24 174:10,14 180:5 187:7,12 200:23,25 204:4,7 207:12 207:15 210:10 220:1,9,12 225:19,22 233:25
exhibits 3:7 4:1 9:13 47:24 48:16 220:10
exist 66:19 81:16
existed 101:24
existence 102:6 106:17 120:22
exists 22:14 66:1 74:9
expect 70:2 209:6

expectancy 92:16 134:11 173:12 184:3 209:8
expectation 35:19
expected 128:10 139:8 139:10 211:14
expenditures 86:25 131:21
expense 185:10 194:6
experience 17:8 28:6 29:9 30:2 32:6 33:20 34:12 57:25 68:16 81:20 236:19,24 237:4,7
experienced 68:10
expert 3:8,10 3:24 4:2,3,5,6,8 4:9,11,12,14,15 9:15,17 10:1 14:25 15:4,25 19:21,22 20:9 20:17,23 24:9 24:12,16 25:4 25:10 26:2 33:24 34:1,2 36:4,10,15,21 38:3,6,7 39:6 39:19 40:1 43:1 43:20 49:2 51:7 53:21,24 54:4 65:20 70:4 81:22 91:24 92:23 118:22 121:7 123:8 128:8 139:17 144:12 155:13 174:12 179:22 187:9 204:5,8 207:13 220:5,7 220:14 234:1
expertise 25:18 42:15 43:20 83:8,14 95:4 104:1 130:16 131:9 142:13
experts 11:13 11:17,24 136:6 136:12 138:1
explain 30:5 42:19 45:15 86:8 154:3 172:7 185:24 224:7 237:21 239:11
explanatory 29:1
exposure 32:16 32:17,23 82:11 82:12
expounded 109:24
express 217:5
expressing 44:14,18 82:13
extends 208:11
extent 11:20 30:21 45:25 47:1 58:25 70:14 71:24 78:1 104:16 137:2 197:20 200:18 202:17
extra 21:9 194:3
extrapolated 180:23
extremely 135:14

f

f 245:1
faces 131:6
facilities 33:5 141:18 152:3
facility 114:17 115:7 143:4,7 143:16,17,24 144:4,17,22 145:20 146:10 147:6,15 148:3 148:7,16 149:2 149:3 152:6 190:15,16,17 193:17,20 194:8 203:5,6 203:11,16 205:12 209:20 209:21 225:7 242:18
facing 137:3
fact 42:2 104:23 137:5 239:19
factor 30:22
factors 37:13 37:18,21 104:24 120:5 126:6
fair 19:2 41:24 41:25 58:18 73:23 168:19 182:18 183:17 215:4 232:8 238:10
fairly 23:14 29:7 64:22 149:6 232:23
fall 28:8 85:17 242:8
familiar 35:2,4 130:23 131:4 145:1
far 50:6 65:5 93:15 109:22 136:9 142:16 195:6 215:17 219:8
fazio 55:5
feature 9:6,9 9:13 47:20,23

201:1
february 1:12 3:14 5:4,5 9:21 9:24 48:2,8 52:23 63:15,17 141:1 142:7 211:15 244:3
federal 16:3,4 17:17,20,25 18:25 19:21 20:7 21:15 24:25 32:24 116:22 124:25 138:6,13
fee 42:5 66:9 67:4,13 69:6 85:17 86:10 87:5 110:21,22 111:13,15 112:17 153:21 157:8 172:19 172:22 214:2 214:19 218:15 218:18,22 231:3,4 240:22 241:4,6,9,21
feel 26:16 33:16 33:23 147:18 147:21
feelings 124:19
felt 112:24 148:5 163:12 239:18
field 42:15 134:2
figure 177:5,8
figures 203:10
files 49:25
filling 59:4
final 86:2 228:4
finally 189:4
financial 83:12 130:20,21 131:8 132:11 233:7
financially 245:16
find 22:17 59:12 64:11,12 65:14 106:5 108:22 229:3
fine 82:21 167:9 225:1
finish 110:18
finished 212:10 219:19
finishing 24:20
firm 7:24 17:14 19:14 22:19 23:4,5 24:2,3,5 45:17 49:12 76:25 77:10,15
first 5:19 10:4 14:4 46:9 48:15 49:13 57:1 65:3 68:9 72:16 89:15 118:14 152:4 162:15 162:17 190:18 193:18,23 194:7 201:19 232:20,20 241:20 245:6,9
fit 89:21 170:9
five 29:3 32:5 47:25
flops 211:19
focused 18:25 97:23
follow 38:1 69:11 124:19 205:9 209:14
followed 122:18
following 152:7 169:17 244:3
follows 5:21 153:16 157:13
footnotes 59:7 59:8,13
force 32:18
forecasted 113:11
forecasting 36:5,8
foreseeable 132:7 139:11
forgot 81:5
form 28:21 29:17 41:13 68:19,22 73:6 74:19 87:9
formula 23:4,5 23:17,18,23 74:17,18 129:17,19,22 152:12
formulary 217:6,7,9 218:2
formulas 125:17
forth 245:9
forward 131:8
found 39:5 41:2 64:11 204:10 207:19
foundation 187:3
four 9:13 60:11 60:16 220:4
fourth 9:21
framework 115:20
frank 4:8 207:17
fraudulent 15:24
free 77:7
frequency 181:6
frequent 28:24
frequently 27:7 27:9 28:25 154:12 172:25

friendly 21:24
front 6:25 178:8
fryar 42:12 189:10 208:4 209:13
fryar's 180:7 189:5,16 208:14,16,17
fryer's 205:16
full 6:15 39:3 75:12 160:2 170:12 215:23
fully 106:16 142:8,8 182:5
fumes 32:20
fun 184:20
functions 158:22 192:9 192:18,20
fund 130:7 131:6,21 132:12 236:13
funded 172:5,8 172:9,10
funding 123:15 124:14 125:5 126:16 129:25 130:2,3 131:14 134:3,7,14 135:9,16 136:1 137:4,7 140:11
funds 43:8 80:18 125:1 126:16
further 3:4 30:5 31:11 235:25 240:18 245:13
future 58:5 69:22,23 75:16 76:1,2 78:7,11 78:13 79:2,7 90:22,22 91:4 91:16 92:1,10 96:1,5,24 97:10 98:15 102:5,20 102:22 113:11 115:14,22 116:2 121:13 123:4 132:7 133:14 136:23 138:19 139:11 145:17 146:17 147:4,5 148:15 148:17 150:7 150:12,21 159:14 165:21 179:1,7 181:17 183:16 185:9 185:21 191:19 191:22 195:11 196:19,23 197:1 198:7 199:2 202:7,8 202:13,18 203:22 205:22 212:20 220:24 223:3,17 226:2 226:9 227:8 231:10,16 233:11,21 235:21 236:13 237:6,11 239:8
fuzzy 152:13

g

g 37:13 226:7
gap 131:14
garner 161:10
gary 4:10 220:8
gases 32:20
gathering 28:3
geared 142:23
gears 237:9
general 36:7 42:18 105:17 105:17 110:12 117:6 119:14 121:15,25 124:7,13 128:19 130:5 140:2,20 219:3
generally 19:22 23:13 92:23 93:8,11 116:18 121:2 202:15 236:25
generated 143:25
generates 149:15
genevieve 55:5
geographic 66:13,24 100:2 100:6 102:1 149:1 205:3
geographical 101:22
georgetown 2:8
getting 22:19 162:25 199:25
give 49:6 66:14 67:4 86:21 93:24 94:11 105:10,11 150:9 152:18 158:7 175:23 179:6 183:11 237:22
given 30:10 41:3 59:25 65:19 72:7,11 77:5 78:5 79:14 80:1,14 85:21 94:23 101:10 101:13 102:16 112:15 125:15 130:14 131:12 149:8,9 154:10 167:1 207:23 227:15 239:24 245:8,12
gives 65:23
giving 64:15 143:3 236:14

glad 77:4
glean 185:23
go 22:2,22 67:2 85:8 88:13 90:19 93:9 110:1 116:14 118:13 121:12 135:21 147:18 157:4 165:25 169:18 179:9 180:14 187:18 188:23 195:7 206:22 212:3 218:6 225:4 236:2
goes 125:15 166:2 215:18 226:7 233:14 241:21
going 9:4,4,6 16:6,8 20:22 22:19 26:1,6 37:25 44:1 47:19 48:21 53:9 54:7 58:3 60:5 64:12 67:9 89:20 90:10,17 90:18 91:3 93:3 93:11,16 95:21 96:2,16,18 97:19,20 98:7,8 99:11,16 115:1 115:6,8 117:9 117:11 118:2 130:12,13 131:8 133:19 136:10 137:11 138:1 140:3 143:3 145:18 146:18 154:11 154:23 156:5,6 158:8,10,11 159:6 162:1 163:5 164:5,6 164:19,22,24 165:13 167:16 167:17,22,24 168:3,4 171:19 173:24 174:13 174:15 184:21 185:7,8 204:6 207:14 210:9 212:12,20 220:5,14 221:2 225:18,19 226:24 227:7 228:23 230:9 241:17
golkow 5:3
good 5:1,24,25 18:5 22:13 25:8 28:8 31:21 57:20 100:13 105:11 142:19 151:3 175:13 175:14 231:24 243:11
goodness 31:19
gould 37:13,18 37:21
government 11:10 16:2 17:17,20,25,25 18:25 19:21 20:8 21:16 26:1 34:9,14 44:19 47:12 53:1 65:6 66:23 67:20 70:18 71:1,2,6 71:9 72:16,20 72:20 73:1,2,18 74:22,23 75:13 75:16 76:10 80:21 84:5,8 86:24 88:21 89:5 90:11,15 90:18 91:7,15 94:24 96:2,7,23 100:3,7 101:25 102:6 103:10 104:10 108:2 108:15 112:15 112:17 116:12 117:11 121:9 124:25 137:20 138:14 144:10 144:16 147:2 147:10 148:2 148:15 149:8 150:7,10 155:3 156:18 158:24 159:4,10,15 164:18,22,24 166:24 167:22 167:24 168:24 169:1,2,3,20 170:24 171:3,9 171:10 173:19 174:25 178:18 178:25 180:6 183:16 187:21 188:3 195:10 199:4,19 200:20 205:11 207:6,9 212:19 213:9 216:7 220:19,23 223:2 226:19 226:24 229:9 229:15,18,25
government's 122:24
governmental 116:7 155:12 165:7 173:13 173:15 184:17 223:23
governments 17:18,21 24:25
graham 2:3
great 129:24
greater 20:23
greatest 80:17
greg 12:14 14:16,20 53:21

55:1
gregory 11:24 11:25
gross 23:25
group 2:7 6:2 7:16,18,22,23 8:12,13 22:23 37:17 77:16,16 77:18,25 78:2 185:12 233:7
grown 24:6
growth 185:17
guaranteeing 216:6
guess 46:5 97:22 107:15 132:19 133:21 155:6 169:16 192:13,16 235:2
guidelines 27:17,20,21
guys 23:19 86:2 118:6 219:19

h

hairston 42:12 60:17,17
half 14:5 40:6,7
hand 145:19 232:4,22 245:17
handled 223:6
hands 144:3
happen 72:10 95:23 99:2,3 133:6,13 137:11 221:3,4
happened 21:22 45:23 46:3 61:17,23 137:5
happens 95:24 96:20 166:1 193:20
happy 174:20
hard 30:1 42:16 78:23 96:5 99:23 108:22 132:21
hcpcs 27:11
head 103:13 175:13
heading 50:21
headquarters 7:25
headwinds 131:7
health 7:21 8:6 8:11 12:5 17:10 18:4,15,17,18 18:19,23 19:4 19:25 21:23 22:1 27:25 45:18 66:20 81:13 100:14 114:4 138:13 139:3 150:8 157:21 185:12 188:20 189:25 190:3 197:9,12 197:13,23 198:17 199:2 234:14
healthcare 18:10,22 24:21 24:22 26:23 27:1,1,2,5,8 30:3,13 33:20 37:12 41:10 133:20 137:25 142:19 149:17 149:20 196:14 199:3,8 236:20 239:23
hear 32:7 38:25 151:1
heard 5:15
heavily 142:20
heightened 213:18
held 5:6 232:4 232:22
help 10:23 29:5 29:11,12 60:1 64:1 84:19 94:14 153:2 164:16 189:23 215:11 232:17 233:6
helped 14:13 35:8
helper 32:2
helpful 83:24 89:14
helping 57:6
helps 84:11
henry 1:11 3:2 3:14 5:10,18 6:16 9:20,24 48:2,9 53:25 56:7 161:25 185:11 243:3 244:2
hereon 244:3
hi 129:25 130:2 130:6 131:6 132:12
hierarchy 241:19
high 64:6 129:9 202:23
higher 65:9 93:12 141:19 148:20 156:14 176:1 177:10 177:13,14,15 177:17,19 190:18 194:17 239:17
highest 227:25
hill 4:4,5 31:17 31:17 72:24 152:22 155:18 156:6 187:10 187:16,20

188:6 189:6 191:13 192:25 193:4 194:20 198:16 202:12 203:3
hill's 50:13 156:8 191:15
hired 12:11,21 20:1,11 22:11 25:10 27:8 38:6 40:13,14 41:8
historical 122:19 128:16
historically 122:13 129:10
history 17:10 137:11,12 153:4 215:9
hold 27:10 35:1 47:12
holds 12:3
home 15:23,25 18:10 33:6,9 189:25 190:3 196:14 197:1,2 197:9,12,13,23 198:17 199:2,2 199:7 208:18 225:7,9 232:1 232:16 233:5,8 233:15
homebound 197:23,25 198:3
homeless 18:22
honestly 7:11
hope 124:17 150:13
hopefully 163:14
hoping 151:15 217:11
hospital 30:8 36:20,24 67:6 114:21,23 143:4 145:3,20 146:25 149:16 149:20 150:8 155:17 237:16 238:8 239:10 240:7,24 242:12
hospitalization 77:11
hospitalized 77:11
hospitals 142:22,23 147:24 204:22 239:14,17 241:3
hour 14:5 43:25 44:2 56:13 63:5 63:10 82:16 118:5 184:20 189:23 193:14
hourly 56:12 189:24 224:16
hours 14:4 56:14 63:5,12 224:10,12
house 140:18 140:22
housekeeping 189:15 233:6
hundreds 26:16 140:6

i

i.e. 91:3
icd 27:23,23
idea 45:14 72:14 78:25 79:5 117:17,18 179:17 202:6 202:24 203:20 226:13,23 227:18
ideas 227:22
identical 240:4
identification 28:20 93:19
identified 34:1 41:19 43:16 51:13 55:16,24 61:1 67:12 71:9 75:7 78:13 82:7 91:14 92:7 93:6 106:20 107:18 112:10 113:8 115:5,20 117:21 122:14 134:14,14 146:20 154:16 162:24 175:4 176:7,8 178:4 178:19 181:9 183:4 184:15 187:11 188:14 188:25 189:10 189:16 190:23 191:23 195:21 198:22,23 205:16 206:2,6 209:20 212:23 216:5 220:25 222:23 223:21 223:22 224:6 225:11 226:20 229:23 231:19 234:12 237:23 238:12 239:16
identifier 50:23
identifies 23:23 29:23 166:6,6,7 198:13,14,16 238:8
identify 11:6 13:17 37:14 40:25 53:10 60:20,21 65:15 66:12,12 67:14 70:18 90:15,17 95:4 104:15 109:17 144:25 146:8 150:20 151:17 169:21

189:22 199:7 211:22 217:4,6
identifying 29:6 36:23 40:8 40:21,22 59:13 69:12 85:16,16 107:3 153:8 185:14 186:10
illinois 17:4
illnesses 97:13
imagine 110:3 188:12
immediate 59:25
impact 108:13 135:18
important 41:25 85:14 86:1,3 95:11 135:13 146:1 165:25 239:13
importantly 112:25
imposed 128:1
impossible 213:8
improper 174:5 174:6
improving 18:25 19:1
inaccurate 178:8
include 63:16 77:10 107:20 112:23 158:21 164:3 221:21 234:17 238:10
included 28:1 35:14 39:14,15 60:13 71:12 72:2,13 73:13 76:14 80:21 82:7 85:4 88:14 88:14 104:14 105:3 109:22 129:17 138:23 159:6,7 192:10 196:24 197:21 222:17 235:10
includes 84:21 84:24 199:8 238:6,7,11
including 6:9 18:14 22:18 28:1 39:16 54:15 114:7 128:2 218:11 231:25
income 132:6
incorrect 69:1
increase 122:5 128:10,23 138:14 175:23 237:6,8
increased 24:10 122:4 236:25 237:2
increases 122:7 128:24 129:12 129:23
increasing 129:8 135:17
independent 205:10
independently 172:9 183:21 228:14 229:17
index 3:1 122:2
indexes 122:1,1
indicate 166:8 166:10
indicated 151:19 154:16 154:17 181:6 210:19 239:6
indicates 25:15
indication 162:25
indices 121:24
individual 12:23 14:22 30:8 66:9 75:22 76:6 77:17 105:16 116:24 119:13 120:24 122:11 128:24 149:16 150:14 152:9 159:6 216:21 239:9
individually 243:9
individuals 13:1,17 14:12 16:2 31:14 53:11 54:16,19 55:24 56:5 60:21 75:4,14 77:25 80:10 113:21 124:13 139:13
industrial 238:1
influence 39:9
inform 123:3,4 240:8
information 33:19 42:1,3,4 50:8 64:12 70:25 71:5,11 72:7 73:2 74:1 74:18 78:3,4 79:14 81:4 93:18 122:5 127:18,20 155:22,23,25 168:24,25 169:8 170:4,10 185:24 191:11 191:12 197:20 198:12 206:14 207:6 218:10 218:12,19
informed 240:2
infusion 221:24

initial 65:1
initially 45:9
injured 16:3 43:8
injury 16:1 38:17 40:17,18 40:20 43:7 45:4
inpatient 18:9 77:13 106:9,13 141:13 160:9
input 241:4,5
inserted 180:11
inside 143:24 144:17,21 145:18 146:10 146:18 205:12 209:20 225:7
instance 38:1 38:15 43:14
instances 33:3 33:18 36:18 59:10 64:16,17 95:13 119:24 120:2 129:18 129:22 154:13 214:21 215:3 215:17,22
instruction 94:22
instructions 94:12 243:6
insurance 33:12 38:4,10 74:25 75:5,6,14 75:15,23 76:7 76:16,16,21 77:1,2,9,13,16 77:17 78:2,6,11 78:17,21 80:2,3 81:11,13 85:6 89:2,3 95:15 96:14 97:14,16 98:14,18,23 99:4,4,7,9,13 103:19 111:4 112:6,19 113:22 121:3 155:16 157:22 159:15 166:7 171:9 191:3 206:12 210:15 211:15 212:16 234:4,14 237:25
insurances 168:16
insurer 166:10 170:13,16
insurers 191:15
intelligence 68:20
intended 93:20 164:23 178:11 182:24
intending 179:4 179:6
intensive 162:21
intent 167:25 168:8,23 183:6 183:9
interested 245:16
interesting 172:21 213:15
interestingly 211:19
internal 49:25
internally 22:13 52:3 143:25
international 7:24 9:1
interplay 94:13 94:20,24 213:16
interpreting 55:19
intervention 221:23
introduction 188:1
investigate 31:11
investigated 114:12
invoice 52:21 52:22
invoices 3:18 3:21,22 11:6 47:16,19 48:4 48:11,12,16,17 48:19,22 49:13 49:16,21,22 50:1,10 51:5,7 51:10,10,15,17 52:14,18,20,25 53:4,5,9,14,17 53:24 54:3,4,9 55:25 56:12 58:19
involve 31:5
involved 15:22 17:16 26:4 36:23 43:6 45:11 46:18,21 53:11 67:12 88:8 113:3 199:15 240:21
involves 17:10 104:5
involving 16:3 40:20 234:7
irrational 98:5 98:24
issue 24:4 25:23 39:11,13 41:4 71:19 102:21 105:16,17 133:15,18,20 134:7 137:2 199:16 215:18 240:6
issued 39:20 41:7 53:21 71:17,18 130:7

130:16 192:24
issues 18:18 100:13 124:23 136:2 229:17
item 162:15 208:18
itemized 208:3 223:9
items 64:14 229:24 232:1 232:23 235:15 238:7,12

j

jacqueline 3:24 4:2 161:25 174:12,25
january 56:17 63:15
jaylen 55:2
jimmy 4:7 204:6,8
joanna 12:17 12:23 14:16,19 55:3
job 65:7 102:14 131:4
joey 235:25
johnson 245:18
join 22:2,3,8,9
joined 36:14
joining 17:9
joint 17:4
jointly 61:22
jordan 55:2
joseph 2:11
joseph.b.turner 2:14
judge 38:24
judge's 39:2
judgment 39:10 65:12
julian 49:23 50:5,5,6 55:10 56:5,11,17 57:4 57:10,13,17,21 57:21 59:24,24 60:20 61:15 62:2,23 64:10 64:17 65:8 68:3 69:1 101:21
june 210:17
jury 38:25 39:8
justice 2:12,13 2:17 3:16,19 44:11,15,20,25 45:6 46:8,10 47:6 50:22 72:12
justice's 47:25

k

k 28:17
kansas 245:4 245:18
keep 67:18 100:10 101:7 109:23 117:3 139:24 140:16 146:1 211:9,20
keeping 8:18 129:25
kelly 1:23 5:16 245:3,22
key 69:13 133:19 199:15 199:16 238:16
kick 194:9
kidney 31:14 33:19 211:3,8
kind 8:14 40:21 100:21 151:25 192:19
kinds 65:22
knee 149:9
knew 45:23 71:14 179:18
know 8:8,22,25 9:2 15:16,18,20 21:9 25:19 26:17 31:23 37:25 39:2 40:12,15 45:11 45:13 47:11 49:5,9,17,21 50:3,16,20,25 52:1,6,9 53:6 53:16 55:15 56:3 57:6 58:10 59:19,20,21 60:3,7 61:19 62:2,9,10,13,16 62:22,25 63:3 63:25 66:1 67:22,25 68:19 70:7,8 73:15,18 77:4 86:6 89:6 89:23 93:16,25 95:15 96:1,5,8 96:11 97:24 99:6 103:12 105:7 106:5 107:13 110:4 113:6 114:9,11 114:15 115:3,6 118:1 122:24 123:2 124:6 130:10 131:19 132:9,16,21 135:20 136:9 136:21 137:2 137:10 141:2,9 141:15,16 142:5,6 145:17 146:15,17 148:8,10 151:25 152:24 153:5,10,10 154:21 156:17 163:19 166:15 167:10,12,16 168:22,22 169:21,21 170:8 172:11 172:15 176:5,6 177:1,18,21 178:16,17

179:18 180:3 180:22 181:16 181:16,20 182:1,20 186:8 186:16 187:2 190:14,22 191:2 192:2,6 195:7,23 196:6 196:25 198:18 198:19 199:9,9 201:7 202:11 203:13 206:19 208:13 209:10 213:8 214:7 215:18 222:3,8 224:16 225:6 227:1,3 230:25 232:9,21 235:25 238:18 239:9,14,15 241:8,15
knowing 104:21 116:14 155:12 156:13 179:8 212:22 227:7
knowledge 14:11 81:3 83:23 84:17 188:11 195:16 204:20 205:20 206:10
knowledgeable 26:17
known 38:21 191:11
knows 181:21 181:22 240:10
knutson 28:14 28:16

l

l 28:16 37:13 38:19
lab 18:10 238:23
labeled 52:1
laboratory 214:1
lamacchia 2:7
landscape 149:4
landscaping 189:15
language 185:9 186:13
laptop 7:4,7
laramore 4:7 204:6,8,14,18 204:21 205:8 206:11,25 209:7
large 7:22 15:22 19:14 35:21 40:5 110:1 138:7 141:13
largest 18:14
larry 130:22
latest 69:20 191:20
law 43:11 76:25 123:16 131:14 214:5
lawful 5:19
lawn 195:22 238:9,10
lcp 181:7 226:10
leaders 138:5
leadership 6:2
leading 129:9
leave 19:3
leaves 55:6
lecg 21:19 22:2 22:4,5,12
led 137:21
left 22:2,2,4,8,8
legal 2:7 43:2
legislative 25:16 36:5,7 117:3 136:24
lejeuen 2:17
lejeune 1:4 2:12 5:7 6:2 10:1 11:7,13,17 13:3 15:1,9 44:11,15,20,25 50:21 51:14,16 52:4,6 55:21 82:12
leslie 2:7
letter 3:17,20 48:1,7
letters 11:10
leukemia 31:15 31:18 61:8
level 56:18 124:5 128:19
levels 136:23
licensed 26:19 198:2
life 26:13,15,16 26:19 33:17,25 34:4 42:10,11 60:11,11,13,19 61:2,7,13 70:16 70:21,22,24 72:11 75:7 76:10 78:14 82:3,6 87:13 88:6,8,22 89:16 89:17,17,22,25 90:12,21 91:7 91:11,13 92:16 92:16,17 93:4,4 94:2 95:5,7 101:24 103:25 106:18,21 108:1 109:25 110:1 112:16 113:8,10 115:17 116:2 122:15,21 134:10 149:21

162:23 168:15 169:10,14,14 173:12,12 178:19 180:7,8 184:2 189:5,9 191:23 196:24 198:13,22 199:6,7,10,11 199:18,22 205:4,16,22 206:6,16 208:4 208:14,17 209:8,13 210:1 212:23 216:24 217:8 218:11 220:24 221:8 221:19 223:15 223:22 225:25 226:8,19 227:13 231:13 232:20 233:21 237:12

lifetime 108:1

likelihood 80:17 95:12

likely 76:10 132:4 137:12 236:19 237:5,5

limited 6:9 36:17 38:16 81:23 137:2 167:8,9,10

limits 33:6 128:10

lindsay 28:14 28:16

line 156:8 166:21 167:1 196:2,4 244:24

linereads 244:6

lines 31:25 167:11,13

list 14:9 42:14 143:1 216:17

listed 146:24 152:24 155:7,8 155:9 160:18 192:2 217:8 236:14

literally 51:15 166:14

literature 116:23

litigation 1:4 5:7 6:3 10:1 11:14,17 13:3 15:1,10 20:2 21:5 23:19 31:5 44:25 50:21 52:4 53:22 134:11 222:13

little 19:20 30:5 65:15 118:8 152:3 162:7 163:12,15 170:4 172:25 174:19 182:2 191:24 194:1 202:2 224:20 225:2,3 235:13

live 7:13

llamacchia 2:9

llc 2:7 21:19 22:6 185:13

local 37:3

locality 215:9

location 221:9 221:10

long 14:5 15:6 62:13,23 90:17 90:18,21 92:5 141:5

longer 77:18 98:2 99:14 210:23 211:8 233:3

longest 22:14

look 10:18,21 15:18 33:17 48:15,22 50:14 52:17 56:6,9 57:5 65:13,21 66:18 68:14,17 70:8 73:15 88:25 89:21 116:10 117:1 121:22,25 149:1,2,4 150:13 151:25 153:19 157:7 161:18,21 163:10 172:21 172:24 174:11 175:14 176:4 177:4 178:23 180:15 187:9 200:25 204:5 206:23 207:13 210:5,8 218:6 233:24 234:11 235:4

looked 10:21 11:3 22:18 33:18 180:16 210:6 225:2 231:3

looking 34:2,3 59:3 61:12 65:6 68:21 116:5 135:7 153:20 153:21 157:10 161:12 162:15 166:25 173:22 176:3 181:4 185:4 198:15 208:11

looks 16:13 17:9 21:18 52:22 57:1 58:16 123:14 123:20 161:19 181:1 192:14 205:15 208:2 224:20 225:3 225:10

lose 58:3 210:24
lost 90:7 100:21
lot 18:3,13 22:13 27:21,23 31:23 33:4 97:19 105:12 141:11 142:23 152:8,18,19 154:13 177:17
lots 105:14 141:13
low 201:12 202:22 224:20 225:2,3 232:23
lower 37:8,17 64:6 80:16 81:17 93:13 141:24 148:21 154:5,8 156:10 156:15 177:20 214:18
lowest 121:3
lpn 197:17 198:19
lucas 55:2
lunchtime 118:10,11
lymphocytic 31:18

m

machine 245:9
macra 128:13
macro 122:10 128:19,22
macroecono... 86:23,23
made 19:3 21:5 23:3 43:12 49:14 61:22 68:13 88:12 116:24 118:3 135:2 136:25 150:18 155:23 163:12 174:8 180:2 183:1 196:22,24 199:6 203:4 216:13 221:8 221:15 225:16 238:22,22 241:13
madison 55:3,3
main 2:4
maintain 132:11
maintains 92:18 159:15
maintenance 32:19 195:22 235:5,9 238:9 238:10
major 100:18 100:20
majority 28:24 49:22 100:11 146:2 214:20 215:17
make 35:25 39:10 41:6 49:17 50:15 60:9 61:21 62:3 68:12 71:7 73:1 79:25 90:14 93:17,22 94:14 97:4,12,20 104:14 105:23 106:3 112:1 123:14 124:14 124:18 127:17 127:21 128:14 131:17 132:1 153:12 161:21 165:22 169:9 179:14 182:16 183:14,15 187:19 195:24 210:6 212:8 222:20 229:14 243:7 244:3
makes 194:6
making 60:6 79:20 91:20 95:12 129:20 193:3 213:18
malpractice 85:6 237:25
manage 43:8
managed 8:17 17:14
management 6:6 130:21 221:21
managerial 144:11,15 145:7,11 148:10,25 237:20 238:3 238:13 239:1 240:21,23 241:1,5,11,14 242:4
managing 7:19 8:5,11 12:3 21:20 31:20 45:2,17 63:9 76:25 185:11
mandatory 125:1,5 128:2
manual 65:5
march 8:4 245:18
marked 9:11 16:5,8 47:21 158:6,9 161:16 161:24 174:10 174:14 187:7 200:23 204:4 207:12 220:2 220:11
market 24:22 40:23
maryland 17:16

master's 58:5,7
match 61:20,20
material 65:18 154:6
materials 14:9 59:8 73:13,21 74:4 146:23 149:18 154:1
maternal 18:23
math 67:18 87:15 161:1 175:13
matter 5:7 15:7 29:21 51:14,25 55:21 176:11 187:9 194:18 197:11 198:2
maximum 214:2,3,6,13,15 214:18 215:1 224:13
mba 17:1
mcelhiney 4:10 4:11 94:21 158:1,7,9,14,18 158:22 159:13 161:9,13 162:23 163:4 163:10 173:22 220:8,13,16,18
mcelhiney's 220:14 221:14 221:19 225:17
mean 30:6 42:5 53:8 67:15 72:10 83:11,18 84:20 88:12 90:4 91:21,23 98:8 119:9 123:24 125:5 128:22 129:13 154:4 164:23 171:10 174:18 192:18 198:9 203:13 218:3 219:12 227:1 228:6 229:24 231:20 234:12
meaning 67:10 113:24 134:10 144:12 146:10 211:7 228:3 233:9
means 6:8 64:25 84:15,19 117:8,9,11 125:9 132:22 192:11 223:21 224:8 229:25 231:21 234:13
meant 61:18 100:24 111:12 132:16 154:4 228:18 234:23
measure 118:22 144:20 144:20 207:5 207:11
measured 239:1 240:7
mechanisms 19:1
medicaid 15:24 18:6,12 43:10 43:10 80:19,24 81:3,5
medical 26:10 27:14 32:9 75:6 78:13 121:1 127:3 139:14 141:18 144:14 175:1 178:4 182:10 184:9 185:10,21 200:5 202:8 204:21 206:12 211:25 212:15 216:17 226:2,9 231:25 238:20 239:8 240:4 242:6
medically 82:4 82:8 216:25
medicals 144:12
medicare 18:6 18:11,20 25:20 26:5 33:1,3,6 33:10 38:24,25 39:4,9 40:9 43:10 66:9 67:4 67:10,13 69:8 70:19 72:6 76:15,15,18 77:7,12,20,21 77:22 79:11,20 80:24 81:7,8,8 81:12,17,23 83:19 84:8 92:25 93:13 94:4,9 95:5,16 95:20 96:12 97:2,8,15,17,23 97:25 100:12 101:2 102:6 103:12,21 104:20 105:8 105:12,24 106:9,16,20 107:2,5,17,18 108:18 109:3,5 109:12,15,17 110:21,24 111:4,16,22 112:14 113:6 116:18 117:4,9 117:10 119:2 120:9,14,18,22 121:2 122:4,8 123:10,15 124:3,15 125:1 125:5,11,16 127:1,2,9,19 128:2,7,11,12 129:7 130:1,3

130:16 131:9
131:15 132:2,6
132:11 133:14
133:16,25
134:2,7,16,22
135:6,8,11,19
137:3,4,7,8,13
138:2,8 139:23
145:3,6,7 146:2
146:5 151:19
151:20,21,22
152:4,5,8,15,17
152:23,24
153:7,8,14,16
153:21 154:11
154:19,20,23
155:8,19,19
156:9,14 157:1
157:6,8,13,25
158:14,20,21
158:25 159:10
159:16,16
160:2,3,6,11,18
160:23 161:9
162:11 163:2
163:18,20,21
163:25 164:4,5
164:13,20,25
165:3,17,18
166:3,4,8,10,11
166:14,23
167:11,16
168:3,12
169:22 170:1
172:8,9,11,21
173:23,25
175:8 176:8
177:6 179:10
179:23 183:4
185:15 186:4
186:11 187:20
188:6,25
189:14,19
190:7,17
191:17 194:7
194:20,23
195:23,23
196:8,13 197:3
197:8,16,22
198:4,19,20
199:11,14
200:1 202:3,7
202:12 203:22
204:12 207:21
210:14,16,24
211:10,14,23
212:4,21
213:14,16
214:18,21,24
214:25 215:8
217:13 218:13
218:14,18,21
219:12,12,13
222:17 223:6
224:3 226:5,11
226:21 228:1
229:4,23
230:16 231:5
231:15,20,21
231:24 232:13
232:16 233:1,9
233:15,17
235:4,11
236:13,19,20
236:24 237:5
237:19 238:22
240:9,24 241:9
241:10,12,19
241:20,23
242:9,12
medicare's 103:16 136:22 164:2 214:5
medication 69:19 217:6 221:21 234:18
medications 217:4,9
medpac 127:19
meet 97:7 196:19 197:8 198:6 199:4,18
meeting 14:5
meetings 13:15 13:19,25 14:3,4 14:7
member 77:15 77:16,18
members 77:25 78:1 112:5 124:2,18
memory 14:3
men 124:22
mentioned 14:16 23:17 24:17 129:17 153:23
mentions 207:21
merely 207:5
messaging 6:9
met 13:12 105:15 106:2,4 113:12
method 112:13 112:14 144:11
methodologies 119:17 120:9 188:24
methodology 64:10,18 85:9 126:9 151:16 151:19 152:21 156:23,23,25 163:15 177:22 188:23 204:12 207:21 208:7 213:23 217:3 219:4,9 229:7 234:7 241:23 242:9
methods 28:1,2 88:9,10 145:2
mexico 245:5

michael 2:16 189:5,16 208:4 208:5
michael.w.cr... 2:19
middle 186:9
miller 1:11 3:2 3:7,11,14,15,17 3:24 4:2,3,6,8,9 4:12,14,15 5:10 5:18,24 6:14,16 9:5,11,20,24,25 11:20 16:5,6,12 16:15 32:7 44:10 45:24 46:25 47:21 48:2,6,10 53:25 54:10 55:2 56:7 58:24 70:13 71:23 82:17 83:6 131:22 158:6 161:16 161:25 162:2 174:10,16 184:20 185:4 185:11 187:7 200:23 204:4,7 207:12 220:1,3 236:11 237:9 239:21 240:14 240:17 242:23 243:3 244:2
miller's 185:19
million 226:1
mind 15:5 32:15 43:13 94:15 100:10 101:7 109:23 146:1 211:21 225:16 232:18 243:7
minus 131:21
minute 151:5 184:21 235:13 236:3
minutes 118:6 150:25 219:19
miscellaneous 196:3
missed 62:20
missing 61:13 234:25
missouri 245:4
mistake 214:10
misunderstand 84:7
mix 85:18
model 121:8 231:9
modifications 233:15
modified 145:8
moment 102:25 149:4 158:7 185:8 210:9 235:25 237:10 240:20
money 23:18 23:24,25 130:13,14 144:3 145:19 147:9,13 165:6 171:19
monitoring 221:22
month 130:19 140:25 149:8 224:10
monthly 224:9
months 46:4
morning 5:1,24 5:25
mother 76:24 77:10
mountain 5:6
mousser 4:8 207:14,17 208:12
mousser's 208:8
movable 232:4
move 228:22
moved 8:3,4
multiple 8:5 53:10 96:7 173:16 192:17
musk 137:22

n

n 28:16,17,17
name 5:2 6:1 6:15 12:11 13:20 28:13 38:20 52:10 130:22 201:5
named 38:19 245:6
names 15:16
natasha 55:1
national 27:25
nature 5:13 17:19 19:18,22 59:12 104:4
navarro 42:12 60:18 191:23 192:3,5 206:20
navarro's 206:16
navigant 19:8 19:10,12,14 20:15,17,25 21:14,19 22:1,9
nc 2:4,18
necessarily 73:25 114:3 196:1
necessary 36:3 82:4,8 149:18 216:25
necessity 216:17
need 26:7 29:5 29:12 31:10,17 33:16,23 34:6 50:8 60:1 64:11 66:15 68:17

89:15 110:5 132:1,17,17 141:14 151:5 158:11 159:23 160:3 169:21 170:8 192:23 196:23 198:13 199:9 200:6 209:1 213:8 221:23 233:9
needed 16:10 37:18 101:23 111:23 179:14 179:23
needs 81:13 176:10 208:25 233:4
negative 131:21
negotiated 241:22
neither 61:24 224:2 241:21
nephrologist 162:16 163:8 165:15 166:3 175:20 180:17
network 35:6 114:8,22 115:9 145:14,22 146:9,19 148:9 150:3,19 204:23 205:17 237:11
neurology 221:21 230:19
neutrality 128:11 129:16
never 12:15,20 24:4 27:4,13 34:15,20 35:3 40:17 42:9 43:1 131:17 136:18 138:10 151:2 173:6 228:18
new 2:18 16:24 17:2 72:25 73:2 73:4 116:19 125:10 245:5
nice 66:16 174:18
nikisha 55:5
noah 55:2
normally 67:22 67:23 99:1 238:24
north 1:1 2:4 5:9
nos 9:11 47:21 220:1
note 60:6 64:22 90:21
noted 5:15 152:18 188:7 224:2
notice 3:11,12 9:19,22 10:11 10:15,23 14:10 47:17 48:5 114:19
noticed 72:15 113:15 152:19 157:24 193:13
notified 116:12
noting 153:8
november 6:18
number 8:17 9:2 25:8 27:24 28:5,25 47:18 48:6 59:7 63:19 84:14,15,19 86:4,7,9,13,14 106:23 108:5 109:11,23 129:3 138:11 142:3 150:17 168:5 173:11 175:25 177:10 177:13,14,15 177:19,20 189:9 193:21 232:4
numbered 174:23
numbers 75:12 79:19 84:3,8 85:18,24,25 87:8 89:14,22 89:24 90:3 91:1 91:4,10,13 92:15 99:14 100:13 110:2 135:8 169:14 174:5 175:11 176:13 182:22 183:2 190:23 203:9 205:21 226:13,21 227:15,17,25 228:4,6 235:21
numerous 74:12
nurse 194:8 197:17 198:1,2 198:14 235:1
nurses 149:3
nursing 15:23 15:25 152:3,6 190:1,4,13,15 190:16 193:17 193:20 197:14 198:13 199:8 199:13 238:11

o

o 28:17 37:13
oath 6:23
object 87:9 89:19 92:12 95:1 159:19
objection 3:12 9:22 10:17 11:1 11:18 15:14 17:22 26:24 29:17 30:19 31:7 36:6,11 38:12 40:4 43:3

44:21 45:10,24
46:25 47:14
49:4,19 50:2,17
51:2,21 52:11
53:3 54:22,25
55:9,17 56:2
57:8,15 58:1,13
58:20,24 59:9
60:8,23 61:9,14
62:18 63:2,7
64:3 65:10,24
66:7 67:21 68:7
69:4,10 70:5,13
71:4,10,20,23
72:9,21 73:3,8
73:24 74:7,20
75:1,8,18 76:3
76:12 77:23
78:8,15 79:3,8
79:17,22 80:8
80:12 81:25
82:5 83:9 84:6
85:19 86:5,15
86:20 87:17
88:3 89:9 90:5
90:13 91:9 92:2
92:20 93:7,23
94:16 95:8 96:4
96:10,15 97:1
98:3,17 99:17
100:9 102:2,12
103:17 104:3
104:18 106:25
108:7,25
109:13 110:6
112:12 114:10
115:11,16,23
117:5 118:24
119:18,23
120:6,11,15,20
121:5,14
122:16 123:1,5
124:9,16 125:7
125:12,18,22
125:25 126:4,7
126:10,13,18
126:23 127:7
127:12,23
128:3,21 130:4
130:8,25
131:11 132:3,8
132:15 133:2,8
133:17 134:4,9
134:18,24
135:23 136:3
136:16 137:1
138:3,9,16,21
140:1,8,13,19
141:7,21 142:1
142:10,15
143:5,19
144:18,23
145:24 146:12
146:21 147:8
147:12 148:4
148:12,19
149:12,22
150:11 155:21
156:20 160:16
161:6,14
162:13 163:23
164:11,15
165:10,24
166:19 167:19
168:18,21
169:12,15
170:6,14,21
171:2,13,21
172:14,20
173:7,18 174:7
175:5,12,19
176:9 177:2,12
177:24 178:6
178:13,21
179:2,11,16,25
180:13,24
181:3,11,19
182:7,13,19,25
183:8,18,24
184:6,11 186:2
186:7,15,19
187:5,22
188:15 189:12
190:9,25 191:6
193:5,9,22
194:11,24
195:5,12,18
196:15,21
197:10,24
198:8,11 199:5
199:20 200:2,8
200:13,21
201:14,17,23
202:9,14,20,25
203:7,12,23
204:2,15,24
205:5,13,23
206:3,8,13
207:2,8,25
208:22 209:4,9
209:16,22
210:3 211:1,11
212:25 213:5
213:11 214:9
214:14 215:2
216:9,14,18,23
217:19,24
218:23 219:6
219:10 221:1
221:12 222:5
222:10,14,24
223:4,11,18,25
224:4,18,23
226:16,25
227:9,19 228:5
228:10,15,20
229:10,20
230:7,24 231:6
231:17 232:7
233:12,16,22
234:19 235:22
241:7 242:1,10
objections 10:11
objective 64:5

obligation 6:22
obscure 29:8
observation 128:20 238:5
observations 128:17
observers 238:5
obtain 239:9
obtained 60:3 98:14
obtains 76:6
obviously 120:23
occasions 28:9
occur 6:9 68:3 99:23 116:18 117:18 118:2 145:9 147:22 154:18 216:3,4 223:16
occurred 99:24 139:18 144:21 148:2 153:9 203:5,6 237:3
occurring 146:9
occurs 114:16 120:3 147:6 148:2,16 149:1 219:16 242:18
odd 38:20
offer 127:20
offered 134:16
offering 34:4,8 76:17 89:7 93:17 94:17 184:8,12,14 207:4
offerings 135:10
offhand 15:19
office 8:19 12:8 28:10 67:6 85:2 85:3 130:21 154:22 162:18 166:5 221:3
office's 131:18
officer 130:20
offices 8:22
official 245:17
offset 42:17,20 42:22 43:16,21 44:19 75:13 179:7,9 185:20 190:24 200:19 227:18 228:19 235:21
offsets 15:13 42:15,24 43:2,5 43:13 44:14 175:1 178:4 182:10 184:9 185:9 201:18 226:2,9
offsetting 42:22
oh 31:19 64:20 81:8 83:15 85:11 110:17 118:10 161:7 174:23 186:23 212:9
okay 6:4 7:8,9 26:6,7 34:8 44:4 48:17,18 50:20 52:17 53:20 59:3,18 74:12 82:19 86:17 89:6 90:9 100:22 101:6 107:16 110:17 114:6 115:19 118:12 153:24 154:2,9 156:22 158:8 163:24 164:16 171:17 174:21 184:22 186:23 194:16 199:24 200:4 200:24 202:1 210:7 214:12 219:17 225:10 228:22 234:22 240:1 242:16
older 105:14 236:21
once 19:19 35:19 59:24 61:23 64:25 69:2 77:15,18 116:18 120:21 198:19
oncology 29:13 29:20 149:9
ones 14:15 29:11,12 46:17 53:2 54:23 71:2 72:12,19 103:21 117:20 154:18
ongoing 221:21
open 7:4
operate 125:11 137:13
operating 146:13
opine 206:1 209:25 211:9
opinion 30:23 34:4,8 41:18 44:14,18 82:11 82:13 91:25 92:3,5 102:21 136:14 143:3 155:13 170:25 178:2 181:8 182:9,14 184:9 184:14 186:17 191:9,14 201:16 216:12 226:22 233:18 235:19 236:15 236:18,22

opinions 30:17 30:20,20 31:4,9 34:5 47:12 70:2 70:6,9 182:4 184:12 200:18 206:24 223:10 229:15 230:3 233:23
opportunity 10:10 22:17 35:22 58:4 77:19 81:5 101:12 127:17
opposed 27:22 40:24 45:8 63:20 65:8 75:16 108:3 128:23 162:22 163:9 173:16 205:10 218:5 232:13,24
opt 97:18 217:12 234:20 234:24
opted 129:22
option 80:16 97:14 133:3 154:7 239:20
optional 79:11 80:6
options 132:21 132:23,25 133:22,23 136:8 154:9 205:18 236:14 236:15
order 6:6 39:6 81:14 89:14 132:2 172:12 179:23 182:16 190:23 196:19 197:16 198:4 198:25 243:4 243:11
ordering 243:5
organized 165:14
original 45:5
outline 64:8 65:1
outlined 100:6 100:17 101:24 116:2
outpacing 132:6
outpatient 18:8 141:15 142:25 145:3 181:7 240:7,24 242:12
outside 109:16 112:21 113:3 114:16,23 143:17 145:20 155:17 178:22 203:6 207:10 209:20
overall 21:11 23:6 43:22 120:22 128:23
overland 245:17
oversaw 35:13
oversight 63:24
own 10:21 19:3 19:12 22:19 23:15 28:12 45:14 51:7,10 66:15 70:11 77:2 93:17 152:7 153:3 157:2,5,9,11 158:18 170:17 180:2 198:24 216:16 218:21 218:22 236:19 237:4

p

p 38:19
p.m. 118:17,18 118:20 151:10 151:11,13 184:24,25 185:2 219:22 219:23,25 236:5,8 243:2 243:13
pa 2:3
pads 232:2
page 3:2 16:18 16:20 158:12 162:5,5 174:24 191:10 192:13 204:10 210:12 213:22 217:2,2 220:21 222:18 225:21,21 230:15 244:1,6
pages 1:12 208:12 243:9
paid 18:4 33:1 36:24 37:16 38:4 40:22,23 43:9 67:9 80:20 92:4 98:12 100:7 107:4,22 108:3 113:1 115:8,9 121:2 143:8,10,16 144:11 145:13 147:10,13,13 155:14 156:18 159:10,25 160:9 164:18 164:20,21 165:17 166:16 169:2 173:20 173:24,25,25 185:15 186:11 194:7 200:1 205:17 206:7 211:24 212:14 214:8,11,23,25 215:16 221:16 238:24

papers 41:2,7
paragraph 123:9,12 128:8 129:8 171:23 185:9,24 187:1 188:7,19 210:11 211:14 213:21 217:1
paragraphs 64:17 139:5 172:4
park 245:18
parkinson's 29:15,20,25 31:15 32:1,12 32:21 61:8 221:20,23 233:7
part 17:2 19:15 56:16 67:10 77:7,19,20,22 79:12,12,15,21 80:6,18,19,24 81:6,7,8,8,16 83:17 84:15 86:25 87:23 97:2,8,9,14,15 101:21 103:12 103:16,21 106:10 109:3,5 111:7 130:3,16 136:2 138:14 139:17 141:15 141:17 143:8 165:13 171:6 172:10 182:18 183:13 188:8 188:10,13 192:25 193:4,8 193:10 217:12 226:3 227:4
participate 34:24 45:5 46:7 79:15
participating 79:21,24 133:14
participation 120:22,24 133:24
participations 120:18
particular 21:13 83:7 84:23 86:18 163:11 189:8 213:19 230:18 230:22
particularly 18:7 43:10 64:9 83:19 143:13 155:24
parties 5:11,14 6:10 43:8 245:14
partly 23:22
partner 76:25
parts 79:11 81:23 84:10 227:2 237:24
party 35:4
pass 125:10
passed 16:19 74:1
past 24:19 33:5 46:23 48:8 102:19 119:17 122:6 137:11 137:12 138:19 139:19 144:11 144:14 239:23 242:5
patience 242:23
patient 29:3,25 30:4,7 67:16,19 103:5,15,25 104:14,21 105:19,24 106:23 107:4 107:21 108:5 108:16,19 109:18,22 110:4 111:1 112:3,9,20 113:7 114:6,16 115:3,4,15 126:21 143:23 143:25 144:3 152:9 159:18 160:13,19 161:3 195:4 196:23 200:11 203:16
patient's 30:9 91:11 171:6
patients 37:1 61:8 103:2 105:12,14,18 106:2 114:7 197:22
pattern 20:13
pause 5:14
pay 37:23 67:11 67:14 70:19 75:15 78:12 80:15 81:17,21 88:1,10 89:5 94:8,10 95:5,6 98:7,8,11,13 99:1,4 103:11 103:23 104:10 105:17,17 106:20 110:19 110:22 111:5 111:13,13,19 112:4,5,16,17 112:18 113:17 113:25 114:7 115:4 116:1 132:25 133:4 147:3 148:15 150:2 155:18 158:20,21,24 159:5,6,7 160:5 163:6,25 164:1

164:3,22,24,25
165:13,16,18
166:15,16
167:11,12,16
167:17,17,23
167:24 168:3,4
168:12,13,16
168:17,24
169:2 170:12
171:19 173:19
178:18 179:23
191:4 193:11
194:9,14
195:10,25
199:19 202:12
202:18 209:2
211:23 212:20
212:23 214:4
214:13,16
215:1 217:8
220:24 222:4
223:3,6,7
224:14 226:24
227:7 228:13
payable 213:2
paying 42:23
76:1 89:2 90:16
98:25 101:2
108:24 159:5
159:13 163:19
164:14 169:20
169:22,23
173:15
payment 18:8,9
84:21 90:18
100:3 117:12
119:17,20
120:3 125:16
126:21 127:19
129:11,18,20
129:21 144:25
145:4 160:19
163:2 164:2
165:22 166:13
166:23 171:4
174:3 186:6
215:7,17,24,25
216:7
payments
43:12 67:19
103:5 112:9
115:15 129:9
129:12 200:11
payor 34:9
37:17 66:9,23
71:9 73:2,18
74:23 75:13,21
75:21 76:1,8
88:21 96:2
99:10,15
101:25 107:17
111:6 116:7
155:3 156:18
157:21 159:15
163:19 164:25
165:1,7,13
166:13 169:3,3
170:24 173:13
173:19 174:3
178:25 181:16
184:17 187:21
188:3 191:4
195:10 198:24
198:24 199:19
212:20 213:9
220:24 223:23
226:24 227:7
228:13 229:18
229:18,25
payor's 74:23
payors 26:1
44:19 65:7
66:17 67:20
71:2,12,12,13
72:16,20 75:17
88:7 94:25 96:7
100:8 102:6
103:6 104:13
108:15 116:13
121:4,9 155:12
169:25 172:17
173:15 191:3
194:22 199:4
200:20 220:19
222:4 223:2
227:16 229:16
238:23
payroll 126:16
pays 31:1
103:14,14,19
105:2,18 112:5
113:16 115:2
159:2 160:6
pebley 38:19,22
people 8:16,17
24:1 28:9 32:25
37:23 87:4
97:13 98:25
101:7,16,16
117:1 124:20
135:17 136:6,6
142:3 238:4
percent 20:6,24
21:1,3 25:3,7
31:9 32:13
36:14 40:13
100:11 104:12
111:4,13,14,20
113:19,24
117:25 122:7
160:5,6,7,12,18
160:23,24
163:2 164:14
164:20 168:5
175:23 223:7,7
241:8
percentage
20:2,4,19,20
21:4 24:11 25:5
40:1,5 63:18
117:22,24
135:17
percentages
20:20 125:21

perfectly 241:13
perform 38:9 115:14 121:17 149:19 197:6 216:20
performed 62:17 63:1 67:5 75:4 122:25 184:1 202:19 240:1,2 242:8
performing 242:4
performs 35:5
period 21:18 113:13 117:23 152:11 191:21 213:17
person 21:25 22:16,20,21 51:13 65:14 91:10,12,20 102:15 142:4 232:6,9,11
personal 16:1 21:24 32:5 38:17 40:16,18 40:20 43:7 45:4 193:12 195:21 196:4,8 197:2 197:14,19 198:17 225:11
personally 130:24 131:3 171:11
personnel 141:18
persons 8:10,19 55:7,13,16 87:12 99:8
perspective 18:8,9 147:16
pertinent 174:16
pet 152:22 155:19
peterson 4:13 220:8 228:24 229:1,3,13 230:6
ph.d. 1:11 3:2 5:18 83:14,15 185:11 244:2
pharmacy 218:13
phase 9:15,17
phillip 2:21 5:2
phoenix 7:14 8:19 12:8 28:10
phone 50:5,16 74:2,3
phrased 242:13
physician 29:2 61:25 67:6 83:22 84:9,21 84:23 129:9,11 129:12,18 154:22 162:15 164:4 166:4 205:2 213:25 237:23 239:4
physician's 166:5
pick 163:6 194:3 196:10 236:15,16
picked 155:20
picking 62:3 89:22 186:9 199:12,21
picks 158:23
piece 18:14
pill 232:2
pitch 159:17
place 65:21 66:17 68:14 157:10 218:9 239:8 244:3
places 223:20
plaintiff 6:2 21:2 25:5 34:1 34:6,10 38:18 39:9 52:7 60:12 70:17,21,24 71:3 73:19 88:21 89:1,25 90:10 91:6,15 92:18 95:4,6,11 95:13,21 96:21 96:22 97:3 98:14 99:12 101:1 108:4 109:25 111:5 112:11 113:18 135:1 144:12 150:14 152:14 155:15 159:8 159:12 160:8 161:25 163:18 165:15,21 166:2 168:15 171:1,9,10,18 187:10 188:6 189:8 190:8 196:18 199:3 200:12,14,15 208:24 209:19 212:3,7 220:19 233:10 239:24 242:6,17
plaintiff's 78:18 82:11 89:17 92:16 100:2 123:7 128:8 161:24 216:6 226:8,19 227:13 236:13 237:12 240:4
plaintiffs 1:7 2:2 10:24 16:7 20:12 47:18 60:25 61:6 70:23 71:8,14 71:17 72:2 73:14 74:24 76:14,18,20

77:24 78:5 79:1 79:6,15 80:1 81:4 90:23 91:25 92:7 96:6 101:8,23 105:9 106:12,16 107:19 115:21 116:1 122:15 122:21 134:11 139:17 141:24 143:2 146:17 149:21 155:11 157:24 161:8 162:12 171:24 184:10 197:7 200:6 203:3 204:1 209:24 216:21 220:5 222:13 232:17
plan 42:11 61:13 70:21,22 76:11 78:2 81:22 84:5 87:13 88:8,22 89:17,18 90:1 90:12 91:8,13 92:17 93:4 94:2 95:5,7 101:24 104:1 106:18 106:21 108:1 108:24 112:16 116:2 122:15 122:22 141:5 156:2 169:11 169:14 173:12 178:19 180:7 189:5,9 191:23 196:25 198:13 198:22 199:10 199:18 205:4 205:16,22 206:6,16 208:4 208:14,17 209:13 210:2 212:24 216:24 217:9,17,22 221:14,19 225:25 226:8 226:19 227:13 231:13 232:20 233:21
planner 26:20 82:7 162:23 199:11 233:7
planner's 199:22
planners 42:10 60:11,19 199:6 199:7
planning 26:14 26:15
plans 26:16 33:17,25 34:4 60:12,14 61:2,7 70:16,24 72:11 75:7 78:14 81:16 82:3 88:6 89:16,23 90:3 90:21 110:1 113:8,10 115:17 149:21 180:8 218:11 220:24 221:8 222:4 223:15 223:22 237:12
plate 123:9
play 196:13
played 83:21 238:16
please 5:13 6:14 9:12 17:13 28:13 47:22 70:12 105:23 110:17 130:11 151:17 174:22 215:12 243:7
plg's 9:19
plus 81:18 162:11 176:1
pocket 89:2 103:1 111:5 209:2
pockets 165:7
point 11:15 33:20,21 46:4 91:1,2 102:16 109:25 203:19 213:8,10 222:3 222:7
points 116:25
policies 21:23 129:10
policy 17:11 19:4 20:1 49:12 68:23 117:3 136:24 145:9 158:23 196:13 215:6,14,25 233:1
political 36:10 123:17,21,25 124:7 136:7,12 138:19
pools 8:16
popular 40:19
populations 141:20,25
portion 23:14 67:12 107:10 117:12 164:6 173:24,25
position 7:17
possibility 75:15 121:8 134:13 214:17
possible 74:3 75:20,24 96:20 212:3 214:19 241:13
potential 24:22 103:14 108:5 221:23
potentially 29:23 30:25 111:1 113:12

power 235:5
practical 198:2
practice 7:21 45:18 185:12
precise 149:6
predict 199:1
predicting 136:1
prediction 213:18
premium 80:7 109:6,10 110:8 110:8 188:8,10
premiums 80:11,14,16 103:18,22 105:3 109:4 112:5
prep 13:25 14:13
preparation 53:18,19 63:13 63:14 83:12
prepare 13:6 64:13,25 139:5
prepared 34:25 48:13 50:4 51:10 64:17 70:17 96:19
preparing 10:11 13:2 41:1 55:7 63:20,20 63:24 68:20
present 13:17 13:18,20,24 34:3 69:8 87:7 108:11,12 131:20 177:8 178:2 185:18 185:21 191:17 201:11 212:4,4 212:6 221:4 225:25 226:2,9
presentation 163:15
presentations 41:3,8
presented 31:9 183:2 185:22
presenting 15:9
presents 166:3
president 137:22
press 116:17 137:16
pressure 232:3
pretty 29:1 50:5 53:4 62:5 64:4 65:2 136:5 142:16 158:24 159:24 163:4 175:13 176:16
prevent 7:11
previous 234:9
previously 14:13 16:8 25:15 158:9 161:24 174:12 174:13 187:11 220:11
price 121:24 122:1,1 145:3 218:5,7 235:10
priced 163:9,10
prices 218:12
pricing 218:14 241:23
primarily 25:6 232:12 241:10 242:8
primary 32:2 51:13 61:15 75:6,10,20 76:9 130:2 142:17 145:9 154:21 159:17 163:20 164:24 165:1 170:13,16 210:14 211:15 211:17 212:16 213:10,17 241:24
prior 13:13 14:23 15:1 17:8 17:9 41:22 42:14 64:15 77:21 210:16 222:20
private 17:18 20:10 38:4,10 74:25 75:4,5,14 75:15 76:1,7,16 76:16,21 77:9 78:6,11,17,21 81:10,11 88:1,9 89:2 97:16 98:23 238:23
privately 87:21
privileged 11:19 59:1
probabilities 136:8
probably 20:5 20:5,13,14,24 28:23 39:25 46:5 58:3 65:14 66:2 69:15 167:1 202:16
problem 100:18,20 105:15 107:11 107:13 132:1 135:16 145:16 154:2 169:16 187:1 235:4
problems 22:13
procedure 214:4 215:9,15 238:5
procedures 29:8,22,23,24 154:18
proceeding 6:11

proceedings 243:13
process 61:5 62:4 65:5 68:14 69:12 127:16 147:18 166:1
produce 9:25 122:1 177:15
produced 10:4 48:22 55:25 84:4 187:15
production 3:13 9:23 10:7 48:1
productivity 126:12
products 70:20 232:11,12
professional 21:25 66:9 182:9
profit 23:25
program 15:24 18:22 34:22 35:2,6 65:21 66:4,5,8 70:18 80:21 86:22 90:11 91:16 92:9 105:3 107:4,5 114:4 114:22 115:9 116:4,7,8 119:3 121:24 123:16 123:24 124:3 124:15 125:6 126:21 127:2 137:8,13,21,23 138:2 139:4,8 145:22 146:10 146:19 147:23 159:5 170:1,1 170:12 188:4 204:23
programming 128:2
programs 18:12,23,23 34:13 76:17 91:7 92:19 99:8 100:3 103:1 138:7,20 139:1 158:25 159:16 165:20 167:22 167:24 169:10 170:5 195:3 207:6,9 229:9
project 83:7 86:18 173:11 212:19
projected 131:14 169:13 170:2 175:1 178:3 182:10 184:9 190:24 200:19 202:6 235:21
projecting 150:21
projection 201:12 223:16
projections 69:22 131:24 191:18,21 205:21 210:2 230:5 231:9 233:20
projects 17:16 17:24
promote 141:15
promoted 56:18
proofed 235:3
proper 85:16 85:17 148:25
properly 76:9 183:22
proportion 194:20
proportions 191:5
proposal 35:13 140:11 141:17
proposals 34:25 35:18
proposed 139:25 140:6
propounded 245:8
proprietary 74:17,18 116:8
prospective 145:3
provide 108:16 142:23 144:16 149:8 151:22 166:25 167:3 168:23 228:12
provided 16:7 36:25 48:4,12 49:22 75:24 90:18 92:5 110:9,10 127:18 142:24 144:10,14 166:7 185:13 185:19 191:13 192:3,5,7 206:20 211:22 215:21 229:17 237:15 239:23
provider 27:5 30:4 40:24 78:23 96:21 101:19 114:23 115:8 117:13 117:14 120:17 120:21 127:3 132:25 133:4 133:24 143:10 166:11 198:18 212:2,3,6,13 221:10 222:1
provider's 95:18 96:1

221:3
providers 27:8 100:2,11 101:2 101:25 120:24 121:1 133:13 133:21 142:13 241:18
provides 34:9 151:22 187:2 212:16 222:1
providing 48:9 92:5 155:22,25
public 124:8,13
publically 74:14 191:13
publicly 116:10 116:11
published 127:1 145:15
pull 23:19 230:20
pulled 184:16 208:15
pulling 206:21
pump 221:24
purchase 77:19 80:18 97:18,21
purchased 19:7 21:24 87:21
purchases 24:21
purpose 115:24 120:3 192:21
pursuant 11:18 86:10
push 219:20
put 16:9 47:19 48:13 51:4 53:9 54:7 57:6 66:23 108:8 132:19 134:22 138:7 144:6 145:5 156:5 158:10 158:17 162:1 182:23 183:4 220:14 228:23 238:4
puts 84:23
putting 19:2

q

qualified 18:19 189:25 238:5
qualify 197:23 198:25 199:14
quantification 111:22
quantified 69:2 103:4 106:19 109:4 173:11 209:13 227:16 228:2
quantifies 105:5 231:2
quantify 43:20 103:24 104:13 112:8 115:14 147:2,3,5 159:2 170:2 183:16 230:5 242:5
quantifying 144:11
quantity 57:4,5 201:12 202:23 202:23
queen 232:3
question 30:1 35:11 38:2 42:16 50:11 57:16,20 65:16 75:19 78:16,24 79:4 93:21 95:9 95:14 99:5,18 99:25 100:23 101:19 107:1 114:8,9 122:17 127:8 156:7,12 158:3 167:21 167:22 172:21 174:9 180:5 181:24 182:8 194:1 197:6 205:14 210:18 227:20 237:2
questioning 166:21 167:1
questions 28:11 49:13 87:1 139:22 167:4,5 210:7 235:25 237:15,17 240:15 242:21 245:8
quick 38:1 161:18 200:24
quickly 52:17 228:22
quite 46:3 49:14 74:3 95:3 176:19
quote 49:6,7 131:7 132:13 139:9

r

r 1:23 245:1,3 245:22
racket 182:12
radiologist 85:1
radiology 214:1
raleigh 2:18
ran 22:1
range 105:19 201:12 202:23 202:23
rare 237:3
rate 34:3 36:23 37:10 40:8,23 56:12,19,19,20 56:20 57:1,2 63:5,9 64:6,7 65:9,23 66:15 66:25 67:5,8,12 69:12 81:17 84:21 85:17,22 85:23,24 86:2 88:14 92:8,24

93:1 94:17
96:11,12,12
102:17 107:22
108:12,13
109:5,15,17
116:13,14,17
128:23 143:1,8
143:9,10,20
144:25 145:8,8
145:14 146:16
148:6,21
150:20 151:20
151:23 152:1,4
152:7,15,15,17
152:17,23,23
152:24 153:1,4
153:8,9,11,14
153:15,20
154:5,6,8,11,12
154:14,19,20
154:21,23
155:1,2,3,8,9
156:10,11,14
157:8 158:14
158:20,21
160:2,3,12,18
160:23 162:17
163:2,4,11
164:2 166:24
167:15 169:8
180:17 183:12
188:25 189:22
189:23,24
190:1,12,17,18
190:19 193:17
194:8,18
203:19,21
204:13 205:17
213:2,24
214:21,24,25
215:13,24
218:18,21
219:13,14
222:8,21,22
224:7,9,16
225:1,11
230:23 231:2
234:25 238:19
241:20,22
rates 25:19,20
37:12,14 38:4
41:9,18 59:4
64:11 65:6,13
65:16 66:10,18
67:6 68:3,4,11
68:12,17,21,25
69:6,8,13,14,14
69:17,19,19,22
74:13,19 75:12
81:21 83:19,19
83:22 87:5,13
88:1,2 92:1,3,7
93:4,5,12,13,15
93:20 94:3,4,9
94:10,19 95:6,7
96:18,24 98:16
102:4,10,19,22
104:15 105:24
106:17 107:18
108:5 109:12
109:24 111:2
112:10 114:19
116:5 117:20
117:22 119:7
119:12,13
120:4 121:3,12
121:13,23,25
122:3,6,6,8,10
122:13,20
123:4 125:16
126:16 127:1,9
128:9,9,20
129:2,4,20,21
133:7,9,20
136:23 143:22
144:6,7 145:5
145:21 146:3,4
146:8,20,24,25
147:5,19 148:9
150:16,21
156:3,10,17
157:1,2,5,13
167:7 170:3
179:7 180:12
182:5,23 183:4
183:5,21
184:15 185:17
185:18 187:4
191:14,16,18
191:22 192:9
192:17 193:1,8
193:13 194:20
198:22,23
199:2 202:3,3
203:2,14,15,18
205:9 206:2
208:3,8 209:14
211:21 213:25
215:6,16 216:5
216:7 217:4,8
223:14,14,17
228:2,4 229:17
231:9,13 234:8
234:11 236:25
237:6,11,19,20
237:21,23
238:16,21,22
239:7,18,19
240:9,12,12,25
241:3,19,24
242:7,11,12,17
rather 147:20
215:7
ratings 146:2
rationale 79:25
79:25
rationally
96:17
reached 181:2
226:14
read 44:10
129:15 130:15
130:17 181:12
185:8 187:2
208:20 243:8
244:2

reading 211:20
real 20:13 168:14
reality 195:3
really 21:7 32:7 49:20 50:11 54:11 61:16 62:4 78:17 93:1 95:18 105:11 145:14 150:6 156:16 158:11 161:18 163:20 165:25 172:22 178:24 212:2
realm 214:17
reanalysis 76:8
reason 26:8 66:4,4 110:13 135:3 162:22 163:11 168:1 210:25 239:13 244:6
reasonable 41:10,19 82:4 89:7 104:5 106:3
reasonableness 215:21
reasonably 26:17 214:7
reasoning 37:8
reasons 72:14 80:5 81:24 99:13
reauthorization 128:13
recall 10:2 15:7 21:4 25:10 47:5 71:17,21 72:19 76:21 123:22 127:22,25 137:22 140:5 180:18 185:5 220:18 221:18 237:13,17 239:24
receive 23:2 101:14 143:4,6 146:18 171:12 199:3 209:19 213:3 233:10 234:21 242:17
received 23:9 47:18 52:18 70:17 71:1,5 81:4 104:23 114:20,21 115:7,8 143:16 205:11 210:20 221:10 222:2
receives 203:16 204:21
receiving 91:15 101:8,13 144:4 169:8
recent 69:12 223:14
recently 8:3 56:19 114:12 140:25
recipient 79:20
recognize 16:12 48:19 51:19 52:20 54:15,24 141:14 162:2 187:13 207:16 220:15 228:25 230:12 234:1
recollection 54:20 220:20
recommendat... 35:25
recommendat... 127:15 140:7
recommended 213:3
record 5:2,16 6:7,11,12,13 9:12 16:14 26:9 44:5,9 47:22 83:1,5 118:14 118:16,20 137:19 151:9 151:13 174:22 184:23 185:2 219:21,25 236:2,4,6,8 243:3 245:12
records 200:5
recruit 59:22
recruited 59:24
redesigned 18:18
redone 65:2
reduce 43:11 107:5,9 132:25 141:19
reduced 67:13 111:14,17,21 119:21 129:2,5 133:5 245:10
reduces 120:3
reduction 42:23,24 117:22,25 129:19 134:15
reductions 129:11
refer 7:6 8:13 37:18 38:24
reference 16:10 73:22 77:22
referenced 42:6
referencing 73:17
referring 12:17 122:8,10 124:2 196:7
reflect 9:12 47:23 56:25 90:22 92:9 174:22 215:7 223:14 235:15

reflected 166:18 235:14
reflects 131:25
regains 211:5
regard 55:24 56:4 216:22
regarding 48:1 154:22 182:4 207:6
region 66:13
registered 198:1
regularly 50:6
regulation 116:22 119:4
regulations 105:3 106:9 116:19
rehab 33:5
reimburse 127:2 207:7,10 241:18
reimbursement 18:7,17,19 19:1 25:20 26:5 34:3 74:15 119:2,3,7 120:8 121:8 125:20 136:23 144:7 145:21 159:9 170:3 177:10 190:12 193:8 196:13 196:20 203:10 205:9 208:3 209:14 226:21 226:22 230:19 230:19 236:25 237:6 241:24 242:18
relate 18:1 29:24 30:18 31:4 53:5,17 142:18 145:22
related 10:15 11:6 15:13 18:3 21:8 23:18,22 24:12 25:4,18 25:22 29:14 31:13 32:23 33:17 36:15 39:3 53:24 54:4 64:18 74:23 82:3 98:16 102:5 103:1,25 110:8,8 111:9 113:5 115:15 124:23 137:16 138:2,20 139:5 139:22,24 140:11 147:4 184:16 200:20 206:24 221:20 225:16
relates 1:6 18:7 23:19 27:22 28:19 38:10 41:10 48:25 63:23 64:1,9 67:19 68:2 80:24 87:11 94:23 100:14 112:2,10 115:2 116:5 117:4 119:1 123:9 130:1 134:23 136:14 139:1 142:13 145:9 149:7,19 150:19 151:17 155:11 156:14 159:18 161:12 172:18 178:3 181:14 183:7 184:2 186:4 196:14 205:3 235:19
relating 7:5 29:7 55:21 215:20
relationship 22:20 85:20 93:15
relative 85:15 245:13,15
relevant 37:23 50:11 62:17 63:1 99:14 145:12 197:21
reliability 201:16 230:4 233:19 235:20
reliable 148:17 182:11 239:12
reliably 148:1 178:24
reliance 73:13 73:21 142:4
reliant 182:5
relied 74:19 146:1 177:22 179:21 217:5 226:14
relies 157:1
relook 78:12
rely 49:20 123:20
relying 73:16 147:19,22 173:3 227:6
remain 90:10
remainder 209:7
remained 109:11
remaining 91:6
remember 11:2 11:3 13:20 15:6 26:3 38:19 46:5 46:12 58:3 73:9 73:10 123:18 124:10 125:3 129:4 140:9,10 140:14 146:22 192:6 206:22 221:13 235:9

remembering 74:1
remote 5:6,13 9:7 13:15
remotely 5:11 5:12
removal 107:20 108:16
renal 210:17,22 210:24 211:8
render 70:3
rent 238:11
reorganization 141:5,12
repeat 79:4
repeatedly 119:7,9
rephrase 139:9
replacement 149:10
report 3:24 4:2 4:4,5,7,8,10,11 4:13,14,16 30:21 41:18 43:20 50:1,14 53:21 54:24 63:14,21 68:21 70:7 71:18 74:13 76:7 82:10 86:25 89:13 105:5 109:5 112:11 112:22 113:1 115:13 124:12 130:1,15 134:15,21 138:18 139:7 139:17 144:13 151:17 157:12 158:8 161:19 161:25 162:2 174:13,15 176:6 179:22 181:12,13,14 182:11 184:10 184:13,15 185:4,13,19,22 186:10 187:9 187:11,13,15 188:2 189:16 191:10,11 192:9,24 193:2 195:6 200:19 201:2 204:6,8 207:1,5,14,17 208:8,16 213:22 220:12 220:15,16,16 222:18 227:2,4 228:24,25 229:1,9 230:10 230:10,12,13 231:2 233:25 234:2
reported 1:23 49:7
reporter 5:16 28:15 49:18 245:4,23
reporting 5:13 8:15
reports 10:1 13:2,8 26:2 33:25 39:19 40:2 50:4 53:18 53:24 54:4,19 55:8,22 56:1,7 56:15 57:7,14 58:17 59:7 63:6 63:13,15,24 64:1,8,22 65:4 66:11 69:16 70:4,9 71:18,19 72:2,17,17 75:4 76:14 81:22 84:14 87:16 90:9 91:24 92:23 99:6 115:21,25 118:22 121:7 122:15,22 123:8 128:8 139:5 150:17 152:14 159:3 168:7 183:22 185:14 187:25 193:3 195:7 208:4 217:3 220:5,7 228:23
represent 6:1 54:8 69:7 85:25 92:8 106:19 115:21 116:1 124:20 160:7 160:19 215:6 223:2 228:2
represented 88:22 203:19
represents 86:4 180:5 185:20
republicans 124:1
repull 210:9
requesting 243:6
requests 3:13 9:20,23
require 75:25 78:12 83:7,13 125:2 150:15 182:15 198:1,3
required 6:23 113:17 197:12
requirement 112:18
requirements 37:11 97:7 128:12 129:16
requires 6:6 43:12 65:12 84:16 114:15 172:12 197:22
research 7:16 7:17,22,23 8:12 8:13 33:23 59:3 185:12

resource 149:25 162:21
resources 18:15
respect 49:18 51:20 53:1 131:7 229:9
respectively 220:10
respond 10:23 10:23 134:13
responding 87:2
response 10:24 14:9 47:17 48:5 59:25 245:8
responses 3:12 9:22
responsibilities 200:11
responsibility 61:15 108:14 144:24 171:7
responsible 61:12
responsive 3:17 3:20 48:1,9
restructuring 121:8
result 133:22 140:7 240:2
resulted 129:10 129:19
results 49:7
resume 25:15 45:22 137:15
retained 11:13 35:17 36:2 44:24 45:1
retainer 47:6
retains 211:2,5 211:6,7
retention 11:9
retrial 37:6
reverse 194:5
review 34:25 35:22 51:10 64:13,19 68:16 72:3,4 90:20 175:17
reviewed 13:8 13:8 14:6 26:16 51:16 68:12 70:23 72:11 130:17 186:1
reviewing 64:15
revise 119:14
revised 119:7 119:11,13
rexroat 1:23 5:16 245:3,22
richard 4:16 220:9 234:2
rick 61:3
ridge 2:8
right 31:20 33:8 34:10,23 38:14 40:10 54:2,7,17 56:22 80:23 88:17,19 91:2 92:11,25 98:7 102:23 111:20,23 112:6 113:8 114:4,5 122:11 134:5 135:6 136:17 137:20 138:15,20 139:11 140:4 145:16 146:20 153:17 154:2 155:20 157:15 157:18 159:21 160:9,25 161:4 166:22 168:25 169:5 173:8 174:6 176:15 184:17 187:16 187:21 188:4,8 189:6 191:19 192:20 193:12 193:14 195:13 195:17 200:16 205:18 214:13 218:10 221:11 223:10 225:12 225:12 228:9 230:16 231:4 231:16 234:25 235:24 240:22 244:2
risk 36:10 138:19
rn 198:19
robertson 55:2
robin 45:2,3,12 45:16,22
role 63:25 78:23 83:21 131:4 137:16 238:16
rothchild 4:14 220:8 230:11 230:13
rough 243:6,11
round 72:16,17 72:25
rounded 226:1
rounds 9:25
rpr 1:23 245:22
rule 11:19
ruled 37:5,18
rules 125:24 170:18,18 198:24 235:17
run 130:12,13
running 172:13
rural 101:1,1
russo 11:24,25 12:14 14:16 53:21 54:5 55:1

s

s 28:16,17
sake 220:4

salaries 147:14
salary 21:10 23:2
salisbury 2:4
sandler 55:1
satisfied 28:12
saw 45:4
saying 42:20 45:7 53:14,16 54:1 72:1 95:22 101:16 111:24 148:5 153:15 155:3 169:17 170:7 199:11
says 50:21 129:8 186:9 193:15 204:11 210:13 211:21 215:23 218:10
sc 2:8
scale 122:11,11
scan 152:22 155:19 156:9 209:15
schedule 66:10 67:4,13 85:17 86:10 87:5 110:21,22 111:14,15 112:17 151:23 153:21 157:8 172:19,22 214:3,19 218:15,22 231:3,4 240:22 241:4,6,10,21
schedules 42:6 69:6
school 16:25
scope 46:22 47:3 70:11,16 83:7 86:17 87:24 109:16 112:21 113:3 138:22 178:22 184:7 188:2 207:10
score 16:20
screen 16:10 48:14 51:17 54:7,17 158:10 162:1 174:16 174:17 185:7 210:10 220:15 220:20 225:18 228:24
scripts 217:5
scroll 48:21 54:18 162:4 202:4
seal 245:17
search 10:14 11:9 158:11
second 3:9 9:16 10:7 38:1 72:17 81:6 85:4 133:12 160:3 187:1,15 188:7 204:7,10 207:16,19 220:16 228:25 230:10,12,15
secondary 75:21 76:9 99:10,15 111:6 157:21 158:15 160:2 166:7,9 166:13 210:15
secret 74:17
secretary 140:17
section 2:12,17 187:18 188:3 191:9 213:23 225:20
sections 64:8 65:1 171:24 188:24
sector 17:18 20:10 238:23
see 9:10 16:15 19:9 29:2 47:15 49:21 51:15 53:12,20,20 54:10,12,13,16 54:17 56:22 58:9 61:4 85:14 87:15 100:17 100:19 101:15 101:22 102:21 116:16,22 154:6,15 158:13 162:6,8 169:16 174:8 174:17 175:1,8 177:5 180:11 180:20 188:7 190:3 192:12 192:16 193:16 194:6 198:19 201:24 225:21 230:15,20 232:15
seeing 201:19
seek 29:11,12 31:12 99:8
seeking 35:15
seeks 95:13 211:25 212:15
seem 68:18 182:6
seems 105:20 172:25 231:24
seen 29:9,9 30:25 33:21 47:9 52:14 59:11 117:15 173:6 181:13 195:8 217:2 227:1 232:21
sees 89:20
segment 220:6
segue 129:24
sekiya 49:23 55:10 56:6 59:15 68:4

select 96:2
selected 68:5,25 69:7 86:2 156:18
selection 68:3
self 29:1
senior 56:11,17 56:20 135:18
sense 36:7 41:22 68:13 93:22 96:17 97:12 117:6 221:13
sensitive 232:1
sent 10:16,23 37:6 53:1
sentence 82:9 129:14 186:8 207:19 210:19 215:5,11
separate 66:19 66:20,21 153:9 161:20 188:24 222:22 239:3 242:7
separately 106:13 154:16 154:17 163:12 186:18 202:3
sequestration 117:8 119:21 120:2,2 128:1
sequestrations 117:4,15 118:2
serious 97:13 138:11
service 28:7 30:10 32:13 40:9,9,10 41:20 43:17 61:19 67:5,10,11 75:23 88:18,22 92:4 96:9,13 98:8 104:10 107:23 110:10 110:20 111:8 112:5 113:2,23 116:15 127:3 134:22 135:4 135:10,12 146:4 147:19 154:15,22 159:14 166:6 167:11,13,17 167:18,23 168:12,14 170:17,20,24 170:25 178:25 183:13 192:21 197:12 198:25 199:12 203:20 208:18 211:24 213:9 215:14 215:19,21 221:14 223:21 223:24 230:1 235:15
services 18:4,6 18:16,17 24:23 36:25 37:17 40:24 61:1,3,4 70:20 75:7 77:12,13 80:20 84:9 87:21 88:2 88:5,13 89:8 90:16,17 93:12 94:8,10 95:18 98:10 99:7 101:8 102:17 104:22,23 106:20 107:14 111:9 112:16 113:7 115:5,6,7 116:25 122:14 122:20,21 128:24 129:6 134:16,21 135:19 141:15 142:18,24 144:14 146:3,6 147:22 148:11 150:15,17 151:20,21 154:25 156:15 156:15 157:2,3 157:5 159:1 166:5 178:19 179:24 189:9 189:15,16,18 191:4 192:12 195:11,22 197:23 200:1 202:24 204:12 205:3 206:6,16 209:19 213:23 214:1,1,1 219:11 221:7 221:10,22 222:2,8 223:15 228:3,14 229:17,22 230:18,22 231:14 232:5 233:5,6,8 238:23 239:4 241:12 242:6
set 10:4 52:18 54:4 69:17 73:4 122:14 125:15 143:22 153:11 157:8 165:12 167:14 180:2 240:9 242:11 245:9
sets 93:20
setting 19:23 26:23 28:6 240:21,24 242:7,12
settled 37:7
seven 224:11
several 22:18 46:4 122:6 129:19 131:7

shahnasarian 42:12 208:5 225:25
shahnasarian's 185:14,22 186:10
share 9:5 22:24 174:15 185:7
shareholder 19:13
sharing 26:6
sharp 57:22
she'll 211:9 213:8
shield 37:10 77:1,14,15
shift 141:18
short 28:8 131:25 134:8
shortage 135:9
shortfalls 137:3
shorthand 245:3,9,23
show 122:5 163:11 166:20 166:22 179:4 179:23 202:4 210:11 225:10 225:18,19 230:9
showed 53:5,9 111:14
shower 232:4 232:22
showing 174:23
shown 53:2 110:20 113:1 143:9 160:22 173:21,23 227:2
shows 217:7 218:2,4
shrinking 141:20
sic 56:13
side 54:17
sign 244:2
signaled 138:5
signature 244:1 244:3,24 245:20
signed 47:5
significant 112:24 233:5
significantly 19:19 176:16
similar 15:8,12 40:2 41:23 42:2 64:23 67:7 68:14 93:1 123:9 135:2 151:18 152:10 152:20 194:22 215:20 225:11 229:13
similarity 45:4
similarly 137:14 156:25 187:1
simple 29:15,21
simpler 162:21
simply 72:11 84:13 95:3,20 107:9 191:8
sir 43:23 60:15 68:21 93:10 107:12 128:4 171:5
sit 52:9 95:25 135:21 136:22 167:10 213:7
situation 35:16 35:17 156:5 157:7 170:23 171:18
situations 97:11
six 32:5
size 232:3
skilled 152:3,5 190:12,13,15 190:16 193:17 193:20 194:8 235:1
skills 85:12 104:1
sleep 232:4
small 19:13 28:25 55:5 107:11 117:11 117:24 129:3,5 129:23 142:3 150:16
smaller 146:5 209:12
snf 190:13
software 66:16 66:19,23
sold 19:7 23:13 23:14
solvency 131:8
somebody 10:20 88:7 190:5 194:2
somewhat 19:23 137:4
sorry 27:18 31:19 32:7 39:12 59:16 62:19,21 64:21 82:22 88:12 93:10 107:12 110:17 124:10 127:8 128:5 131:2 163:6 164:1 172:5 186:21,25 193:25 204:16 212:9 235:12 238:25
sort 95:9 167:20 196:22
sound 62:3
sounds 32:8 75:20 129:15 134:5

source 13:9 39:11,13 42:1 42:23 59:8 65:18 153:22 153:23,24 154:6 209:3 218:18
sources 39:14 42:5 130:3 186:6
southern 1:2 5:9
spain 55:3
span 221:19
sparks 4:16 220:9 234:2,4
sparks's 235:20
speaking 5:14 23:13 93:11 107:17 132:12 202:15
specialist 32:19
specialties 100:12
specialty 16:23 85:7 145:10 157:2 165:16
specific 9:2 11:4 42:17 61:20 64:8 76:13 85:24 86:22 104:23 105:19 112:16 140:14 154:24 154:25 198:24 215:9,14 227:22 238:4
specifically 8:15 21:12 27:22 35:10 38:24 61:8 76:24 94:12 110:9 117:10 132:12 135:6 156:6 192:6 196:2
specifics 75:23
specified 127:3 218:11
spectrum 123:17,21,25
speculative 136:2,4,15,19
spell 28:15
spend 58:22
spending 125:1 128:11 138:13
spent 33:4 56:7 56:13 58:16 63:4,12,19
spits 66:24
split 23:6
spoke 12:14
spoken 11:12 12:20 42:9
spot 30:24 68:11 221:3
stacked 93:21 93:24,24 174:2 174:4 175:10 175:14,25 176:4
stacking 173:16
staff 85:4 116:9 116:14 238:11
staffed 142:8,9
staffing 140:11 141:19
stage 210:17,22 210:24 211:8 232:6,10
stamp 48:6
stamped 16:14 174:24
stand 190:13 226:23
standard 188:13 240:11
standing 243:5 243:11
standpoint 150:14 241:9
stands 137:19
start 22:5
started 6:5 17:14 22:25 236:1
starting 22:18 22:22
starts 162:5 210:12
state 6:15 17:17 17:21,25 24:19 24:20,23,24 49:6 74:12 129:25 130:2 157:12 172:4 226:7 229:23 245:4
stated 30:21 60:10 81:24 107:19 124:25 139:4 191:8
statement 123:14,18 125:3 128:7,14 128:16 129:7 146:24 150:18 192:24
statements 83:12
states 1:1 3:8,9 3:12 5:8 9:14 9:16,22 15:1,4 25:11 45:8 50:24 82:10 128:9 192:9 193:13 215:5 243:10
stationed 32:17
statistical 28:2
statistics 27:25
statute 44:11 119:3 127:5

statutes 106:8
statutory 241:19
stay 106:11 210:21
stayed 19:15
stays 149:17,20 150:8
stenographic 5:16
stimulator 221:24
stock 23:9,15 23:15
stop 26:6 76:17
stops 77:15
straightforward 62:5 64:4 105:2 151:18
street 2:4,8
stricken 36:17 38:16
structure 8:14 35:9,14,23,23 35:24 83:18,22 119:2 188:1
structured 84:10
structures 126:2
studied 81:5
studies 17:11 19:4 20:1 21:23 238:2,3
study 145:2 238:8 239:3,16 241:14
subject 15:7 25:23 50:21 92:10 102:11 230:22
submission 45:5
submit 45:13 60:11
submitted 35:18 45:7,12 45:14,22 53:5 63:16
subsequent 65:4
substance 11:19,21 13:5 13:11 46:1,11
substances 14:8
substantial 23:14 107:10 137:12
substantially 120:16 239:15
subtract 67:15 106:22 108:9 109:20
subtracted 72:20
subtraction 67:19 105:8
successful 140:3
sued 16:2
sufficient 39:6
summary 3:22 48:12 54:8 56:23 188:19 191:9
supervising 197:17
supervision 199:8,13 245:11
supplemental 99:9 158:23
supplies 204:12 213:23 232:16 232:17,24 233:1,2
supply 232:12
support 49:22 123:16,21,21 123:24 124:7 198:12 233:5,7
supported 74:14
supporting 50:7
suppose 95:23 97:4
supposed 37:15 93:5,9 94:5,13 108:11
sure 10:19 15:22 23:2 41:6 44:3 46:2,14 53:4 55:4 68:12 82:18 84:21 101:17 104:14 105:23 122:18 153:4,10,12 158:24 161:21 181:20,22 201:24 210:6 222:20 224:19 232:19 237:22 243:7
surgeries 149:10 154:24
surgery 240:8
surgical 29:8
surprise 142:6 142:11
surrounding 204:22
survey 101:22 123:20,22 124:12
suspensions 129:11
swear 5:17
switch 237:9
sworn 5:12,19 245:6
syncope 221:22
system 18:8,9 18:20 23:11

29:22 119:2 120:18 121:2 130:3 132:2,6 133:14,25 139:25 141:6 141:12,13 142:14,20 145:4 146:19 149:15 151:21 152:9 157:9,11 157:13 166:12 203:22 218:21
systematic 219:15
systems 18:8,10 18:10,12

t

t 28:17 245:1,1
table 156:8 158:12 161:12 162:4,23 163:4 164:23 167:25 174:25 180:5 180:11 181:15 182:8 185:20 189:4 205:15 206:15 208:11 209:12 222:18 234:11 235:4 235:14
tables 59:4 64:13,13,14,15 91:24 92:6,22 102:22 107:18 107:24 112:10 115:20 117:21 133:6,10 143:2 144:7 154:16 171:16 189:4 201:3,11,21,25 207:4 211:22 216:6 229:13
tacrolimus 176:22 177:5
take 44:1 70:16 82:19 90:25 91:3 93:3 107:8 118:6,8 150:25 151:4 160:12 160:25 161:18 161:21 172:25 173:10 174:11 177:6,16 182:20 184:21 187:9 200:24 219:18,19 241:13
taken 1:6 30:25 44:7 68:14 75:12 83:3 118:18 151:11 182:3 184:25 219:23 244:2 245:9
takes 65:14 117:20 168:10 227:25
talk 26:9 37:25 46:11 48:13 59:14 60:5 89:11 102:25 115:1 139:3 143:21 156:6 156:22 196:4
talked 33:8 62:6 109:3 116:4 125:14 132:24 157:20 169:24 187:24 188:21 219:8 222:16
talking 40:16 40:21 43:5 53:23 97:2,10 97:11,13 98:19 117:10 135:6 150:16 151:15 196:2,25 242:3
talks 138:12
tallied 52:14
tandem 164:10 186:6 194:21 194:22,25 202:7
tangent 88:13
tax 123:15 126:16
taxed 135:18
taxes 131:21
team 65:19 67:18 69:21 74:13 88:18 104:8 190:2 192:4 206:20 208:15
tell 5:19 13:12 14:2 17:13 21:21 25:4 26:7 27:16 38:14 39:1 44:23 49:25 50:15 51:23 58:15 94:6 102:16 103:13,20 129:13 130:10 141:9 151:7 152:13 175:3 177:18 178:7 178:10,15,25 181:13 186:12 192:10 195:10 220:23 225:5 227:23 235:2
telling 46:11 165:12
ten 31:22 39:17
tended 20:18
term 131:25 134:8 232:21
terms 31:11 104:20 147:14
testified 5:21 25:16 39:3,14 39:16 40:12,18 56:5 116:6

119:6 123:8 131:6 132:10 142:7 173:5 179:20 195:15 208:9 237:19 239:22 240:20 242:16
testifier 43:1
testify 20:1 37:3,6,7,9,19 38:7,22 39:3,6 40:19 99:6 141:2 147:25 205:25 218:20 245:6
testifying 7:11 41:9 143:18,20
testimony 3:8 3:10 9:15,17 15:8,8 20:12 25:24,25 35:8 36:17,19 38:16 38:23 41:22 42:14 55:7,23 77:21 89:7 101:4 132:24 140:17 148:24 150:2 179:21 182:3 188:21 189:2 222:21 225:24 240:22 243:2 245:12
tests 192:21,21
text 6:9
thailand 32:17
thank 16:6 18:24 40:1 54:2 62:22 121:21 129:1 186:23 187:8 190:16 193:16 194:19 240:14 242:22
therapeutic 176:10
therapy 221:22 221:25 230:20
thing 37:21 45:23 64:19 66:1 130:18 133:12 151:25 228:9
things 37:22 55:20 110:13 133:5 152:2 163:12 199:15
think 8:3 15:3 19:2 20:17 26:22 30:20 31:6 36:16 38:15 41:25,25 43:4,14 46:13 60:17 62:7,14 62:24 73:10 83:17 87:1,4,4 87:19 93:25 95:19 99:22 100:24 101:4 101:20 109:2 110:25 136:5 140:3 148:20 157:25 165:14 165:19,25 167:8 175:16 177:15 180:1,1 186:3 192:7 196:11 204:11 217:3 219:17 223:5 224:25 227:20 232:24 235:24 237:5 241:1
thinking 76:24 167:2 186:24
third 9:19 14:5 35:4 85:5 193:15
thought 99:15 99:19 152:20 152:25 186:23 212:9 225:2 239:7,11,12
three 13:14,19 15:5,5,6 22:16 23:3,7,10 25:10 26:1 55:13 58:16 60:10 61:11,24 62:15 62:24 63:23 84:9,22 93:19 94:22,24 95:22 103:22 104:12 116:20 150:25 172:16,17 220:19 222:3 227:15 237:24
tie 151:20
tied 86:3 214:4
tier 61:3
time 5:5 8:18 18:1 20:10 21:6 21:14 22:19 24:14 25:3 33:4 34:3 36:14 45:16 56:6,9,16 57:1,5,5 58:17 58:22 63:19,19 65:2,3 68:9 69:9 91:1,2 95:19 102:16 113:13 117:23 119:8 128:10 128:20 137:8 138:13 139:14 143:12 146:3 151:3 153:7 156:10 182:16 184:16 191:17 191:21 201:19 209:14,15 211:16 213:10 213:15 219:16 219:16 221:5 222:3,8 232:20 232:21 237:1 243:1

timeframe 60:1 60:6
times 6:19 13:12 15:3 25:10 29:10 36:16 58:16 61:17 74:12 117:18 175:22 177:7 235:2
timing 153:11
tips 161:1
tissue 148:24
title 12:3 50:25 131:4
today 5:10 6:3 6:20,23 7:1,6 7:10 9:5 10:25 13:7,13 14:10 23:12 26:2 46:18 52:9 95:25 135:21 136:22 167:11 182:23 208:9 213:7 226:23 228:18 242:23
today's 5:4,4 243:2
todd 2:21 5:2
together 14:18 14:21 22:4,22 85:8 94:5,13,14 94:20 158:17 164:10 165:22 169:10 170:5 170:10 178:18 182:6,24 186:14 192:22 195:3 223:3 227:18 228:7 228:18 229:16
told 25:9 71:2
took 86:22 87:12 92:15 107:24 109:24 138:10 144:14 177:16 180:22 201:10 231:12 233:20
top 55:11,13 103:13 192:14 225:21
topic 26:5
tosic 4:5 12:12 201:5
total 43:16 63:5 67:8,9 69:2 98:11 106:23 107:2,4,15 164:18 166:22 168:12,13 173:20,22,23 174:3 175:4,21 177:8 179:9 181:7 185:18 224:10,13 228:13,19
totalling 63:13
totally 167:9 225:1
totals 178:2 201:16 202:5
touch 155:6
towards 20:18
track 8:18 40:9 100:21
trade 116:23
trained 26:13
training 26:18 27:16
transition 21:22
transplant 210:20,23 211:3,8
treated 77:24
treatment 31:23 32:9,22 78:13 82:4 101:23 143:24 149:9 155:17 204:21 212:20 212:23 227:8
trend 128:16
trial 2:12,17 217:14
tricare 25:20 34:16,22 35:1,5 66:21 69:8 70:19 78:21 95:17,23 98:16 98:20,22 99:3 99:10,12,14 100:14 101:3,9 102:7 112:2,3,9 112:13 113:6 116:20 135:2,2 154:13 156:23 156:23,25 157:8,17,20,25 158:14,18,22 158:25 159:5,8 159:13,13,17 159:23 160:2,5 160:8 161:8 162:11 163:4 163:11,18 164:1,5,6,14,21 165:1,3,15,16 166:4,9,9,12,15 166:16,23 167:12,17 168:3,13 169:22 170:1 170:11,12,19 171:24 172:2,5 172:10,11,24 174:1 175:7 176:7 179:10 179:24 180:12 183:5 185:15 186:5,11 194:22 210:14 211:17,23 212:21 213:14 213:17,24,25

214:3,8,15 215:1,8 216:16 217:4,5,8,12,18 218:15,16,20 219:9,14,14 222:17,21 223:7 224:3 226:5,11,21 228:1

tricare's 170:17 214:2,17,18

tricia 12:18,20

tried 37:4 104:8

trillion 131:15 138:6,10

triwest 34:21 35:5,10,11,16 35:17 114:8,15 147:23 148:8

true 6:20,21 12:18,19 26:23 34:16,17,24 36:5 41:15,16 42:15 47:9,10 63:6 70:4 74:19 76:5 78:2 80:7 80:11,13 82:4,6 83:8 87:8,10 94:25 96:9 97:10,11 98:4,5 98:6 99:16 101:11 102:1,7 104:10 113:13 113:19,25 114:24,25 115:10 116:20 118:23,25 124:4 125:6 126:22 128:20 133:7 134:17 134:19,23 137:17 138:10 138:11 144:1,8 146:11 148:20 161:11 162:15 163:14 164:10 164:14,16 165:23 167:20 178:14 179:3 179:15 180:12 181:18 183:23 183:25 190:20 198:7 200:7 201:21 203:11 213:4,10 223:17 235:3 245:11

truly 242:6

trump 137:22

trust 43:11 68:5 130:7 131:6,21 132:12

trusted 68:8

trusts 43:7

truth 5:20,20 5:20 147:4 245:7

truthful 6:23

truthfully 7:11

try 44:1 115:14 149:25 231:9

trying 26:3 73:9 99:22 109:15,21 110:3 147:2,2 148:14 170:9 212:19 221:13 227:12 235:9

tucks 168:11

tuesday 48:8

tukes 3:24 4:2 158:1 161:8,11 161:19 162:1,7 173:22 174:15 174:25 180:9 181:6,18 182:11 185:5 185:16 186:12 210:6,8,8,13,15 211:25 212:15 213:3,14 217:8

tukes's 174:12 213:22

turned 22:12 31:8 140:4

turner 2:11 3:4 6:13 10:17 11:1 11:18 13:18 15:14 17:22 26:24 28:21 29:17 30:19 31:7 36:6,11 38:12 40:4 41:13 43:3 44:21 45:10,24 46:20,25 47:14 49:4,19 50:2,17 51:2,21 52:11 53:3 54:22,25 55:9,17 56:2 57:8,15 58:1,13 58:20,24 59:9 60:8,23 61:9,14 62:18 63:2,7 64:3 65:10,24 66:7 67:21 68:7 69:4,10 70:5,13 71:4,10,20,23 72:9,21 73:3,8 73:24 74:7,20 75:1,8,18 76:3 76:12 77:23 78:8,15 79:3,8 79:17,22 80:8 80:12 81:25 82:5 83:9 84:6 85:19 86:5,15 86:20 87:9,17 88:3 89:9,19 90:5,13 91:9 92:2,12,20 93:7 93:23 94:16 95:1,8 96:4,10 96:15 97:1 98:3 98:17 99:17

100:9 102:2,12
103:17 104:3
104:18 106:25
108:7,25
109:13 110:6
112:12 114:10
115:11,16,23
117:5 118:24
119:18,23
120:6,11,15,20
121:5,14
122:16 123:1,5
124:9,16 125:7
125:12,18,22
125:25 126:4,7
126:10,13,18
126:23 127:7
127:12,23
128:3,21 130:4
130:8,25
131:11 132:3,8
132:15 133:2,8
133:17 134:4,9
134:18,24
135:23 136:3
136:16 137:1
138:3,9,16,21
140:1,8,13,19
141:7,21 142:1
142:10,15
143:5,19
144:18,23
145:24 146:12
146:21 147:8
147:12 148:4
148:12,19
149:12,22
150:11 155:21
156:20 159:19
160:16 161:6
161:14 162:13
163:23 164:11
164:15 165:10
165:24 166:19
167:19 168:18
168:21 169:12
169:15 170:6
170:14,21
171:2,13,21
172:14,20
173:7,18 174:7
175:5,12,19
176:9 177:2,12
177:24 178:6
178:13,21
179:2,11,16,25
180:13,24
181:3,11,19
182:7,13,19,25
183:8,18,24
184:6,11 186:2
186:7,15,19
187:5,22
188:15 189:12
190:9,25 191:6
193:5,9,22
194:11,24
195:5,12,18
196:15,21
197:10,24
198:8,11 199:5
199:20 200:2,8
200:13,21
201:14,17,23
202:9,14,20,25
203:7,12,23
204:2,15,24
205:5,13,23
206:3,8,13
207:2,8,25
208:22 209:4,9
209:16,22
210:3 211:1,11
212:25 213:5
213:11 214:9
214:14 215:2
216:9,14,18,23
217:19,24
218:23 219:6
219:10 221:1
221:12 222:5
222:10,14,24
223:4,11,18,25
224:4,18,23
226:16,25
227:9,19 228:5
228:10,15,20
229:10,20
230:7,24 231:6
231:17 232:7
233:12,16,22
234:19 235:22
236:2,10
240:14 241:7
242:1,10,25
243:10
turning 170:11
210:16
turns 131:21
146:14 211:15
twice 61:23
98:13
two 9:25 14:4,4
15:11 16:1
21:21 22:5
24:20 32:6
33:15 36:18
62:14,14 91:24
93:5,14,19 94:2
94:19 98:11
101:21 110:12
117:1 133:5
152:14 154:9
155:11 161:8
161:20 162:10
162:11 165:2,6
165:20 169:10
170:5 177:16
182:5 188:24
191:3 192:8
194:21 195:3
206:16 208:4
208:12 223:2
226:20 227:25
229:15 234:16

type 34:5 43:5 49:24 65:21 82:2 87:7 116:8 138:25 149:19 153:22 196:17 197:13 205:1 229:14 232:12
types 17:24 42:2,6 129:5 232:5
typical 32:24 48:22
typically 20:11 41:8 49:1 114:18 152:16 154:9 204:21
typo 204:11,16

u

u 28:17 37:13
u.s. 2:13 50:22 50:22 123:15
u.s.a. 16:15 48:6
ultimate 124:5
ultimately 156:18
unaware 78:5
unchangeable 125:6
uncovered 88:2 89:8 135:4 189:9
under 6:23 8:10 16:20 31:23 44:15,19 66:18 68:24 76:20 81:11 98:20 99:12 100:17 101:8 113:17 114:3,7,22 115:19 121:1 128:12 131:14 134:16 140:6 142:14 146:9 146:19 147:22 150:2 169:2 180:12 181:6 185:9 209:1 213:22 214:8 215:16 217:12 229:23 231:15 231:20,25 234:14 235:16 245:10
underlying 25:23 91:14 127:4 145:10
understand 6:22 10:19 13:21 30:12 44:13 64:1 79:10 83:18 84:19 86:4 91:1 92:23 95:11 106:14 110:3 112:3 150:6 153:2,13 161:22 162:10 163:17 164:17 187:3 189:23 191:4 200:6 215:11 227:12 232:17 234:22 241:2
understanding 33:24 42:19 53:20 65:15 83:20,25 84:2,4 84:15,16,18 85:25 94:1 104:8 109:21 111:25 117:19 121:11,15 131:16 149:11 159:20 195:2 201:10 217:10 217:15,20 234:23 242:20
understood 27:7 36:4 39:8 63:18 103:9 110:11 112:2 136:22 194:19 222:20
unfortunately 28:9 179:1
uninsured 88:2
unique 37:11 137:4 157:9 218:15
unit 40:9 43:17 92:7,9 146:7 147:5 181:9 182:23 209:13 223:13,14 224:8
united 1:1 3:8,9 3:12 5:8 9:14 9:16,22 15:1,4 25:11 45:8 50:24 243:10
units 223:13
universe 146:6
university 17:3
unpopular 135:14
unpredictability 203:21
unrelated 23:21 25:21
unsure 61:16 61:18
unusual 61:3 216:2
updated 9:13
updates 128:9
upload 9:6 16:6 158:8 161:20 174:13 187:10 204:6 207:14
uploaded 47:23 174:12 220:9 220:11
uploading 161:23 200:25 220:4

urinalysis 176:19
urograms 206:17
urologist 209:14
usdoj.gov 2:14 2:19
use 42:1,3 58:4 66:10 78:22 81:18 86:18 93:5 94:7 96:13 96:18 103:14 103:15 105:20 122:5 136:18 145:2 148:6 149:24 152:12 155:24 156:2 162:22 174:6 177:19,20 190:2 211:4 227:14 232:11 237:10 238:12 239:2,7
used 27:19 28:1 28:4,24,25 29:4 32:20 33:2 42:4 42:11 60:14,25 68:20,22 71:12 71:14 83:19 88:9 91:10 94:8 94:9 102:4 111:16 112:13 112:14 146:3 148:9 153:6,7 154:3,19,20 155:15 162:23 166:13,23,24 177:1 183:22 184:3 189:1 190:22 194:23 195:16 203:14 203:15,18 239:5 240:6,8 240:12,24
uses 151:20
using 42:17 81:14 91:13 135:19 153:7 160:13 176:6,7 176:11 199:10 201:12 214:2 215:23 218:10 218:14,16,17 239:19 241:18
usually 20:7 28:22 95:24 116:21 153:15 157:13 212:5
utilize 105:7 237:20
utilized 187:4
utilizing 116:9 185:17

v

va 32:3,9,23 33:1,2,9,12 34:16 114:17 114:21,23 115:7 140:16 141:5 142:8,14 142:19 143:4,7 143:16,17,17 143:22,24 144:4,7,17,21 145:14,18,20 146:1,3,10,18 146:24,25 147:3,4,6,15,17 147:24 148:3,7 148:11,16 149:2,5,16,19 150:2,7,8,15,21 151:24 155:17 202:3,6,12 203:2,5,6,9,11 203:16,22 204:22 209:20 209:20 225:6,7 237:13,16 238:8 239:10 239:14,17,23 240:10,21 241:2,4,6,9,18 241:21 242:5,7 242:11,18
va.govvhabe... 153:25
valuable 102:15
value 41:10,19 75:13 87:7 89:7 104:6 131:20 177:8 185:18 185:21 201:12 225:25 226:2,9
values 178:3 240:3
variation 60:25 112:24
various 17:16
vary 188:12 239:14
vast 28:24 100:11 146:2 214:20 215:17
verified 183:21
verify 68:4 71:8
veritext 5:3
version 243:8
versus 25:5 50:24 67:6 74:2 97:23 114:21 145:10 146:25 155:4 156:11 169:3,22 170:3 179:10 198:23 202:3,18 203:5 226:22 237:16
veteran 30:14 30:18 31:5 32:1 139:3 141:19 141:24 145:17
veteran's 30:22 66:20 188:20
veterans 100:14 113:17

114:3 140:18
140:22 152:11
vetting 29:5
vha 25:20 31:1
34:22 40:10
69:8 70:19 72:6
78:20 92:24
93:12 94:3,8
95:6,17 96:12
97:23,25 98:1
101:3,8 102:6
113:15,17,22
114:4,7 115:5,9
115:15 116:20
135:1,2 139:5,7
139:8,10,14,25
140:6,15 143:1
146:5,8 151:15
151:17,20,22
152:6,15,16,23
153:1,3,9,13,15
153:20,22
154:6,12 155:4
155:9,15
156:10,11,25
157:9 159:16
172:24 187:20
188:25 189:14
189:19 190:2
190:18,18
191:17 193:13
194:9,20
195:24,25
196:9 197:4
203:15 204:13
204:14,18
205:12,18
206:7 207:20
208:8,18 209:1
209:6 212:4
224:6,13 226:6
226:12,22
228:1 229:4,23
234:4,11,14,16
235:11,17
241:9
viability 132:11
victoria 55:2
video 5:6
videographer
2:21 5:1,3 44:5
44:8 83:1,4
118:13,16,19
151:9,12
184:23 185:1
219:21,24
236:4,7 243:1
videotaped
1:11
vietnam 32:13
32:18
view 6:10
visit 29:5
106:10 152:22
154:23 162:25
163:9 164:19
165:13,16,17
166:24 167:23
173:23 180:17
visits 106:13
162:19,21
163:8 181:7
221:5
volume 154:15
154:22
voluntary
133:25

w

w 2:16
waived 113:18
wallace 2:3,3
3:3,4 5:23 6:1,5
6:14 10:22 11:5
11:25 15:16
17:24 27:4
29:13 30:2,24
31:12 36:9,13
38:14 40:7
41:14 43:15,25
44:4,10,23
45:15 46:9 47:5
47:17,22 48:15
49:5,24 50:12
50:18 51:4,23
52:13 53:8
54:23 55:6,11
55:23 56:4
57:10,17 58:6
58:15,22 59:6
59:14 60:15
61:6,11,24
62:19,22 63:4,9
64:20 65:18
66:3,22 68:2,19
69:6,21 70:10
70:25 71:7,16
71:22 72:5,15
72:23 73:6,12
74:5,9,22 75:3
75:11,25 76:5
76:23 78:4,10
78:25 79:5,10
79:19 80:5,10
80:23 82:2,9,16
82:19,22,25
83:6,13 84:7
86:1,9,17 87:5
87:11,19 88:16
89:11,24 90:20
91:12 92:6,14
92:22 93:9 94:1
94:19 95:3,25
96:6,11,22
97:22 98:4,21
99:20 100:19
102:4,14
103:18 104:7
105:4 107:7
108:9 109:2,19
110:11 113:5
114:13 115:13
115:17,25
117:7 118:5,10
118:12,15,21
119:1,20,25
120:8,13,17

121:1,7,16
122:19 123:3,7
124:11,21
125:9,14,20,24
126:2,6,9,12,15
126:20,25
127:9,14,25
128:4 129:1
130:6,10 131:1
131:13 132:5
132:10,23
133:4,12,24
134:6,10,20
135:5,25
136:11,17
138:5,12,18,24
140:5,10,16,21
141:9,23 142:2
142:12 143:1
143:12,21
144:19 145:16
146:7,15 147:1
147:9,21 148:8
148:14,23
149:14,24
150:12,24
151:4,14 156:1
156:22 159:21
160:17 161:7
161:17 163:17
163:24 164:12
164:16 165:11
166:17 167:5
168:6,19 169:1
169:13,18
170:11,16,23
171:5,15,23
172:16 173:2,8
174:4,11 175:6
175:16 176:5
176:13 177:4
177:21 178:1,9
178:14,23
179:3,13,19
180:4,16 181:1
181:5,15,22
182:8,15,22
183:3,11,20
184:1,8,14,19
185:3 186:4,17
186:20 187:8
187:24 188:17
189:14 190:11
191:2,8 193:7
193:12,24
194:13 195:1,9
195:13,20
196:17 197:5
197:22 198:5,9
198:21 199:17
199:24 200:4
200:10,16,24
201:15,18
202:1,11,17,22
203:2,9,14,25
204:5,17 205:1
205:7,15,25
206:5,10,15
207:4,13 208:2
208:24 209:6
209:10,18,24
210:5 211:4,13
213:7,13
214:12,24
215:5 216:11
216:16,20
217:1,21 218:1
218:25 219:7
219:17 220:3
221:4,18 222:7
222:12,16
223:1,8,13,20
224:2,6,20,25
226:18 227:5
227:11,23
228:8,12,17,22
229:12,22
230:9,25 231:8
231:19 232:8
233:14,18,24
234:20 235:24
240:16,19
241:16 242:3
242:14,21
243:4
wallacegraha... 2:5
want 26:9 41:6
60:2,9 66:2
78:19,22 82:20
89:11 92:23
98:22 101:16
101:17 103:15
110:4 118:6
139:3,9 150:25
153:12 158:2
162:9 173:2
210:10 219:19
222:20 225:10
237:9 243:11
wanted 42:9
46:6 60:2 98:23
102:25 105:7
106:22 108:2
147:18 150:6
166:20,22
168:1 170:2
171:12 183:16
187:8 191:16
193:2,14
213:21 242:22
wants 58:5,8
war 32:13,18
warning 130:7
134:3
washington 2:13 8:4
water 1:4 5:7
way 9:4 19:2
35:11 42:17
47:15 57:20
66:18 77:6
84:10 95:24
99:24 104:21
108:8 121:22
132:19 140:2

140:20 145:6 146:14 147:15 148:1,17,23 155:12 156:12 156:16 158:4 159:25 165:11 165:14 167:14 172:8 179:8 183:1,3,9 188:16,17 194:10,12 212:5,22 227:7 239:1
ways 67:3 121:22 162:10
we've 65:3 125:14 182:3 188:20 209:25 221:2 229:8 243:6
website 151:24
week 52:19 224:11,12
welch 71:17,18 72:4,6,13
welcome 242:24
went 16:25 21:19 61:15
whatsoever 184:13
wheelchair 232:25 235:5,6 235:10
white 41:2,7
whitney 2:3 6:1 238:8
widespread 123:16,25
wise 57:25
wish 146:22
withdrawn 72:7
withhold 117:11
witness 3:2 5:12,17 14:25 15:4 19:22 20:9 20:18,24 24:10 24:12,16 25:4 25:10 36:15,22 44:3 46:2 82:18 82:21,24 118:8 118:11 151:2,7 174:23 184:22 242:24 244:24 245:6,7,12,17
women 124:22
word 27:18 103:14,15 136:4,18,20 154:3 211:4
words 34:15 70:11
work 7:13 8:20 17:8,10,10,19 18:3,5,13,15,20 18:21,24 19:10 19:18,20,21,23 20:9,18,20,24 20:24 21:5,13 23:1 24:7,9,12 24:18,19 27:21 27:23 28:1,10 40:21 45:3 47:15 49:2 50:3 50:7 51:8 53:6 53:17 54:24 55:4,20 57:18 57:18,21 59:5 59:25 62:17 63:1 64:5,6 68:13 70:23 77:3,6 83:21 84:13,22,22 104:5 109:16 109:16 113:3 139:17 142:16 145:12,12 156:24 164:9 165:22 169:10 178:18 184:7 193:25 194:10 194:12,21,22 194:25 195:3 201:9,9 202:7 207:10 223:2 227:17 229:16 237:24 238:1 240:6,10
worked 14:12 14:21,22 26:22 27:4,13 34:15 35:3 50:13 54:19 170:5
working 8:18 14:17 22:21 32:18,19 53:6 78:1 182:6
works 12:24 57:20 64:2,10 196:10 201:7 212:5
worries 151:4 204:17
worse 129:15
write 64:8 244:5
writing 35:13 245:10
written 64:9 65:3 69:16 73:9
wrong 37:20
wrote 126:25 139:8
wwallace 2:5

y

y 28:16 38:19
yeah 21:10 34:24 39:13 42:25 52:5 59:10 60:5 88:5 107:15,22 117:24 129:15 150:23 153:23 169:4 176:21

192:12 193:15
207:22 213:20
214:15 224:21
228:21 234:22
year 17:6 23:13
24:20 32:1 40:9
46:5,13,23
102:11 105:6
107:9 109:8
116:18,25
117:16 119:14
119:16 121:23
121:23 122:4,4
125:10,15
131:14,22
134:3 137:6,6
152:5 172:12
175:23 215:10
years 14:18,19
14:20 17:15
21:21 24:15
28:5 31:22 32:5
33:5,20 40:17
62:14,14,24
85:11,11,12
102:11 108:23
110:1 122:6
129:2,3,19
142:9 145:4
175:21 176:2
177:7 221:19
230:23
yellow 106:3
yonash 55:3
york 16:24 17:2
young 130:22
130:23 132:10
young's 132:24
younger 105:12
yount 12:13,18
12:20 174:14
175:3 180:6
181:21 185:25
202:2
yount's 182:11
younts 12:12
12:17,23 14:17
55:3

z

zero 88:16,23
134:22 135:3
135:11 195:21
223:21 229:23
234:12
zeros 171:16
231:19 235:14
zoom 1:13
46:15 54:12,12

Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate. The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

DISCLAIMER: THE FOREGOING FEDERAL PROCEDURE RULES ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY. THE ABOVE RULES ARE CURRENT AS OF APRIL 1, 2019. PLEASE REFER TO THE APPLICABLE FEDERAL RULES OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.

VERITEXT LEGAL SOLUTIONS

COMPANY CERTIFICATE AND DISCLOSURE STATEMENT

Veritext Legal Solutions represents that the foregoing transcript is a true, correct and complete transcript of the colloquies, questions and answers as submitted by the court reporter. Veritext Legal Solutions further represents that the attached exhibits, if any, are true, correct and complete documents as submitted by the court reporter and/or attorneys in relation to this deposition and that the documents were processed in accordance with our litigation support and production standards.

Veritext Legal Solutions is committed to maintaining the confidentiality of client and witness information, in accordance with the regulations promulgated under the Health Insurance Portability and Accountability Act (HIPAA), as amended with respect to protected health information and the Gramm-Leach-Bliley Act, as amended, with respect to Personally Identifiable Information (PII). Physical transcripts and exhibits are managed under strict facility and personnel access controls. Electronic files of documents are stored in encrypted form and are transmitted in an encrypted

fashion to authenticated parties who are permitted to access the material. Our data is hosted in a Tier 4 SSAE 16 certified facility.

Veritext Legal Solutions complies with all federal and State regulations with respect to the provision of court reporting services, and maintains its neutrality and independence regardless of relationship or the financial outcome of any litigation. Veritext requires adherence to the foregoing professional and ethical standards from all of its subcontractors in their independent contractor agreements.

Inquiries about Veritext Legal Solutions' confidentiality and security policies and practices should be directed to Veritext's Client Services Associates indicated on the cover of this document or at www.veritext.com.

Exhibit 781

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF NORTH CAROLINA
SOUTHERN DIVISION

IN RE: CAMP LEJEUNE WATER LITIGATION	Case No. 7:23-cv-00897
This Document Relates to: ALL CASES	

VIDEOCONFERENCE VIDEOTAPED DEPOSITION
OF
JADINE PIPER
Thursday, February 26, 2026
(Remotely via Zoom)

Reported by: Christine A. Taylor, RPR

Job No.: 7887236

On February 26, 2026, commencing at 9:00 a.m., the videotaped deposition of JADINE PIPER was taken via Zoom pursuant to notice and pursuant to the Federal Rules of Civil Procedure, on behalf of the Plaintiffs.

* * *

REMOTE APPEARANCES:

Representing the Plaintiffs:

WEITZ & LUXENBERG
BY: BENJAMIN VANSLYKE, ESQ.
3011 West Grand Boulevard
24th Floor
Detroit, Michigan 48202
313.800.4170
bvanslyke@weitzlux.com

and

WALLACE & GRAHAM
BY: WHITNEY WALLACE, ESQ.
525 North Main Street
Salisbury, North Carolina 28144
704.633.5244
wwallace@wallacegraham.com

Representing the Defendant:

U.S. DEPARTMENT OF JUSTICE
BY: WILLIAM KLOTZBUCHER, ESQ.
JOEY TURNER, ESQ.
MICHAEL W. CROMWELL, ESQ.
175 North Street, NE
Washington, D.C. 20002
william.v.kotzbucher@usdoj.gov
michael.w.cromwell@usdoj.gov

Also Present:

David Lane, Videographer
Ty Collier, Esq., Veterans Administration
Office of General Counsel

C O N T E N T S

	PAGE
EXAMINATION BY MR. VANSLYKE	7
EXAMINATION BY MR. KLOTZBUCHER	240
FURTHER EXAMINATION BY MR. VANSLYKE	246

* * *

E X H I B I T S

EXHIBIT	DESCRIPTION	PAGE
Exhibit 1	Plaintiffs' Notice of Deposition of Jadine Piper	13
Exhibit 2	Plaintiffs' Amended Notice of Deposition of Jadine Piper	17
Exhibit 3	Curriculum Vitae CLJA_USA_PIPER_1 - 7	17
Exhibit 4	Position Description CLJA_USA_PIPER_15 - 20	18
Exhibit 5	The United States' Second Disclosure of Expert Testimony for Phase III Pursuant to Fed. R. Civ. P. 26(a)(2) and D.E. 630	22
Exhibit 6	United States' Responses and Objections to Plaintiffs' Notice of	22

	Deposition and Subpoena for the Production of Documents to Jadine Piper	
Exhibit 7	Public Law 117-168 - Aug. 10, 2022	33
Exhibit 8	VBA Data CLJA_VBA_000000019	34
Exhibit 9	Title 38 - Veterans' Benefits, Pages 133 and 134	85
Exhibit 10	38 CFR Part 4 - Schedule for Rating Disabilities	89
Exhibit 11	Expert Report of Tricia M. Yount, CPA, MAFF, Economic Damages	142
Exhibit 12	5/29/2025 VBA's Special Monthly Compensation Calculator in the Veterans Benefits Management System for Rating Did Not Always Produce Accurate Results	239

P R O C E E D I N G S

* * *

THE VIDEOGRAPHER: We are now on the record. My name is David Lane, videographer for Golkow, Veritext division. Today's date is February 26, 2026. Our time is 9:00 a.m. Eastern Time.

This remote video deposition being held in the matter of Camp Lejeune Water Litigation.

Our deponent today is Jadine Piper.

All parties to this deposition are appearing remotely and have agreed to the witness being sworn in remotely. Due to the nature of remote reporting, please pause briefly before speaking to ensure all parties are heard completely. Counsel will be noted on the stenographic record.

Court reporter today is Christine Taylor and will now swear in our witness.

* * *

JADINE PIPER,

having first been duly sworn, was examined and testified as follows:

* * *

THE VIDEOGRAPHER: Please begin.

MR. VANSLYKE: Good morning. This is Ben VanSlyke from Weitz and Luxenberg on behalf of the Plaintiffs Leadership Group.

THE WITNESS: Good morning.

MR. KLOTZBUCHER: And my name is William Klotzbucher from U.S. Department of Justice. I am joined by my colleagues, Joseph Turner and Michael Cromwell, also from the Department of Justice. We're representing the defendant in this action.

MR. VANSLYKE: And I'll note that we have Whitney Wallace from Wallace and Graham also on behalf of Plaintiffs Leadership Group on the Zoom with us as well.

EXAMINATION

BY MR. VANSLYKE:

Q. Good morning, Ms. Piper.

A. Good morning.

Q. My name is Ben VanSlyke. And as you just heard, I'll be conducting this deposition today on behalf of the Plaintiffs Leadership Group. Could you please state your name on the record?

A. My name is Jadine Piper.
Q. And your date of birth?
A. [redacted], 1985.
Q. Have you ever been deposed before?
A. No, I have not.
Q. You understand that you're under oath today?
A. Yes, I do.
Q. And that you are to answer the questions truthfully?
A. Yes.
Q. It's okay if you do not know every answer, but if you do not, please answer to the best of your ability. Okay?
A. Okay. Thank you.
Q. Throughout the deposition you may hear the government attorney object to some of my questions. Unless they specifically instruct you not to answer something, he will say his objection to get it on the record, and then you'll still answer the question to the best of your ability. Does that make sense?
A. Yes, it does.
Q. Just to make sure, is there anything that would get in the way of you being able to

testify fully and truthfully today?

A. No, there is not.

Q. To make things easier for the court reporter, I'm going to ask that you always answer verbally, like saying "yes" instead of nodding your head or saying "uh-huh," okay.

A. Okay.

Q. And, like he said, since we are remote, it will be extra easy for us to talk over each other which also makes it harder on the court reporter. So let's please try to wait until each other are finished talking and allow a second or two pause between speaking. Okay?

A. Okay.

Q. If I ask a question that you think is confusing, please feel free to tell me and I will try to rephrase the question. Okay?

A. Okay.

Q. If you answer a question, I will assume that you believe you understand it. Fair?

A. Sure. Yes.

Q. I'm sure you know these topics better than I do. So if at any point, you think I'm misunderstanding what you're trying to tell me, feel free to correct me. Okay?

A. Okay.

Q. If I accidentally misrepresent something about the data we're going to be looking at, feel free to correct me on that too. Okay?

A. Okay.

Q. If I'm showing you a document, I may draw your attention to a specific part of the document. But if you feel the need to review other parts of the document, please feel free to say so, and I can give you time for that. Okay?

A. Okay.

Q. And, last, if at any point today you need a break to stretch your legs, get some water, anything like that, feel free to let me know. I will ask that you finish answering the last question that I asked, but, otherwise, we can take a break at any time. Okay?

A. Okay.

Q. So I know we're all on Zoom today, but where are you physically located?

A. I am in Upper Marlboro, Maryland.

Q. And is that -- are you at home?

A. My -- yeah, my residence.

Q. Is anybody else there with you?

A. No.
Q. So I'm going to ask that you not communicate with anybody else while we're on the record today. Okay?
A. Okay.
Q. I know that you need your computer on since we're on Zoom, but do you also have a cell phone with you?
A. No.
Q. Okay. Do you have any other materials with you today?
A. No.
Q. I will ask that you please not open any other materials or programs on your computer while we're on Zoom today. Okay?
A. Okay.
Q. How did you first learn that you were going to be deposed today?
A. I received correspondence from my supervisor informing me that I would be deposed.
Q. Did you receive a notice of deposition, the document where the plaintiffs requested to speak to you?
A. I'm not sure, but I just received an email. I can't remember the contents, but

basically it was just asking for an SME that was available to answer certain questions involving the litigation.

Q. And do I understand correctly that you were identified as that SME?

A. Yes.

Q. And can you tell me what SME stands for?

A. Subject matter expert.

Q. Thank you.

I will place a document into the chat. So, Ms. Piper, I will pull the document up on my screen in just a moment. But can you go ahead and open that document and confirm that you can access it?

A. Yes, I can access it.

Q. Okay. Let me share my screen. I have to request permission to share.

THE VIDEOGRAPHER: Okay. You should have it now. Sorry about that.

MR. VANSLYKE: Thank you. That's okay.

BY MR. VANSLYKE:

Q. Okay. And, Ms. Piper, can you see the document on my screen as well?

A. Now I can.
Q. Okay. So throughout the deposition today, I will show documents on my screen, but I will also place them in the chat. I will use the screen sharing to direct you to the parts that I'm looking at, but you are also welcome to look at the copy that I sent in the chat if that's easier for you. Okay?
A. Okay.
Q. Okay. And do you see the title here, it says "Plaintiffs' Notice of Deposition of Jadine Piper"?
A. Yes.
Q. Have you received this document before?
A. I believe I have.
MR. VANSLYKE: Okay. I will mark this as Exhibit 1.
(Exhibit 1 marked for identification.)
BY MR. VANSLYKE:
Q. And you can see this is In Re: Camp Lejeune Water Litigation; correct?
A. Yes.
Q. Okay. I'm scrolling down. Do you

see that this is a subpoena to test -- to testify at a deposition in a civil action --

A. Yes.

Q. -- to Jadine Piper?

A. Yes.

Q. Thank you.

Have you received this document before?

A. Yes, I believe I have.

Q. And if I continue scrolling down, there is Attachment A, and it says that the respondent is required to produce, by the date stated on the deposition notice and subpoena, the documents requested herein.

Do you see that on this document?

A. Yes.

Q. Do you recall reviewing this document before?

A. Not in this level of detail.

Q. If I scroll down further, there is a section labeled "Requests for Production." And you see the first one here is your current curriculum vitae and bibliography; correct?

A. Yes.

Q. Do you recall reviewing this request

before?

A. Yes. And I submitted it.

Q. Have you reviewed the rest of the requests in this document?

A. If I did, I don't remember. But we can look at it now.

Q. I will give you a few moments if you'd like to review this entire request for production section. Would that be easier?

A. Sure.

Q. Okay. Go ahead and open that document. It begins on page 11. Feel free to read that section and let me know when you're finished. Okay?

A. Okay.

Okay. Yes, I remember reviewing this document.

Q. And I will represent that we received two copies of your curriculum vitae and one job description. Does that match what you believe to have been produced?

A. Yes.

Q. I was unable to find any difference between the two copies of the curriculum vitae. Are you aware of a difference between them?

A. No, there were no changes.
Q. Okay. So I will only be using one copy today.
A. Okay.
Q. So I will -- I will stop sharing for now.
Do you recall receiving an amended notice of deposition to reflect that you would be in Maryland and not in DC?
A. No, I don't remember reviewing that document. I know the request was, but I don't remember seeing the actual request.
Q. Okay. Well, I will give you a copy so that you have one. I will place this document in the chat. I'll just briefly open it here.
Do you see the title here says "Plaintiffs' Amended Notice of Deposition of Jadine Piper"?
A. Yes.
Q. And in the second paragraph here, you see today's date, Thursday, February 26, 2026; correct?
A. Correct.
Q. Thank you. I'm now placing in chat a copy of your CV that we received. And I will

open that document on my screen. Does this appear to be the CV that you provided?

A. Yes, this is correct.

Q. And do you believe this to be an accurate and up-to-date version of your CV?

A. Yes.

Q. Thank you. We'll come back to this shortly. Apologies, Court Reporter, I will mark the amended notice as Exhibit 2 and the CV as Exhibit 3.

(Exhibits 2 and 3 marked for identification.)

BY MR. VANSLYKE:

Q. And I have now placed in chat the job description. And can you now see the job description on my screen?

A. Yes.

Q. And does this appear to be the job description that you produced?

A. Yes.

Q. And do you believe this to be an accurate and up-to-date version of your job description?

A. Yes.

Q. Are you aware that we noticed your

deposition because the government identified you as an expert in this litigation?

A. Yes.

Q. Court reporter, I will mark the job description as Exhibit 4.

(Exhibit 4 marked for identification.)

BY MR. VANSLYKE:

Q. I'm placing a file in chat. Do you see that I'm sharing my screen?

A. Yes.

Q. And at the top here, you see this is a document in the United States District Court for the Eastern District of North Carolina; correct?

A. Correct.

Q. And to the left, it says In Re: Camp Lejeune Water Litigation; correct?

A. Correct.

Q. And then do you see this list of case names underneath this document relates to?

A. Yes.

Q. Do you understand from this document that those are the plaintiffs whose cases are currently before the court in regard to the Camp

Lejeune Water Litigation case?

A. Yes.

Q. Throughout the deposition today, if I say Lejeune plaintiffs or bellwether plaintiffs, I am referring to this group of plaintiffs. Okay?

A. Okay.

Q. And at the bottom it says the United States second disclosure of expert testimony for phase 3 pursuant to Federal Rule of Civil Procedure 26(a)(2) and D.E. 630; correct?

A. Correct.

Q. So I'm scrolling down, and I'm now on -- you can see page 2 at the bottom; correct?

A. Correct.

Q. And you see your name listed here on page 2?

A. Yes.

Q. Can you take a moment and read the section and let me know when you've finished and I'll -- let me know when you need me to scroll down to the last line or two.

A. You can scroll down. I am -- yeah. Okay.

Q. I'm sorry, do you see this one

bullet?

A. Yeah, and the E. Uh-huh.

Q. Have you finished reading the section under your name?

A. Yes, I have.

Q. Do you believe that the list here encapsulates everything you expect to provide opinions about in this litigation?

A. Yes.

Q. Generally speaking, do you believe you have an understanding of each of the topics listed here?

A. Yes.

Q. Are you aware of any other topics upon which you expect to provide opinions?

A. No.

Q. So you have no opinion on the legal tests for damages or offsets at trial; correct?

A. Correct.

Q. And you have no opinion on whether VBA disability benefits should be applied as offsets against the Lejeune plaintiffs' damages awards; correct?

A. Correct.

Q. And if the court did choose to apply

them, you have no opinion on the details of how they should be applied; correct?

A. Correct.

Q. Have you reviewed any of the expert reports issued in this litigation either by plaintiffs or by the United States?

A. No, I have not.

Q. Is it true then that you do not expect to provide any opinions in support of or in opposition to any of those reports?

A. Correct. Yes.

Q. Have you reviewed the transcripts of any other depositions taken in this litigation?

A. No.

Q. Is it true then that you do not expect to provide any opinions agreeing or disagreeing with any of the testimony in those depositions?

A. Yes, that's correct.

Q. Thank you. Are you aware that the government provided a written request to our notice of deposition and the requests for production that it included?

A. Say that -- I would say no, but I'm not --

Q. So I'll -- I will go back to Exhibit 1. And Court Reporter, I will mark the U.S. disclosures as Exhibit 5.

(Exhibit 5 marked for identification.)

BY MR. VANSLYKE:

Q. Do you recall a few minutes ago we were looking at this document with the requests for production?

A. Yes.

Q. Are you aware that the government has provided a written response to these requests?

A. Yes.

Q. I am placing a document in chat. And I will mark this document as exhibit 6.

(Exhibit 6 marked for identification.)

BY MR. VANSLYKE:

Q. And can you see the document on my screen now?

A. Yes.

Q. Do you see this is another document in the United States District Court for the Eastern District of North Carolina In Re: Camp Lejeune Water Litigation; correct?

A. Yes.

Q. And do you see the title block to the right, it says "United States Responses and Objections to Plaintiffs' Notice of Deposition and Subpoena for the Production of Documents to Jadine Piper; correct?

A. Correct.

Q. Have you seen this document before?

A. No, I don't recall seeing this document.

Q. So you recalled reviewing the requests for production themselves. Is it fair to say that you reviewed them and somebody else prepared this document; is that correct?

A. That's correct.

Q. I'm going to scroll down. Okay. So I'm at Number 13 beginning on page 9. And I read here that it says, "All emails, letters, correspondence, text messages, conversations, chats, voicemails, data, technical files, or other communications in which you have been a party pertaining to (1) the Camp Lejeune litigation (2) the topics of the below individuals' opinions in this litigation and/or (3) any other topics upon which you intend to

render an opinion in this litigation, including but not limited to, those with, to, or from any of the following."

Did I read that paragraph correctly?

A. Yes.

Q. And then the list says, "Any other expert designated by a party in this case. Dr. Richard Ruck, Andrew McIlroy, Heather Ford, Larry Young, Nicholas Tackaberry, Carla Ryan, Ty Collier, Wang Ji, Syed Hasan, Henry Miller, Deborah Navarro, Michael Shahnasarian, Gregory Russo, Dubravka Tosic, Tricia Yount, or Andrew Broad, any other person previously or currently employed by or working with the VA or the VBA"; correct.

A. Correct.

Q. Do you know Andrew McIlroy?

A. No.

Q. Do you know Nicholas Tackaberry?

A. I know of him. He works in the same division I do, but that's about the extent.

Q. Do you know Carla Ryan?

A. Yes.

Q. So this first section of request 13, all emails through other communications, I am

going to refer to that as the communications.

Do I understand correctly that you have never had communications with Nicholas Tackaberry regarding the Camp Lejeune litigation?

A. That's correct.

Q. And is it also true that you have never had communications with Carla Ryan regarding the Camp Lejeune litigation?

A. Yes, that's correct.

Q. Other than coordinating for today's deposition, is it also true that you have never had communications with any person previously or currently employed by or working with the VA or VBA about the Camp Lejeune litigation?

A. Yes, that's correct.

Q. Thank you. Other than reviewing the notice of deposition, subpoena, and request for production, have you done anything to prepare for today's deposition?

A. No, I have not.

Q. Without telling me anything that you might have talked about with them, did you meet with any of your attorneys to prepare for today's deposition?

MR. KLOTZBUCHER: I'd also like to

object and reiterate to keep the answer to avoid substance of communications between attorneys and clients in your answer. But to that extent you may answer.

You may answer, Ms. Piper. Just keep the substantive communications out of the answer.

THE WITNESS: Yes, I did meet with attorneys.

BY MR. VANSLYKE:

Q. Can you tell me who you met with?

A. Yes. I met with Bill. I met with Michael and Ty.

Q. Who is Ty?

A. He works for VBA Office of General Counsel. Ty Collier. He's on the line.

Q. Thank you. How many times did you meet with your attorneys?

A. Three times.

Q. Three times?

A. (Witness nodded head.)

Q. How long was each meeting?

A. Between like an hour and a half, no more than two hours.

Q. Per meeting?

A. Uh-huh.
Q. Had you ever communicated with Bill before that?
A. No.
Q. Had you ever communicated with Michael before that?
A. No.
Q. Had you ever communicated with Ty before that?
A. Yes.
Q. Were those communications unrelated to this deposition?
A. Yes.
Q. And when you met with the attorneys, was that in person or over Zoom or on the phone?
A. Through Microsoft Teams.
Q. Thank you. Approximately when was the first time you recall meeting with those --
A. The beginning of this month.
Q. The beginning of February; correct?
A. February. Yes, February 2026.
Q. Other than those three, did you speak with any teammates or supervisors to help you prepare for this deposition?
A. No, I did not.

Q. Did you speak with anyone else to prepare for today's deposition?

A. No, I did not.

Q. Are you aware that we have deposed Mr. Tackaberry, Ms. Ryan, and Mr. McIlroy?

A. Based off the document that you shared that I saw before, yes.

Q. So you were not aware of it other than via these documents; correct?

A. That's correct.

Q. Is it correct that you have not spoken to any of them about their depositions?

A. Yes, that's correct.

Q. Have you reviewed any other documents to prepare for today's deposition?

A. No, I have not.

Q. I believe we received an amended response to the requests for production indicating that you had reviewed the M21-1; is that correct?

A. No. I requested it, but due to work constraints, we have a lot going on, I was unable to. But I did request, but I did -- time did not permit for me to review anything.

Q. Thank you for clarifying.

I understand that that is a large catalog of information, more so than an individual PDF document; is that correct?

A. That's correct.

Q. Is it fair to say that in general you are familiar with the M21-1?

A. Yes. It's our procedures manual.

Q. I understand that due to the size of that document, it would be unmanageable and probably unhelpful for me to place a PDF of that document as an exhibit?

A. Yes.

Q. If I -- if I ask you questions today that would implicate the contents of that document, please answer to the best of your ability based on your familiarity. Understood?

A. Understood.

Q. Okay. Is there anything else that you've done to prepare for today's deposition?

A. No, I have not.

Q. Okay. And you work for the VBA; correct?

A. That's correct.

Q. What does VBA stand for?

A. Veterans Benefits Administration.

Q. Can you describe generally what VBA does?

A. Yes. So, generally, VBA offers benefits for veterans in service. So we have various programs, education, loan guarantee. But all of it is just benefits and services for veterans. And they are -- each division manages how they provide those benefits to veterans and their beneficiaries.

Q. Do you work with all of those benefits or are there specific benefits related to your work?

A. Yeah. So I'm just focused on disability compensation. However, from time to time, due to changes with disability compensation, we may have to interact with other business lines because what changes are sometimes -- what changes with disability compensation, disability compensation infringes upon another business line where then they may have to change or update their procedures.

Q. Are all of the VA's disability benefits facilitated by VBA?

A. Say that again.

Q. Are all --

A. Are all?
Q. -- disability benefits that the VA provides to veterans administered through VBA as opposed to other components?
A. I would say the national cemetery, so that's a benefit for veterans. That's not only solely VBA, but it's a benefit to veterans through our national cemetery. So NCA.
Q. Would that -- I'm sorry, go ahead.
A. No, go ahead.
So I just want to make sure I'm answering. Like, you're saying, like, are there other business lines other than VBA that provide benefits to veterans. Is that the question?
Q. Do I understand correctly that those benefits would be related to burial or similar expenses?
A. Yes.
Q. So those would be for something other than disability; correct?
A. That's correct.
Q. So would all benefits, specifically for disability that the VA provides to veterans, be administered through the VBA?
A. Yes.

Q. Okay. What is your understanding of what this deposition is about today?

A. My understanding is that the deposition is just about the Camp Lejeune water litigation. That's basically as much as I know. I don't know, like, the ins and outs of it.

Q. Are you familiar with the Camp Lejeune Justice Act?

A. Vaguely, not fully. Just when I got the request, I just went on the website. So I just know, like, what's publicly available. But it was just, like, okay what is this. And so that was it.

Q. So you understand that that is the act under which this litigation is being pursued; correct?

A. That's correct.

Q. I will place a document in chat. And at the top here you see that this is an excerpt from the Public Law; correct?

A. Correct.

Q. And you understand that these are publicly available statutes, such as the one that you indicated you reviewed; correct?

A. Correct.

Q. I will represent that this excerpt includes the entirety of the Camp Lejeune Justice Act beginning at Section 804 on the first page and continuing until Section 805 begins on page 3. I will mark this document as Exhibit 7.

(Exhibit 7 marked for identification.)

BY MR. VANSLYKE:

Q. And is this the statute that you understand this litigation to be brought under?

A. Let me -- I wasn't familiar that it was in statute. I haven't, like, researched it to that point. But based off what you're showing me now, I can confirm that, yes, it's in statute.

Q. And do you understand that as part of this litigation, we have requested VBA data about disability payments received by our plaintiffs?

A. So you're asking me am I aware that you-all requested data?

Q. Correct.

A. I mean, now that you tell me, but I'm not familiar with the ins and outs of how much you-all are -- or what you-all are researching or what you-all are trying to obtain.

Q. Do I understand correctly that before

today you were not aware that the plaintiffs had requested their information from the VBA?

A. Yes. I'm not familiar with what the plaintiffs have requested from VBA in support of this litigation.

Q. So I assume you were also not aware that the government has produced VBA data to us in this regard; correct?

A. Correct.

Q. Apologies. I don't think my file sent last time. So I just sent that one.

I will place another file in chat. Court reporter, I will mark the VBA data that I just sent as Exhibit 8.

(Exhibit 8 marked for identification.)

BY MR. VANSLYKE:

Q. Ms. Piper, would you like a moment to briefly click through that file and get a general sense of what it contains before I ask you questions about it?

A. Yeah. I'm trying to download it because it's small on the screen, so I can't see.

Q. Sure. Go ahead and take a moment and let me know when you have reviewed the general

contents, not necessarily every single piece of information.

A. Okay. Okay, I've looked at the general contents.

Q. Thank you. Apologies if you hear a dog barking.

Ms. Piper, are you generally familiar with this type of information?

A. Yes.

Q. Have you seen this spreadsheet before?

A. No. I have not seen this particular spreadsheet before.

Q. So you were not involved in the production of this spreadsheet; correct?

A. Correct. I was not involved in the production of this spreadsheet.

Q. Were you involved in any of the decisions about how to produce this data?

A. No. I am not aware of the data, how it was produced, or anything pertaining to this dataset.

Q. So if I click to the rating data tab, you have not reviewed this particular collection of data, but you are very familiar with

understanding rating data such as this; correct?
A. Correct.
Q. If I click to the award line data, the same is true for award data such as this?
A. Yes.
Q. And if I click to payment data, the same is true for payment data such as this?
A. Yes, that's correct.
Q. I will stop sharing for now.
Is it correct that you have not been involved in the preparation of any other documents related to the Camp Lejeune plaintiffs?
A. Yes, that's correct.
Q. I'm going to go back to your CV for now. So this is Exhibit 3. And you can see this on my screen; correct?
A. I think I might have did something.
Okay. Yes, I am looking.
Q. And what is your current job title at the VBA?
A. So my current job title is acting assistant director of the compensation service policy staff.
Q. And can you briefly explain to me what it means to be in an acting role?

A. Yeah. So acting role means that I have not been permanently awarded the position, but I am acting in the capacity due to having a vacancy.

Q. While you are in the acting role, do you still have any responsibilities under your permanent role?

A. Yes. Yeah. So it's basically more. So it's basically I'm still the chief of program implementation, but my roles for the acting director position has increased my responsibilities.

Q. And it looks to me like you started your permanent role in September of 2021; correct?

A. That's correct.

Q. And you started in the acting role in March of 2025?

A. That's correct.

Q. And is it fair to say that you presently still hold both roles?

A. Yes.

Q. And I see at the top here that you have a high school diploma in 2003?

A. That's correct.

Q. And you received a Bachelor of Science in Experimental Psychology from the University of South Carolina in May of 2007; correct?

A. That's correct.

Q. And a Master of Social Work from the University of South Carolina; correct?

A. Oh, yes. Typo. Yes.

Q. And that's in 2014?

A. Correct.

Q. Okay. So I'm going to scroll down to the earliest position listed. And I believe the earliest one would be this legal administrative specialist in 2008; correct?

A. Correct.

Q. And in this role as the legal administrative specialist, were you doing work related to VA disability compensation benefits?

A. Yes.

Q. Can you briefly summarize for me what you did in this role?

A. Yeah. So in this role it was basically a part of VBA's national contact center. So that's when VA had just transitioned to having a national call center. Prior to that,

VA just had like if I lived in South Carolina, so I was a veteran, I lived in South Carolina, I was able to talk to someone that lived in South Carolina.

But starting in October 2007 VA expanded into what was called national call center, so the wait time wouldn't be so long. So if a veteran in South Carolina could speak to someone in Montana if they were available.

During these calls, veterans would just ask about the status of their claims or their appeals. So we had to look in our systems just to see, like, hey, what's the status of the claim. Sometimes if the claim was pending too long, we could send the request on the veteran's behalf. We would process first notice of death. So basically, like, if the spouse is, like, hey, my husband passed away, we would process that, ensure that the veteran's spouse received that last check. Sent information for them to apply for death benefits. Also, process the presidential memorial certificate and things like that.

So that's basically was, like, VA's one stop shop for veterans to get access --

instead of coming into the regional offices, they were able to get that same service over the telephone.

Q. Thank you.

A. You're welcome.

MR. VANSLYKE: Counsel, could we go off for just one moment.

MR. KLOTZBUCHER: Okay.

THE VIDEOGRAPHER: We're going to go off the record at 9:48 a.m.

(Recess taken from 9:48 a.m. until 9:54 a.m.)

THE VIDEOGRAPHER: We're back on the record at 9:54 a.m.

BY MR. VANSLYKE:

Q. Okay. So I am still looking at your CV, Ms. Piper?

A. Okay.

Q. I'm scrolling up to the next position, which I see is the senior certified veteran service representative from June of 2010 through April of 2015; correct?

A. Correct.

Q. And in this role, were you still working with VA disability compensation benefits?

A. Yes, I was.

Q. Can you briefly describe for me what you did in this role?

A. Yes. The role as a veteran service representative, the majority of my time was spent as an appeal veteran service center representative. So basically we worked in appeals division, basically means the veteran had filed a claim, it was denied. And now we are looking at it a second time.

During this time, we had to basically do the same thing as if the veteran had filed a claim, but it's just kind of giving that veteran a second chance. So just reviewing the claims folder for any missed evidence, developing the claim. Sometimes we had to do, like, care to discharge the termination. So, basically, a veteran could not receive benefits, so we are looking to see if we could write the veteran in based off that information.

Also, we would process the rating decision. So, basically, once the veteran receives a rating decision, we would be responsible for processing for that disability payment. Also, in that role, sometimes we would have to still do rotations in our public contact

center. So, basically, helping veterans in person with their claims. So, basically, that's just the development. We're trying to make sure we get the case together. Because we were in appeals, sometimes we had to do the after action. So we, basically, before the rating decision and after the rating decision actions, development for those is the best way I can describe it in a nutshell.

Q. Would you say that the process of reviewing claims on appeal is any more or less detailed than the initial claims?

A. I would say with the initial stage. I think it's just like a clean slate. So when they first filed the claim, it's you -- it's just you. So now you're reviewing someone else's work to make sure it's not -- like, there were no errors. So because, basically, the veteran is filing an appeal because it was, like, hey, I disagree with your decision.

So now we are just trying to get that veteran that extra chance to see if we can basically assist in the development and possibly get the decision review officer to kind of overturn that decision. So I feel like it is a

little bit more detailed because it's basically a second claim.

So you're looking at the first claim, trying to get the information for the second claim. So I feel like it's -- I would say just say it's just more information. So if you want to say detailed, but I think the biggest thing is just more information because it's just like a second claim.

Q. And I see in this first bullet here it says that you reviewed, interpreted, and applied VA laws, regulations, and procedures for board of veterans appeals, court of appeals for veteran claims and federal circuit court; correct?

A. Correct.

Q. And I see that you authorized or reviewed disability benefit awards even though they were generated by another individual; correct?

A. Correct.

Q. And then the third bullet, I believe you're saying that you are a productive data technician who accurately reviewed VA rating decisions and claims folders to generate and

process compensation and pension benefit payments totaling over a million dollars; correct?

A. Correct.

Q. So on page 7, the second bullet, I see this inquiry routing and information system IRIS. Could you describe for me what that system is?

A. Yeah. So IRIS was basically like our online tool that veterans would file kind of complaints to. So that's what I was saying, when they come into public contact, we would assist them with completing those requests.

So, basically, during that time frame, IRIS is no longer into play. But that was just our routing tune to receive information. So, basically, we would be that intermediate between either the rater or someone that was actually working on the veterans claim, we would submit that on the veterans behalf when they would come in to -- in person.

So sometimes, like I said, veterans would call, but when they would come in, we couldn't just stop the RVSR, the VSR, whoever was either developing or reviewing that claim. But this was our mechanism to get that information to

them about the veteran's claim.

Q. Okay. I will scroll up to the next position, which appears to be journey-level rating veterans service representative from April of 2015 to January of 2018; correct?

A. Correct.

Q. And would you briefly describe this role and how it differs from the previous one?

A. Yes. So this role is where we actually made decisions on veterans' claims. So, basically, the first role was basically we got the claim ready. So basically we would develop the claim. So, say, the veterans submitted a claim on the VA Form 526, so this is the first job, the first position. Basically, we would develop those claims. We would look and see what conditions are the veterans claiming. We would input that information to the system.

So, basically, the first position is getting it ready for the rating specialist, developing for any information, making sure the veteran submitted the claim properly. If not, we would send the veterans letters. We were the ones responsible for getting the medical evidence if it wasn't there. Going into our VHA system,

CAPRI during that time to download all the medical records.

So, basically, before a claim can be decided by the rating specialist, it has to be developed to ensure they have everything they need before they make a decision. So that was the first job.

The second job was, like, okay, we believe that this case is ready, now we're about to make a decision. So we are looking at the medical evidence, trying to determine.

So one of the differences with the rating specialist, the rating specialist could not do complex medical examinations. So sometimes as a rating specialist, the claim wasn't ready for a decision. We were the ones responsible for inputting those complex medical opinions during that time frame. So, usually, the veteran service representative could do things like hearing loss, tinnitus, claims that weren't -- exams that weren't complex. But anything that required, like, an extensive medical opinion would be done by the rating specialist.

Also, with the rating specialist, I

think the biggest thing is just reviewing it a second time to make sure that no development actions were needed. If it was determined that development actions were needed, you would submit what was called a deferral back to the VSR to further develop the claim prior to submitting it for a rating decision.

And then the once the rating decision was completed, the first job, which was the veteran service representative, then now had to do the post-award action meaning to look at the rating decision to ensure that it was accurate, the effective dates and all of that line up, and then get the award ready for processing for the disability payment, reaching out to the veteran if the veteran did not provide direct deposit. So, basically, the first job was doing information on the front end and the back end of the veteran, and the second job was anything as it pertains to trying to make a decision on the veteran's claim.

Q. And I see in this first bullet it says, "Adjudicator who exhibited sound judgment when rendering VA compensation and pension rating decisions, utilizing VA's schedule for rating

disabilities, 38 Code of Federal Regulations, CFR, VA regulations and procedures outlined in M21-1 Compensation Manual as support of references"; correct?

A. Correct.

Q. And is it fair to say that that is a more specific articulation of the first bullet in the previous jobs language saying reviewed, interpreted, and applied VA laws, regulations, and procedures?

A. Correct. And I would say that the biggest difference is that it was more extensively heavily using the VA schedule of rating disabilities. So you would use the same information, but I would say with the rating specialist, she relied a lot on the VA schedule of rating disabilities, more so in that job than the first one.

Q. And this M21-1, is that voluminous guidance quote/unquote --

A. Yes.

Q. -- document that we referred to earlier; correct?

A. Yes.

Q. Okay. And in the third bullet, it

says, "Administered organizational support by serving as a reviewing official, second signature reviews, on complex rating decisions to rating specialist trainees to ensure quality and accuracy were obtained"; correct?

A. Correct.

Q. And I think you sort of already said this, but that is recognizing that at this stage you are engaging in more complex analysis than you were in the previous -- in previous role; correct?

A. Right. But, actually, you're a mentor. So, basically, when you just become a rater, I would say like maybe your first 18 months, you really can't release a rating decision without someone reviewing it. So at that point I was a mentor to junior raters who just started. And so we had to do what was called second signature review. So, basically, looking at their work and making sure that it was correct. Especially complex. At certain sometimes, and it still may be, I haven't been a rating specialist since 2018, but during that time frame certain conditions like TBI, they couldn't be released without someone looking at

it again.

Q. Okay. I'll scroll to the next role.

So from January of 2018 to September of 2021, you were a management analyst/veterans claims examiner; correct?

A. Correct.

Q. And go ahead and summarize that one for me and how this changes from the previous role.

A. Yeah. So starting like 2016, VA started to have their own contract exams. So VHA in the past, they also contracted out, but VBA at that time they expanded to kind of take over contract examinations.

So during that time, we were kind of standing up the team. So basically my role was to assist at that time the contract examiner QTC, but during that time we had LHI, which is Logistics Health, and VES, Veterans Evaluation Services. Those contract vendors, we were assisting them ensuring that they met VA's contract obligations. We would do site visits just to ensure. Sometimes we would get complaints from veterans like, hey, my exam wasn't satisfactory. I had an exam at a nail

parlor or something like that.

And so we would have to do investigations with those contract examiners. Also, during that time VBA was expanding our veterans benefits management system. And that is our system that we use for claims, but we were now doing exam management.

So during that time, we would only schedule VHA exams, but now because the contract examiners needed an avenue to receive information from our VSRs or RVSRs or rating specialists or veteran specialist. We were testing that system, what's called EMS, or exam management system, which is still in existence. And that was a way to ensure that the veterans exams were getting at the right place.

So we were responsible for looking at the levels. Sometimes VHA did not have the capacity to have an exam. So we would kind of turn off the system where the exams had to be routed to one of the three contract vendors. So I had to ensure that the -- it was leveled out. So basically due to contract obligations, each contract examiner had to receive a certain amount of exams. So that was basically the role of the

management analyst in that position was just to ensure VA's contract exams were properly handled for veterans.

Q. And all of these medical exams would have been related to VBA disability benefits; correct?

A. Yes.

Q. And in this role, is there any aspect that you would still describe as reviewing, interpreting, and applying VA laws, regulations, and procedures?

A. Yes. So sometimes we would get, like I said, complaints from veterans. So we actually had to go in the system and look at their exams depending on their complaints. So as part of that job for management analyst, we receive inquiries from actual veterans or VSOs. And they were all about the exams.

So we would have to go in the system, look up the veteran's rating decision, kind of ensure that everything was the way it was supposed to be. Depending on what we found, it was our job to liaison between our VA regional offices for them to handle the claim depending on what we found in our investigations.

Q. I'm going to scroll down to the next page but under the same role.

A. Okay.

Q. So I see a bullet if you can see my highlighting here.

A. Yes.

Q. It says proficient technical expert on the veterans benefits management system and other VA computer programs to provide an accurate analysis of claims or appeals statuses; correct?

A. Correct.

Q. Could you describe what the veterans benefits management system is?

A. Yeah. So that is the hub for VA claims processing. That's where the ratings specialist, so the two previous positions would develop the claims. So everything's housed. But VBMSA is VBMS award. So that's for the post-determination VSR or the VSR who completes the claim actions after the rating decisions. That's the system that processes awards.

Then we have VBMSR, which stands for VBMS rating. That's where all the information is contained for a VA rating decision. So that's how you input the information, you know if it's

claim for increase, a claim -- you know, so that's basically how the rating decision is processed in that system.

So veterans benefits management has multiple systems. So that's the overarching. And then depending on what action is happening would determine which one you would use.

Q. Are those completely distinct systems or is it --

A. Yeah.

Q. -- something like different drives within the same system?

A. I would say different drives in the same system because they're all in VBMS. It's just certain -- like, if I am not a rater, I don't have access to VBMSR. Because I'm not a rating specialist, I don't need that function. If I'm a post-determination VSR meaning I'm processing the money, I need access to VBMSA. But I'm a rating specialist, so I don't need access. So depending on what function you serve for VBA determines which access you receive.

Q. And if there was a rule that had appropriate access to both, would they be able to access it in the same system?

A. So VBMS during the time frame -- and I haven't researched that. But there was a time where it was limited. So -- and we've even experienced that as we've been processing or working with VHA on processing clothing allowance. But one of the things that we know is that, say, I want to use VBMSA, if I -- I can't have access to both systems because it's kind of like to prevent fraud.

So depending on what functions you have, the system may not allow you to use another one. I don't know all the nuances. But there should be some type of restriction where depending on what function you serve, you can't have access to both systems because there's a potential for fraud. Especially like if you make a decision on the claim, you shouldn't have access on how to process the claim. Maybe in supervisory status, but they may have taken that away, as we have had in the past some fraudulent actions with the VBA.

But I'll say for the majority, and I'm not 100 percent certain, but there was a time where depending on what function you had, you couldn't have access to both systems due to some

kind of potential fraudulent actions that may or may not occur.

Q. And when you talk about fraud, could you give me a brief description of what type of fraud you're referring to that has occurred in the past?

A. Yeah. It would be more like financial. There may be something publicly known, but usually when something happens, we get restrictions. So there was a time where there was kind of like a conspiracy. I can't remember which regional office, you would have to look it up. But it was a -- I can't remember which regional office. But it had to have been like sometime like between 2010, 2015, don't quote me on that. But it was where the VSR and RVSR was basically had like dummy -- dummy veterans claims or whatever. And they were basically taking the money. So because of that -- like, just basically I'm working with my person. So basically I make the decision on the claim. Now I have a friend who knows how to process the awards. We're putting it in an account that's not a real person. So because that has happened before, that's what causes certain restrictions

on certain accounts due to -- to stop fraud in VA against employees.

Q. Is it your understanding that that fraud has been ended by those measures?

A. Yeah. From my understanding, that's why it was put into place due to previous actions.

Q. I'm scrolling down further. And in this paragraph, I see, "Operated as an incarcerated veteran subject matter expert, SME, by reviewing and analyzing policies and/or procedures, evaluate and develop best practices, and implement continuous process improvement techniques by formulating and recommending instructions and procedures to deviate field personnel to ensure MDEs are conducted for this vulnerable population of veterans"; correct?

A. Correct.

Q. What does MDE stand for?

A. Medical disability exams.

Q. Could you summarize, based on this expertise, what you think is unique to the population of incarcerated veterans in this context?

A. So I would say the biggest thing in

that role was a lot of incarcerated veterans were not receiving exams. During that time frame, it was just basically because there was not a lot of Internet access in some of those facilities. There was, like, no one boots on the ground so veterans could file a claim. But when it was time for them to get their exams, their address -- their address of record could be their home.

And so because it's an actual place where they live, it wasn't like we would know that their -- that this veteran was incarcerated. It was that basically the veteran filed a claim, they put their address at their home of record, and then we would send the exam for the home of record and it would never happen. But that's because some veterans weren't getting mail.

So, basically, we had to work to ensure that there was a mechanism for incarcerated veterans to receive their exams. So even though if a veteran was in the federal facility, they could only get 10 percent of their VA disability, but they're entitled to that 10 percent. So we had to find a way for incarcerated veterans to receive exams.

So the unique thing was basically taking a -- a job, you know, just trying to work with incarcerated veterans. So we basically had to basically go through all of the United States and meet with veteran service officers, different state and federal correctional facilities, those wardens, and try to increase access for incarcerated veterans to receive examinations. So it's a -- like a two-year effort to try to expand benefits to incarcerated veterans.

Q. So you mentioned that 10 percent amount?

A. Yeah.

Q. Could you tell me more about that?

A. Yeah. So if a veteran is incarcerated federally, their benefits are reduced, and they are only entitled to 10 percent.

Q. And is that only if they are incarcerated in a federal prison, not a state facility?

A. As far as I know. It's been a minute since I looked at it. But from what I can recall, it was due to the federal, and they were only entitled to receive 10 percent.

Q. So I'm looking at the last bullet here running on to page 6. I see "Maintained close working relationships, customer service, and coordination with other elements within VA to include the Disability Evaluation Management Office, DEMO; Office of Disability and Medical Assessment, DMA; Veterans Health Administration, VHA; Veterans Experience Office, Office of Field Operations, OFO; district area offices, ROs; strategic acquisition center, and other VA entities"; correct?

A. Yes.

Q. Could you tell me what the disability evaluation management office is?

A. Yes. During that time, I believe DEMO was an office within VHA, and they were working -- as I can recall, and it's been such a while, but they were responsible for managing the disability evaluation system.

Q. And would that be related to the medical exams that we were talking about previously?

A. Yes. All of that is inclusive to the medical exams.

Q. So that's -- by all of that, you're

including the office of disability and medical assessment.

A. Yes.

Q. Do you think that your ability to maintain close relationships and coordinate with these other elements was improved by your prior experience with the ratings roles?

A. I would say yes, because I feel like you had to have a foundation to kind of understand how to improve the process. So you had to know kind of the process before you improve it. So I would say yes.

Q. Okay. I'm going to move on to your next role, which I believe brings us to your current permanent role; correct?

A. Correct.

Q. So am I reading correctly that the bullets listed here, and I'll scroll briefly from where this job begins on page 1 through page 2 through page 3 until page 4 is the previous role?

A. Yes.

Q. These bullets include both your current permanent role and your current acting role; correct?

A. Correct.

Q. So as I talk about these bullets, please feel free to clarify if any of the content applies exclusively to one of those roles. Okay?

A. Okay.

Q. So I see -- I believe this is explicitly under the assumed acting assistant director role --

A. I would say yes.

Q. -- that you ensure policy-related and personnel deliverables are maintained; correct?

A. Correct.

Q. How are you distinguishing between policy-related deliverables and personnel deliverables?

A. So policies are the things we do for work. Personnel would be the things doing for the employees, like their -- their assisting them with their -- you know, like updating their performance standards. Assisting them with their issues. You know, employees, they have suicidal things going on. So sometimes you have to call the employee assistance program. Sometimes you have to do welfare checks.

So anything that's pertaining to the employee, I would say personnel. Anything

related to work because it's the policy staff. So it could be taskers. It could be regulations. It can be -- it can be implementation plans. So anything related to work, I would call it the policy-related deliverables. Anything related to ensuring that the employees have what they need, it would be a personnel deliverable.

Q. Just for the record, can you describe for me what a tasker is?

A. Yes. Taskers are -- we get things that's either internal. So this is something, like, hey, I need this. So Jadine -- so for an example, Jadine, we received this from Congressman blah, blah, blah, blah, can you review this and have it completed in the next 24 hours.

So we get multiple taskers from anything related to disability compensation that would fall in the realm of the -- for the policy staff to review. That's what a tasker is. So it's basically an inquiry, usually a highly visible inquiry, usually from Congress, veterans service officers, our -- under secretary for benefits.

So usually anything that's highly

visible that needs to be reviewed, that's considered a tasker. And this can be internal or external. So someone in another division can be, like, hey, we need you to review our manual edits. Hey, we need you to look at this quality review to see if there is any impact to the policy staff. So something like that is what you would call a tasker or just basically someone asking you to look at something.

Q. Is it fair to say that those topics are policy tasks?

A. Yes.

Q. And then the second bullet, it says oversees and provides guidance to analysts that aids in the development and implementation of policies and programs that support the veterans benefits administration's mission; correct?

A. Correct.

Q. And what do you mean when you say you are overseeing and providing guidance to analysts who are aiding in the development and implementation of policies?

A. So, basically, we have what's called integrated project teams. So say a law pass. We have to perform the work groups. So, usually,

it's the responsibility of the program implementation staff to either implement something that has passed in law or in regulation. So we assemble those work groups. It could just be internal. So internal for compensation service means we have to work together with the procedure staff. Those are the people who do the M21 adjudication manual.

If we make changes to the M21 adjudication manual, now we may have to update our training or create new training for our claims processors. So these are work groups where we're like, hey, this law happened, so the policy staff lets them know the impacts. From there, how does this law change or this new law changes your policy. How will now that impact the quality.

So, basically, it's just overseeing the analyst and it's the responsibility of one analyst usually, sometimes two, to have a backup to basically assemble those work groups that can expand from 60 days sometimes to, like, two or three years. But their job is to implement the policies which is usually something that's in law or regulation and just trying to look at the

project milestones. It's their job to write options paper. So sometimes we get these laws, now it's our job to try to interpret these laws. And so we may have to do options depending on our system. Sometimes I think that's the longest thing to come into play due to -- you know, just due to the nature of prioritizing systems and all of VBA.

So, basically, it's just the job of the policy staff, mainly the program implementation team, to assemble these work groups to ensure that all the deliverables are met and maintained. So they do all the slide decks. They do all the briefing materials. They create the guidance, all of that to implement a change in law or regulation.

Q. So is it fair to say that the work group as a whole is reviewing, interpreting, and applying new VA laws and regulations and procedures?

A. Yes. But it's the job of the policy staff to interpret it for them to ensure that they have an understanding. And then from there, once they have an understanding, then they apply that to their work products. So training needs

to see what impacts the change has on to them, if that makes sense.

Q. And I'm understanding this bullet to say that you are overseeing and providing guidance to that work group; is that correct?

A. Right. Or to the analyst who facilitates the workgroup, but sometimes I lead workgroups myself. So, yes, I would say both. So I either lead the workgroup or I train the employees to lead the workgroup.

Q. And do you include yourself as policy staff?

A. Yes.

Q. I'm going to scroll down to the next page. And in this paragraph, it says actively assists with organizing integrated project teams, IPTs, by creating a cadence consisting of ready-to-use materials to foster implementation consistency, email solicitation notice, presentation materials, and it calls for script outline.

Does this relate to the process that you were just describing?

A. That's correct.

Q. And in the next bullet, it says that

you ensure the successful implementation of 14 IPTs; correct?

A. Right.

Q. So are these IPTs that you may be involved in or overseeing but not involved in correctly -- directly? My apologies.

A. Yes.

Q. And in the next bullet where it says monitors and participates in five IPTs or work groups, are those the ones that you are involved in directly?

A. I would say yes. I -- I mean, I'm trying to answer your question. But, basically, when we -- I would say that I oversee all of them. The difference is those are completed. So those are -- the first one ensures the successful implementation. So I'm responsible for all of them. All of them are managed by my team. But when we monitor and participate, that's because they're still ongoing or during the time frame in which we did this. It was still ongoing. They were not resolved.

So the difference in the first bullet is that they were done, implementation was completed. The other ones is that we're

monitoring and participating, but they all are a part of the policy staff, and I have some type of involvement, whether it's leading -- leading it or helping the staff work through whatever issues they have with those.

Q. Understood. Thank you for clarifying. In the next bullet at the top of page 3, it says, "Maintains oversight of six standing projects."

What is the difference between a standing project versus an IPT or work group?

A. So standing -- so we -- I guess the IPTs, they're going to end, right. So they're like -- I would say they're temporary in nature. So, basically, you're just trying to implement the law or change as soon as possible. But the standing projects, they never end or at least right now they're still ongoing. So these are things that we have to continue to do. So if they're standing projects meaning that they still exist, the IPTs, they exist until everything is done and then it's the end of it. And now you probably have another work group to work on. So I would say that's the difference. The standing projects continue, they're ongoing, whereas the

IPTs, they're for a certain duration.

Q. And I see one of the standing projects is this advisory committee on disability compensation for ACDC; correct?

A. Yes.

Q. Okay. I'll come back to that one in a little more detail later on. About halfway through that paragraph I see coordinated 16 letter of modifications to assist field personnel in the processing of veterans claims in physical year 2023; correct?

A. That's correct.

Q. Could you explain to me what those letter modifications are?

A. Yeah. So, basically, entities rather they're internal to compensation service, that's my division, or we have other members of like pension and fiduciary, that's another division in VBA, or our -- what's the other staff? -- office of administrative review, OAR.

So, basically, you're looking at the letter, but, however, due to some change in law you now have to modify the letter. So veterans receive different letters, development letters. We look at those and depending on the change in

law or if there are new laws, we now have to update those letters based off those changes.

They have a board where they kind of look at every letter. And depending on the change, they have to vote to ensure that it's into compliance. So because of that during that time frame, we had 16 different changes and we orchestrated that.

But that's basically what it is, is just due to a change in law or sometimes they create new letters. But most of the time it's just updating our letters and our letters have to be updated. Like anytime there's a change in law, we have to look at the letters to ensure the letters are still in compliance.

Usually, there's some kind of tweak where we have to change where you may see something called a fragment. That just means the letter language. We're updating the letter language to ensure that it's in compliance with the law.

Q. If a letter is not in compliance with the law because of a recent change, would that mean that the change affected the way that those benefits are provided or would it only be a

change to the administrative procedure?

A. I would say not how it's provided. I would just basically say we may have to clarify something. But usually they are able -- in the field they are able to do like until -- but most of the time we're able to do it, but it's our job -- and I'm trying to find the best way to say it, but -- so basically we send -- I'm trying to find an example of a letter modification.

But, say, we granted -- like with the packet, we now have new conditions that may be presumptive. Depending on the letter that comes out, we need to ensure that now veterans know that, hey, XYZ is now into law, so now we update it, too. We've updated that letter language to incorporate those new conditions or something like that.

So it's usually just ensuring that the letter is still in compliance. If it's not in compliance, it's our job to modify it. But it does not change the administrating of -- the administration of the benefit. It is usually just tweaking the language to ensure that we're now incorporating new information. And sometimes depending on it, we may have to take something

out.

So we just have to look at it on a case-by-case basis to ensure, but that's why we have people from, like, the office of administrative reviews. That's the division that handles a lot of the appeals stuff.

Then we have pension and fiduciary. They're usually responsible for veterans who need a fiduciary or pension, you know, for veterans who, you know, are on the income-based benefit. And then also pension and fiduciary kind of works on that survivor language. So we have an all-inclusive board to ensure depending on what law change and the impacts on what division. They all work together and ensure that it's in compliance.

Q. So looking at the example you gave of the PACT Act where certain conditions were identified as presumptive, would you agree that that changed to the benefit being recognized -- I'm sorry, to the condition being recognized as presumptive is a change to how those benefits are administered?

A. Yeah. Because now we're recognizing a new condition that may have not been eligible

prior to that change in law.

Q. So would it be fair to say that some of the letter modifications are related to how benefits administered and others are not?

A. I would say it's possible. Yes, it's possible.

Q. Okay. In this bullet, I see "Aids in the development and/or implementation of program changes that closed out the following, GAO or OIG audit items, OIG status update requests, VBA inadequately supported P&T disability, oversaw the LCCB letter change and worked with manual to complete request changes. OIG status update request, clothing allowance, oversaw the development of a white paper to assist VHA with the implementation of clothing allowance recommendation. VHA was able to provide an interim response. However, this issue is not fully resolved." Correct?

A. Correct.

Q. Can you tell me what is referred to when this says "VBA inadequately supported P&T disability"?

A. I would -- I would -- it's been a minute since I looked at that. So I would have

to refresh my memory. It's been quite a while. So I can't remember the actual OIG audit. So I apologize for that.

Q. Do you know what P&T disability stands for?

A. Yes. Permanent and total disability.

Q. Do you have any recollection of issues with permanent and total disability being inadequately supported?

A. Not at this time. I can't recall what that was about.

Q. Okay. And in this bullet, it says, "Oversaw the revision of VA form, VAF, 21-0781. Statement in support of claimed mental health disorders due to in-service traumatic events that resulted into a single form titled statement in support of claimed mental health disorders due to an in-service traumatic events released June 29, 2024. Combining the forms allowed VA to reduce the burden for the veteran who completes the form by 50 percent. Additionally, VA further reduced the burden by improving trauma sensitivity, decreasing the potential for respondents to provide information that is not needed and allowing for other mental health conditions other

than PTSD to be submitted on the form"; correct?

A. Correct.

Q. And when it references other mental health conditions?

A. Yeah. So other than PTSD, mental health can be depression. So basically at that time we were just only allowing PTSD to be claimed, but now veterans can claim other conditions that's mentally health related usually in that diagnostic number 9,000 or whatever. If you look at VA schedule or rating disability, it will be something like that, depression, bipolar, anything in that mental health sphere is what it's talking about.

Q. So I -- I think you answered my question but just to confirm, this reflected a change in which mental health conditions were permissible for a claim, not just which ones were listed on the form; is that correct?

A. Right. Because, like, previously, we could only accept PTSD on that form. But now we're able to allow other mental health conditions to be submitted on the form.

Q. So would those additions have been a result of a change to the manual?

A. No. We had a public law 117-303. So that was in support of -- what was it called? But it was a change in public law, not a change in the manual. Yeah.

Q. So does the law -- apologies. Go ahead.

A. No. Go ahead.

Q. So is the law what granted the ability for claims to be provided for those other mental health conditions?

A. Yes.

Q. Okay. All right. I think I'm finally going to put this document away for now.

So would you agree that you have had a long career at the VA?

A. I would say yes. I didn't realize how long until today, but yes.

Q. And has the entirety of your time at the VA involved working with VBA disability benefits?

A. Yes.

Q. So I want to go back to your role on the ACDC and the -- you were a designated federal officer; correct?

A. Right.

Q. What does that mean?

A. So, basically, the advisory committee on disability compensation, they're one of the secretary of VA's advisory committee. So the role -- and this happened to be on the policy staff. But the role is to assist members on that committee. They're usually doctors, lawyers, or whatever, but they're working on behalf of the secretary to provide recommendations to VBA, usually about the VA schedule of rating disabilities. But they also -- also look at different areas in the disability compensation program trying to provide recommendations.

So every two years they submit this biannual report to the secretary with their list of recommendations on how VBA can change it. So our job is not to persuade them in any way, but it's just to ensure the committee has what they need to provide those recommendations.

So we're responsible for hosting the conferences, ensuring the logistics, booking their travel, anything they need. But our job is not to do anything on behalf of them, but it's just to support the committee to ensure that they're able to execute on behalf of the

secretary of VA.

Q. And am I understanding that the committee members themselves are not part of the VA?

A. That's correct.

Q. Can you recall an example of a recommendation from a CDC that has been implemented as a change?

A. Yes. Let's see, the most recent one.

MR. KLOTZBUCHER: I'm going to object to form.

But, Ms. Piper, you can still answer the question.

THE WITNESS: Okay.

MR. KLOTZBUCHER: A form objection on the record.

THE WITNESS: Okay. Okay.

Yeah, it's available. I can't recall right offhand, but there has been some times because every now and then we have to go through the recommendations. So there have been some recommendations that they have been implemented. But at this time I can't recall exactly which ones they were.

BY MR. VANSLYKE:

Q. Okay. Have you participated in reviewing regulations, policy changes, or federal register notices relating to disability compensation?

A. You said have I participated?

Q. Participated in reviewing, yes.

A. Oh, yes.

Q. Have you participated in drafting regulations, policy changes, or federal registered notices relating to disability compensation?

A. Yes.

Q. You are aware of the PACT Act; correct?

A. Yes.

Q. Are you aware that it passed in 2022?

A. Yes.

Q. And you would have been in the supervisory veterans claims examiner role at that time; correct?

A. Correct.

Q. Was any of your work in that role related to the PACT Act?

A. Was any of the work related --

implementing, not in the regulation space. Implementing.

Q. And was any of that work related to Camp Lejeune?

A. No, not for me. I didn't do anything with Camp Lejeune. That section was not owned by the policy staff.

Q. I'm going to just briefly look back at Exhibit 4 which is the job description. Scrolling down to the second page. I'm starting about the middle of this paragraph. It says, "This staff is charged with implementing changes in Title 38 of the United States Code and the Code of Federal Regulations. It renders guidance primarily through the procedurals -- procedures manual, i.e., M21-1 adjudications procedures manual and policy letters; correct?

A. Correct.

Q. And do you agree that you are charged with those tasks in your role?

A. Yes, I agree.

Q. Do you agree that you have to interpret the U.S. Code and CFR in order to implement them?

A. Yes.

Q. And once you do implement them, you participate in issuing guidance for others to use when they are implementing them; correct?

A. Correct.

Q. Okay. With all of your background, is it fair to say that you are familiar with the statutes applicable to VBA disability benefits?

A. Yes.

Q. What about the regulations?

A. Yes.

Q. I understand that you are not a lawyer; correct?

A. Correct.

Q. But would you agree that in the roles we've just discussed going as far back as 2010, you were interpreting and applying the laws and regulations applicable to VBA benefits?

A. Correct.

MR. KLOTZBUCHER: Objection. Form. You may answer.

BY MR. VANSLYKE:

Q. Would you agree that doing so has been part of your job duties in every role you've held since then?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: Yes.

BY MR. VANSLYKE:

Q. New statutes have been passed which are applicable to VBA benefits or existing statutes received new amendments, you have participated in interpreting and applying them; correct?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: Yes.

BY MR. VANSLYKE:

Q. So in total, you have more than 15 years of experience interpreting and applying the laws and regulations applicable to VBA benefits?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: Yes.

BY MR. VANSLYKE:

Q. Is it fair to say that despite not being an attorney, you have subject matter expertise on interpreting and applying the laws and regulations applicable to VBA benefits?

MR. KLOTZBUCHER: Objection. Form.

You may answer.

THE WITNESS: Yes.

BY MR. VANSLYKE:

Q. Do you understand that expertise to be why you were identified to be deposed today?

A. Yes.

Q. Before I start a new section, I just want to check in, does anybody need a break?

A. Yes.

MR. VANSLYKE: Yes, okay. Let's go off the record.

THE VIDEOGRAPHER: All right. We're going to go off the record at 10:53 a.m.

(Recess taken from 10:53 a.m. until 11:01 a.m.)

THE VIDEOGRAPHER: Back on the record at 11:01 a.m.

BY MR. VANSLYKE:

Q. Ms. Piper, are you familiar with 38 USC Section 1155 which directs the secretary of the VA to adopt a disability rating schedule?

A. I'm not familiar, but if I had to look it up, I could. So, I mean, I'm sure it's in there, but I'm not familiar with the ins and outs of it.

Q. Do you understand that the secretary

of the VA is charged with adopting and applying a disability rating schedule?

A. Yes.

Q. I'm placing a file in the chat which I will mark as Exhibit 9. And I will share my screen.

(Exhibit 9 marked for identification.)

BY MR. VANSLYKE:

Q. Okay. Ms. Piper, at the top of this document, do you see the GPO stamp?

I can zoom in, if that's helpful. Top left corner.

A. Yes.

Q. Are you familiar with GPO?

A. Not that I can recall at this moment.

Q. If I say government publication office, is that familiar to you?

A. Yes.

Q. And the stamp says "Authenticated U.S. Government Information"; correct?

A. Yes.

Q. And do you understand that Title 38 is the title governing veterans' benefits?

A. Yes.

Q. And if I scroll down here to Section 1155, do you see that it says "Authority for schedule for rating disabilities"?

A. Yes.

Q. If you were asked in your role to interpret and apply a statute, such as this, do you believe you could do so?

A. Can you repeat the question?

Q. So we spoke previously about one of the responsibilities in your job role as being to interpret and apply statutes and regulations governing VBA benefits; correct?

A. Yes.

Q. If as part of that responsibility you were asked to interpret and apply this statute, do you believe you could?

A. Yes.

Q. And if I read the first two sentences under the section, it says, "The secretary shall adopt and apply a schedule of ratings of reductions in earning capacity from specific injuries or combination of injuries. The rating shall be based, as far as practicable, upon the average impairments of earning capacity resulting from such injuries in civil occupations";

correct?

A. Correct.

Q. Do you believe this to refer to the VA rating schedule that you are familiar with?

MR. KLOTZBUCHER: Objection.

Foundation. You may answer.

THE WITNESS: Yes.

BY MR. VANSLYKE:

Q. And based on what I just read, is it your understanding that VBA disability benefits awarded, according to the schedule, are based on impairments of earning capacity?

MR. KLOTZBUCHER: Objection.

Foundation. You may answer.

THE WITNESS: Yes.

BY MR. VANSLYKE:

Q. I will continue reading from here. It says, "The schedule shall be constructed so as to provide ten grades of disability and no more upon which payments of compensation shall be based, namely, 10 percent, 20 percent, 30 percent, 40 percent, 50 percent, 60 percent, 70 percent, 80 percent, 90 percent, and total 100 percent."

Did I read that correctly?

A. Yes.

Q. In your experience, is it possible for one veteran to have a 100 percent rating for one injury and a 50 percent for another at the same time?

A. Yes.

Q. And if dependents and other variables are equal, would their award value based on those ratings be greater than that of somebody with only one -- 100 percent rating?

A. It's just 100. So I think you're saying, like, if someone had 100 and -- had one disability that's rated at 100, another one rated at 50, and then someone else just has 100, will their money differ, is that the question?

Q. Assuming other variables to be the same just based on those ratings percentages; correct.

A. Yes, just the rating percentages. Not considering any special monthly compensation. But if we're just talking about both people being at 100 percent, the rate that they're paid would be the same no matter how many disabilities they have.

Q. I will continue reading from here.

It says, "The secretary shall from time to time readjust this schedule of ratings in accordance with experience"; correct?

A. Correct.

Q. Is it your understanding that the secretary of the VA has the authority to alter the rating schedule discussed here?

A. Like make changes?

Q. Correct.

A. Like updates? Yes.

Q. And I believe you've stated that you are familiar with this schedule; correct?

A. Correct.

Q. I will stop sharing. I will place another file in chat and mark this as Exhibit 10.

(Exhibit 10 marked for identification.)

BY MR. VANSLYKE:

Q. And can you see that I'm sharing my screen?

A. Yes.

Q. And do you see at the top left that same GPO stamp?

A. Yes.

Q. And do you see the title here says

"Part 4 Schedule for Rating Disabilities"?

A. Yes.

Q. Is this what you were referring to as the rating schedule that you're familiar with?

A. Yes.

Q. Has the rating schedule changed at all in your tenure at the VBA?

A. Yes. They are working updates. It was last fully updated, I think, in 1945 up in the 1940s. And they're close to having a full comprehensive update. So, yes, they've been making updates.

Q. Can you explain for me the distinction that you're drawing between a full comprehensive update versus other updates?

A. Yes. That's meaning like the whole -- like they have went through and updated the entire -- not just certain body systems. They're in the process of making sure that all of the updates have been completed one time. Like, so one iteration would involve all of the disability benefits that has not happened yet. The last time that has occurred was in 1945 or that's the first -- it has never happened. We're close to completing it.

So right now we have updated it, but it's not been a full comprehensive where everybody's system has been accounted for since 1945 that had updates. I can't tell you which ones because that's not in my realm of responsibility. But I do know that that staff is close to completing that first iteration of the entire update of all body systems.

Q. And when you say that hasn't been done since 1945, do I understand correctly that 1945 was when the complete schedule was initially published?

A. Right.

Q. So all of the updates until now have been more limited updates; correct?

A. Yeah. It's been like targeted, but it hasn't been, like, a full comprehensive that every single system has been updated at least one time. It's close to completion, but last time I checked it's not been a full comprehensive update, but it's close to being fully updated.

Q. So referring to the more targeted updates, do you have any recollection of how many times it has been updated since you began working at the VBA?

A. No, I can't recall at this time.
Q. Would you say there have been more than five updates?
A. I would say yes, there's been more than five updates.
Q. Would you say there have been more than ten updates?
A. I know there have been updates, but I have not sat down to quantify how many.
Q. Can you recall any examples of how it has been updated?
A. Off the top of my head. I'm drawing a blank on an example. Again, that's not in my day-to-day area anymore to look at updates. I haven't been a rating specialist since 2018. So I don't monitor the updates frequently, so I apologize, I'm unable to answer that.
Q. That's okay.
Is it your understanding that when the schedule is updated, that may cause changes to individual veterans' ratings?
A. It's possible, like depending on what the update is. You're saying like depending on the update, it could change a veteran's evaluation.

Q. Yes.
A. It's possible.
Q. I'm going to scroll down in this document to the first subpart here, Section 4.1. Do you see the title "Essentials of evaluative rating"?
A. Yes.
Q. And, again, we have spoken about your job roles including interpreting and applying the statutes and regulations governing VBA benefits. In that capacity, if you were asked to interpret and apply this regulation, do you believe you could do so?
A. Yes, but not today. I would have to read it, because, again, I'm not day to day in the four-part. Most of the time we're in the three-part regulation. But I'm sure what time I would be able to interpret it.
Q. I understand correctly that you're saying this is not something you deal with in your day-to-day job?
A. Right.
Q. But you are capable of understanding this section; correct?
A. Right.

Q. So I'm going to read from the beginning. It says, "This rating schedule is primarily a guide in the evaluation of disability resulting from all types of diseases and injuries encountered as a result of or incident to military service. The percentage ratings represent as far as can practicably be determined the average impairment and earning capacity resulting from such diseases and injuries and their residual conditions in civil occupations. Generally, the degrees of disability specified are considered adequate to compensate for considerable loss of working time from exacerbations or illnesses proportionate to the severity of the several grades of disability."

Did I read that correctly?

A. Yes.

Q. And based on that regulation language, do you understand that to mean that VBA disability benefits awarded, according to this schedule, are based on impairments of earning capacity?

MR. KLOTZBUCHER: Objection. Foundation. You may answer.

THE WITNESS: Yes.

BY MR. VANSLYKE:

Q. I will continue reading from here. "For the application of this schedule, accurate and fully descriptive medical examinations are required with emphasis upon the limitation of activity imposed by the disabling condition."

Did I read that correctly?

A. Yes. Yes.

Q. And based on that language in the regulation, is it your understanding that the limitation of activity is important because those limitations are what lead to the impairment of earning capacity discussed above?

MR. KLOTZBUCHER: Objection. Foundation. You may answer.

THE WITNESS: I mean, yes.

BY MR. VANSLYKE:

Q. And is that consistent with your experience working with the medical examination process?

A. In the medical examination process, I'm not familiar with utilizing earning capacity. Even though it states it here, I'm not familiar with the earning capacity piece.

Q. Are you familiar with the limitation

of activity piece?

A. Yes.

Q. Could you tell me more about the importance of the limitation of activity and the medical examination process?

A. I would say --

MR. KLOTZBUCHER: Objection. Form.

You may answer, Ms. Piper. I'm sorry for interrupting.

THE WITNESS: Yeah. So, I mean, I guess based off the examination, if it talks about, like, limitation of activities, if that's what you're asking. But, again, I'm not familiar -- like, my day to day is not in this four-part regulation. So I feel like I would just be in here just trying to assist you. But I'm not -- my day to day is not in the four-part regulation. Not that I can't figure it out. But I feel like in the time frame in which we have today I wouldn't be able to accurately assist you in interpreting this.

BY MR. VANSLYKE:

Q. I'll stop sharing for a moment. At

this point, I am not asking about the regulation. I'm asking about your prior role focused on medical examinations.

A. Okay.

Q. Do you recall which role I'm talking about?

A. The rating decision -- the rating specialist.

Q. I believe I'm referring to the management analyst/veterans claims examiner?

A. Okay.

Q. Did that role involve medical examinations?

A. Yes, but we were overseeing the examiners who did the contract exam. So it wasn't like I'm sitting there looking at an exam. We are ensuring that the contractors are meeting their obligations to get veterans exams. But we had a different division who did the quality reviews that would be able to answer your questions. But that wasn't my role as an operations specialist. Our job was to ensure that the systems worked. Our job was to ensure that veterans are getting their examinations, but the extent of reviewing the examinations to

review all that part, they had a quality review team that would probably be able to answer your question.

So in the medical disability exam, they had quality reviewers who actually reviewed those exams. And I feel like that would be the position that would be able to assist you. But not to the point where I am looking at exams. That wasn't my role in that position.

Q. Understood. Do I understand correctly that you're saying you did review the medical exam records when you were a claims examiner?

A. Yes. That was the job of the ratings specialist to look at the exams and apply the rating schedule. But that was the job of the rating specialist. But what I'm saying is the management analyst position, we didn't look up exams to review it. It was just basically to ensure that they had the exams. So it was like facilitating a program to ensure that, hey, these veterans are getting the exams that they need, like keeping the program moving.

Q. Okay. Thank you for clarifying.

So I will shift the perspective of

this question to when you were a claims examiner reviewing the medical examinations. Is that clear?

A. Okay.

Q. Okay. So in that role, when you were reviewing the medical examinations, do you recall the limitation of activity being significant?

MR. KLOTZBUCHER: Objection. Form. You may answer.

THE WITNESS: Yes. Especially, I would say more so in the musculoskeletal examinations, if I can recall correctly.

BY MR. VANSLYKE:

Q. Could you tell me more about why the limitation of activity was significant?

MR. KLOTZBUCHER: Objection to form. You may answer.

THE WITNESS: Yeah, I just can't remember at this time. I feel like it was part of the evaluation. But, again, I'm not -- it's been so long. I apologize, but I would have to review and get back to you. Like I would be able to answer these questions, but it would take me a little bit of time to research that and

not answer on the spot.

BY MR. VANSLYKE:

Q. Okay. So I will put this document back up for just a moment. And I'm picking back up here. It says, "Over a period of many years, a veteran's disability claim may require reratings in accordance with changes in laws, medical knowledge, and his or her physical or mental condition.

Did I read that correctly?

A. Yes.

Q. And based on that language, is it your understanding that a veteran's disability rating may change based on changes in law?

MR. KLOTZBUCHER: Objection. Foundation. You may answer.

THE WITNESS: Yes.

BY MR. VANSLYKE:

Q. And in your time at VBA, can you recall any changes in law that would have resulted in a change in the ratings of veterans?

A. Not right off the -- it's not -- I'm sure it has happened. But at this time I can't give you a specific example.

Q. If we refer back to your prior

example of the PACT Act and the presumptive injuries, do you believe that would be an example of this?

A. (Reading document.)

So I feel like this is saying and, again, it's been a minute. So but -- so I feel like with PACT Act, like they expanded new. So I mean it's -- I think I would just have to ensure that I am interpreting this correctly. So, again, like I said, I'm not looking at this all the time. So -- would require re-ratings -- because it's saying that the disability claim -- yeah, I would have to sit down and analyze the interpretation of it. Because I read this and, like I said, I'm not looking at this all the time. But with PACT Act, I don't know if that would be a rerating because, like, hey, we're granting -- some of them were new conditions. But this is how I read it. Again, like I said, I'm not looking at this all the time. But, to me, this would be, like, maybe a change in law requires us to look at something that's already service connected again.

So because I'm not -- I haven't sat here to analyze it, I can't tell you if this is

saying without getting further interpretation, if this is saying like, hey, someone's already service connected, we're rerating them, or because of the change in law we are now granting something new. So I can't fully assess that without taking some time to really assess the section.

So, again, like I said, I do not work in this section all the time. So I apologize that I'm not able to give you that -- the response that you need for this.

Q. So I just want to clarify. When you're saying you don't work in this section all the time --

A. Right.

Q. -- I understand that you're saying you are a bit rusty on this section --

A. Right.

Q. -- but that the rating schedule is still within the topics you are familiar with, in general; correct?

A. Right. But, in general, when we talk about, like, evaluation and stuff like that. But when it comes to interpreting this section, I feel like I would need to have to -- to look at,

like, what is this saying. Like, it's just been so -- like, I've never sat here to look at this to be, like, hey, this means rerating something new. To me, it could be two different answers, and I'm not fully confident on which way to go with that one word, it's kind of throwing me off.

Q. Are you familiar with conditions being rated as secondary service connected?

A. Yes. So that's basically saying, like, hey, I'm service connected for X, but because of X, now I have a condition. So, basically, I'm service connected for my knee. My knee is bad and now it's causing my hip to be bad. Now my hip can be secondary due to the issues I have with my primary condition of my knee that's service connected.

Q. Do you believe it's possible that any of the presumptive injuries under the PACT Act could have been rated as secondary service connected prior to the PACT Act?

A. Without, like, looking at each disability right now, I can't say off top, but it's possible. I mean, anything is possible. But I would have to look at -- look at the information to see like -- because, basically,

what you're saying like, hey, this person could have received this secondary. So PACT Act allowed us to do this presumptive, but what you're saying is that potentially prior to PACT Act something could have been secondary service connected is what you're saying?

Q. Correct.

A. Yeah, but I wouldn't know that without looking at it to say yes or no. But I understand what you're saying, but I feel like I would have to look at the information without making a generalization of yes.

Q. So I understand you cannot say yes to a specific example without reviewing that file, but that in general you believe that would be possible; correct?

A. Yeah. It's possible, but I wouldn't know until I would really, like, look at it to see, like, the evidence prior to PACT Act. Because that's basically what you're saying. But without looking at the case and making a full assessment, I wouldn't be able to 100 percent say yes without looking at it.

Q. And if there were an example of that, that would be an example of a rerating in

accordance with changes in law; correct?

A. If that's what this is saying. Again, like I said, I would have to really look and see what this rerating is because it's not saying -- that's what I'm saying. I would have to take a minute to sit down to actually understand what the term "reratings" mean in this context. Again, I don't work in this area, but I feel like if I would have a little bit of time, I would be able to fully answer your question.

Q. Are you generally familiar with a veteran having a rating for a condition and later receiving a different rating for the same condition?

A. So like a claim for increase, is that what you're saying?

Q. Correct.

A. Yeah. That's normal. So that's basically what happens with most people over time due to age like things get worse. You know, sometimes they usually don't get better, they get worse. So what you're saying is that we are basically looking at something and now it has gotten worse. So, basically, a claim for increase. So usually veterans come in when they

feel that a condition that's currently service connected, has gotten worse. We'll look at it and evaluate it to see if that indeed did occur.

Q. And would you understand a successful claim for increase to be a rerating?

MR. KLOTZBUCHER: Objection. Form. You may answer.

THE WITNESS: Yes. If this term -- and, like I said, I do apologize, but if this terms means to rerate again or look again, yes, but I'm not 100 percent well versed on the term "rerating."

BY MR. VANSLYKE:

Q. So that would be my understanding of that word by itself?

A. Okay.

Q. Is there some other interpretation that you are imagining might be possible?

A. Well, because this is not just saying rerating. But this says over a period of time many veterans disability claims may require reratings in accordance to law. But then you're saying that rerating in a different context. You're just saying the term "rerating" without even applying law, is that --

Q. Do you agree that it says "over a period of many years a veteran's disability claim may require rerating" --

A. Right.

Q. -- "in accordance with changes in law, medical knowledge, and his or her physical or mental condition"; correct?

A. Yes.

Q. So would the claim for increase be a rerating based on his or her physical or mental condition?

A. I would say yes.

Q. Okay. I will stop sharing that. In your understanding, can VBA tell the difference between payments issued to a veteran versus payments anticipated to be made to a veteran in the future?

A. I'm not familiar with that. So you're saying can VBA -- like, do we have some kind of mechanism to assess that? Like payments now and future payments, is that what you're asking?

Q. In your role at the VA or at the VBA, do you understand the difference between those two things?

A. Can you say it again? Can you say it again?

Q. Do you understand the difference between a payment issued to a veteran in the past versus a payment anticipated to be issued in the future?

A. So basically like in our system, like if we show, like, okay, this payment that he has now, does it change -- I guess I'm just trying to answer -- assess like what are you -- like should I know, like, okay, what they received, I mean, like, am I looking at a system or am I just saying, like, hey, this person has this payment -- in the future, they should have this payment. I guess I'm trying to put together what you're saying.

Q. I think my question is a bit simpler than it seems.

A. Okay.

Q. Is there a difference between yesterday and tomorrow?

A. A difference between yesterday and tomorrow. Like, okay, so you're saying blurring -- no changes should the payment that comes out today the same tomorrow?

Q. No.
A. Maybe I'm reading too much into your question.
Q. Today is February 26, 2026; correct?
A. Okay. Right. So you're saying -- okay. X -- person X on today gets $1,000; right? The next part of you are saying -- you asked about the future. Is there a way for me, Jadine, to know if this person will still get $1,000?
Q. So let me open up the spreadsheet again.
A. Okay. So you -- let's go to that.
Q. So --
A. So this is this person --
Q. So at the outset I'll note that the very first tab here says that the data was retrieved on April 30th, 2025; correct?
A. Okay.
Q. So there's a period of months of data between this date and today that would need to be supplemented for this to be a complete record; correct?
A. Correct.
Q. Assuming that later in this case this data is supplemented to be present. If we look

at this payment data tab, this will show the list of past payments made to a particular recipient; correct?

A. Correct.

Q. And somewhere in VBA's system, there is also a schedule of payments to be issued in the future; correct?

A. Correct.

Q. My question is simply you understand the difference between those two lists of past payments and scheduled payments; correct?

A. Correct. Because, basically, it stays the same for the majority of these people. And then every December, it increases due to the COLA. So if we look at Keller -- Scott Keller, so we go down if we're going to do the past two years, if we look at 12/1/2022, the rate between November and December changed.

So they continue to receive the same payment. However, there was something that occurred October that dropped him down. I would have to look. But then it resumed back. And I think -- let's see -- so it had to change. So I would have to look in and out. But for the most part, what you're saying it is yes, but, however,

it seems like there was something that happened that caused a break, but then it went back to the normal cadence of what was going on. But for some reason between -- yeah, I would just have to look at it. I kind of understand what you're saying. But I just don't know what happened without looking at the inside of the award -- it might be on another dataset, another tab, to show what happened in with the change in percentages probably.

Q. So we'll look at some examples of that soon.

A. Okay.

Q. But for right now --

A. Okay.

Q. -- I understand you're saying there is a cadence where veterans typically receive the same benefit for 12 months; correct?

A. Uh-huh.

Q. But that there are certain things that can cause changes in that and we don't know exactly what caused the change here; correct?

A. Correct.

Q. If a veteran receives an increased award, would that cause a change?

A. Yes. An increased award would cause a change.

Q. Would the COLA adjustment cause a change?

A. Yes. COLA, yes, if it was more than a percent, yes.

Q. Would a --

A. So if it was granted -- go ahead.

Q. Sorry. Go ahead.

A. No, go ahead.

Q. Would a change in dependent status cause a change?

A. Yes. Like, if we are -- depending on -- I mean, I don't know if you want to talk about the types of changes. So, like, if you're adding a dependent, removing a dependent. But, yes, we would -- our award lines would change for anything that happened, it would cause a change whether positive or negative. But, yes, a change would occur.

Q. If the veteran passes away, would that cause a change?

A. Yes. Usually if the veteran passes away, the benefit stops. It usually is terminated once the veteran passes away.

However, if there is a surviving spouse, depending on the criteria, they may or may be awarded that benefit. It wouldn't be the same amount that a veteran receives.

Q. Are those referred to as DCI benefits?

A. DIC. Dependents indemnity compensation. And then, yeah, so I would say -- yes, DIC benefits is one type of death benefit.

Q. Thank you for the correction.

Are there other types of death benefits that it can transition to?

A. I would have to look up right quick. But I believe they have a pension that's a dollar for dollar, but I would have to look. It's administered by our pension and fiduciary service. But it would be a quick search. But I believe there should be two -- should be a pension and a DIC, but I'm not 100 percent sure right at the moment. But I do know DIC, I feel like there's a pension, but I would just have to double check.

Q. And do I understand correctly that the veteran can receive the pension while they're alive, but not the DIC benefits; correct?

A. DIC is for survivors. If a veteran has the income criteria and it is more than the disability percentage, then, yes, they can receive pension. They can't receive pension and compensation. So, usually, depending on the veteran's income, so that -- it's just income-based.

So, basically, you would want to, you know, get the disability if it's more. But sometimes in rare instances, the pension is more advantageous. So the veteran could possibly be entitled to both compensation and pension, pension just based off income and the veteran will have to elect which one, getting the higher -- you know, which one is the higher benefit.

Q. So when you say pension is based off income, do you mean that it's means-based?

A. Yes. It's an income-based benefit for veterans who have wartime service.

Q. And is that completely separate from the disability benefits?

A. It's separate from compensation. So, like I said, some veterans, in some instances, are entitled -- or they meet the criteria for

both. And at that time they would have to elect to either receive the pension or the compensation. Usually getting whichever one is most advantageous.

Q. And the compensation benefits are the ones that are based on disability ratings; correct?

A. Correct.

Q. And SMC rates also fall under compensation; correct?

A. Correct.

Q. So there's essentially two distinct categories compensation versus pension?

A. Right.

Q. And I understand they can overlap and can potentially impact each other, but they are two distinct programs; correct?

A. Correct.

Q. And the DIC benefits are also a separate benefit provided to survivors, you said?

A. Yeah, survivor's spouse. So it was a death benefit.

Q. Those are not benefits provided to the veteran directly?

A. No. So DIC -- the criteria should

be -- it's been a minute since I looked at it. But it is basically for veterans who either died in service, so sometimes before they even -- they were in the military and they passed away, someone can receive that benefit, or if they pass away from a service-connected disability.

There were some talks, I would have to look at it, but I believe that they have to at least have it for eight years, basically had that 100 percent rating for eight years. Don't quote me on it. But that should be one of the criteria. There was three criteria. But I would just have to look to refresh my memory. But basically it is only for a surviving spouse or for a veteran's spouse if the veteran was in the military and died in service.

Q. So when you referenced the criteria for duration of benefits, you started that same with there were some talks?

A. Yeah.

Q. Do you mean to --

A. I'm just trying -- yeah.

Q. Go ahead.

A. I'm just trying to think, like, I mean, it's not nothing that's public, you know.

So I'm just trying to think, like, in my mind. So I'm talking to you, I probably should have -- but I'm just thinking, like, trying to ensure that there weren't any changes. So when I say some talks, I mean I'm working through, like might have been working on something and saw something.

So in my mind, that's why I said I would have to look at it, you know, a quick snap if I had my work computer to be, like, hey, this is what it is, if that makes sense, just to make sure what I'm telling you is factual. Because it's not, like, the death benefit is administered by my staff, so it's not something that I look at all the time. So that's what I said, like, I feel like there might have been something that might have occurred and I would want to make sure before I tell you, like, hey, this is what it is.

Q. So do I understand correctly that when you say there were some talks, you're referring to previous discussions about potential changes to that requirement and that you do not recall sitting here today what the current version of the requirement is?

A. Yeah. Like, I feel like I'm

80 percent sure, but because this is not something I look up every day, I would just want to do a quick check to be, like, hey, this is the criteria.

Q. So based on the things we just talked about, you would agree that there are certain things that could cause a change in the anticipated cadence of payments; correct?

A. Like basically -- like potentially, like -- like if something were to happen with the case, so, basically, if the veteran files a claim, it may or may not change the current benefit. I think that's what you're kind of alluding to. Not that it just changes on its own, but it has to be something that happens to cause it to change. Is that what you're alluding to?

Q. Correct. I understand there would need to be a cause.

A. Okay.

Q. But there can be changes when there are causes; correct?

A. Can be changes if there are causes. Potentially, depending on what that change is.

Q. Would you agree that the pattern of

the cadence is not set in stone for future payments indefinitely into the future?

MR. KLOTZBUCHER: Objection. Form and foundation. You may answer.

THE WITNESS: Can you repeat the question?

BY MR. VANSLYKE:

Q. So you've identified that there is a cadence to the changes over time; correct?

A. Right.

Q. And that cadence is not set in stone and required to continue into the rest of the future indefinitely?

MR. KLOTZBUCHER: Objection. Foundation. You may answer.

THE WITNESS: Yeah. Without looking, like I -- like I said, like, everyone has a case by case basis. So without looking to see is I feel like -- well, I know you can't just make a generalization without knowing. I mean -- I'm trying to find the best way to put this.

But, I mean, without knowing what the changes or the cause, like, I mean, there's potentially that this benefit they

have is going to increase every 12 months. But without looking at their case, I can't tell you that. Like, to make a general blanket statement for all of them, it's just without looking at each individual case, I can't make that assessment.

BY MR. VANSLYKE:

Q. December 1st is when the annual changes occurred; correct?

A. The COLA, yes, the annual cost of living adjustment. It's effective 12/1 and --

Q. So if I --

A. Go ahead.

Q. Go ahead.

A. No, you go ahead.

Q. So if I look at Mr. Keller here at the top, if I assume that his rating stayed the same, I see the most recent payment is in April, but the cadence would suggest that his payments would continue and there would be a COLA adjustment in December 1st of 2025; correct?

MR. KLOTZBUCHER: Objection. Foundation.

You may answer, Ms. Piper.

THE WITNESS: Right. Based off that

without knowing, you know, what is going on, you know, but potentially, it should be -- yeah, like, if it's nothing that happened, like there's nothing in the record to indicate that something was going to happen in the future, we would say that this would continue to increase every 12 months.

But who's to say that Mr. Keller didn't file something in June of 2025. Like without taking a -- like, I feel like -- well, I know that I can't just say a blanketed statement because we don't know what will occur in the future.

BY MR. VANSLYKE:

Q. So that's -- I'm just going to acknowledge that we're on the same page. That is in the future from the perspective of this dataset being produced in April of 2025, but it is in the past as of today, February 26, 2026; correct?

A. Can you repeat that?

Q. I just -- I'm trying to avoid confusion on the record. Sorry, excuse me. One second.

Okay. I'll try again. So I'm just trying to avoid confusion on the record that when we're referring to that potential cost of living adjustment in December 1st of 2025, the only reason that that is hypothetical is because we do not have the rest of this data from April of last year until today; correct?

MR. KLOTZBUCHER: Objection. Foundation. You may answer.

THE WITNESS: Yes, I would say barring no changes in what he has going on based off this small dataset, if -- you know, if there's nothing in the file that indicate a change, if it's continuing the same cadence with no changes, it's possible that in December of 2025 he should have received the cost of living adjustment.

BY MR. VANSLYKE:

Q. I think I'm --

A. To increase the benefit, yes.

Q. Go ahead. I think I'm overcomplicating my question again. My point is only that today, February 26 of 2026, if asked to, the VBA could identify whether Mr. Keller

did, in fact, receive a cost of living adjustment in December of 2025; correct?

A. Yes. There will be a way for us to look and see that.

Q. But then if we look ahead to December 1st of 2026, that is actually in the future and has not occurred yet; correct?

A. Right. So basically this -- on the award letter, basically, if there was a proposed future action, it would have been in the veterans' last letter that -- the correspondence that they received from VA. So if that letter did not indicate some kind of term date, then we would assume, only assume because we don't know what has happened or transpired without looking at it that it should have followed the same cadence unless indicated on that letter some future date. But the veteran should know at the time of decision or at the time of whatever happens whether or not there will be some form of change in the future besides submitting a claim and getting a new letter indicating that.

But if we were to look, like, based off this, the veteran's last letter showed that maybe effective April -- like, I don't even know

how long this award line goes, but if there was nothing indicating a future date of change in benefits, then we would assume that it would continue, in every December there should be a cost of living adjustment increasing the payment.

Q. So what I hear you saying is that that is the general expectation, but sitting here today, you would not promise me that that's what will happen in December of 2026; correct?

A. Without knowing what's going on, I wouldn't -- to me, I wouldn't think that would be fair to make that assessment without knowing what's going on.

Q. And by what's going on, are you including you would need to know what happens between today and December of 2026?

A. No. I would say whatever that last rating decision indicated. Like I don't know what is in the veteran's file to indicate if there's some -- if something in the file indicated that there were -- that there is a potential future change. But the veteran will always know unless it's something that's outside of that. But if it's just pertaining to the current rating status, we notify the veteran in

that rating if there's going to be some type of future action. If that's not indicated, there's a highly probable chance that it will stay the same, but without knowing or looking at that at least that last rating decision. I don't know -- or I wouldn't -- it wouldn't be fair to make an assessment to say, yes, this will always stay the same. But that last rating decision, if it did not indicate any future actions, it's very -- it's highly probable that it should stay the same with no increase unless the veteran comes in and requests something.

Q. So what I hear is that, not counting the COLA adjustment, it will stay the same unless something changes, like, for example, the veteran coming in and filing another claim; correct?

A. Right. Which could potentially change what the current state is.

Q. And you would agree that if the veteran passes away, that would also change the current state?

A. Yes, because once that veteran passes away that benefit terminates.

Q. So is it fair to say that we do not know whether there will be a COLA adjustment in

December until we know whether or not the veteran lives to December?

A. Well, we put it in there -- like, I don't think we -- it's just -- so the -- every year, the -- it has to be passed in law, the COLA. So right now, every year, we would have to notify the veteran because it's not like a standard thing. It usually happens, but we still have to notify the veteran because it's not -- because the law has to pass every year. It's not like a standing COLA that has to happen. It has to pass in law every year. But barring that -- and I almost have to go back to your original question again.

But, basically, barring us not notifying the veteran, that benefit will still stay the same. So say the veteran does not get COLA for 2026, if there's been no change in future action, we know continual will still be $4,044 until we notify the veteran again.

So if there's no future action --

Q. And --

A. Yeah. If there's no future action, no new claim and there was no law that passed COLA, we can say it's highly likely that it will

still be $4,044.91 until we notify the veteran again.

Q. And that would not continue beyond the veteran's death, you said; correct?

A. Right. When the veteran passes away, that benefit terminates. So we're not paying -- like who would we be paying if the veteran passes away. So this is due to the veteran's service-connected disability. So that's the intent of the benefit is for the veteran as a result of service-connected benefits.

So the veteran passes away, then that entitlement goes away because that benefit was intended for the veteran. Now, if the spouse meets whatever -- the criteria that we have set, then the spouse can possibly obtain it, but it's not the same amount in which the veteran receives.

Q. And as you said earlier, it is not the same benefit being provided; correct?

A. Right.

Q. Okay. So when you refer to needing to see the latest rating decision, are you referring to the correspondence provided with the latest rating decision or do you believe that

information would be in another tab here on this spreadsheet?

A. Yeah, I would -- I mean me -- I would look at the correspondence. But it could be in here. But I don't look at this all the time. I think if I would have time to sit here and look at it, I'm sure I would be able to figure it out. But the easiest thing in what we would normally do in these cases, if someone would have come and asked for this inquiry, we wouldn't be looking at this spreadsheet. We'd be actually be looking in the record because that way you can get a full assessment of everything that's in the veteran's record, not a snapshot of what's in this. Because this is only -- this is only as good as the last person that put this information in there. However, sometimes when you look at the file, you're able to find more information. So this spreadsheet is not -- it's not the best way to assess what you're asking. Yes, it may help, but this spreadsheet I would -- I feel like you can potentially miss things when you don't look at the whole file. And so we were always taught in VA to every time you look at the claim, you start from the bottom up, so you can get the full

snapshot of everything that's occurred, not just bits and pieces because you could miss something.

Q. And is that partially due to retroactive changes?

A. No. I guess I wouldn't think that has anything to do with retroactive changes. We were just always told before you make an assessment in VA and in our training is that you should always look at the entire C file, the veteran file -- or C file mean claim file, is because you can miss something just by looking at one thing, taking it for face value.

So we were always taught, like, if you want to answer an inquiry, then you need to look in the file so you can make a determination for yourself. So, normally, what you're asking is like a form of inquiry. It's not proper to just look at the snapshot in time to give a full assessment without taking time to look in the claim file.

Q. So do I understand correctly you are saying that if I wanted an assessment of what will happen with a particular veteran's benefits in the future, the correct way to do that is to have the VA conduct an inquiry?

A. Well, what I'm saying is, I mean, these are rare questions that people would ask. But what I'm saying is if someone were to ask me that, like what you're saying, I know that I can look at least at the current claim file to get a snapshot to give you -- or advise you in the best thing. So, usually, like, veterans would come in, we had to be careful because you can't just say all blanketed yes or no or maybe so. But we would be able to at least take a full assessment to advise you on what is proper or what the next steps are. And I just know that it's not proper just to look at a spreadsheet or just to look at a hypothetical situation and to make an assumption for everything.

So what I am saying -- or the best way for me to say it is that until I know what is going on with each and every case, I just feel like it's just improper just to make a full blanket assessment.

Q. When you refer to looking at the entire claim file, are you referring to the current status of data entered in VBMS or are you referring to the total history of correspondence documents?

A. The total history of correspondence documents, which is found in VBMS. But it's in a document tab, not like the award tab. Because I think because this is like award lines. But this is -- I'm just talking about me because what you're asking is about information that should be found -- like, to me it would be more medical, not payment.

Q. So you're distinguishing between data entered directly in VBMS versus documents uploaded to VBMS; correct?

A. Yeah. Because I guess I got to understand your take on data. Are you just talking about award lines, like, when we want to look at payments. I am talking about documents, like, the veteran filed the claim. Like, I should be able to look at the claim, the 526, all the veterans VA exams. But I wouldn't have to go that far. I can at least look at the last one.

What I'm saying is normally the last rating decision, the last notification letter, the last bit of evidence is what we are going on because we're looking at the current history. Like, if we're just talking about future, we're looking at the veterans current rating decision,

what it says. And from there, that will make me know if I need to go even further to look at the beginning. But what I'm saying is just the last rating decision, it would indicate if there are future actions that may or may not change that information is all I'm trying to say or the best way I'm trying to say it.

Q. So if you look at a particular veteran in VBMS, am I correct that without opening a separate document that is contained within VBMS, there is somewhere within the VBMS platform itself where you can see, for example, what that veteran's current combined rating is?

A. Yes. But that's -- yes.

Q. So that's an example of what I'm referring to as --

A. The data.

Q. -- data in VBMS as opposed to in a document uploaded into VBMS, is that distinction clear?

A. Yes. I understand what you're saying.

Q. And I just want to clarify that you're saying you would look at the most recent correspondence document, not the current data

that should reflect the most recent decision made; correct?

A. Yeah. Because that's how we know if something's wrong too. Because sometimes we have what's called clear unmistakable error. So if someone's telling me to look at it for a fresh lens, a fresh lens is not looking at what's in the data because that's not telling me anything. That's what someone else did.

But if you want me to make an assessment with a fresh lens, then I need to see the documents, because if I come up with something different, then there could be a potential -- something what we call a clear and unmistakable error. So that's why if you're -- so it depends on what you want to know. If what you're saying is we're just looking at the veteran's current state. But if you're saying, like, hey, something could have been wrong, then that's where my interpretation comes in looking at the entire file for a new look. So it depends on what you're requesting.

So if we're just requesting what's the best for its current state, what you said first, the data, that's fine. But if you're

asking for, like, a separate analysis or a new look, then that's where what I was talking about, like a fresh lens or a clean file review or something like that would be more feasible.

Q. And am I understanding you are testifying that if you could look at that claim file, you believe you would be able to give a more clear answer on whether there would be changes to a veteran's benefits in the future; correct?

A. Correct.

MR. KLOTZBUCHER: Objection. Foundation.

BY MR. VANSLYKE:

Q. And I think one example that you gave is that you would be able to see whether a particular rating had a scheduled end date; correct?

A. Correct.

Q. Are there other examples of features you would look for that would impact those future projections?

A. No, I think that would be enough.

Q. And you stated that if the veteran filed a new claim, that could be another thing

that could cause a change; correct?
A. Potentially.
Q. And that if there was a change like that, it could change the amount that is provided to the veteran in the future; correct?
A. Potentially, depending on what it what it showed. Like, that's what I'm saying. Like it's no blanket statement. So usually -- like, so -- and this it's kind of you're asking, like, is it a positive change or negative change. So what type of change do you want -- do you want to talk about?
Q. I think either are possible; correct?
A. Right. It's possible.
Q. So I am including both in my questions that it can increase or it can decrease based on changes, such as new applications; correct?
A. Potentially, yes.
Q. And in contrast to the past payments reflected here, those future projected payments have not yet been provided to the plaintiff; correct?
MR. KLOTZBUCHER: Objection. Foundation.

THE WITNESS: Right because future changes, like I said, like if there -- they just keep the same rate. So the veteran -- like, in this instance, like, if there's no future proposed action, we can only go to 12/1. And that is just because COLA has to pass in law every year. But if there's been no rating decisions, no indication of future actions, nothing else that comes in, it is likely that it will increase. But if there's been no change in COLA, you -- at a minimum, we know this veteran will get $4,044.91.

BY MR. VANSLYKE:

Q. So you're saying it's likely that those amounts would be provided to the veteran, but they have not yet been; correct?

MR. KLOTZBUCHER: Objection. I'm going to put a continuing objection on the record based on the spreadsheet. She doesn't have foundation to answer these questions. So objection, foundation.

You may answer, Ms. Piper.

THE WITNESS: Can you restate --

restate the question?

BY MR. VANSLYKE:

Q. So just to recap, I believe you agreed that you recognized that the payments here have already been paid to the plaintiff in the past; correct?

A. Correct.

Q. And we recognize that there is an inherent distinction between a payment already provided to the plaintiff and payments in 2027 that have not yet been provided to the plaintiff; correct?

A. We wouldn't -- like, based off this person, if I were to look at when you received the dataset, we would have -- the last award line would have had a 12/1/2024. And that is because COLA for the 12/1/2025, we did not input that into the system until December of 2025 or the 2026 year.

So what I'm saying is because every year for COLA to occur, it has to happen in law. We're not going to go that far. So what you're saying, 2027, I know that's not feasible is because every year we have to do it. So you're -- what you're saying is we wouldn't go

that far. So based on -- yeah.

Q. Go ahead.

A. So if I were to look at this data subset for 4/30/2025, what I know is if there were nothing that occurred, I know that the last letter that the veteran received had to be sometime in December of 2024 to discuss what will occur in 2025. What I'm saying is we're not going to go too far in the future is because COLA at a minimum, if there were no -- ever no more rating decisions, never any more claims, every year we have to notify the veteran because it's not -- because a law has to pass for it to occur.

So what I'm saying is, say, COLA did not take place for 2026 year, we know the last thing we should see is in December of 2024. We notified the veteran that they were entitled to receive $4,044.91. So, hypothetically, if nothing ever were to occur, we know that that last letter the veteran should have should be December 1 of 2024, and it will not -- unless COLA passes again, that letter would have stayed the same. That's what I do know barring there were no more rating decisions, no more changes, or anything like that. So that's what I'm

saying.

But you give the example of 2027 and what I'm saying is we would never -- until -- unless there's a change where COLA doesn't have to be in law, but right now COLA has to be in law. So what I'm telling you is we would never project that far out, and that's just because we have to see what happens every year. So COLA is only good for that particular year.

Q. Okay. Thank you. I will stop sharing.

All right. I'm going to go back to Exhibit 7. This is the Camp Lejeune Justice Act. You can see it runs for about a page and a half.

Would you like a moment to briefly review this before I ask you anything about it?

A. Sure.

Q. Let me know when you would like me to scroll.

A. Okay. Okay. Okay.

Q. And the last section here.

A. Okay.

Q. Okay. So you have just read the Camp Lejeune Justice Act; correct?

A. Correct.

Q. And do you see in this section it refers to health and disability benefits relating to water exposure?

A. Yes, I see that.

Q. Do you see in Section B here it says in connection with health care or a disability relating to exposure to the water at Camp Lejeune?

A. Correct.

Q. Do you understand that some veterans receive VBA disability benefits related to Camp Lejeune?

A. Yes.

Q. And do you understand that this language here is distinguishing between benefits related to Camp Lejeune and benefits not related to Camp Lejeune?

A. Okay. Restate your question. Can I --

Q. Just in general, you understand that this is referring to two separate categories, one category being health care or disability relating to exposure to the water at Camp Lejeune, and the other category would be anything that is not relating to the exposure to the water at Camp

Lejeune; correct?

A. Where is it not -- maybe I'm missing something.

Q. If I understand -- if I make a statement that I will go to the store and I will buy apples but only green apples, do you understand that that excludes apples that are not green?

A. I might need a -- five minutes.

Q. Of a break? Is that what you mean?

A. Yeah, I need a break. Yeah.

Q. Okay. Let's go off the record.

A. Thank you.

THE VIDEOGRAPHER: We're going to go off the record at 12:20 p.m.

(Recess taken from 12:20 p.m. until 12:26 p.m.)

THE VIDEOGRAPHER: We're back on the record at 12:26 p.m.

BY MR. VANSLYKE:

Q. Okay. I'll put the document back up. So we were looking at this language here; correct?

A. Uh-huh.

Q. And do you understand that this language is referring specifically to health care

for a disability relating to exposure to the water at Camp Lejeune?

A. Yes.

Q. And do you understand that to be different than health care or a disability not relating to exposure to the water at Camp Lejeune?

A. Yes. That's two different things it's saying related to exposure.

Q. Okay. That's all. I will stop sharing that one. I am placing another document in chat that I will mark as Exhibit 11.

(Exhibit 11 marked for identification.)

BY MR. VANSLYKE:

Q. Okay. I am sharing my screen. Ms. Piper, can you see here that this says expert report of Tricia M. Yount, CPA, MAFF, economic damages; correct?

A. Yes.

Q. And below that you can see this refers to David Downs; correct?

A. Correct.

Q. At the bottom you see that it's dated December 15, 2025; correct?

A. Correct.

Q. And earlier you stated you had not reviewed any of the expert reports produced in this litigation. So I'm assuming you have not reviewed this particular report; correct?

A. Right.

Q. So I'm going to scroll down. And on page 2 here, you see there's a section referring to Veterans Benefits Administration compensation; correct?

A. Right.

Q. And if I start reading in that section, it says, "Mr. Downs is currently receiving disability compensation benefits through the U.S. Department of Veterans Affairs, Veterans Benefits Administration, VBA. He began receiving benefits related to Camp Lejeune on April 1, 2017. VBA benefits are based on Mr. Downs combined disability rating assigned by the VBA for various diagnoses. Using VBA's disability ratings tables, I have calculated Mr. Downs' benefits due to increased disability ratings related to Camp Lejeune compared to what he would have received without these ratings. Mr. Downs calculated additional benefits through

December 31st, 2025, are $89,449," and it cites to Table 1; correct?

A. That's what it says, yes.

Q. And I'll note that there's a footnote here after disability ratings related to Camp Lejeune. And if I come down here, it says, "VBA disability ratings related to Camp Lejeune are based on an expert opinion report prepared by Wang Ji, M.D., dated December 15, 2025. For Mr. Downs, those conditions are 7500, renal cell carcinoma." Is that correct?

A. That's what -- correct.

Q. Do you understand this footnote as saying that for purposes of this report, the only rating that is being treated as related to Camp Lejeune is this rating, 7500, renal cell carcinoma?

MR. KLOTZBUCHER: Objection. Form. Foundation. You may answer.

THE WITNESS: From there, that's what it appears to be saying.

BY MR. VANSLYKE:

Q. Okay. I'll come back up here. So we have this citation to Table 1. If I scroll down, we see Table 1 here; correct?

A. Yes, that's Table 1.
Q. And you see this appears to be referring to veterans benefits administration payments from government; correct?
A. Yes.
Q. And you see that it says, "VA benefits with CLJA and VA benefits without CLJA"; correct?
A. Correct.
Q. And the next column says, "Excess benefits for CLJA"; correct?
A. Correct.
Q. Okay. So I'll scroll back up. And the following paragraph after where I stopped reading says, "Mr. Downs current benefit is $1,759.19 per month due to his current disability rating which includes Camp Lejeune related diagnoses. Had Mr. Downs not received Camp Lejeune related disability ratings, he would currently be receiving monthly benefits of $774.16. The variance of $985.03 reflects the disability benefit received relating to Camp Lejeune and is the monthly offset amount. Mr. Downs' total additional benefits related to Camp Lejeune for 2025 are expected to be

$11,820," and a citation to Table 2; correct?

A. Correct.

Q. When you read this description describing the current benefit and the benefit that he would receive if he had not received the Camp Lejeune related disability ratings and then the variance between the two, do you understand the math that she's applying here?

A. Yeah. So basically she's saying the VA disability is the $774 per month. And then he's getting an additional benefits of $985.03, and they combined those to $1,759.19.

Q. And this variance that reflects the disability benefit received relating to Camp Lejeune, do you understand that to be referring to this same rating that we looked at in footnote 2, the 7500 renal cell carcinoma?

MR. KLOTZBUCHER: Objection. Foundation. Form.

You may answer.

THE WITNESS: Yeah. But I would have to just confirm it with the current VA rate table. Like, what did they say his total disability percentage was? They just gave the monthly amount.

BY MR. VANSLYKE:

Q. I believe that's in Table 2. So let me scroll down there so you can look at it.

A. Yeah, I don't have -- I'm not on my -- I'm on my personal laptop. I don't have any VA information to check it with. Okay. So they say --

Q. So if we assume that the data she entered here is correct, do you understand the calculation that she's applying?

MR. KLOTZBUCHER: Objection. Form and foundation. Presumably these are questions for the author of the report.

THE WITNESS: Yeah, I don't -- I mean, I would have to look at it. Like, I mean, I don't know without the rate tables. I mean, I can see the math or whatever like that. But I'm not sure what table do I need to answer in regards to this.

BY MR. VANSLYKE:

Q. I will ask you to only try to answer the question that I am presenting.

A. Okay. Just based off looking at the information from this document?

Q. If you look at this table -- go ahead.

A. Right. So basically you want me to do -- like, I mean, I don't have anything. So I don't know if I need to verify the math. Like, I -- that's what I'm saying. I'm not trying to be funny, but I'm just trying to get at, like, am I just making the sure the math was right that they did? Like, I'm not sure what you're asking me to do with this.

Q. I'm -- I'm not asking you to verify the math. I'm only asking if you understand the logic of the calculation that she's applying?

A. I mean, it would just take --

MR. KLOTZBUCHER: Objection. Form.

THE WITNESS: Yeah, I just feel like the amount of time -- what you're asking, I would have to sit down. I'm sure I'd be able to figure it out. But when you're just scrolling and going through this, I'm just trying to put it all together in the time frame in which I have to look at these materials. So it's not like I had these materials ahead of time. So I'm just trying to put it all together. So

I'm not trying to be difficult.

I'm really trying to figure out what am I supposed to do. Should I do a separate screen and put the math -- like, I'm just trying to figure out. Am I just saying, yes, like, hey, this says Table 2, yes, this says Table 2. Like, I'm just trying to understand what do you want me to do with this information in this short period of time, and I haven't had it.

BY MR. VANSLYKE:

Q. And I'm happy to clarify my questions as needed. So I will go back to the text of the report. And this paragraph explaining the current benefit, the benefit that would be received -- or, I'm sorry, the benefit that would not be received from the Camp Lejeune related disability ratings -- I'm sorry, let me rephrase.

We looked at this paragraph earlier and you indicated that you understood what this paragraph was saying; correct?

A. Right.

Q. And it indicates that his current benefit is $1,759.19; correct?

A. Correct.

Q. And it indicates that if he did not receive the Camp Lejeune related disability ratings, he would currently be receiving $774.16; correct?

A. Correct.

Q. And it says the difference between those two numbers or the variants is $985.03; correct?

A. Right.

Q. And here where it refers to the Camp Lejeune related disability ratings, we looked at footnote 2. And it appears that footnote 2 indicates that the VBA disability ratings related to Camp Lejeune are -- I'm skipping the rest of that sentence to "are 7500 renal cell carcinoma"; correct?

MR. KLOTZBUCHER: Objection. Foundation.

THE WITNESS: Yes, that's what it says.

BY MR. VANSLYKE:

Q. So if this renal cell carcinoma is what is being identified as related to Camp Lejeune and then we look back at this second paragraph when it says "Camp Lejeune related

disability ratings," do you understand those to be referring to the same thing?

MR. KLOTZBUCHER: Objection. Foundation.

THE WITNESS: So they're saying that Camp Lejeune disability ratings is for his -- and go back down to the document. This is just trying to put it all together.

Okay. So they're saying his Camp Lejeune disability rating. And they've said -- okay. So saying that it's renal cell carcinoma. Okay. Yes, I understand that those two words mean the same thing.

BY MR. VANSLYKE:

Q. So with that understanding, if we read this sentence, "Had Mr. Downs not received Camp Lejeune disability ratings, he would be currently be receiving monthly benefits of $774.16," do you understand that to say that if he had not received disability ratings for his renal cell carcinoma, he would be receiving monthly benefits of $774.16; correct?

MR. KLOTZBUCHER: Objection. Foundation and form.

THE WITNESS: Yeah. I guess based off that not seeing the rate tables to verify, like I'm just not -- I don't have anything to bounce it off. So if we're just looking at this and I'm just going with this hypothetical with no checks and balance, yes. But I just -- it just makes sense for me to have the full picture without this document. But if we're just going with this scenario barring they don't have anything that I can't see, the answer is yes.

BY MR. VANSLYKE:

Q. Well, like you said, I don't think we have time today for me to ask you to recalculate all of this math, and I am not asking you to validate the dollar values here. I'm just confirming that that is your understanding of what's being stated in this report; correct?

MR. KLOTZBUCHER: Objection. Form and foundation. You may answer.

THE WITNESS: Yes.

BY MR. VANSLYKE:

Q. Okay. So if I scroll back down here to Table 2, this no CLJA column under the

Row 2025, do you see the $774.16?

A. Yes, I see that number.

Q. And that's the same number referenced here as what he would be receiving if he had not received the Camp Lejeune related disability ratings; correct?

MR. KLOTZBUCHER: Objection. Foundation.

THE WITNESS: That's what it appears to show.

BY MR. VANSLYKE:

Q. And if I look at this table, do you understand that what this expert is doing is taking the total benefit received, subtracting the amount that he would receive without the Camp Lejeune disability rating to identify the difference between those two numbers; correct?

MR. KLOTZBUCHER: Objection to foundation.

THE WITNESS: Okay. So they're saying the both benefits is 1,759, the offset amount and then they're just saying $985 per month is the difference, and then they multiply it by 12.

BY MR. VANSLYKE:

Q. Is that what you see here?
A. Without having a pen, paper, calculator, time to do math --
Q. Sure.
A. -- it's close, you know. Yeah.
Q. And, again, I'm not asking you to check the math. I'm only asking if that's what you understand to be represented here?
A. Yes. I'm just a person that likes to confirm things. So it's just kind of like --
Q. Sure.
A. I'm just -- just going with the flow here.
Q. So I will stop sharing this for now and I will go back to the offset -- I'm sorry, excuse me, to the CLJA language. And earlier we looked at this language and recognized that there is a distinction between disability relating to exposure to the water at Camp Lejeune and a disability that is not relating to exposure to the water at Camp Lejeune; correct?
A. Correct.
Q. In general, without validating any of the numbers themselves, do you believe that the approach taken by Ms. Yount in that report where

she identifies the total value received, the value that would be received absent the Camp Lejeune related disability and identifying the difference between those two numbers, do you agree that finding that difference is a reasonable way to identify the amount related to the disability relating to the exposure to the water at the Camp Lejeune?

MR. KLOTZBUCHER: Objection. Foundation.

THE WITNESS: I mean is -- so did -- is there a consistent way of doing this or is everyone doing it different for each claimant trying to come up with the -- are we just looking at her one interpretation or are there multiple interpretations on how to do this offset piece? Because it was just referring to one of the claimants, but what I'm saying is this is their consistent way or they -- everyone doing the same thing. So you have like different diagrams or the same diagram for each of the veterans that you have?

BY MR. VANSLYKE:

Q. So I cannot testify to the

consistency across reports. I am only providing you with one example and my question is whether you agree with the general process being applied assuming the numbers are correct or whether you would approach this a different way?

A. I'm not --

MR. KLOTZBUCHER: Objection. Form and foundation.

You may answer. Sorry to talk over you.

THE WITNESS: Yeah, I mean, I see what they're doing, but I don't feel like I'm the best person to discuss the whole offset portion without knowing, like, the criteria that's set and if it's consistent. Like, I mean, I don't even -- I'm just looking at the document. So I'm just trying to see what am I supposed to say about it.

Like -- because, I mean, I just feel like it -- whatever is decided, it should be the same for everybody, to have one consistent practice. But what I'm saying is what is needed from me to know like, okay, I know how to do math. I understand

what the person did. But are we trying to apply something just for one of the claimants or everybody, and why do I need to weigh in on this piece here. Like, what does that have to do with -- why do I need to weigh in on this.

BY MR. VANSLYKE:

Q. Give me one moment. Okay. I'm going to share Exhibit 5. So this is the disclosure that identifies you as an expert on behalf of the United States; correct?

A. Yes.

Q. And in this disclosure, I see bullet B states that disability compensation benefits are made to veterans with service-connected conditions. Service-connected conditions are those illnesses or injuries VA has determined were caused or exacerbated by active military service; correct?

A. Correct.

Q. For some conditions, VA is directed by law or regulation to presume that military service caused the conditions without the need for the veteran to prove that his or her service caused the condition; correct?

A. Right. Not to interrupt you, but my question wasn't that I'm asking what am I weighing in on. The math -- is the math done right? Like, what am I weighing on? Like, okay, are they doing this formula right? Are they applying it properly?

So it's not that I'm not able to weigh in. I'm just trying to figure out what the whole portion of this diagram, what are you trying to ask me to weigh in on? Whether or not it's consistent? I feel like if you -- if you had shown me all of the documents for all of the veterans doing the same thing, but you're asking me about one veteran, one person who did this offset math.

So I am just Jadine asking, not -- you don't have to go through that. I'm just asking what question or what are you asking for me just to get a consensus that, hey, what she did seems logically sound or is there another way to do it. Like, I guess I'm just trying to ask as it pertains to the other diagram, not this, what do you want me to weigh in on because, to me, I should be able to look at multiple documents for the same person saying the same

thing had been like, okay, I assume like this is consistent, all this something seems reasonable to apply, but you just asked me about one person with no -- in my mind. So I'm just going back -- I want to go back to the document just to see what am I weighing in on when it's not something that I can see for everybody.

So I just felt like it wasn't a consistent practice. If we're talking about something that we're looking at all claimants, I think we should have had that same diagram and went through it to discuss. So that's all I was saying. Not like, okay -- because I feel like I'm able to -- if I understand what the question is asking, I'm just trying to figure out what am I supposed to be doing with this document?

Is it just something where I'm saying, like, oh it seems like this person did math, but I put it in my head, it seems like 1,700 something dollars adds up okay. So I guess that's what I'm just trying to put in, like, what am I supposed to do with the document and is it something that I'm supposed to be weighing in on for everybody or just this one particular example.

Q. I understand. I will reiterate that I'm not asking you to validate math or particular values. I am also not asking you to validate consistency.

To help illustrate what I am asking, I will go back to Exhibit 8, the spreadsheet of VBA data. So if I look at the payment data and I see April 21st, 2025, Mr. Keller received a payment in the amount of $4,044.91; correct?

A. That's what it says.

Q. And in the award line data tab, if I look at the award authorization date of November 30, 2024, from Mr. Keller, I see an award for a monthly amount of $4,044.91; correct?

A. That's what it says.

Q. And I can scroll down to Mr. Downs, who we were looking at the report for. So I see January 22nd, 2025, he receives an award for a monthly gross amount of $1,759.19; correct?

A. That's what it says.

Q. And in the payment data, I will filter this to Mr. Downs because there's many entries. So if I look at Mr. Downs, on April 21st, 2025, there was a payment transferred in the amount of $1,759.19; correct?

A. That's what it says.

Q. Am I correct that none of these numbers distinguish between how much of those amounts are related to Camp Lejeune versus what portion of the amount is not related to Camp Lejeune; correct?

MR. KLOTZBUCHER: Objection. Form and foundation. You may answer.

THE WITNESS: Yeah. Like I don't -- I don't know the back end. I mean, I just see the amounts. I saw the document. But I'm not an administer of the program, so I don't know how it's paid. So on the spreadsheet, I just don't have an entire picture. And not saying I can't figure it out. I just feel like I don't have all the pieces in the puzzle to give you the analysis that you're asking for as it pertains to whether it's related to Camp Lejeune.

I would have to go back to the words in the law in that section that you showed me, either health care or disability, I can't remember off the top of my head. I am trying to -- in this small snapshot of

time, trying to put everything together not knowing, like, okay, I saw what they said is that his rating was 700 and something dollars. I don't know what his percentages -- like, I'm really just trying to put it all together. But I'm not fully following what am I validating or just saying yes to. Like, I see these numbers, yes, yes, yes. But I'm just trying to put it together -- like, I just feel like I'm just missing a few pieces to the puzzle, sir. As it pertains to this -- I'm just trying to make sure I'm giving you what you need.

But I just feel like I'm just blind to some things that's missing. And maybe, like I said, it's just a time frame in which we have where I'm not able to make a full assessment of everything not knowing every single document. I'm not sure if it's uncommon or common for me not to have gotten these materials in enough time to validate to assess.

I mean, I guess this may be normal, but I'm just not fully understanding if

I'm -- you're saying I'm not doing the math, I'm not doing any validation, I'm just saying this seems logical, but I don't have the full pieces to the puzzle to know if it's fully logical. So that's what -- I'm just really trying to be helpful, but I just feel like I'm missing some things.

BY MR. VANSLYKE:

Q. I understand. And I think in trying to be helpful, you are trying to answer more than I'm asking. I'm going to ask you to please focus on the questions I'm presenting you with and only answer those if you can. And if I want to know more about it, I will ask you more about it. Okay? Do you understand?

A. I understand. I hear you.

Q. So do you agree that looking at this amount shown in the table right now, it does not identify how much of that $1,759.19 was provided to Mr. Downs related to Camp Lejeune versus how much was provided on other bases; correct?

MR. KLOTZBUCHER: Objection. Foundation.

THE WITNESS: I don't see -- if I'm

just saying yes, I don't see a separate award line. So I show in the previous diagram it was broken down with the 700, the 900, the difference. But this is just a total amount with no distinction of 1 and 2.

So are you saying, like, yes, there's no distinction that there should be a separate award line or that's not for me to know. I'm just seeing what I see here which is just one total with no description of what it's for.

BY MR. VANSLYKE:

Q. I am not asking you whether you believe there should be a separate award line. But it sounds like you agree that as presented here, there is only one total without the distinction between benefits related to Camp Lejeune and benefits not related to Camp Lejeune; right?

MR. KLOTZBUCHER: Objection. Foundation. You may answer.

THE WITNESS: Yeah, what I see is just the award type, and it just shows compensation and it just has one amount.

Without seeing the document you had previous, I would have just said this veteran receives 1,759.19 per year without knowing why. I just know it's for compensation and pension and he's alive.

BY MR. VANSLYKE:

Q. Do you understand that to be per year or per month?

A. This is per month.

Q. Okay.

A. This is one month.

Q. And then on the award line data for Mr. Downs here, do you agree that you see the same thing, there is a gross amount and there is no distinction between an amount related to Camp Lejeune versus amounts not related to Camp Lejeune; correct?

MR. KLOTZBUCHER: Objection. Foundation. You may answer.

THE WITNESS: Yeah, I mean, it's just the same thing. Just the one amount with no -- it just does not give descriptions of what it's for.

BY MR. VANSLYKE:

Q. And if I go back to Exhibit 11, the

report from Ms. Yount, in this paragraph, she identifies that same amount, $1,759.19; correct?

MR. KLOTZBUCHER: Objection to foundation.

THE WITNESS: That's what this document says. I have a question separate to this. Do you know -- because, I mean, I'm not familiar with how this is paid or anything like that. But do you know when the veteran receives the information from VA, is it just the total $1,759 or is there a document that the veteran receives that tells what she had or this is why you did it because he didn't have this information?

BY MR. VANSLYKE:

Q. Are you indicating that VA correspondence would sometimes delineate --

A. No. Okay. So this -- I thought you were showing me this because when we look at the information or the data provided by VA, it did not show a distinction. So I thought the whole purpose of Exhibit 11 was to show how she broke it down for us to maybe do some type of process improvement for these veterans where they know

where they received their money from. But what I'm asking is, is there an avenue outside of VA, like, I don't even know the administration of the program. Like, that's what I'm saying, I don't -- I'm not -- I'm not knowledgeable on how this Camp Lejeune Justice Act is paid. I just read what you provided and I see the offsets.

So, me, Jadine, I'm trying to do this quick analysis. But what I'm saying is, is there a separate place where the veteran receives correspondence separate from VA that tells them where they receive this money or is it all from VA, and what you're saying is that there needs to be some form or some type of mechanism to tell the difference from the two benefits?

Q. I don't think I can offer testimony to answer your questions. But --

A. Okay.

Q. -- I will ask in this paragraph, do you agree that there is no indication that there is an external source confirming the dollar amount attributed to the Camp Lejeune related disability ratings versus the other disability ratings?

MR. KLOTZBUCHER: Objection to

foundation. You may answer.

THE WITNESS: From what I could see -- but, again, I just have the small snapshot, not the full details. So just based off this spreadsheet that I have and this document you have, that's all I can go by. And I don't have much to go by. And I don't have any answers to my questions.

So from what you said and what you show is just -- just $1,759 total for the current benefit is what it shows.

BY MR. VANSLYKE:

Q. So I'm going to hold on to this number, the current benefit of 1,759.19, and then if I come back to this language that identifies disability rating or I'm sorry -- disability relating to exposure to the water at Camp Lejeune, if I were to ask you how much of that total award that we were looking at is relating to exposure to the water at Camp Lejeune, could you answer that question?

MR. KLOTZBUCHER: Objection. Foundation. You may answer.

THE WITNESS: No. No, I don't have

all the information to answer the question.

BY MR. VANSLYKE:

Q. What information would you need to answer that question?

A. Like, I would need to see what's -- like the entire file -- like, I don't know what those numbers are, like, how it adds up or -- I just have -- what this -- these words say, I just don't have a full case to just be, like, yes. It's just, like -- it's just a few pieces missing that would help me give you what you need. But I just feel like I don't have what I need. I'm just putting small pieces of what you show me, your snapshots, and you're just want me to say yes without having a full scope of what's going on.

So I see the numbers correspond. I just don't have any descriptions and I don't have anything to bounce the descriptions off to say yes. So I -- I guess I'm just -- like you said, I don't -- I'm not -- you just want me to answer what you want me to answer. But I just feel like there's some things missing to put it all together.

Q. So I'm back on Exhibit 11 and I'm scrolling down to Table 3. Does this look like it would help you answer that question?

A. Right. It's no disabilities. It's just award lines. So this is kind of what we were talking about earlier. So this -- it just shows that he's been receiving these payments, he's at 70 percent in that there are no changes. So if there were no changes, then every year you'll get a COLA at 70 percent, but it still is not like -- it just says combined rating. So I don't know if he only has one thing he's service connected for.

Q. I can help answer that question for you. So we'll come back to this spreadsheet from the VBA. I will go to the ratings data tab and I will filter to Mr. Downs. Do you see the 7500 under diagnostic type code for renal cancer status post right kidney removal in Column H?

A. Yes.

Q. Do you see that information?

A. Yeah. So it's saying that's 60 percent and then all the rest of them combined up and he has overall of 70.

Q. And do you understand this 7500 for

renal cancer to be the same 7500 for renal cancer that was referenced in footnote 2 of the report?

MR. KLOTZBUCHER: Objection. Form and foundation.

THE WITNESS: Yeah, I would have to, you know, bounce it off again. Like I said, I don't work in the area all the time, but if I were to validate and it all lines up, I can understand what you're saying.

So now that we see that he's 60 percent for the renal kidney cancer, are you-all saying -- I guess, it's not for me to put together. I guess, that's what I'm saying, like, what am I supposed to be answering? Just saying yes, yes, I see what you're saying. But I don't need to form any conclusion. That's your job, I think, to form the conclusions based off my responses.

BY MR. VANSLYKE:

Q. Let's start there. I'll start by asking you if you agree that information is there and then I will let you know if I'm asking for your opinion. Okay?

A. Okay.

Q. Okay. So we see here the 7500 for renal cancer status post right kidney removal; correct?

A. Right. That's what it shows.

Q. Okay. And then if I go back to the report and I go back to footnote 2 that we were looking at earlier, it says, "VBA disability ratings related to Camp Lejeune are based on an expert opinion report prepared by Wang Ji, M.D., dated December 15, 2025. For Mr. Downs, those conditions are 7500 renal cell carcinoma"; correct?

A. That's what it says.

Q. And is that -- I'll rephrase.

Does that appear to be this 7500 renal cancer?

MR. KLOTZBUCHER: Object to the form and foundation. Again, this is a spreadsheet she's not familiar with, with individual specific plaintiff, and that she's not agreed to testify to. In her report, she's not familiar with as well. So my objection stands to form and foundation.

With that, Ms. Piper, you can answer.

THE WITNESS: So it appears that that's what it is talking about.

BY MR. VANSLYKE:

Q. Okay. And you recognize that this particular rating is for 60 percent; correct?

A. Yes. It shows the percentage number and this is 60 percent. It's been 60 percent since March 14th of 2017.

Q. And there's no end date; correct?

A. Right. There's no end date.

Q. And do you see that there is another rating for 20 percent?

A. Yeah. I see his total service connected disabilities.

Q. And by total service connected disabilities, you mean --

A. Yes.

Q. -- including more than just the renal cancer; correct?

A. Yeah. Uh-huh.

Q. So if, according to this report, only this individual rating is determined to be related to Camp Lejeune, then the other ratings listed on that spreadsheet would presumably be

not related to Camp Lejeune; correct?

MR. KLOTZBUCHER: Objection to foundation.

THE WITNESS: Yeah, I mean, he's -- only according to this, yes.

BY MR. VANSLYKE:

Q. And if we assume that to be true, do you understand in this paragraph that what Mrs. Yount is doing is identifying the value received if he were to not have the Camp Lejeune related rating as $774.16?

MR. KLOTZBUCHER: Objection. Foundation and form. You may answer.

THE WITNESS: But that's what it shows. And let me see -- okay. That's what it shows.

BY MR. VANSLYKE:

Q. And you agree that the next step that Ms. Yount is performing here is to identify the difference between that number and the total award that he is receiving; correct?

MR. KLOTZBUCHER: Object to the foundation and form.

You may answer.

THE WITNESS: Yeah. Based off my

math in my mind, I could see that $7,159.19 minus the 774 is that 985.03.

BY MR. VANSLYKE:

Q. And based on that calculation, Ms. Yount is indicating here that that $985.03 reflects the disability benefit received relating to Camp Lejeune; correct?

MR. KLOTZBUCHER: Objection to form and foundation.

You may answer.

THE WITNESS: Yes, that's what she said.

BY MR. VANSLYKE:

Q. Okay. Thank you. All right. Would now be a good time for a lunch break?

A. I guess. Whatever you-all want to do. I'm flexible.

THE VIDEOGRAPHER: All right. We're going to go off the record at 1:14 p.m.

(Recess taken from 1:14 p.m. until 2:00 p.m.)

THE VIDEOGRAPHER: We're back on the record at 2:00 p.m.

BY MR. VANSLYKE:

Q. All right. Ms. Piper, I would like to zoom out a little bit and see if you could

help me understand some information generally about VBA disability benefits.

I believe you have testified that you are generally familiar with the process by which veterans would file a claim to receive benefits and that claim would be evaluated; correct?

A. That's correct.

Q. And you're aware of the different variables that can change the way that those awards are provided; correct?

A. Correct.

Q. So I'm going to look back at the spreadsheet. And at this time I'm not going to look at any particular data entry so much as I'm looking at the title row at the top here. Do you see where I'm indicating?

A. Yes.

Q. Okay. So if I look at Column C, it appears to me that that's indicating latest rating date. Do you agree?

A. Yes. Yes.

Q. I will remove the filter from before. So now all plaintiffs are visible. I'll scroll back up to the top.

And plaintiffs can receive multiple

ratings over time; correct?

A. Correct.

Q. If there is a rating decision that is more recent than another rating decision on the same injury, is it safe to assume that the later one supersedes the prior one?

A. Unless it's something where -- so most of the time. But sometimes it can be a latest rating, but the condition may change. It might be like a stage rating. So sometimes you'll see something like that. But usually more times than not, the latest rating date should be what you use unless you see something that indicates otherwise.

Q. Okay. And in Column D, I understand this title to mean diagnostic type code. Is that how you interpret it?

A. Yes.

Q. And is that referring to codes identified in the VA schedule?

A. Yes.

Q. And then Column E is "percent number"; correct?

A. Correct.

Q. And I understand that to be referring

to the percentage rating awarded to the individual rating on each row; correct?

A. Correct.

Q. And Column F, I read the title as "begin date," do you agree?

A. Yes.

Q. Can you tell me what "begin date" means, if it's different than the latest reading date?

A. So, I mean, based off what I'm seeing there, there -- for, like, if we look at Scott Keller, the begin date, it shows that -- and the only thing is I feel, like, that the 8526 series, most of those are things where they can be service connected, yeah, on the right and left side. So it looks like those started or they've been service connected for the right lower extremity neuropathy, left lower, all of those -- those four conditions, 8/10/2017. And then it looks like starting August 16, 2022, it picked up with the additional disabilities with the scar, the diabetes, the diabetic neuropathy.

But then also -- it looks like it's going in order not by the begin date for some of them, but it's basically the diagnostic codes are

in the correct order. So you'll see, depending on the condition, the begin date just depends on where it is.

So, basically, if we look at 8/10/2017, the veteran with service connected for when I was talking about the right left lower extremity, the neuropathies on all quadrants of the body, and then the diabetes and the diabetic neuropathy. And then it looks like there was an increase in the diabetic neuropathy starting 8/16/2022 and then a new service connected condition of the coronary artery disease starting 8/16/2022.

Q. I think I understand what you're saying about the different injuries beginning on different dates, and I understand what you're saying about the diabetic neuropathy receiving a new rating modifying the previous rating for diabetic neuropathy; is that correct?

A. Correct. It looks like it got increased.

Q. So I'm trying to understand and if I look just as one example at the -- under the current view, it's Row 3, this is for diabetic -- I'm sorry, nephropathy --

A. Uh-huh.
Q. And I see the begin date of August 16th of 2022 --
A. Uh-huh.
Q. -- and the latest decision date is November 18th of 2022.
A. Uh-huh.
Q. Can you clarify for me why there is a difference between the date of the rating versus the begin date?
A. So --
MR. KLOTZBUCHER: Objection, form and foundation. Just to the extent that this is individual plaintiffs' specific information. And, again, the database that she hasn't prepared.
But you can answer the question generally.
THE WITNESS: Yeah. If it's -- what I show, it looks like the rating was completed on 11/18/2022, but the effective date was 8/16/2022. So basically the decision was after, but the medical evidence shows that effective 8/16/2022. I'm not sure if that's when the claim was

submitted or if that's when the medical evidence showed that there should be an increase. But that's the difference where the begin date is usually the effective date. And then the latest rating date is when the actual decision was completed by a rating specialist.

BY MR. VANSLYKE:

Q. Thank you. And if I look at Column L, I read the title as "military service period type"; is that correct?

A. Correct.

Q. And if I look at the options here, it's either blank or Gulf War, peacetime, or Vietnam era; correct?

A. Correct.

Q. Could you explain to me the difference -- I'll rephrase.

Could you explain to me the effect that it could have for a rating to be labeled as peacetime in this column as opposed to being labeled, for example, Vietnam era?

A. If they do not have war service -- so, basically, peacetime means they don't have any war service. So depending on the conditions,

sometimes even though you don't have war service, but you want to ensure if there was some type of condition where they have to have military service. I can't think right offhand. But sometimes you want to ensure that their -- that it's notated what period of service it is accurate.

So you're saying what's the impact if it's not labeled correctly, like if the person were to have Vietnam service, like, I want to make sure I'm answering the question.

Q. I think you answered it. I wasn't asking --

A. Okay.

Q. -- about it being labeled incorrectly.

A. Okay.

Q. I was only asking assuming --

A. Yeah.

Q. -- it's labeled correctly, what are the --

A. Yeah.

Q. -- results of those differences. And do you feel that you've explained that?

A. Well, I mean, I think this is the

biggest thing, like, if someone was in Vietnam and we're looking at Vietnam with Agent Orange exposure. But you just want to make sure that it's labeled correctly where we're able to show, like, hey, this person had this particular period of service during the time of war, blah, blah, blah, blah.

So it could have some implications if it's -- if it's not labeled correctly depending on what the condition it is that you're trying to service connect.

Q. Thank you. I will move to the award line data tab. Scroll back up to the top here.

So if I look at Column D, it says "award type"; correct?

A. Correct.

Q. And if I look at the filter options, it looks like the only options are blank or compensation/pension live; correct?

A. Correct.

Q. And earlier we discussed those two types, compensation versus pension being two distinct benefits; correct?

A. Correct.

Q. And if I look at Column E, award line

type, and I look at the filter options, it appears the options are blank or compensation; correct?

A. Correct.

Q. If an award were granted as a pension, is it your understanding that Column E would instead say pension instead of compensation?

A. Yes.

Q. So given that, if I apply the filter, there is no option for pension, is it fair to assume that none of the entries on this tab are indicated as award line type pension?

MR. KLOTZBUCHER: Objection to foundation.

You may answer.

THE WITNESS: Yes. Based off what I see, if there's nothing indicated that there's pension, then everyone on that list is in receipt of compensation. If they were receiving pension, the award line should show pension.

BY MR. VANSLYKE:

Q. Thank you. I see Column G, I read as "gross amount." Do you agree?

A. Yes.
Q. Column H, I read as "net amount." Do you agree?
A. Yes.
Q. Are you aware of any examples in which the net amount would be different than the gross amount for a compensation award?
A. Not right offhand without seeing. It's been a minute. I have seen, but I just can't remember why. But it should be something on the letter that indicate like why we withhold. Usually, there's some type of withholding where the gross amount and net amount may differ, but it's been a minute. But I believe it should be some type of withholding.
Q. So am I understanding correctly that you're saying there are some circumstances where there may be a withholding applied to the gross amount of a compensation award?
A. Yes.
Q. And that if that were the case, there would be some indication in the veterans file that there is a withholding and what the withholding is for; correct?
A. Yes.

Q. Okay. I read the title for Column J as "children number." Do you agree?

A. Yes.

Q. I read K as "dependent number." Do you agree?

A. Yes.

Q. Do you understand what the title for Column L is intended to represent?

A. That's a -- seems like a veteran has a helpless child dependent. That's usually a child that was assumed to be helpless before the age of 18. So they would be always on the veterans award, like, a spouse if they had that.

Q. Can you explain to me what helpless means in this context?

A. Yeah. Helpless child is a child that has the inability to care for themselves. So usually a child that may have some form of special needs. The medical evidence had to show that they were deemed helpless prior to the age of 18.

Q. And I read the title for Column L as "minor children number"?

A. Yes.

Q. Am I correct in assuming that a minor

child who is not deemed helpless does not remain a dependent beyond 18?

A. Unless they fall in that school child category.

Q. And what is that category?

A. Between, I believe, 18 to 23. It might be 26. I know there was some change. But, anyway, it's while they're in school. So they would have to submit a VA Form 674 to indicate that they're still enrolled in school.

Q. And am I understanding correctly that you're stating there has been a change at some point in the --

A. Yeah.

Q. -- age limit for --

A. Yeah, I believe so. I used to think it used to be 23 and now it should be 26 -- 18 to 26.

Q. And I read Column N, the title as "parent number." Do you agree?

A. Yes.

Q. Under what circumstances would a veteran's parent qualify as a dependent?

A. I would have to look that up, but I -- I would have to look it up. I can't

remember if it's -- yeah, I would just have to look it up. On the dependent qualifications for a parent. I'm not remembering off -- offhand.

Q. Do you remember -- apologies. Go ahead.

A. No, go ahead. Do I remember?

Q. Do you remember generally that there are some circumstances where a parent can qualify as a dependent?

A. Yes. Parents can qualify as a dependent. I just can't remember the criteria right offhand.

Q. Is it safe to assume that if the number of dependents a veteran has increases that the benefits they receive will increase?

A. Yes. They get dependent's allowance depending on the amount of dependents.

Q. And I read the title for Column P as "spouse flag"; correct?

A. Yes.

Q. Is that essentially a yes or no indication of whether they have a spouse?

A. Yes.

Q. And it's presented as a flag instead of a number like the previous columns because

presumably somebody can't have more than one spouse as a dependent?

A. I'm assuming so. But I don't know the method behind this dataset. But I would assume it's something similar, but I can't be 100 percent sure why the distinction not using number and flag.

Q. So if I am -- I'm sorry, let me rephrase.

A. I mean, I haven't seen an instance where a person was -- had more than one spouse. I know sometimes spouses pass away and then you get a new one. But I haven't seen where there's two living spouses getting a dependent at the same time. Basically --

Q. Am I correct -- go ahead.

A. Go ahead.

I mean, because we have to apply, you know, laws. So I don't -- I mean, I can't recall offhand if there's any state in the United States that would recognize a veteran being married to two people at the same time. But what I'm saying is I have not seen two veteran being paid for two spouses at the same time. Maybe two separate spouses at different forms of life, like, if

someone were to pass away, they get remarried. But I haven't seen two living -- you know, a veteran being married to two people getting a dependent -- spousal dependent pay for two people at the same time.

Q. Am I correct that in your knowledge the word "flag" does not indicate anything different in this context than just indicating that there is one spouse?

A. Yeah, without confirming, I would assume, you know, that it just means one spouse. Like, it doesn't mean anything. But I would clarify, like, if it was helpful, we have a data team, you just clarify the fields just to ensure there's nothing. But, I mean, just me looking at it, I would just say they just, for some reason, used that word "interchangeably." But I never went and asked them, like, hey, why are you using number all this time and now you use flag. But I think it would be a quick clarifying question that we could ask them.

Q. If I were to ask the data team this question and they told me that they were unsure, is there another source you would look to?

A. No. I feel like they would have to

find out. I mean, sometimes we ask them questions and they say no. But we have to get an answer. So it's their job to figure it out. So we just don't take no for an answer. But they don't know that they need to go to some other source until we get an answer.

Q. In Column S, I see award line reasons. Do you agree?

A. Yes.

Q. And do you understand that as indicating why a new award has been issued?

A. Yes. So like, for example, when we look at line 11, we show that the veteran received their original award at 90 percent and they continued on at 90 percent receiving their annual cost of living adjustment. And then on line 4, the same person received a compensation rating which went from 90 to 100. And then they can continue receiving 100 percent disability pay in their annual cost of living adjustment.

Q. Thank you. And under Column R, I see "SMC type"; correct?

A. Correct.

Q. Can you summarize generally for me what an SMC type is?

A. Yes. Special monthly compensation for additional compensation for certain things. One, online, it shows special monthly compensation K meaning this person is getting an additional benefit for loss of use of something.

Q. So if I open the filter options here, I see K, L, and S are the only rates here, not counting combinations of those three. Do you agree?

A. I agree.

Q. Do you know what SMC rate L is for?

A. Yes. SMCL, I believe, should be aid and attendance. So I would, you know, always verify. And then SMCS, I believe, is for a statutory housebound. But we have a chart with the correspondence, but I believe L should be aid and attendance with loss of use. So this person is getting L plus K meaning SMC for loss of use and SMC for aid and attendance.

And then the other person is getting statutory housebound, which usually means that they have 100 percent rate and a 60 percent rate. And then SMCK, but I can verify that quickly, but that's what -- based on my quick review, I believe that's what it is.

Q. And am I correct that SMC rates are awarded separately and in addition to the underlying disability rating?

A. Correct. It's an additional.

Q. And each SMC rate would have its own dollar value attached to the award; correct?

A. Correct.

Q. Would those values change based on dependents or only the underlying disability rate?

A. I would have to look at the rate chart. But I believe you would go to -- I wish you just had the rate chart. It would be easier to figure it out. But I believe that we would look at, like, the 100 percent, and then you should be able -- it's just easier for me to look at a rate chart. It's just been so long because I don't do any of this anymore. But in the rate chart, I believe that you should be able to go to 100 percent with the dependent amount and then look at the SMC rate with the dependent amount to get the values. But if I had a quick chart, if you have it, I can probably kind of walk you through it.

Q. I do not have a chart as an exhibit,

but I understand that you are giving me your best understanding without referencing the chart.

A. Okay.

Q. Do you know if the values attached to SMC rates are also typically adjusted on COLA, cost of living adjustment?

A. Yes.

Q. And would it be the same --

A. The only one --

Q. Go ahead.

A. The only one that does not go up is the medal of honor. That rate stays the same. But other than that, they go up -- we provide the calculation. So they are adjusted each year as well. So on the VA.gov site, you can kind of do a comparison because we kind of put the historical rate, so, like, maybe like the last three years so you can see how they go up and they include the SMC rates.

Q. Would it be the same COLA percentage that applies to the SMC rates as applies to the underlying disability rates?

A. Yes, it's the standard percentage for all rates.

Q. And when you reference the medal of

honor award, is that an SMC rate or is that something separate?

A. It's just -- yeah, it's something separate. But you'll see it on the same chart. So sometimes people ask for it. But it's not like SMC. It's just a separate rate. But that's the only one where COLA doesn't apply. So if you look -- I was referencing that because if you were ever to go to the rate chart, you'll be, like, hey, why this number never stayed the same or why this never changed.

Q. Understood. So I'll close that. I'm going to go to the last tab here, the payment data. I think the only question I have here is I see in Column C, I read that as "payee type CD." Is that what you see?

A. That's what I see.

Q. Do you know what that refers to?

A. Yes. It's a chart that I don't have, but I believe the payee codes are different. So the I think the veteran's code is 00. So all of these should be veterans. So if you go down, they all should be 00. Do you see anything other than a 00 when we go to the filter.

Q. Well, let me -- I just realized I'm

still filtered to Downs on this tab. So I will unfilter there. And I think an easier way to see that is if I look at the filter options under Column C, I see 00, 10, and 80.

A. So 10 I believe is spousal. Let's click on that person.

Q. Okay. I'm filtering to 10 in Column C.

A. Let's see what it shows. Yeah, so they're receiving looks like compensation pension death. So she got a retroactive pay. So it's a spouse code, but the 10 means spouse.

80, I believe is parent. Let's go to the 80 one that you had and let's see what it says.

Q. Before we do that, I would like to clarify this one.

A. Okay.

Q. So I -- under Column J, I see compensation listed as the program type; correct?

A. Correct.

Q. And, earlier, I think we talked about compensation benefits would not go directly to anybody other than the veteran; correct?

A. I believe, and I would have to go

back and look, but I believe DIC, they still put it as a part of disability compensation because it's service connected, but I would have to double-check the fields. But I believe that's what it is, but it's been so long. But I feel like it's just a quick clarification but it may be because it's dependency, indemnity, death compensation. So I think it still falls under that program type, even though they're administered by our pension and fiduciary. But I think overall is still compensation, but we just have to quickly clarify because it's been a minute.

Q. So if I look at Column L, I see retroactive C and P?

A. Uh-huh.

Q. Does that mean retroactive compensation and pension?

A. Yes. I believe it's a retroactive compensation and pension payment. I would have to look at it, but I'm not not -- the number is high. I'm not sure if the veteran passed away during a certain time frame. But I would have to look and see why that rate is $4,837. But it is some form of retroactive payment.

Q. In general, do you know if there is any process available to the surviving spouse to submit medical documentation attempting to obtain a retroactive adjustment for their spouse, the veteran who passed away?

A. They do -- they can receive -- I'm not sure if this is a one-time payment. Like I don't know if the veteran passed away, we'd have to look at that. But, usually, when the veteran pass away, the spouse can apply for what's called the month of death check. So, usually, if the veteran, say, passes away February 27th, that payment usually is already going out for March 1st. But because the veteran passed away, they could have tooken -- taken that payment out of the veteran's account. And what happens if there's a spouse that's still living, they can submit a request for the month of death check. So that could be why that's only, like, one month long and just one line. But I'm not sure without looking at the full scope. But it could have been something like that where they requested that month of death check.

Q. Understood.

A. It's usually a one-time payment.

Q. Okay. So I will change the filter on Column C from 10 to 80. I see this is --

A. Burial. Okay. Is this the same person?

Q. Yes.

A. Okay.

Q. I have added 10 back to the filter in Column C. So it now shows both 80 and 10.

A. Okay. So they seem to maybe pass away between 2023 -- yeah, 2023, and then they seemed to file like a claim for burial benefits.

Q. Understood. Thank you very much. I will stop sharing that exhibit.

Do you recall earlier we talked about the distinction I was drawing between documents uploaded to VBMS versus data held directly within VBMS?

A. Yes. I remember you trying to make the distinction.

Q. Do you understand the distinction I'm drawing?

A. I believe I do. I believe that you're saying that the document is -- like, if someone were to upload documents into VBMS, I'm not sure if you're talking about, like, sometimes

our system, if we were to make a decision, we put those same documents in the system, so sometimes it can be manually uploaded or they can also be, like, generated by the system. But I believe you're talking about, like, in the document field. And then I -- I could spend a few hours. I can't remember what you said about the embedded data.

But I think we talked about something like what the rating percentage was, like, we went through and it showed -- like -- I don't think we showed it, but I remember -- or I could visualize what you were saying, where you were talking about, like, the different -- like, the veteran is rated for this and their combined evaluation, that's like the data that's in the system versus the actual document. So I think that's the distinction you were trying to make.

Q. If a veteran has two ratings at the same time, each one for 50 percent, is it correct to assume that their combined rating is 100 percent?

A. No.

Q. Can you give me an overview of how you would calculate the combined rating?

A. It's been a minute. But if there are just two people with 50 -- oh, God -- we have like a combinator, but I have done what we call VA map in a long time. So it would have probably took me 2 minutes to -- but, basically, we take a percentage of the person.

So they start off 50 -- likely at 100 percent. So they are first 50 percent, now makes them now 50 percent of the veteran left. However, we're not going to subtract another 50 percent, it's going to be a percentage, and I cannot remember -- I can't remember -- remember it fully. But it's not going to give a full 50 percent. I'm trying to think in my mind how much it would give. 50 -- yeah, it's not going to -- you can't do 50 plus 50. It's called VA math. I'm sorry, I didn't prepare for that, but it's not going to give you a total 50. We also have like a VA combinator that's embedded in our systems where we would normally put that in there. But it wouldn't come up to 50 plus 50 equals 100.

Q. Can you describe the combinator for me?

A. Yeah. It's just like a VA calculator

in a sense where you put in the veteran's service connected disabilities in the system, and then it gives out what the veterans current combined evaluation should be.

Q. So when you just described inputting the individual ratings or the combinator to use to calculate the combined rating, can you describe for me how someone would input the data relevant to the individual rating?

A. Yes. Not knowing if it has changed; right, but if I can remember or recall correctly, we would have to put the veterans percentages in order of what's the highest. So if the person is 60, you put in the 60 first. If the person is 40 or have a 40 percent rating, now you put in the 40. If they are 20 percent, say it's left and right, they have something called a bilateral factor you have to apply. I can't remember the full term. But there are different things that we have to check off in the list. It's a little complicated, not too much, but I'm not prepared to do a full long tutorial today.

Q. So the data that you just described needing to input --

A. Right, it would be on the

veteran's --

Q. Am I --

A. -- code sheet. So are you familiar with the rating code sheet?

Q. No. Can you describe it?

A. So if you ever had a veteran's rating decision, I'm not sure the veterans you have in question. If you ever looked at their VA rating decision, accompanying the rating decision on the back of the rating decision will be the code sheet. The code is basically everything the veteran has ever been service connected for, anything they've been denied for and has the date and how long the effective date. So it's basically a sheet that goes with the veteran. And we keep adding to it depending on how many claims they had. But it's called a rating code sheet. And it's just an outline of the veteran's disability percentages, if there are any future exams. So it's just basically like the veterans historical rating data.

Q. So to input the individual rating data or -- would you be manually entering that data or would you upload a document and the system reads it from the document and inputs it

automatically?

A. The last time I've done it is 2018. So if there have been developments, I don't know. So back in 2018, there was a manual process. If that process has changed, I have not heard of it, but it is possible as VA has been making strides towards automation, so there's a chance that now this process is automated, but I am not familiar if it is automated. So the last time I've heard, it was manual.

Q. Okay. So I would like to use this example to clarify my distinction between data entered into the system versus documents uploaded to the system. You told me that uploading the document did not lead to that information being entered into the system automatically when you last did it; correct?

A. We're talking about, I think, two separate processes. So when we put information into VBMSR, say, I was making a decision for the rating purposes, that information is -- once it's in VBMS, it puts it into the system. So I don't have to upload it because that's part of the process.

What I was talking about is, say, the

veteran called or I am explaining your combined evaluation because we were talking about the overall percentages and VA math. What I'm saying to help verify that information, that was a manual process. So these are two different -- I think we were talking about two different things.

Since, I want to say, 2013, the process for rating decisions, that information was automatically put in the system in our veterans benefits management system, so that data was automatically in there and you have to upload it. Once you finalize the draft rating decision, that's automatically in there and then any accompany information is automatically inputted in the system.

What I was talking about a manual process was just trying to for illustrative purposes, say someone we get -- because that's one of the most -- I wouldn't say controversial things, but it's the confusing thing of why isn't 50 plus 50 a hundred. So to verify that information for someone outside of the VA, for me, like, if I were teaching a VSO. So during that time we had, like, strong building relationships with the veteran service

organization for people that would be in the office.

So say they had a question or they wanted you to verify, like, hey, are you sure this is correct, that would be a manual process where I am just assisting you with ensuring the information in the computer, what the computer showed as the combined evaluation is the same. So it was just more of an illustrative thing. And the only way to help us teach people was to do it manually. So what I'm saying is that I am unsure if the process to teach VA math is still manual or if it's not automated.

Q. Would you agree that at some point in the process, it will be necessary for somebody to input the individual rating amounts?

MR. KLOTZBUCHER: Objection. Foundation.

You may answer.

THE WITNESS: Yeah, I mean, that's what's already happening now. Like, when we input, as a rating specialist, that's one of the things that we're doing when a veteran files a claim, what we talked about earlier, when you went through my CV

or my resume to go through the different things, one of the things you asked is, like, hey, tell me the difference about the development.

When I was saying with the -- we get a claim on the VA Form 526, that starts the data portion that veteran service representative is inputting that information. Those same issues, once is ready for decision for the rating, that same information is now pulled into the system to make a rating. So the entire time that data is going from the veteran service representative is being verified again from the rating specialist. So it's always in the system. So we're taking the information that came in the system.

So I guess I'm just trying to clarify that -- that I wasn't saying like that process was totally manual. I guess I'm just trying to find the best way to give that distinction of what you -- what you're saying.

BY MR. VANSLYKE:

Q. Do I understand correctly that when

the VSO processes the claim, they have to insert the rating percentage for each individual rating?

A. When I was -- now the process could have changed. Maybe you would want to verify with someone who's currently rating, like I said, they've been making strides. So what I'm saying -- I'm telling you something from 2018. You may want to verify someone who does it in 20 -- 2016.

But what I'm saying is the -- I'm just explaining the process based off how I know. But there's a chance that it could change. So I feel like you may want to verify what the VA rating specialist on how is information or data inputted in the system to date. Because I'm not -- that's not my area of expertise anymore.

Q. Would you agree that it is not the case that any individual rating percentage populates randomly?

A. Yeah. Like the issue is, like, while I'm rating, so it's not randomly. It's usually I'm making a decision on that issue when I assign the evaluation that travels with the veteran. And from there, when I was talking about the code sheet, you'll see when I did it. So the day that

I input the rating, you should be able to see all that information on that veteran's code sheet anytime it changes, anytime it's denied. But it was manually during that time inputted by me, but it was in the system, but I did it because I have to verify that it was correct. So it was not just arbitrarily assigned, it was assigned by me if I was making a decision on a particular claim.

Q. Understood. Thank you.

So when an individual makes that decision and assigns the relevant rating percentage, then that piece of information exists within the system and can be carried forward and used in things like the combinator; correct?

A. Correct.

Q. Okay. So the combinator is applying the VA math formula essentially to the rating percentages that have been decided at some point earlier?

A. So it's already in the system, but we had access -- so say -- so these are two different things. But the reason why I brought it up is because sometimes we get inquiries to verify a rating before it even exists. So the combinator is not required, but it's helpful for

someone like you so I don't have to spend time inputting fictitious information in the system. So these are two separate things.

But when I assign a rating, that combinator is already embedded in our veterans benefits management system. The reason why we would have a separate -- or access to a combinator where we can do things on our own is for us to know, like, hey, if I do this -- do this, this is what I'm going to get.

So it was like us -- like sometimes we have to train people. So you don't want to put that information in the system because you can mess up or skew data. So this was our own separate way to provide tutorials for inquiries for people who are just asking for information.

So this is the veterans benefits management system can calculate that stuff. So the combinator during that time was not required. This was a separate tool that we had access to where we can know VA disability percentages without putting it in the veterans benefits management system, or we had something called our VA 2000. But, basically, we did not have to utilize our VA system to get that same

information.

Does that make sense?

Q. Yes. So if I understand correctly, the VBMS system has an embedded feature --

A. Right.

Q. -- to apply the VA math formula --

A. Uh-huh.

Q. -- to identify the combined rating percentage; correct?

A. Right. Uh-huh. But during that time frame, we just had access to our own combinator where we could just do things for tutorial purposes. A lot of us, like I said, when we talk about second signature reviews, we were checking other people's work. So instead of going in the system, you can just do something quick just to see if it was right.

Q. Does the system -- go ahead.

A. So I would call it something -- when you say for illustrative purposes only, that's where we would use that for.

Q. Does the system also have an embedded formula to identify the award value based on the combined percentage?

A. If I understand correctly, basically,

like, if the veteran is 100 percent, you're saying that it should automatically be in the system. So it should be programmed from what I understand, like I said, it's been a minute. But I should be able to look on the VA rate table to see that same information immediately. I think that's what you're saying. Like, I don't have to manually now go and input whatever that award information is. So if I say this veteran is 100 percent from 2013, the system is automatically able to populate that 100 percent rate with dependents automatically from 2013 to present.

Q. And you're saying that is the case, to your understanding?

A. Yes. Yes. Since -- at least since 2018. I feel like it would be -- it would be even better. I don't think it would go backwards. So, yes, since 2018, it was -- anything else, I think it would just enhance. It should have been more of an enhanced process.

Q. So the embedded features identify, not just the base value of the rating -- the combined rating percentage, but also other variables like dependence and how that might

affect the value; correct?

A. I think we're saying the same thing. But VBMS has separate systems. So I think we were kind of talking about earlier, like the distinctions, like with VBMSR, those for people who input the rating. Once the rating is done, someone would have access to what's called VBMSA, which is VBMS awards, and that is pulling the information from the rating, which would be those -- that veteran's percentage, and then that system is what feeds into how much money the veteran receives, if that makes sense.

Because it's all VBMS, but it's designed for certain features. So like me as a rating specialist, I wouldn't have access to the awards. But the person who was processing awards has access to the data that I input it to process the award.

Q. I think we're saying the same thing as well.

A. Yeah, I think so.

Q. So I appreciate the distinction you're drawing about different levels of visibility. But just to confirm I'm understanding correctly, you're saying that the

embedded features of the system do calculate how variables like dependents would alter the value based on the tables that we've discussed; correct?

A. Right.

Q. Would the same be true for the value of SMC rates?

A. Right. Like the SMC, it's done by the rater. So once the rater codes certain SMCs, that information automatically populates to VBMSA when they process those awards. One of the things that the veteran service representative would have to do is ensure on that rating code sheet it's not populating something weird. But that's why you have that rating code sheet because that's the snapshot for everything you need to know. So that was one of the ways or that is a way how we were able to check to ensure the awards was processing correctly if the code sheet didn't match up. That's why sometimes we would have to return things back to the rating specialist to ensure that they line up.

Q. So it sounds to me like both things are true that the embedded features automatically calculate the total award amount based on all of

the variables. And, also, it's possible to check the accuracy of each individual variable and the corresponding amount; is that correct?

A. Yes.

Q. Okay. And just to confirm one detail on the spreadsheet, and back on Exhibit 8, so Column R here for SMC type, many of them are blank; correct?

A. Correct.

Q. And then, for example, there is a cluster here that are marked with K; correct?

A. Correct.

Q. And that application of SMC type K would have an effect to change the total award value; correct?

A. Correct.

Q. But the dollar amount of that change as a result of SMC type K would be reflected in the tables that you've referenced; correct?

A. Correct.

Q. And that value is not reflected here; correct? I can scroll if you would like to look at other parts of the spreadsheet.

MR. KLOTZBUCHER: Objection. Foundation.

THE WITNESS: I mean, I would have to just bounce it off a rate table. So if you scroll over, it should already be added in that award value number. So I think the best way you can know if it's correct, if you see a veteran who has the same percentage. So I think that person had 20 in the K, you would want to find somebody who had 20 without, and then you should be able to tell their rate shouldn't be the same. I think that's the best way to look at it with just a spreadsheet.

To look at two veterans that have the same disability percentage who has a K and who doesn't, the person who has a K should have the higher amount. So if we're just using the spreadsheet, that's the best way for me to know if it's valid.

BY MR. VANSLYKE:

Q. And I assume those would have to be compared within the same year; correct?

A. Right.

Q. And if one of them had a dependent that year and the other did not, that would be

another way that those would be different; correct?

A. Right.

Q. Are you familiar with the appeals process for VBA disability ratings?

A. No more so. VA appeal process totally changed. So I used to be familiar. With the new process, I am not familiar. So VA changed their appeal process, so it's totally different from when I learned the appeal process. I may be able to assist you with some general questions. But the specific nuances, I'm sure I'm not the best person for that anymore.

Q. Is it fair to say that you may not be knowledgeable about specific procedures for the appeal process, but you are generally familiar with the veteran's right to appeal their claims?

A. Correct.

Q. What would be the purpose of appealing a claim?

A. If a veteran disagrees with the decision. So that's why we tell the veteran, like, it's under the header, like, if you disagree. So basically if the veteran disagrees with the decision, they can file an appeal. So

they can disagree with the effective date. They can disagree with the percentage. They can disagree with the evidence so we don't limit to what they disagree with. We allow the veteran to determine what they disagree with.

Q. Fair to say there's a wide range of issues that could be appealed?

A. It would have to be on the decision that's in play.

Q. And if a veteran is successful in an appeal, that could change their ratings; correct?

A. Yes. It could potentially change their ratings.

Q. It could also change the effective date you said; correct?

A. Yes.

Q. Are you aware of whether the VBA tracks pending appeals?

A. Yes.

Q. If an appeal is successful, could that lead to a retroactive award?

A. Yes, potentially.

Q. Are there other ways that a veteran could receive a retroactive award?

A. I mean, not just claims. So are you

saying, like, if they're -- if it's -- the retroactive is not just for an appeal, sometimes they didn't have their dependents on the original claim and they filed a claim for dependency. Then that can lead to a retroactive award.

But, basically, the retroactive award comes from some form of claim or appeal. So, yeah, I guess that's the best way to answer what you're saying. So it doesn't just have to -- like, they don't have to just receive a retroactive award because it was an appeal. Some claims constitute a retroactive award.

Q. So if, for an example, a veteran files their initial claim and documents that they have suffered from the injury for the previous ten years, it's possible that they could receive a retroactive award covering that time period?

A. I mean, if there's some date limitations. So there's -- so you're saying, like, today, like, hey, I had this condition for ten years, are you going to go back for ten years. There are limitations. So I'm trying to see when -- it's been a minute, but it's rare. Even though they had that -- unless there was, like, an error on VA part for us to go back those

ten years, it usually would be from the date of claim even if they filed it. But I would have to look at it. But, usually, this day and time, just on a normal case basis, like, today I filed this claim, February 26th of 2026. I've been suffering from this condition for the past ten years. It's rare that we're going to go back those ten years unless there's a reason why, like, maybe there was some kind of evidence that showed that this person really did file a claim and we never adjudicated. Like, those are rare instances.

Usually, but not saying that all the time, but usually we would go back from the date of the claim unless there's a reason to constitute that we were able to go back. If I just got out of the service, so I'm a veteran that just got out of the military, I have a year. So say I got out February 26th of 2025 and I just hit my year mark, then there's a potential I can go back that year because you can't go back to the day after discharged from the service.

But I'm just trying to think of -- from what I can think about it is some form of administrative error or something, reason why the

claim was not processed those ten years ago. But just under normal circumstances, it would go by the date of claim unless there's some type of thing that we can apply, usually some kind of law or something that may give us some -- some reason to go that far back.

But I would say under normal circumstances, it would just be the date of claim or if the veteran was on active duty. But if there's some reason for them to go back those ten years, it has to be some kind of triggering reason why we would just take a person who's never filed a claim and they said I had this for ten years. Because they should have filed that claim when they were experiencing those conditions, unless there's some reason where they filed a claim and we never adjudicated it for reasons that I don't know.

Q. Earlier, I believe you referenced scenarios where a veteran may have to choose between the disability compensation and the pension; correct?

A. Correct.

Q. When you're referring to pension, I understand that you are referring to the

income-based pension provided through the VA; correct?

A. Correct.

Q. Is there any conflict between VA disability compensation and a military retiree's pension?

A. Is it a conflict? I wouldn't say a conflict. And I'm not sure if it's changed. But I would say depending on the veteran's disability percentage, their retirement pay -- I'm going to say retirement pay, not pension, I know people outside of VA use the word "pension," but we just use "military retirement pay."

Usually, depending on the veteran's percentage, it may or may not be offsetted by their VA disability benefits. So there are times where we have to offset their VA disability benefits or their retirement pay. DFAS would notify them that it has to be offset due to them receiving VA disability. I haven't processed that in a while. But it usually was for veterans who were not 100 percent. But if that's changed, it's been a minute. But once they received 100 percent during that time frame, they were entitled to -- they were entitled to receive both

benefits with no offset.

Q. When you say offset in that context, what do you mean?

A. That means it would reduce. So at some -- at one time if the veteran was not 100 percent, there was a chance that their military retirement paid, depending on how much they received, could have been offset by their VA disability if they were not 100 percent.

Q. Do you know what concurrent retirement and disability pay means?

A. I know of it, but I'm not familiar with the program anymore. But that's kind of what I was talking about where veterans who were 100 percent, they were able to receive both benefits. And anyone who was under that amount, their benefit was reduced by their VA benefits or had to depend on their -- how much they received from the military retirement. But it's been so long, so I'm probably not the best person to go into the nuances of that.

Q. Again, I understand you're doing the best you can based on your recollection. I'm going to look back at Exhibit 8 for just a moment. I'm on the award line tab. I'm looking

at Column S under award line reasons.

A. Uh-huh.

Q. And I see concurrent retired and disability pay, two lines here; right?

A. Uh-huh.

Q. So I'm going to unfilter and just look at those two. Okay. So it looks like the ones that have a second entry, it's just the cost of living adjustment; correct?

A. Correct. Can you scroll -- are they all the same person?

Q. No.

A. Okay.

Q. So do you agree that this entry under Column S reflects the scenario that we were just talking about?

A. Yeah. I mean they -- it shows that they received -- that's their current retired and disability pay amount.

Q. Okay. I will unselect those. Do you see these boxes that say "COMV retire pay (SPEC law 06)" continues beyond that?

A. Yeah. Is it an old award? Like, does convert usually -- used to be people who may have been on the old system and we try to convert

it. Are they recent?

Q. I can open them up and we'll see. So if I scroll over, it does look like they are all from before 2010, would you agree?

A. Yeah.

Q. So I understand that's how you interpret the CONV as converted?

A. Like they were converted. Uh-huh.

Q. Do you understand what retired pay (SPEC law 06) on AWD line, do you know what that means?

A. No. It's saying some kind of special law 06 or something. I would have to look at it. It's probably something in the system. But I don't -- I can't remember anymore. But it's probably something that we -- yeah. No, I'm not -- I can't recall at this time.

Q. So sitting here today, you cannot tell me how this might have affected their award amount and you would have to look in the system to figure that out; correct?

A. Right.

MR. KLOTZBUCHER: Object to foundation.

THE WITNESS: Yeah. Because we would

have to do a lot of research, especially because they're like old awards like 2004, so I'm definitely --

BY MR. VANSLYKE:

Q. I'm going to look at one more. This one says "retired pay adjustment." Do you understand what that would refer to?

A. Well, I mean, just -- it just says that they adjusted the award due to retirement pay.

Q. So is that essentially the opposite of the scenario you described before where they have 100 percent rating and --

A. That's what I'm saying, the law changed. So without looking at it, so concurrent retirement, CRDP is what it's called, it wasn't there are all the time. So that's what I'm saying, if you even look at the dates of the awards to get a full assessment, you're going to have to look because depending on when they received this benefit, there were certain laws that were in the place. So I -- I can't tell you fully, but this is a newer award versus the other ones you had.

So to get a full assessment, you just

have to see what law was in play during that time frame in which they received that benefit. So I can't 100 percent say because all retirement pay laws was not the same. It changed.

Q. Okay. Do you have any recollection of when that changed?

A. I feel like around 20 -- you want to look it up, but when I was on the phone -- it had to have been around 2010. I don't -- but it had to have been around that time frame. I had just kind of started. So if you want to start, I would start around 2010.

Q. Do you know generally whether it is common practice for the VBA to revisit prior ratings to investigate whether the plaintiff is still similarly -- I apologize, the veteran is still similarly disabled?

A. No, I'm not familiar with us just reviewing ratings just -- just because. Like, what would be a reason?

Q. I think that's what I'm asking --

A. Asking me?

Q. -- you is if there's a reason why the VA would revisit the medical exam, for example?

A. The medical exam or the disability?

Like, for us to revisit a medical exam means something might have been wrong with the exam, because usually if the exam was less than a year old, there's no need to reexamine unless there's something wrong with the exam, we deem it to be insufficient.

So I want to ensure I'm answering. But if you're saying why we would just do another exam, usually that means something was wrong with the first exam. That's usually the only reason why we would just do another exam in less than a year. Usually the exam is good for a year.

Q. So after a year?

A. Right, because it's considered outdated. So, usually, if you have medical evidence that's sufficient to make a decision on or if you have an exam or it was called a disability benefits questionnaire, if it's within a year and we determine that it's sufficient, then we would take that. But if it's the medical evidence is older than a year, then we would schedule a new exam to get the most current evaluation.

Q. So just to confirm I'm being clear, I am not trying to frame a question around the

medical exam being faulty or inadequate in any way.

A. No. But your question was about medical examinations. Like, is there a reason why VA would just basically do a new exam. You used the term "exam." But, no, it's not that you were saying that it's being faulty, but that -- that's a reason why we would -- if this -- why we wouldn't take it for face value is what I'm saying.

What I'm saying is the reason why if it's been a year, so say you submit something six months ago, the only reason why we would schedule it again is because we felt like something was wrong with that exam or the evidence indicated that this person should be better by this time frame. So what I'm saying is we would not just go around scheduling exams just because, because you try to be good fiscal stewards. But if the exam is determined to be insufficient, like, say, I'm trying to make a decision on it, but the information that came from the exam that you provided six months ago didn't obtain everything for me to make the most accurate assessment, I have to then schedule a

new exam. So that would be a reason why.

Q. I believe you mentioned in there the possibility that the plaintiff was expected to improve on a certain time frame; correct?

A. Right. And it's usually indicated by the examiner.

Q. If the examiner in the initial rating indicates that the condition should improve within a certain period of time, after that period of time has elapsed, would the VA revisit to investigate whether the condition has improved?

A. Yeah. We would schedule what's called a routine future exam. But you would know when we give you that rating decision, we would indicate, like, you're going to be scheduled for a routine future exam to look up the likelihood for improvement.

Q. So if that is not indicated, would you assume that all ratings are indefinite?

A. Wouldn't say indefinite, but it's likely that it will stay the same unless the veteran or someone comes in for another exam. Because sometimes we could make a decision on the exam -- I mean, on a condition and we don't want

to look at it. However, the veteran may feel like, hey, I want to file a claim. We're looking at it, but we're looking at it because it's properly triggered by the veteran requesting for us to do so.

Q. If the veteran filed a claim for a new condition, might that trigger recognizing that the previous condition has improved?

A. So the veteran filed a claim for a new condition, but it's separate from the old condition?

Q. Correct.

A. So we're not looking at the old condition because they didn't request for us to. So the new condition, depending on what it is, we may possibly, once we service connected, look at it, but it's only if the evidence is showing that we need to look at it again. Or if it's something deemed temporary in nature, you know, sometimes we may service the service connected veteran for a knee condition, the veteran might have just had knee surgery maybe six months ago. So we know that when you have surgery, sometimes things get better. So it just really just depends on the condition. But, again, the

veteran will know once we make a decision on whether or not we're going to look at it again.

Q. Is there ever a point at which a veteran is no longer able to file a claim for a new disability rating?

A. We don't limit the veteran, the amount of times that they can file a claim. So if the veteran wants to keep filing a claim, we can't tell them to stop.

MR. VANSLYKE: Okay. Could we go off the record for a moment.

THE VIDEOGRAPHER: We're going to go off the record. The time is 3:20 p.m.

(Recess taken from 3:20 p.m. until 3:28 p.m.)

THE VIDEOGRAPHER: Back on the record at 3:28 p.m.

BY MR. VANSLYKE:

Q. Okay. Ms. Piper, I'm going to share my screen for just a moment. I'm looking back at -- I believe this is Exhibit 9, which is 38 USC Section 1155. And I believe you testified that you understood this section to relate to the rating schedule that we looked at from the VA; correct?

A. Correct.

Q. Just to confirm, you are familiar with that rating schedule, but did you have any role in identifying the award amounts that should accompany each percentage?

A. Do I have -- like, do I know where to find it or like --

Q. I'm not asking if you know where to find it. I'm asking if you had a role in setting that value?

A. No.

Q. So when a veteran receives a combined rating and that rating yields a certain award amount, you do not have a role in determining how much of that amount should accompany each percentage level; correct?

A. I mean, it's a set rate, so it's not like -- I guess I'm trying to make sure you're not saying that I'm setting the rate. Like, do I know how to find it?

Like, I guess I'm just trying to find the best way to apply what you're saying. So, basically, if a veteran is 10 percent, they receive whatever amount that the rate table says, I mean, I guess I'm just trying to find the next step. Like, I guess I'm just trying to

understand what you're asking.

Q. Correct. You do not determine the amount that goes into the rate table; correct?

A. Correct.

Q. Have you at any point played a role in that?

A. Like the staff, but it's just like calculating the COLA. So I guess, like, the origin, I feel, like, what you're asking is set prior to what we do, which is just apply the year -- the yearly increase. So I feel like the answer is no because that has been set before I even started working at the VA. So I would say no.

The only thing we're responsible for is not the actual percentages, just applying that small COLA increase each year, but not the actual foundational rate, if that makes sense. Because I feel like that has been set how -- each rate, like you get 10 percent for such and such. There was a foundation that was established to determine those intervals. And I don't have any involvement in that.

Q. Is it -- I'll go ahead and stop sharing. Is it correct that a veteran can

receive VBA disability payments while also earning income?

A. Yes.

Q. Is it correct that earned income is not a factor in determining their VBA rating?

A. I'm not familiar with the earned income piece with VA rating.

Q. So to the best of your knowledge, that does not play a role in determining their rating; correct?

A. Yes, to the best of my knowledge.

Q. I understand that certain SMC rates can be related to aid and attendance; correct?

A. Yes.

Q. And is that intended for certain extra degrees of care required by those veterans?

A. Yes. Basically, the veteran requires assistance with their daily living activities. So VA, based on the criteria, we'll pay the veteran a benefit amount that's determined by that rate to -- just because a veteran is unable to do their activities of daily living, we will provide that benefit amount.

Q. So do I understand correctly that that's intended for daily living care or

assistance, not medical care or assistance?

A. Well, we just give the rate amount. So that's the criteria. But we don't oversee, like, hey, can you tell me did you spend this money on X, Y, Z. So it's basically like, hey, the veteran meets the certain criterion, we pay the money, but then there's no oversight of how they actually apply that. Like, did they actually get that. Like, we don't get that far into that.

Q. When there is a medical exam conducted, is that medical exam provided by VBA or VHA?

A. So it depends on the exam. It depends on where it is. So VHA can do some of the exams, but we don't know. It just depends on the address. VBA has contract exams. So you don't know depending on the exam, but our exam management center, again, that's now offered by a medical disability exam office, they control whether or not the exams will occur at VHA, VBA. Back in 2018, not sure if the same thing, VHA exams received priority. And then if VHA could not -- or did not have the capacity to complete an exam, then those exams were split among our

contract vendors. Whether or not that's still the same, I'm not sure.

But that's how it used to go where they would be split, but it would be based off VA -- VHA's capacity to handle exams. And if VHA didn't have the capacity depending on the veteran zip code, where they are, then those VA contract examiners will handle those exams. But whether or not that's still the case, I'm unsure.

Q. So other than potentially those medical exams that are part of the benefit rating process, does the VBA provide any medical care to veterans?

A. VBA is not responsible for medical care. The only thing we do is provide exams. And those are completed by either contract vendors or VHA, the exam piece. So, basically, the VHA or our contract vendors provide that medical evidence to VBA. But we don't do any kind of medical care. So it's no one in the Veterans Benefits Administration who completes the examination, but we oversee. So VBA does have a piece of the medical exam part. It's called our medical disability examination office and they work with our contract vendors. But

it's not anyone in VBA doing the exam. It's by vendors like QTC, VHA -- I mean VH -- VES, LHI. So those are the contract vendors who are providing those medical examinations for VBA to make rating decisions.

Q. So am I correct that you are not offering any opinion on past or future medical care that would be appropriate for any plaintiff?

A. Yeah. VBA is not responsible for medical care.

Q. And you are also not providing an opinion on any past or future medical care that would be made available to any plaintiff?

A. That I'm aware of, VBA is not offering medical care in the past or the future, you know. But as far as I'm concerned -- I mean, as far as I know, VBA is not responsible for medical care for veterans.

Q. And is it also correct that you are not offering any opinion on the value of any medical care that may be offered to veterans?

A. Can you repeat the question? Not just Jadine, you're just saying, like, VBA in general?

Q. Correct.

A. Okay. Repeat it. I'm sorry.
Q. Am I correct that you are not offering an opinion on the value of any medical services that may be provided to any plaintiff?
A. Yes, not that I'm aware of.
Q. So I want to go back to our earlier discussion about the embedded features of the VBMS system that automatically apply the VA math; correct?
A. Correct.
Q. Are you aware of any instances where those embedded calculations were incorrect?
A. Not that I'm aware of.
Q. I'm introducing one more file in chat. I will mark this as Exhibit 12. And I'll go ahead and share my screen.
(Exhibit 12 marked for identification.)
BY MR. VANSLYKE:
Q. Can you see the document that I'm sharing?
A. Yes, it's coming up.
Q. And at the top it says "U.S. Department of Veterans Affairs Office of Inspector General"; correct?

A. Correct.

Q. And the title says "VBA's special monthly compensation calculator in the veterans benefits management system for rating did not always produce accurate results"; correct?

A. That's what it says.

Q. Are you aware of this report prior to today?

A. No, sir, I'm unaware.

Q. Were you aware of any of these issues prior to today?

A. Not this issue, sir.

Q. Are there other issues with the calculations in the veterans benefit management system that you are aware of?

A. No, sir. Not that I am aware of. We have a system support staff, so I'm not on that staff, so I'm not knowledgeable of what's going on with that.

Q. Understood. I will stop sharing. And I thank you for your time and I will pass the witness.

EXAMINATION

BY MR. KLOTZBUCHER:

Q. Thank you, Ben. How are you doing,

Ms. Piper?

A. I'm doing good.

Q. Good. I have a few short questions for you. But, first, I want to thank you on the record, I know you testified to working in an acting capacity as well as having responsibilities of your previous position. That sounds like at least one and a half to two jobs to me. And, yet, you found time to sit for this deposition. I truly do appreciate your time.

A. You're welcome.

Q. I just have about a handful of short questions to ask you. You said earlier, am I correct, that you have some experience with VA disability rating assessments?

A. Yes.

Q. And so it's safe to say you're familiar with how those determinations get made?

A. Yes.

Q. In your past experience, have you made disability rating determinations?

A. Yes.

Q. In your prior experience, how common was it for a veterans disability rating to change going into the future? Would you say it's common

or uncommon?

A. I would say it's uncommon.

Q. You did testify before that they can change; is that correct?

A. Yes, they can change.

Q. Okay. But that it is uncommon for it to change?

A. Yes.

Q. You were asked previously about costs of living adjustments or COLAs?

A. Yes.

Q. In your prior experiences, were COLAs more likely or less likely to be applied annually?

A. More likely to be applied annually.

Q. And so given your previous experience and your current knowledge, is it reasonable to assume that it's more likely than not to be continually applied annually?

A. Yes. I would say yes.

Q. You discussed earlier about the VA reevaluations of disability benefits. Are there situations where the VA would not look to reevaluate their disability ratings?

A. Yes. If a veteran is, for instance,

55 or older, unless they have a condition in which the medical evidence shows that it's temporary in nature, we would not request a routine future examination to look at the current state given the veteran's age.

Q. So you're saying if there was a veteran over the age of 55 and there was nothing in their ratings decision regarding needing a future evaluation, would you anticipate that the ratings of that veteran would change?

A. It could change, but it's highly unlikely that it would change.

Q. How would you know if a veteran is required to be reevaluated?

A. It just depends on the disability. Just looking at the medical evidence. Usually that's found on the medical disability benefits questionnaire. For instance, if the veteran has active cancer, we know that we need to reevaluate to, number 1, assess the residuals. Sometimes those treatments can make it worse for the veteran. So even if the veteran is in remission due to the treatment that they receive for those conditions, it can bring about severe residuals.

So that's why something like active

cancer is -- we know that we have to automatically schedule some type of routine future examination depending on what that disability benefits questionnaire shows as the date or when that treatment end, like six months later, we want to assess the veteran's current state.

Q. And so if the veterans rating decision is silent or the medical evidence through the DBQ does not show that there is a need to do a reevaluation, what is the likelihood of a reevaluation for that veteran?

A. It's unlikely unless the veteran is requesting for us to actually look at that condition.

Q. In your experience, has the veteran ever requested a decrease in his or her rating?

A. I have never seen a veteran request a decrease.

Q. If the veteran's disability rating stays the same, would the amounts that the veteran receives stay the same as well, excluding cost of living adjustments?

A. Yes. So the veteran's disability evaluation, so you're saying if the veteran is at

70 percent, would the -- and they file a rating decision and we keep them at 70 percent, would that change or -- I guess I want to make sure I understand.

Q. I'll rephrase. I'm sorry.

If the disability was at 70 percent, so does the amount the veteran receives change annually?

A. No. Unless there's a COLA applied. A cost of living adjustment applied.

Q. Going back to the possibility of a decreased disability rating, if the VA reevaluates a veteran and determines that disability rating should be decreased, can you explain briefly the process for how that works?

A. Yes. So, say, the veteran files a claim for increase, we look at the exam, we see that the veteran actually got better. The first time, we actually would do what's called a C&C, which we would confirm and continue the evaluation. However, if the veteran comes in again, we have two exams showing improvement. That's when we would submit what's called a proposal to reduce. We would send a veteran a letter to let them know, hey, we propose to

reduce your disability X to percentage Y due to this.

During that time frame, the veteran has 30 days to request a hearing. The veteran also was able to submit medical evidence. Sometimes in that process, we can see that, hey, maybe the veteran was having a good day doing those exams. But, now, we have current medical evidence warranting either of us to keep the evaluation the same and no longer reduce or actually get -- got severe. So that's usually the process. But, again, it usually takes two examination of improvement before we would even propose to reduce an evaluation.

Q. And so throughout that process, VA can choose to decrease the rating or keep the rating the same?

A. Correct.

Q. Once again, I want to thank you for your time. That's all that I have.

A. You're welcome.

MR. VANSLYKE: I do have a few redirect questions then.

FURTHER EXAMINATION

BY MR. VANSLYKE:

Q. Ms. Piper, you testified that it is uncommon for a veterans disability rating to change; correct?

A. Correct.

Q. And to clarify, when you testify to that, are you referring to their combined disability rating or the individual disability ratings?

A. So we -- I guess we would be talking about -- depending on the instance. So if this is the original claim and the veteran is over 55, there's nothing to show for us to do an examination again, and they are service connected for multiple conditions, at that time will be multiple things. It would be their combined evaluation staying the same.

If we're talking about granting a new condition and it didn't show a need for us to schedule an exam again, that time, it would just be one individual condition. So I think it just depends on the instance. But if the veteran is over 55, 55 and older, and there's no indication for us to schedule an exam again, then unless the veteran is requesting for us to look at that condition, there's no need for us to request any

reevaluations.

Q. So, to be specific, do you believe it is uncommon for a veterans combined disability rating to change?

A. It's a potential depending on what's going on if the veteran is requesting individual exam. So it just depends on the nature. So if it's just us looking at individual exams, I mean, individual disabilities, then it's a potential. But sometimes even if we look at the individual disability, sometimes they don't change the overall combined evaluation. It just depends on the condition.

Q. I appreciate the context. I will ask that you answer my question as presented.

Is it your testimony that it is uncommon for a veterans combined disability rating to change?

A. Yes, it's uncommon.

Q. Is it also your testimony that it is uncommon for the rating percentage for a particular injury to change?

A. Yes, unless the medical evidence shows that it's temporary.

Q. Are you aware that VA regulations

expressly authorize reexaminations when a disability may improve?

A. Yes.

Q. Are you aware that VA regulations provide for routine future examinations?

A. Yes.

Q. And are those routine future examinations typically scheduled within a few years of the initial rating when improvement is possible?

A. Yes.

Q. So for conditions that are not considered static, reevaluation is expected, not rare; correct?

A. Yes.

Q. Are you aware that the VA office of inspector general has studied the VA's reexamination practices?

A. I've heard -- I'm vaguely familiar with it.

Q. Are you aware that the OIG found that veterans were being scheduled for medical reexaminations in significant numbers?

A. No, I'm not aware.

Q. Are you aware that OIG criticized the

VA for conducting unwarranted reexaminations?

A. Can you repeat that?

Q. Are you aware that the OIG criticized the VA for conducting unwarranted reexaminations?

A. No.

Q. If I represent to you that the OIG did make that criticism, does that seem that the concern from the OIG was that the reexaminations were happening too often in some cases?

A. If you -- can you repeat that?

Q. If I tell you that the OIG criticized the VA for conducting unwarranted reexaminations, do you understand that to mean that the OIG is concerned that reexaminations were happening too often in some cases?

MR. KLOTZBUCHER: Objection. Form and foundation.

THE WITNESS: Yeah, I would have to review it.

BY MR. VANSLYKE:

Q. Is it true that a reexamination is conducted to determine whether a rating should change?

MR. KLOTZBUCHER: Objection. Form.

BY MR. VANSLYKE:

Q. You can answer.
A. Can you repeat. Excuse me.
Q. Is it true that a reexamination is conducted to determine whether a rating should change?
MR. KLOTZBUCHER: Same objection.
THE WITNESS: I think it is conducted. It's just to look at the current state of the disability. So it's not --
BY MR. VANSLYKE:
Q. Go ahead.
A. Not saying that it changes, just looking at the current state of the disability. So that could be that it changes, yes, or it got severe. So we don't know what the change is, but it's just to look at the current state.
Q. And is it looking at the current state to determine whether or not the current rating remains appropriate?
A. Yes, it's just looking at the current state. And from there, we have to determine whether or not it changes.
Q. And if the evidence shows the condition worsening, the VA may increase that

rating; correct?

A. Yes, if the condition is worsened, yes, it could warrant an increase.

Q. So whenever the VA schedules a reexamination, there is a possibility that it could result in a rating change; correct?

A. Yes. It could possibly result in a rating change.

Q. Is it fair to say that ratings for nonstatic conditions are periodically reevaluated as part of VA's normal process?

A. Yes.

Q. And your testimony about these practices is premised upon law and regulation as it exists today; correct?

A. Yes.

Q. Is it possible that Congress could amend some of those laws?

A. Yes, it's possible.

Q. And is it possible that amendments, such as those, might change some of these practices you've been describing?

A. Yes, it's possible.

Q. I'm going to look briefly back at Exhibit 8. I'll try to remove the filters. One

moment.

Do you recall testifying earlier today that as people age, their conditions typically worsen?

MR. KLOTZBUCHER: Objection to form.

BY MR. VANSLYKE:

Q. You can answer.

A. Yes.

Q. Could you describe for me what you were referring to?

A. It's just -- I was just saying usually when people get older, it's just normal for our bodies to get worse. So it's just a normal part of aging where it's uncommon for you to revert back to full strength as you get older. Usually things get worse, not better.

Q. And are you referring to existing conditions getting worse or are you referring to new conditions developing?

A. So are we talking about general or are we talking about specific individual cases.

Q. In general, right now, I'm asking which of those two scenarios you're referring to?

A. So I thought we was just talking -- I think you was just asking about in general in

life. But if we're talking about these cases, then can you rephrase.

Q. So I'll stop sharing to avoid confusion.

So when you testified that things generally get worse as we age, are you referring to new conditions developing as we age or are you referring to existing conditions worsening as we age?

MR. KLOTZBUCHER: Objection to form.

THE WITNESS: Yeah, I mean -- yeah, I just think -- can you repeat the question?

BY MR. VANSLYKE:

Q. When you refer to our health worsening as we age, are you referring to new conditions developing as we age or existing conditions worsening as we age?

MR. KLOTZBUCHER: Same objection.

THE WITNESS: Yeah, I mean it could possibly be both. I mean, just in life.

BY MR. VANSLYKE:

Q. So your testimony is that both of those can occur?

A. Yes, both can occur.

Q. And you stated that typically things

get worse as we age; correct?
A. Yes.
Q. Would it be fair to state that commonly things get worse as we age?
MR. KLOTZBUCHER: Objection. Form and foundation.
BY MR. VANSLYKE:
Q. You can answer.
A. I'm thinking.
Can you repeat the question?
Q. Instead of saying that typically things get worse as we age, would it be fair to say that commonly things get worse as we age?
MR. KLOTZBUCHER: Same objection.
THE WITNESS: I would say commonly.
BY MR. VANSLYKE:
Q. Can you repeat your answer?
A. I would say commonly.
Q. Ms. Piper, do you understand what a degenerative condition is?
A. Yes.
Q. Could you describe for me your understanding?
A. A degenerative disease would be something like Parkinson's. It's -- Parkinson's

is considered a neurodegenerative condition. Those are usually conditions that your body deteriorates. It starts one way and it progresses worsening. It doesn't progress better. Usually, people who have Parkinson's, they're unable to talk, they're unable to move, they have uncontrollable movements. So it's a neurodegenerative disease where your body is basically breaking down. That's how I would describe degenerative.

Q. So if somebody has a degenerative condition, would you expect that condition to worsen over time?

A. Yes, I would.

Q. Would you say that it is uncommon for a veteran with a disability rating to obtain an additional disability rating at a later date?

A. Can you repeat the question?

Q. Would you say that it is uncommon for a veteran with one disability rating to receive an additional disability rating at a later date?

A. I wouldn't say it's uncommon. I mean, I feel like if someone files a claim, there's a potential for it to -- for them to get service connected again.

I'm not sure what the question is asking. But, basically, it's not uncommon, like if someone files a new claim, depending on what the new condition is, say there's a new law and now they have a condition that's now recognized, they're service-connected for A, now they can be service-connected for B, should VA expand benefits and they meet the criteria. So I don't think it's uncommon depending on what the condition is and who the person is.

Q. Is it also true that they could develop a new condition and obtain an additional rating for that?

A. I mean, yeah, it's possible.

Q. Would you say it's common for a veteran to receive a second rating after receiving their first?

MR. KLOTZBUCHER: Objection. Foundation.

THE WITNESS: I mean, if they file a claim, and they get service connected for it. So, I mean, it's possible.

BY MR. VANSLYKE:

Q. Would you say it's common for that to occur?

MR. KLOTZBUCHER: Same objection. Foundation.

THE WITNESS: I mean, people -- I mean, I haven't studied, like, the patterns or the trends of veterans coming in getting additional service connection, but I'm saying it's possible. But to know if it's common, I would have to look at the data and analyze the numbers and then come back to you.

BY MR. VANSLYKE:

Q. When you have completed claims on behalf of veterans, have you ever completed a claim for a rating on behalf of a veteran who already had a preexisting rating?

A. Yes. Claims for increase. I've completed several claims for increase.

Q. Did that ever strike you as uncommon to encounter that scenario?

A. I mean, I never really just sat and thought about it if it's common. I mean, it's just someone wants to file a new claim, they feel like, hey, I have a condition that warrants service connection. So they're filing a claim. But I never sat there and be, like, hey, a lot of

people are doing it. I never just sat and look at the trends.

Q. Have you ever completed a claim on behalf of a veteran who received an increased rating for a rating we already had?

A. Yeah. So you're saying the veteran just came in to say, hey, my condition is worse, let me file a claim.

Q. Correct.

A. Yes, I have.

Q. Did that ever strike you as uncommon?

A. I mean, I never really thought about it. Again, I feel like if we want to talk about the trends for claims for increase, but I've never -- I'm just -- my job was just to process the claims, but not look at the trends to see if it's common, uncommon, or not.

Q. If I understand correctly, you're saying that you have not studied the data, but you have no particular recollection of that striking as you as uncommon; is that correct?

MR. KLOTZBUCHER: Objection. Form. You may answer.

THE WITNESS: Yeah, I mean, like I said, I've seen it before. I've rated a

good bit of claims for increase, but I've never studied the trends of them.

BY MR. VANSLYKE:

Q. So do I understand correctly that sitting here today, you cannot tell me whether it is common or uncommon for a particular rating to be increased at a later date?

MR. KLOTZBUCHER: Objection. Form.

THE WITNESS: Without analyzing, like, the entire population. But I'm saying it's not -- I mean, I've seen it occur before. But if you want me to use the word common or uncommon, I've seen it before. So we can say common if that helps.

BY MR. VANSLYKE:

Q. And would you say that it is common or uncommon for a veteran to receive an additional rating after already having a preexisting rating?

A. So, I mean, it's possible. I mean, I've seen it before. So we want to use the word common. I think it's fine.

MR. VANSLYKE: Okay. I have no further questions. Thank you again for

your time.

MR. KLOTZBUCHER: Thank you, Ms. Piper. Nothing further.

THE VIDEOGRAPHER: This ends today's deposition. We're going to go off the record at 4:08 p.m.

* * *

(Deposition concluded at 4:08 p.m.)

* * *

(Signature reserved.)

* * *

DEPOSITION ERRATA SHEET

Our Assignment No: 7887236

Case Caption: In Re: Camp Lejeune Water Litigation

DECLARATION UNDER PENALTY OF PERJURY

I declare under penalty of perjury that I have read the entire transcript of my deposition taken in the captioned matter or the same has been read to me, and the same is true and accurate, save and except for changes and/or corrections, if any, as indicated by me on the DEPOSITION ERRATA SHEET hereof, with the understanding that I offer these changes as if still under oath.

Sign on the _____ day of _____, 20 __.

_____

JADINE PIPER

DEPOSITION ERRATA SHEET

Page No. _____ Line No. _____ Change to: _____

_____

Reason for Change: _____

Page No. _____ Line No. _____ Change to: _____

_____

Reason for Change: _____

Page No. _____ Line No. _____ Change to: _____

_____

Reason for Change: _____

Page No. _____ Line No. _____ Change to: _____

_____

Reason for Change: _____

Page No. _____ Line No. _____ Change to: _____

_____

Reason for Change: _____

Page No. _____ Line No. _____ Change to: _____

_____

Reason for Change: _____

SIGNATURE: _____ DATE:_____

JADINE PIPER

CERTIFICATE

I, CHRISTINE A. TAYLOR, Registered Professional Reporter, Certified Court Reporter, do hereby certify:

That JADINE PIPER, the witness whose deposition is hereinbefore set forth, was duly sworn by me, and that such deposition is a true record of the testimony given by such witness taken stenographically by me to the best of my ability.

I further certify that I am not financially interested in the outcome of this action, a relative, employee, attorney or counsel of any of the parties, nor am I a relative or employee of such attorney or counsel.

IN WITNESS WHEREOF, I have hereunto set my hand this 14th day of March, 2026.

CHRISTINE A. TAYLOR
Registered Professional Reporter
Certified Court Reporter #4736

&

& 3:4,9

0

00 195:21,23,24 196:4
000000019 5:6
00897 1:4
06 224:22 225:10,13

1

1 4:12,17 13:18 13:19 22:2 23:22 61:19 138:21 143:18 144:2,24,25 145:1 164:5 243:20
1,000 109:6,9
1,700 159:20
1,759 153:21 166:11 168:11
1,759.19 145:16 149:24 160:19 160:25 163:20 165:3 166:2 168:15
1,759.19. 146:12
10 5:4,9 58:22 58:24 59:11,18 59:25 87:21 89:15,16 196:4 196:5,7,12 199:2,7,8 233:22 234:20
100 55:23 87:24 88:3,10 88:11,12,13,14 88:22 104:22 106:11 113:19 116:10 189:6 191:18,19 192:22 193:15 193:20 200:22 201:7,22 212:1 212:10,11 222:22,23 223:6,9,15 226:13 227:3
10:53 84:13,14
11 5:11 15:12 142:12,13 165:25 166:23 170:1 191:13
11,820 146:1
11/18/2022 180:21
1155 84:19 86:2 232:21
117-168 5:4
117-303 77:1
11:01 84:14,16
12 5:13 111:18 120:1 121:8 153:24 239:15 239:17
12/1 120:11 136:6
12/1/2022 110:17
12/1/2024 137:16
12/1/2025 137:17
12:20 141:15 141:16
12:26 141:16 141:18
13 4:12 23:17 24:24
133 5:8
134 5:8
14 68:1
142 5:11
14th 173:9 264:18
15 4:19 83:14 142:25 144:9 172:11
16 70:8 71:7 178:20
16th 180:3
17 4:14,16
175 3:16
18 4:18 49:15 186:12,21 187:2,6,17
18th 180:6
1940s 90:10
1945 90:9,23 91:4,10,11
1985 8:3
1:14 175:19,20
1st 120:8,21 122:4 123:6 198:14

2

2 4:14,22 17:9 17:11 19:11,14 19:17 23:23 61:19 143:8 146:1,17 147:2 149:6,7 150:12 150:12 152:25 164:6 171:2 172:7 201:5
20 4:19 87:21 173:13 202:16 208:9 216:8,9 227:7 262:18
2000 210:24
20002 3:17
2003 37:24
2004 226:2
2007 38:3 39:5
2008 38:14
2010 40:20 56:15 82:15 225:4 227:9,12
2013 205:7 212:10,12

2014 38:9
2015 40:21 45:5 56:15
2016 50:10 208:9
2017 143:18 173:9
2018 45:5 49:23 50:3 92:15 204:2,4 208:7 212:17 212:19 236:22
2021 37:14 50:4
2022 5:4 80:17 178:20 180:3,6
2023 70:11 199:10,10
2024 75:19 138:7,16,21 160:13
2025 37:18 109:17 120:21 121:10,19 122:4,16 123:2 137:18 138:8 142:25 144:1,9 145:25 153:1 160:8,18,24 172:11 220:19
2026 1:14 2:1 6:7 16:21 27:21 109:4 121:20 122:24 123:6 124:9,16 126:18 137:19 138:15 220:5 264:18
2027 137:10,23 139:2
21-0781 75:13
21572 264:21
21st 160:8,24
22 4:20,24
22nd 160:18
23 187:6,17
239 5:13
24 63:16
240 4:4
246 4:5
24th 3:5
26 1:14 2:1 4:22 6:6 16:21 19:11 109:4 121:20 122:24 187:7,17,18
26th 220:5,19
27th 198:12
28144 3:10
29 75:18
2:00 175:20,22

3

3 4:16 17:10,11 19:10 23:25 33:5 36:15 61:20 69:8 170:2 179:24
30 87:22 160:13 246:4
3011 3:5
30th 109:17
313.800.4170 3:6
31st 144:1
33 5:4
34 5:5
38 5:7,9 48:1 81:13 84:19 85:23 232:21
3:20 232:13,14
3:28 232:14,16

4

4 4:18 5:9 18:5 18:6 61:20 81:9 90:1 191:17
4,044 126:20
4,044.91 127:1 160:9,14
4,044.91. 136:14 138:18
4,837 197:24
4.1. 93:4
4/30/2025 138:4
40 87:22 202:14,15,16
4736 264:23
48202 3:6
4:08 261:6,8

5

5 4:20 22:3,4 157:9
5/29/2025 5:13
50 75:21 87:22 88:4,14 200:20 201:2,7,8,9,11 201:14,15,16 201:16,18,21 201:21 205:21 205:21
525 3:10
526 45:14 131:17 207:6
55 243:1,7 247:11,22,22

6

6 4:24 22:15,16 60:2
60 65:22 87:22 170:23 171:12 173:6,8,8 192:22 202:14 202:14
630 4:23 19:11
674 187:9

7

7 4:3,17 5:4 33:5,6 44:4 139:13

7,159.19 175:2
70 87:23 170:8 170:10,24 245:1,2,6
700 162:3 164:3
704.633.5244 3:11
7500 144:10,16 146:17 150:15 170:17,25 171:1 172:2,12 172:16
774 146:10 175:2
774.16 150:3 151:20,23 153:1 174:11
774.16. 145:21
7887236 1:25 262:3
7:23 1:4

8

8 5:5 8:3 34:14 34:15 160:6 215:6 223:24 252:25
8/10/2017 178:19 179:5
8/16/2022 179:11,13 180:22,24
80 87:23 118:1 196:4,13,14 199:2,8
804 33:3
805 33:4
85 5:7
8526 178:13
89 5:9
89,449 144:1

9

9 5:7 23:17 85:5,7 232:20
9,000 76:10
90 87:23 191:14,15,18
900 164:4
985 153:23
985.03 145:21 146:11 150:7 175:5
985.03. 175:2
9:00 2:2 6:7
9:48 40:10,11
9:54 40:11,13

a

a.m. 2:2 6:7 40:10,11,11,13 84:13,14,14,16
ability 8:14,22 29:16 61:4 77:9 264:11
able 8:25 39:3 40:2 54:24 72:4,5,6 74:17 76:22 78:25 93:18 96:22 97:20 98:2,7 99:23 102:10 104:22 105:10 128:7,18 130:10 131:17 134:7,16 148:19 158:7 158:24 159:14 162:18 183:4 193:16,19 209:1 212:5,11 214:18 216:10 217:11 220:16 223:15 232:4 246:5
above 95:13
absent 155:2
accept 76:21
access 12:15,16 39:25 54:16,19 54:21,22,24,25 55:8,15,18,25 58:4 59:7 209:21 210:7 210:20 211:11 213:7,15,17
accidentally 10:2
accompany 205:14 233:4 233:14
accompanying 203:9
accordance 89:2 100:7 105:1 106:22 107:5
account 56:23 198:16
accounted 91:3
accounts 57:1
accuracy 49:5 215:2
accurate 5:17 17:5,22 47:12 53:9 95:3 182:7 229:25 240:5 262:12
accurately 43:24 96:22
acdc 70:4 77:23
acknowledge 121:17
acquisition 60:10
act 32:8,15 33:3 73:18 80:14,24 101:1 101:7,16 103:18,20 104:2,5,19 139:13,24 167:6
acting 36:21,25 37:1,3,5,10,17

61:23 62:6 241:6
action 7:11 14:2 42:5 47:11 54:6 123:10 125:2 126:19,21,23 136:5 264:14
actions 42:7 47:3,4 53:20 55:21 56:1 57:7 125:9 132:5 136:10
active 157:18 221:9 243:19 243:25
actively 67:15
activities 96:13 235:18,22
activity 95:6,11 96:1,4 99:7,15
actual 16:12 52:17 58:10 75:2 181:6 200:17 234:16 234:17
actually 44:18 45:10 49:12 52:13 98:5 105:6 123:6 128:11 236:8,9 244:14 245:18 245:19 246:11
added 199:7 216:4
adding 112:16 203:16
addition 193:2
additional 143:25 145:24 146:11 178:21 192:2,5 193:4 256:17,21 257:12 258:6 260:19
additionally 75:21
additions 76:24
address 58:8,8 58:14 236:17
adds 159:20 169:8
adequate 94:12
adjudicated 220:11 221:17
adjudication 65:8,10
adjudications 81:16
adjudicator 47:23
adjusted 194:5 194:14 226:9
adjustment 112:3 120:11 120:21 122:4 122:18 123:1 124:5 125:14 125:25 191:16 191:20 194:6 198:4 224:9 226:6 245:10
adjustments 242:10 244:23
administer 161:12
administered 31:3,24 49:1 73:23 74:4 113:16 117:13 197:10
administrating 72:21
administration 3:22 29:25 60:7 72:22 143:9,16 145:3 167:3 237:21
administratio... 64:17
administrative 38:13,17 70:20 72:1 73:5 220:25
adopt 84:20 86:20
adopting 85:1
advantageous 114:11 115:4
advise 130:6,11
advisory 70:3 78:2,4
affairs 143:15 239:24
affect 213:1
affected 71:24 225:19
age 105:20 186:12,20 187:15 243:5,7 253:3 254:6,7 254:9,15,16,17 255:1,4,12,13
agent 183:2
aging 253:14
ago 22:7 221:1 229:13,23 231:22
agree 73:19 77:14 81:19,21 81:22 82:14,22 107:1 118:6,25 125:19 155:5 156:3 163:18 164:16 165:13 167:20 171:23 174:18 176:20 178:5 184:25 185:3 186:2,5 187:20 191:8 192:9,10 206:14 208:17 224:14 225:4

agreed 6:13 137:4 172:22
agreeing 21:16
ahead 12:14 15:11 31:9,10 34:24 50:7 77:6,7 112:8,9 112:10 116:23 120:13,14,15 122:22 123:5 138:2 148:2,24 188:5,6 189:16 189:17 194:10 211:18 234:24 239:16 251:12
aid 192:12,16 192:19 235:13
aiding 64:21
aids 64:15 74:7
alive 113:25 165:5
allow 9:12 55:11 76:22 218:4
allowance 55:6 74:14,16 188:16
allowed 75:19 104:3
allowing 75:25 76:7
alluding 118:14 118:16
alter 89:6 214:2
amend 252:18
amended 4:14 16:7,17 17:9 28:17
amendments 83:6 252:20
amount 51:24 59:12 113:4 127:17 135:4 145:23 146:25 148:17 153:15 153:22 155:6 160:9,14,19,25 161:5 163:19 164:5,25 165:14,15,21 166:2 167:22 184:25 185:2,6 185:7,13,13,19 188:17 193:20 193:21 214:25 215:3,17 216:17 223:16 224:19 225:20 232:7 233:13 233:14,23 234:3 235:20 235:23 236:2 245:7
amounts 136:17 161:4 161:11 165:16 206:16 233:3 244:21
analysis 49:9 53:10 134:1 161:18 167:9
analyst 50:4 52:1,16 65:19 65:20 67:6 97:10 98:18
analysts 64:14 64:20
analyze 101:13 101:25 258:9
analyzing 57:11 260:9
andrew 24:8,12 24:17
annual 120:8 120:10 191:16 191:20
annually 242:14,15,19 245:8
answer 8:9,13 8:13,19,21 9:4 9:19 12:2 26:1 26:3,4,5,7 29:15 68:13 79:12 82:20 83:1,10,18 84:1 87:6,14 92:17 94:24 95:15 96:8 97:20 98:2 99:9,17,23 100:1,16 105:10 106:7 108:10 119:4 119:15 120:24 122:9 129:14 134:8 136:22 136:24 144:19 146:20 147:19 147:22 152:12 152:21 156:9 161:8 163:11 163:14 164:22 165:19 167:17 168:1,22,24 169:1,5,22,23 170:3,14 173:1 174:13,24 175:10 180:17 184:16 191:3,4 191:6 206:19 219:8 234:12 248:15 251:1 253:7 255:8,17 259:23
answered 76:15 182:12
answering 10:16 31:12 171:16 182:11 228:7
answers 103:4 168:8
anticipate 243:9

anticipated 107:16 108:5 118:8
anybody 10:25 11:3 84:8 196:24
anymore 92:14 193:18 208:16 217:13 223:13 225:15
anytime 71:13 209:3,3
anyway 187:8
apologies 17:8 34:10 35:5 68:6 77:5 188:4
apologize 75:3 92:17 99:21 102:9 106:9 227:16
appeal 41:5 42:11,19 217:6 217:9,10,16,17 217:25 218:11 218:20 219:2,7 219:11
appealed 218:7
appealing 217:20
appeals 39:12 41:7 42:5 43:13,13 53:10 73:6 217:4 218:18
appear 17:2,18 172:16
appearances 3:1
appearing 6:13
appears 45:3 144:21 145:2 150:12 153:9 173:2 176:19 184:2
apples 141:6,6 141:7
applicable 82:7 82:17 83:5,15 83:24
application 95:3 215:13
applications 135:17
applied 20:21 21:2 43:12 48:9 156:3 185:18 242:13 242:15,19 245:9,10
applies 62:3 194:21,21
apply 20:25 39:20 66:24 86:6,11,15,20 93:12 98:15 157:2 159:3 184:10 189:18 195:7 198:10 202:18 211:6 221:4 233:21 234:10 236:8 239:8
applying 52:10 66:19 82:16 83:7,14,23 85:1 93:9 106:25 146:8 147:10 148:13 158:6 209:16 234:16
appreciate 213:22 241:10 248:14
approach 154:25 156:5
appropriate 54:24 238:8 251:20
approximately 27:17
april 40:21 45:4 109:17 120:18 121:19 122:6 123:25 143:18 160:8 160:24
arbitrarily 209:7
area 60:9 92:14 105:8 171:7 208:16
areas 78:12
artery 179:12
articulation 48:7
asked 10:17 86:5,15 93:11 109:7 122:24 128:10 159:3 190:18 207:2 242:9
asking 12:1 33:18 64:9 96:13 97:1,2 107:22 128:20 129:16 131:6 134:1 135:9 148:9,11,12,17 152:16 154:6,7 158:2,13,16,18 158:18 159:15 160:2,3,5 161:18 163:12 164:14 167:2 171:23,24 182:13,18 210:16 227:21 227:22 233:7,8 234:1,9 253:22 253:25 257:2
aspect 52:8
assemble 65:4 65:21 66:11
assess 102:5,6 107:20 108:10

128:20 162:23 243:20 244:6
assessment 60:7 61:2 104:22 120:6 124:12 125:7 128:13 129:8 129:19,22 130:10,20 133:11 162:19 226:19,25 229:25
assessments 241:15
assign 208:22 210:4
assigned 143:19 209:7,7
assignment 262:3
assigns 209:11
assist 42:23 44:11 50:17 70:9 74:15 78:6 96:17,22 98:7 217:11
assistance 62:22 235:18 236:1,1
assistant 36:22 62:6
assisting 50:21 62:17,19 206:6
assists 67:16
assume 9:20 34:6 120:17 123:14,14 124:3 147:8 159:1 174:7 177:5 184:12 188:13 189:5 190:11 200:21 216:21 230:20 242:18
assumed 62:6 186:11
assuming 88:16 109:24 143:4 156:4 182:18 186:25 189:3
assumption 130:15
attached 193:6 194:4
attachment 14:11
attempting 198:3
attendance 192:13,17,19 235:13
attention 10:8
attorney 8:17 83:22 264:14 264:16
attorneys 25:23 26:3,9,18 27:14
attributed 167:22
audit 74:10 75:2
aug 5:4
august 178:20 180:3
authenticated 85:20
author 147:13
authority 86:2 89:6
authorization 160:12
authorize 249:1
authorized 43:17
automated 204:8,9 206:13
automatically 204:1,16 205:9 205:11,13,14 212:2,11,12 214:10,24 239:8 244:2
automation 204:7
available 12:2 32:11,23 39:9 79:18 198:2 238:13
avenue 51:10 167:2
average 86:24 94:8
avoid 26:2 121:23 122:2 254:3
award 36:3,4 47:11,14 53:18 88:8 111:7,25 112:1,17 123:9 124:1 131:3,4 131:14 137:15 160:11,12,14 160:18 164:2,9 164:15,24 165:12 168:20 170:5 174:21 183:12,15,25 184:5,13,21 185:7,19 186:13 191:7 191:11,14 193:6 195:1 211:23 212:8 213:18 214:25 215:14 216:4 218:21,24 219:5,6,11,12 219:17 223:25 224:1,23 225:19 226:9 226:23 233:3 233:12

awarded 37:2 87:11 94:20 113:3 178:1 193:2
awards 20:23 43:18 53:21 56:23 176:10 213:8,16,16 214:11,19 226:2,19
aware 15:25 17:25 20:14 21:20 22:11 28:4,8 33:18 34:1,6 35:20 80:14,17 176:8 185:5 218:17 238:14 239:5 239:11,13 240:7,10,15,16 248:25 249:4 249:16,21,24 249:25 250:3
awd 225:10

b

b 4:10 140:5 157:14 257:7
bachelor 38:1
back 17:7 22:1 36:14 40:12 47:5,18 70:6 77:22 81:8 82:15 84:15 99:22 100:4,4 100:25 110:22 111:2 126:13 139:12 141:17 141:20 144:23 145:13 149:13 150:24 151:7 152:24 154:15 159:4,5 160:6 161:10,21 165:25 168:16 170:1,15 172:6 172:7 175:21 176:12,24 183:13 197:1 199:7 203:10 204:4 214:21 215:6 219:21 219:25 220:7 220:14,16,21 220:21 221:6 221:10 223:24 232:15,19 236:22 239:6 245:11 252:24 253:15 258:10
background 82:5
backup 65:20
backwards 212:19
bad 103:13,14
balance 152:7
barking 35:6
barring 122:11 126:12,15 138:23 152:10
base 212:23
based 28:6 29:16 33:13 41:19 57:21 71:2 73:10 86:23 87:9,11 87:21 88:8,17 94:18,21 95:9 96:11 100:12 100:14 107:10 114:7,13,17,18 114:19 115:6 118:5 120:25 122:12 123:23 135:17 136:21 137:13 138:1 143:18 144:8 147:24 152:1 168:5 171:19 172:9 174:25 175:4 178:10 184:17 192:24 193:8 208:11 211:23 214:3 214:25 222:1 223:23 235:19 237:4
bases 163:22
basically 12:1 32:5 37:8,9 38:23 39:17,24 41:6,7,10,16,21 42:1,2,6,18,23 43:1 44:8,13 44:16 45:11,11 45:12,15,19 46:3 47:17 49:13,19 50:16 51:23,25 54:2 56:17,18,20,21 58:3,13,18 59:1,3,4 63:21 64:8,23 65:18 65:21 66:9 68:13 69:15 70:15,21 71:9 72:3,8 76:6 78:2 98:19 103:9,12,25 104:20 105:19 105:23,24 108:7 110:12 114:8 116:2,9 116:14 118:9 118:11 123:8,9 126:15 146:9 148:3 178:25 179:4 180:22 181:24 189:15 201:5 203:11 203:15,20 210:24 211:25 217:24 219:6 229:5 233:22

235:17 236:5 237:17 256:9 257:2
basis 73:3 119:18 220:4
began 91:24 143:16
beginning 23:17 27:19,20 33:3 94:2 132:3 179:15
begins 15:12 33:4 61:19
behalf 2:5 7:4 7:14,23 39:16 44:19 78:8,23 78:25 157:10 258:13,14 259:4
believe 9:20 13:16 14:9 15:20 17:4,21 20:6,10 28:17 38:12 43:22 46:9 60:15 61:14 62:5 86:7,16 87:3 89:11 93:12 97:9 101:2 103:17 104:15 113:14,18 116:8 127:25 134:7 137:3 147:2 154:24 164:15 176:3 185:14 187:6 187:16 192:12 192:14,16,25 193:12,14,19 195:20 196:5 196:13,25 197:1,4,19 199:22,22 200:4 221:19 230:2 232:20 232:21 248:2
bellwether 19:4
ben 7:3,21 240:25
beneficiaries 30:9
benefit 31:6,7 43:18 44:1 72:22 73:10,20 111:18 112:24 113:3,9 114:16 114:19 115:20 115:22 116:5 117:13 118:13 119:25 122:21 125:23 126:16 127:6,10,13,20 145:15,22 146:4,4,14 149:15,15,16 149:24 153:14 168:12,15 175:6 192:5 223:17 226:21 227:2 235:20 235:23 237:11 240:14
benefits 5:7,15 20:21 29:25 30:4,6,8,11,11 30:23 31:2,14 31:16,22 38:18 39:21 40:24 41:17 51:5 52:5 53:8,13 54:4 59:10,16 63:24 64:17 71:25 73:22 74:4 77:20 82:7,17 83:5 83:16,24 85:24 86:12 87:10 90:22 93:10 94:20 113:6,9 113:12,25 114:22 115:5 115:19,23 116:18 124:3 127:11 129:23 134:9 140:2,11 140:15,16 143:9,14,16,17 143:18,22,25 145:3,7,7,11,20 145:24 146:11 151:19,23 153:21 157:14 164:18,19 167:15 176:2,5 183:23 188:15 196:23 199:11 205:10 210:6 210:17,22 222:16,18 223:1,16,17 228:18 237:21 240:4 242:22 243:17 244:4 257:8
benjamin 3:4
best 8:14,21 29:15 42:8 57:12 72:7 119:22 128:19 130:6,16 132:6 133:24 156:13 194:1 207:21 216:5,12,18 217:13 219:8 223:20,23 233:21 235:8 235:11 264:10
better 9:22 105:21 212:18 229:17 231:24 245:18 253:16 256:5
beyond 127:3 187:2 224:22
biannual 78:15

bibliography 14:23
biggest 43:7 47:1 48:12 57:25 183:1
bilateral 202:17
bill 26:12 27:2
bipolar 76:12
birth 8:2
bit 43:1 99:25 102:17 105:9 108:17 131:22 175:25 260:1
bits 129:2
blah 63:14,14 63:14,14 183:6 183:6,7,7
blank 92:13 181:14 183:18 184:2 215:8
blanket 120:4 130:20 135:8
blanketed 121:13 130:9
blind 162:15
block 23:2
blurring 108:24
board 43:13 71:3 73:13
bodies 253:13
body 90:18 91:8 179:8 256:2,8
booking 78:21
boots 58:5
bottom 19:8,14 128:25 142:24
boulevard 3:5
bounce 152:4 169:20 171:6 216:2
boxes 224:21
break 10:14,18 84:8 111:2 141:10,11 175:15
breaking 256:9
brief 56:4
briefing 66:14
briefly 6:16 16:15 34:19 36:24 38:20 41:1 45:7 61:18 81:8 139:15 245:15 252:24
bring 243:24
brings 61:14
broad 24:13
broke 166:23
broken 164:3
brought 33:10 209:22
building 205:24
bullet 20:1 43:10,22 44:4 47:22 48:7,25 53:4 60:1 64:13 67:3,25 68:8,23 69:7 74:7 75:12 157:13
bullets 61:18 61:22 62:1
burden 75:20 75:22
burial 31:16 199:3,11
business 30:17 30:20 31:13
buy 141:6
bvanslyke 3:7

c

c 4:1 6:1 129:9 129:10 176:18 195:15 196:4,8 197:15 199:2,8
c&c 245:19
cadence 67:17 111:3,17 118:8 119:1,9,11 120:19 122:15 123:17
calculate 200:25 202:7 210:18 214:1 214:25
calculated 143:21,25
calculating 234:8
calculation 147:10 148:13 175:4 194:14
calculations 239:12 240:14
calculator 5:14 154:3 201:25 240:3
call 38:25 39:6 44:22 62:21 63:4 64:8 133:14 201:3 211:19
called 39:6 47:5 49:19 51:13 64:23 71:18 77:2 133:5 198:10 201:16 202:17 203:17 205:1 210:23 213:7 226:16 228:17 230:14 237:24 245:19 245:23
calls 39:10 67:20
camp 1:4 6:9 13:22 18:17,25 22:24 23:22 25:4,8,14 32:4

32:7 33:2 36:12 81:4,6 139:13,23 140:7,11,16,17 140:23,25 142:2,6 143:17 143:23 144:5,7 144:15 145:17 145:18,22,25 146:6,14 149:17 150:2 150:10,14,23 150:25 151:6 151:10,18 153:5,15 154:19,21 155:2,8 161:4 161:5,19 163:21 164:18 164:19 165:15 165:16 167:6 167:22 168:18 168:21 172:9 173:24 174:1 174:10 175:7 262:4

cancer 170:18 171:1,1,12 172:3,17 173:20 243:19 244:1

capable 93:23

capacity 37:3 51:19 86:21,24 87:12 93:11 94:8,22 95:13 95:22,24 236:24 237:5,6 241:6

capri 46:1

caption 262:4

captioned 262:10

carcinoma 144:11,17 146:17 150:15 150:22 151:13 151:22 172:12

care 41:15 140:6,22 141:25 142:5 161:23 186:17 235:16,25 236:1 237:12 237:15,20 238:8,10,12,15 238:18,21

career 77:15

careful 130:8

carla 24:9,22 25:7

carolina 1:1 3:10 18:14 22:24 38:3,7 39:1,2,4,8

carried 209:13

case 1:4 18:20 19:1 24:7 42:4 46:9 73:3,3 104:21 109:24 118:11 119:18 119:18 120:2,6 130:18 169:10 185:21 208:18 212:14 220:4 237:9 262:4

cases 1:6 18:24 128:9 250:9,15 253:21 254:1

catalog 29:2

categories 115:13 140:21

category 140:22,24 187:4,5

cause 92:20 111:21,25 112:1,3,12,18 112:22 118:7 118:16,19 119:24 135:1

caused 111:2 111:22 157:18 157:23,25

causes 56:25 118:22,23

causing 103:13

cd 195:15

cdc 79:7

cell 11:7 144:10 144:16 146:17 150:15,22 151:13,22 172:12

cemetery 31:5 31:8

center 38:24,25 39:7 41:5 42:1 60:10 236:19

certain 12:2 49:21,24 51:24 54:15 55:23 56:25 57:1 70:1 73:18 90:18 111:20 118:6 192:2 197:23 213:14 214:9 226:21 230:4,9 233:12 235:12,15 236:6

certificate 39:22 264:1

certified 40:19 264:4,23

certify 264:5,12

cfr 5:9 48:2 81:23

chance 41:13 42:22 125:3 204:7 208:12 223:6

change 30:21 65:15 66:16 67:1 69:16 70:22,25 71:5

71:10,13,17,23
71:24 72:1,21
73:14,22 74:1
74:12 76:17,25
77:3,3 78:16
79:8 92:24
100:14,21
101:21 102:4
108:9 110:23
111:9,22,25
112:2,4,11,12
112:17,18,19
112:22 118:7
118:12,16,24
122:14 123:21
124:2,22
125:18,20
126:18 132:5
135:1,3,4,10,10
135:11 136:12
139:4 176:9
177:9 187:7,12
193:8 199:1
208:12 215:14
215:17 218:11
218:12,14
241:24 242:4,5
242:7 243:10
243:11,12
245:3,7 247:3
248:4,11,18,22
250:23 251:5
251:16 252:6,8
252:21 263:3,5
263:6,8,9,11,12
263:14,15,17
263:18,20
changed 73:20
90:6 110:18
195:11 202:10
204:5 208:4
217:7,9 222:8
222:22 226:15
227:4,6
changes 16:1
30:15,17,18
50:8 65:9,16
71:2,7 74:9,13
80:3,10 81:12
89:8 92:20
100:7,14,20
105:1 107:5
108:24 111:21
112:15 117:4
117:22 118:14
118:21,23
119:9,24 120:9
122:11,15
125:15 129:4,6
134:9 135:17
136:2 138:24
170:8,9 209:3
251:13,15,23
262:12,15
charged 81:12
81:19 85:1
chart 192:15
193:12,13,17
193:19,22,25
194:2 195:4,9
195:19
chat 12:12 13:4
13:7 16:15,24
17:14 18:9
22:14 32:18
34:12 85:4
89:15 142:12
239:15
chats 23:20
check 39:20
84:8 113:22
118:3 147:6
154:7 197:4
198:11,18,23
202:20 214:18
215:1
checked 91:20
checking
211:14
checks 62:23
152:6
chief 37:9
child 186:10,11
186:16,16,18
187:1,3
children 186:2
186:23
choose 20:25
221:20 246:16
christine 1:23
6:19 264:3,22
circuit 43:14
circumstances
185:17 187:22
188:8 221:2,8
citation 144:24
146:1
cites 144:1
civ 4:22
civil 2:4 14:2
19:10 86:25
94:10
claim 39:14,14
41:8,12,15
42:15 43:2,3,5
43:9 44:18,24
45:1,12,13,14
45:22 46:3,15
47:6,21 52:24
53:20 54:1,1
55:17,18 56:21
58:6,13 76:8
76:18 100:6
101:12 105:15
105:24 106:5
107:2,9 118:12
123:21 125:16
126:24 128:24
129:10,20
130:5,22
131:16,17
134:6,25 176:5
176:6 180:25
199:11 206:24
207:6 208:1

209:8 217:20 219:4,4,7,14 220:2,5,10,15 221:1,3,8,13,15 221:17 231:2,6 231:9 232:4,7 232:8 245:17 247:11 256:23 257:3,21 258:14,22,24 259:3,8
claimant 155:14
claimants 155:19 157:3 159:10
claimed 75:14 75:17 76:8
claiming 45:17
claims 39:11 41:13 42:2,11 42:12 43:14,25 45:10,16 46:20 50:5 51:6 53:10,15,17 56:17 65:12 70:10 77:9 80:20 97:10 98:12 99:1 106:21 138:11 203:17 217:17 218:25 219:12 258:12,16,17 259:14,16
260:1
clarification 197:6
clarify 62:2 72:3 102:12 132:23 149:12 180:8 190:13 190:14 196:17 197:12 204:12 207:18 247:5
clarifying 28:25 69:7 98:24 190:20
clean 42:14 134:3
clear 99:3 132:20 133:5 133:14 134:8 228:24
click 34:19 35:23 36:3,6 196:6
clients 26:3
clja 4:17,19 5:6 145:7,7,11 152:25 154:16
close 60:3 61:5 90:10,25 91:7 91:19,21 154:5 195:12
closed 74:9
clothing 55:5 74:14,16
cluster 215:11
code 48:1 81:13 81:14,23 170:18 177:16 195:21 196:12 203:3,4,10,11 203:17 208:24 209:2 214:13 214:15,19 237:7
codes 177:19 178:25 195:20 214:9
cola 110:15 112:3,5 120:10 120:20 125:14 125:25 126:6 126:11,18,25 136:7,12 137:17,21 138:9,14,22 139:4,5,8 170:10 194:5 194:20 195:7 234:8,17 245:9
colas 242:10,12
colleagues 7:8
collection 35:24
collier 3:22 24:10 26:16
column 145:10 152:25 170:19 176:18 177:15 177:22 178:4 181:10,21 183:14,25 184:6,24 185:2 186:1,8,22 187:19 188:18 191:7,21 195:15 196:4,8 196:19 197:14 199:2,8 215:7 224:1,15
columns 188:25
combination 86:22
combinations 192:8
combinator 201:3,19,23 202:6 209:14 209:16,25 210:5,8,19 211:11
combined 132:13 143:19 146:12 170:11 170:23 200:15 200:21,25 202:3,7 205:1 206:8 211:8,24 212:24 233:11 247:6,15 248:3 248:12,17

combining 75:19
come 17:7 44:11,20,22 66:6 70:6 105:25 128:9 130:7 133:12 144:6,23 155:14 168:16 170:15 201:21 258:10
comes 72:12 102:24 108:25 125:11 133:20 136:10 219:7 230:23 245:21
coming 40:1 125:16 239:22 258:5
commencing 2:1
committee 70:3 78:2,4,7,18,24 79:3
common 162:21 227:14 241:23,25 257:15,24 258:8,21 259:17 260:6 260:13,14,17 260:23
commonly 255:4,13,15,18
communicate 11:3
communicated 27:2,5,8
communicati... 23:21 24:25 25:1,3,7,12 26:2,6 27:11
compared 143:23 216:22
comparison 194:16
compensate 94:12
compensation 5:14 30:14,16 30:19,19 36:22 38:18 40:24 44:1 47:24 48:3 63:18 65:6 70:4,16 78:3,12 80:5 80:12 87:20 88:20 113:8 114:5,12,23 115:3,5,10,13 143:9,14 157:14 164:25 165:5 183:19 183:22 184:2,8 184:20 185:7 185:19 191:17 192:1,2,4 196:10,20,23 197:2,8,11,18 197:20 221:21 222:5 240:3
complaints 44:10 50:24 52:13,15
complete 74:13 91:11 109:21 236:24
completed 47:9 63:15 68:15,25 90:20 180:21 181:6 237:16 258:12,13,17 259:3
completely 6:17 54:8 114:21
completes 53:19 75:20 237:21
completing 44:12 90:25 91:7
completion 91:19
complex 46:14 46:17,21 49:3 49:9,21
compliance 71:6,15,20,22 72:19,20 73:16
complicated 202:21
components 31:4
comprehensive 90:11,15 91:2 91:17,20
computer 11:6 11:14 53:9 117:10 206:7,7
comv 224:21
concern 250:8
concerned 238:16 250:14
concluded 261:8
conclusion 171:18
conclusions 171:19
concurrent 223:10 224:3 226:15
condition 73:21 73:25 95:6 100:9 103:11 103:15 105:12 105:14 106:1 107:7,11 157:25 177:9 179:2,12 182:3 183:10 219:20 220:6 230:8,11 230:25 231:7,8 231:10,11,14 231:15,21,25

243:1 244:15 247:18,20,25 248:13 251:25 252:2 255:20 256:1,12,12 257:4,5,10,12 258:23 259:7
conditions 45:17 49:24 72:11,16 73:18 75:25 76:4,9 76:17,23 77:10 94:10 101:18 103:7 144:10 157:16,16,21 157:23 172:12 178:19 181:25 221:16 243:24 247:14 249:12 252:10 253:3 253:18,19 254:7,8,16,17 256:2
conduct 129:25
conducted 57:16 236:12 250:22 251:4,8
conducting 7:22 250:1,4 250:12
conferences 78:21
confident 103:5
confirm 12:14 33:14 76:16 146:22 154:10 213:24 215:5 228:24 233:1 245:20
confirming 152:18 167:21 190:10
conflict 222:4,7 222:8
confusing 9:16 205:20
confusion 121:24 122:2 254:4
congress 63:22 252:17
congressman 63:14
connect 183:11
connected 101:23 102:3 103:8,10,12,16 103:20 104:6 106:2 116:6 127:9,11 157:15,16 170:13 173:15 173:16 178:15 178:17 179:5 179:11 197:3 202:2 203:12 231:16,20
247:13 256:25 257:6,7,21
connection 140:6 258:6,24
consensus 158:19
considerable 94:13
considered 64:2 94:12 228:14 249:13 256:1
considering 88:20
consistency 67:19 156:1 160:4
consistent 95:18 155:12 155:20 156:16 156:23 158:11 159:2,9
consisting 67:17
conspiracy 56:11
constitute 219:12 220:16
constraints 28:22
constructed 87:18
contact 38:23 41:25 44:11
contained 53:24 132:10
contains 34:20
content 62:2
contents 11:25 29:14 35:1,4
context 57:24 105:8 106:23 186:15 190:8 223:2 248:14
continual 126:19
continually 242:19
continue 14:10 69:19,25 87:17 88:25 95:2 110:19 119:12 120:20 121:7 124:4 127:3 191:19 245:20
continued 191:15
continues 224:22
continuing 33:4 122:14 136:20
continuous 57:13
contract 50:11 50:14,17,20,22 51:3,9,21,23,24 52:2 97:15

236:17 237:1,7 237:16,18,25 238:3
contracted 50:12
contractors 97:17
contrast 135:20
control 236:20
controversial 205:19
conv 225:7
conversations 23:19
convert 224:24 224:25
converted 225:7,8
coordinate 61:5
coordinated 70:8
coordinating 25:10
coordination 60:4
copies 15:19,24
copy 13:7 16:3 16:13,25
corner 85:13
coronary 179:12
correct 9:25 10:4 13:23 14:23 16:22,23 17:3 18:15,16 18:18,19 19:11 19:12,14,15 20:18,19,23,24 21:2,3,11,19 22:25 23:6,7 23:14,15 24:15 24:16 25:5,9 25:15 27:20 28:9,10,11,13 28:20 29:3,4 29:22,23 31:20 31:21 32:16,17 32:20,21,24,25 33:20 34:8,9 35:15,16 36:1 36:2,8,10,13,16 37:15,16,19,25 38:4,5,7,10,14 38:15 40:21,22 43:15,16,20,21 44:2,3 45:5,6 48:4,5,11,23 49:5,6,11,21 50:5,6 52:6 53:10,11 57:17 57:18 60:11 61:15,16,24,25 62:10,11 64:17 64:18 67:5,24 68:2 70:4,11 70:12 74:19,20 76:1,2,19 77:24 79:5 80:15,21,22 81:17,18 82:3 82:4,12,13,18 83:8 85:21 86:12 87:1,2 88:18 89:3,4,9 89:12,13 91:15 93:24 102:21 104:7,16 105:1 105:17 107:7 109:4,17,22,23 110:3,4,7,8,11 110:12 111:18 111:22,23 113:25 115:7,8 115:10,11,17 115:18 118:8 118:18,22 119:9 120:9,21 121:21 122:7 123:2,7 124:9 125:16 127:4 127:20 129:24 131:11 132:9 133:2 134:10 134:11,18,19 135:1,5,13,18 135:23 136:18 137:6,7,12 139:24,25 140:9 141:1,22 142:19,22,23 142:25 143:1,5 143:10 144:2 144:11,12,25 145:4,8,9,11,12 146:1,2 147:9 149:21,24,25 150:4,5,8,16 151:23 152:19 153:6,17 154:21,22 156:4 157:11 157:19,20,25 160:9,14,19,25 161:2,6 163:22 165:17 166:2 172:4,13 173:6 173:10,20 174:1,21 175:7 176:6,7,10,11 177:1,2,23,24 178:2,3 179:1 179:19,20 181:11,12,15 181:16 183:15 183:16,19,20 183:23,24 184:3,4 185:24 186:25 188:19 189:16 190:6 191:22,23 193:1,4,6,7 196:20,21,24 200:20 204:17 206:5 209:6,14 209:15 211:9

213:1 214:4 215:3,8,9,11,12 215:15,16,19 215:20,22 216:6,22 217:2 217:18 218:11 218:15 221:22 221:23 222:2,3 224:9,10 225:21 230:4 231:12 232:24 232:25 233:15 234:2,3,4,25 235:4,10,13 238:6,19,25 239:2,9,10,25 240:1,5 241:14 242:4 246:18 247:3,4 249:14 252:1,6,15 255:1 259:9,21
correction 113:10
correctional 59:6
corrections 262:13
correctly 12:4 24:4 25:2 31:15 33:25 61:17 68:6 87:25 91:10 93:19 94:16 95:7 98:11 99:12 100:10 101:9 113:23 117:19 129:21 182:9,20 183:4 183:9 185:16 187:11 202:11 207:25 211:3 211:25 213:25 214:19 235:24 259:18 260:4
correspond 169:18
corresponden... 11:19 23:19 123:11 127:24 128:4 130:24 131:1 132:25 166:18 167:11 192:16
corresponding 215:3
cost 120:10 122:3,17 123:1 124:5 191:16 191:20 194:6 224:8 244:23 245:10
costs 242:9
counsel 3:22 6:17 26:16 40:6 264:14,16
counting 125:13 192:8
court 1:1 6:19 9:3,11 17:8 18:4,13,25 20:25 22:2,23 34:13 43:13,14 264:4,23
covering 219:17
cpa 5:12 142:18
crdp 226:16
create 65:11 66:15 71:11
creating 67:17
criteria 113:2 114:2,25 115:25 116:12 116:12,17 118:4 127:15 156:15 188:11 235:19 236:3 257:8
criterion 236:6
criticism 250:7
criticized 249:25 250:3 250:11
cromwell 3:16 7:9
current 14:22 36:19,21 61:15 61:23,23 117:23 118:12 124:25 125:18 125:21 130:5 130:23 131:23 131:25 132:13 132:25 133:18 133:24 145:15 145:16 146:4 146:22 149:15 149:23 168:12 168:15 179:24 202:3 224:18 228:22 242:17 243:4 244:6 246:8 251:9,14 251:17,18,19 251:21
currently 18:25 24:13 25:13 106:1 143:13 145:20 150:3 151:19 208:5
curriculum 4:16 14:23 15:19,24
customer 60:3
cv 1:4 16:25 17:2,5,9 36:14 40:16 206:25

d

d 6:1 177:15 183:14
d.c. 3:17
d.e. 4:23 19:11

daily 235:18,22 235:25
damages 5:12 20:18,22 142:19
data 5:5 10:3 23:20 33:16,19 34:7,13 35:19 35:20,23,25 36:1,3,4,6,7 43:23 109:16 109:19,25 110:1 122:6 130:23 131:9 131:13 132:17 132:18,25 133:8,25 138:3 147:8 160:7,7 160:11,21 165:12 166:21 170:16 176:14 183:13 190:13 190:22 195:14 199:16 200:8 200:16 202:8 202:23 203:21 203:23,24 204:12 205:10 207:7,13 208:14 210:14 213:17 258:9 259:19
database 180:15
dataset 35:22 111:8 121:19 122:12 137:15 189:4
date 6:6 8:2 14:12 16:21 17:5,22 109:20 123:13,18 124:2 134:17 160:12 173:10 173:11 176:20 177:12 178:5,7 178:9,12,24 179:2 180:2,5 180:9,10,22 181:4,5,5 203:13,14 208:15 218:1 218:15 219:18 220:1,14 221:3 221:8 244:5 256:17,21 260:7 263:22
dated 142:24 144:9 172:11
dates 47:13 179:16 226:18
david 3:21 6:4 142:22
day 92:14,14 93:15,15,21,21 96:15,15,18,18 118:2 208:25 220:3,22 246:7 262:17 264:18
days 65:22 246:4
dbq 244:10
dc 16:9
dci 113:5
deal 93:20
death 39:16,21 113:9,11 115:22 117:13 127:4 196:11 197:7 198:11 198:18,23
deborah 24:11
december 110:14,18 120:8,21 122:4 122:16 123:2,6 124:4,9,16 126:1,2 137:18 138:7,16,21 142:25 144:1,9 172:11
decided 46:4 156:21 209:18
decision 41:21 41:22 42:6,7 42:20,24,25 46:6,10,16 47:7,8,12,20 49:16 52:20 53:24 54:2 55:17 56:21 97:7 123:19 124:18 125:5,8 127:23,25 131:21,25 132:4 133:1 177:3,4 180:5 180:23 181:6 200:1 203:7,9 203:9,10 204:20 205:12 207:10 208:22 209:8,11 217:22,25 218:8 228:16 229:22 230:15 230:24 232:1 243:8 244:9 245:2
decisions 35:19 43:25 45:10 47:25 49:3 53:20 136:9 138:11,24 205:8 238:5
decks 66:14
declaration 262:7
declare 262:8
decrease 135:16 244:17 244:19 246:16
decreased 245:12,14
decreasing 75:23

deem 228:5
deemed 186:20 187:1 231:19
defendant 3:13 7:11
deferral 47:5
definitely 226:3
degenerative 255:20,24 256:10,11
degrees 94:11 235:16
delineate 166:18
deliverable 63:7
deliverables 62:10,13,14 63:5 66:12
demo 60:6,16
denied 41:8 203:13 209:3
department 3:14 7:7,10 143:15 239:24
depend 223:18
dependence 212:25
dependency 197:7 219:4
dependent 112:11,16,16 186:4,10 187:2 187:23 188:2,9 188:11 189:2 189:14 190:4,4 193:20,21 216:24
dependent's 188:16
dependents 88:7 113:7 188:14,17 193:9 212:12 214:2 219:3
depending 52:15,22,24 54:6,21 55:10 55:14,24 66:4 70:25 71:4 72:12,25 73:13 92:22,23 112:13 113:2 114:5 118:24 135:6 179:1 181:25 183:9 188:17 203:16 222:9,14 223:7 226:20 231:15 236:18 237:6 244:3 247:10 248:5 257:3,9
depends 133:16 133:21 179:2 231:25 236:14 236:15,16 243:15 247:21 248:7,12
deponent 6:11
deposed 8:4 11:18,20 28:4 84:5
deposit 47:16
deposition 1:11 2:2 4:12,15 5:1 6:8,12 7:22 8:16 11:22 13:2,11 14:2 14:13 16:8,17 18:1 19:3 21:22 23:4 25:11,17,19,24 27:12,24 28:2 28:15 29:19 32:2,4 241:10 261:5,8 262:1 262:9,14 263:1 264:7,8
depositions 21:13,18 28:12
depression 76:6,12
describe 30:1 41:1 42:8 44:6 45:7 52:9 53:12 63:8 201:23 202:8 203:5 253:9 255:22 256:10
described 202:5,23 226:12
describing 67:23 146:4 252:22
description 4:11,18 15:20 17:15,16,19,23 18:5 56:4 81:9 146:3 164:12
descriptions 165:22 169:19 169:20
descriptive 95:4
designated 24:7 77:23
designed 213:14
despite 83:21
detail 14:19 70:7 215:5
detailed 42:12 43:1,7
details 21:1 168:4
deteriorates 256:3
determination 53:19 54:18 129:15
determinations 241:18,21
determine 46:11 54:7 218:5 228:19

234:2,22 250:22 251:4 251:19,22
determined 47:3 94:7 157:17 173:23 229:20 235:20
determines 54:22 245:13
determining 233:13 235:5,9
detroit 3:6
develop 45:12 45:16 47:6 53:17 57:12 257:12
developed 46:5
developing 41:14 44:24 45:21 253:19 254:7,16
development 42:3,7,23 47:2 47:4 64:15,21 70:24 74:8,15 207:4
developments 204:3
deviate 57:15
dfas 222:18
diabetes 178:22 179:8
diabetic 178:22 179:8,10,17,19
179:24
diagnoses 143:20 145:18
diagnostic 76:10 170:18 177:16 178:25
diagram 155:22 158:9 158:22 159:11 164:3
diagrams 155:22
dic 113:7,9,19 113:20,25 114:1 115:19 115:25 197:1
died 116:2,16
differ 88:15 185:13
difference 15:23,25 48:12 68:15,23 69:10 69:24 107:14 107:24 108:3 108:20,22 110:10 150:6 153:17,23 155:4,5 164:4 167:15 174:20 180:9 181:3,18 207:3
differences 46:12 182:23
different 54:11 54:13 59:5 70:24 71:7 78:12 97:19 103:4 105:13 106:23 133:13 142:5,8 155:13 155:22 156:5 176:8 178:8 179:15,16 185:6 189:25 190:8 195:20 200:14 202:19 205:5,6 207:1 209:22 213:23 217:1,10
differs 45:8
difficult 149:1
diploma 37:24
direct 13:5 47:16
directed 157:21
directly 68:6,11 115:24 131:10 196:23 199:16
director 36:22 37:11 62:7
directs 84:19
disabilities 5:10 48:1,14 48:17 78:11 86:3 88:23 90:1 170:4 173:15,17 178:21 202:2 248:9
disability 20:21 30:14,15,18,19 30:22 31:2,20 31:23 33:17 38:18 40:24 41:23 43:18 47:15 52:5 57:20 58:23 60:5,6,13,19 61:1 63:18 70:3 74:11,23 75:4,6,8 76:11 77:19 78:3,12 80:4,11 82:7 84:20 85:2 87:10,19 88:13 90:22 94:3,11 94:15,20 98:4 100:6,13 101:12 103:22 106:21 107:2 114:3,9,22 115:6 116:6 127:9 140:2,6 140:11,22 142:1,5 143:14 143:19,21,22 144:5,7 145:16 145:19,22 146:6,10,14,24 149:18 150:2 150:11,13

151:1,6,11,18
151:21 153:5
153:16 154:18
154:20 155:3,7
157:14 161:23
167:23,23
168:17,17
172:8 175:6
176:2 191:19
193:3,9 194:22
197:2 203:19
210:21 216:15
217:5 221:21
222:5,9,16,17
222:20 223:9
223:11 224:4
224:19 227:25
228:18 232:5
235:1 236:20
237:24 241:15
241:21,24
242:22,24
243:15,17
244:4,20,24
245:6,12,14
246:1 247:2,7
247:7 248:3,11
248:17 249:2
251:9,14
256:16,17,20
256:21

disabled
227:17

disabling 95:6

disagree 42:20
217:24 218:1,2
218:3,4,5

disagreeing
21:17

disagrees
217:21,24

discharge
41:16

discharged
220:22

disclosure 4:20
19:9 157:9,13

disclosures
22:3

discuss 138:7
156:13 159:12

discussed 82:15
89:7 95:13
183:21 214:3
242:21

discussion
239:7

discussions
117:21

disease 179:12
255:24 256:8

diseases 94:4,9

disorders 75:15
75:17

distinct 54:8
115:12,17
183:23

distinction
90:14 132:19
137:9 154:18
164:5,8,18
165:15 166:22
189:6 199:15
199:19,20
200:18 204:12
207:22 213:22

distinctions
213:5

distinguish
161:3

distinguishing
62:12 131:9
140:15

district 1:1,1
18:13,14 22:23
22:24 60:9

division 1:2 6:6
24:21 30:7
41:7 64:3
70:17,18 73:5
73:14 97:19

dma 60:7

doctors 78:7

document 1:5
10:7,9,10
11:22 12:11,12
12:14,25 13:14
14:7,15,17
15:4,12,17
16:11,14 17:1
18:13,21,23
22:8,14,15,19
22:22 23:8,10
23:14 28:6
29:3,9,11,15
32:18 33:5
48:22 77:13
85:11 93:4
100:3 101:4
131:3 132:10
132:19,25
141:20 142:11
147:25 151:7
152:9 156:17
159:5,16,22
161:11 162:20
165:1 166:6,12
168:6 199:23
200:5,17
203:24,25
204:15 239:20

documentation
198:3

documents 5:2
13:3 14:14
23:5 28:9,14
36:12 130:25
131:2,10,15
133:12 158:12
158:25 199:15
199:24 200:2
204:13 219:14

dog 35:6

doing 38:17
47:17 51:7

62:16 82:22 153:13 155:12 155:13,21 156:12 158:5 158:13 159:16 163:1,2 174:9 206:23 223:22 238:1 240:25 241:2 246:7 259:1
dollar 113:14 113:15 152:17 167:21 193:6 215:17
dollars 44:2 159:20 162:4
double 113:22 197:4
download 34:22 46:1
downs 142:22 143:13,19,22 143:25 144:10 145:15,18,24 151:17 160:16 160:22,23 163:21 165:13 170:17 172:11 196:1
dr 24:8
draft 205:12
drafting 80:9
draw 10:8
drawing 90:14 92:12 199:15 199:21 213:23
drives 54:11,13
dropped 110:21
dubravka 24:12
due 6:14 28:21 29:8 30:15 37:3 51:23 55:25 57:1,6 59:24 66:6,7 70:22 71:10 75:15,17 103:14 105:20 110:14 127:8 129:3 143:22 145:16 222:19 226:9 243:23 246:1
duly 6:23 264:7
dummy 56:17 56:17
duration 70:1 116:18
duties 82:23
duty 221:9

e

e 4:1,10 6:1,1 20:2 177:22 183:25 184:6
earlier 48:23 127:19 143:2 149:19 154:16 170:6 172:8 183:21 196:22 199:14 206:25 209:19 213:4 221:19 239:6 241:13 242:21 253:2
earliest 38:12 38:13
earned 235:4,6
earning 86:21 86:24 87:12 94:8,21 95:13 95:22,24 235:2
easier 9:3 13:8 15:9 193:13,16 196:2
easiest 128:8
eastern 1:1 6:7 18:14 22:24
easy 9:9
economic 5:12 142:18
edits 64:5
education 30:5
effect 181:19 215:14
effective 47:13 120:11 123:25 180:21,24 181:4 203:14 218:1,14
effort 59:9
eight 116:9,10
either 21:5 44:17,24 63:11 65:2 67:9 115:2 116:2 135:13 161:23 181:14 237:16 246:9
elapsed 230:10
elect 114:14 115:1
elements 60:4 61:6
eligible 73:25
else's 42:16
email 11:25 67:19
emails 23:18 24:25
embedded 200:7 201:19 210:5 211:4,22 212:22 214:1 214:24 239:7 239:12
emphasis 95:5
employed 24:14 25:13
employee 62:22 62:25 264:14 264:16

employees 57:2 62:17,20 63:6 67:10
ems 51:13
encapsulates 20:7
encounter 258:19
encountered 94:5
ended 57:4
ends 261:4
engaging 49:9
enhance 212:20
enhanced 212:21
enrolled 187:10
ensure 6:16 39:19 46:5 47:12 49:4 50:23 51:15,22 52:2,21 57:16 58:19 62:9 66:12,22 68:1 71:5,14,20 72:13,23 73:3 73:13,15 78:18 78:24 97:22,23 98:20,21 101:8 117:3 182:2,5 190:14 214:13 214:18,22 228:7
ensures 68:16
ensuring 50:21 63:6 72:18 78:21 97:17 206:6
entered 130:23 131:10 147:9 204:13,16
entering 203:23
entire 15:8 90:18 91:8 129:9 130:22 133:21 161:14 169:7 207:12 260:10 262:9
entirety 33:2 77:18
entities 60:11 70:15
entitled 58:23 59:17,25 114:12,25 138:17 222:25 222:25
entitlement 127:13
entries 160:23 184:12
entry 176:14 224:8,14
equal 88:8
equals 201:22
era 181:15,22
errata 262:1,14 263:1
error 133:5,15 219:25 220:25
errors 42:18
especially 49:21 55:16 99:10 226:1
esq 3:4,9,15,15 3:16,22
essentially 115:12 188:21 209:17 226:11
essentials 93:5
established 234:21
evaluate 57:12 106:3
evaluated 176:6
evaluation 50:19 60:5,14 60:19 92:25 94:3 99:20 102:23 200:16 202:4 205:2 206:8 208:23 228:23 243:9 244:25 245:21 246:10,14 247:16 248:12
evaluative 93:5
events 75:15,18
everybody 156:22 157:3 159:7,24
everybody's 91:3
everything's 53:17
evidence 41:14 45:24 46:11 104:19 131:22 180:24 181:2 186:19 218:3 220:9 228:16 228:21 229:16 231:17 237:19 243:2,16 244:9 246:5,9 248:23 251:24
exacerbated 157:18
exacerbations 94:14
exactly 79:24 111:22
exam 50:24,25 51:7,13,19 58:15 97:15,16 98:4,12 227:24 227:25 228:1,2 228:3,5,9,10,11 228:12,17,22 229:1,5,6,15,20 229:23 230:1

230:14,17,23 230:25 236:11 236:12,14,18 236:18,20,25 237:17,23 238:1 245:17 247:19,23 248:7
examination 4:3,4,5 7:17 95:19,21 96:5 96:11 237:22 237:24 240:23 243:4 244:3 246:13,24 247:13
examinations 46:14 50:14 59:8 95:4 97:3 97:13,24,25 99:2,6,12 229:4 238:4 249:5,8
examined 6:23
examiner 50:5 50:17 51:24 80:20 97:10 98:13 99:1 230:6,7
examiners 51:3 51:10 97:15 237:8
example 63:13 72:9 73:17 79:6 92:13 100:24 101:1,2 104:14,24,25 125:15 132:12 132:15 134:15 139:2 156:2 159:25 179:23 181:22 191:12 204:12 215:10 219:13 227:24
examples 92:10 111:11 134:20 185:5
exams 46:21 50:11 51:9,15 51:20,25 52:2 52:4,14,18 57:20 58:2,7 58:20,25 60:21 60:24 97:18 98:6,8,15,19,20 98:22 131:18 203:20 229:18 236:16,17,21 236:23,25 237:5,8,11,15 245:22 246:8 248:8
except 262:12
excerpt 32:19 33:1
excess 145:10
excludes 141:7
excluding 244:22
exclusively 62:3
excuse 121:24 154:16 251:2
execute 78:25
exhibit 4:11,12 4:14,16,18,20 4:24 5:4,5,7,9 5:11,13 13:18 13:19 17:9,10 18:5,6 22:2,3,4 22:15,16 29:11 33:5,6 34:14 34:15 36:15 81:9 85:5,7 89:15,16 139:13 142:12 142:13 157:9 160:6 165:25 166:23 170:1 193:25 199:13 215:6 223:24 232:20 239:15 239:17 252:25
exhibited 47:23
exhibits 17:11
exist 69:21,21
existence 51:14
existing 83:5 253:17 254:8 254:16
exists 209:12 209:24 252:15
expand 59:10 65:22 257:7
expanded 39:6 50:13 101:7
expanding 51:4
expect 20:7,15 21:9,16 256:12
expectation 124:7
expected 145:25 230:3 249:13
expenses 31:17
experience 60:8 61:7 83:14 88:2 89:3 95:19 241:14 241:20,23 242:16 244:16
experienced 55:4
experiences 242:12
experiencing 221:15
experimental 38:2
expert 4:21 5:11 12:9 18:2 19:9 21:4 24:7 53:7 57:10 142:17 143:3

144:8 153:13 157:10 172:10
expertise 57:22 83:23 84:4 208:16
explain 36:24 70:13 90:13 181:17,19 186:14 245:15
explained 182:24
explaining 149:14 205:1 208:11
explicitly 62:6
exposure 140:3 140:7,23,25 142:1,6,9 154:19,20 155:7 168:18 168:21 183:3
expressly 249:1
extensive 46:22
extensively 48:13
extent 24:21 26:4 97:25 180:13
external 64:3 167:21
extra 9:9 42:22 235:16
extremity 178:18 179:7

f

f 178:4
face 129:12 229:9
facilitated 30:23
facilitates 67:7
facilitating 98:21
facilities 58:4 59:6
facility 58:22 59:21
fact 123:1
factor 202:18 235:5
factual 117:12
fair 9:20 23:12 29:5 37:20 48:6 64:10 66:17 74:2 82:6 83:21 124:12 125:6 125:24 184:11 217:14 218:6 252:9 255:3,12
fall 63:19 115:9 187:3
falls 197:8
familiar 29:6 32:7 33:11,22 34:3 35:7,25 82:6 84:18,21 84:23 85:15,18 87:4 89:12 90:4 95:22,23 95:25 96:14 102:20 103:7 105:11 107:18 166:8 172:20 172:23 176:4 203:3 204:8 217:4,7,8,16 223:12 227:18 233:1 235:6 241:18 249:19
familiarity 29:16
far 59:22 82:15 86:23 94:7 131:19 137:22 138:1,9 139:7 221:6 236:9 238:16,17
faulty 229:1,7
feasible 134:4 137:23
feature 211:4
features 134:20 212:22 213:14 214:1,24 239:7
february 1:14 2:1 6:6 16:21 27:20,21,21 109:4 121:20 122:24 198:12 220:5,19
fed 4:22
federal 2:4 19:10 43:14 48:1 58:21 59:6,20,24 77:23 80:3,10 81:14
federally 59:16
feeds 213:11
feel 9:16,25 10:4,9,10,15 15:12 42:25 43:5 61:8 62:2 96:16,20 98:6 99:19 101:5,6 102:25 104:10 105:9 106:1 113:20 117:16 117:25 119:19 121:11 128:21 130:18 148:16 156:12,20 158:11 159:13 161:16 162:11 162:15 163:7 169:13,23 178:13 182:24 190:25 197:5 208:13 212:17 227:7 231:1 234:9,11,19 256:23 258:22 259:13

felt 159:8 229:14
fictitious 210:2
fiduciary 70:18 73:7,9,11 113:16 197:10
field 57:15 60:8 70:9 72:5 200:6
fields 190:14 197:4
figure 96:20 128:7 148:19 149:2,5 158:8 159:15 161:15 191:3 193:14 225:21
file 18:9 34:10 34:12,19 44:9 58:6 85:4 89:15 104:14 121:10 122:13 124:19,20 128:18,23 129:9,10,10,10 129:15,20 130:5,22 133:21 134:3,7 169:7 176:5 185:22 199:11 217:25 220:10 231:2 232:4,7 239:14 245:1 257:20 258:22 259:8
filed 41:8,11 42:15 58:13 131:16 134:25 219:4 220:2,4 221:13,14,17 231:6,9
files 23:20 118:11 206:24 219:14 245:16 256:23 257:3
filing 42:19 125:16 232:8 258:24
filter 160:22 170:17 176:22 183:17 184:1 184:10 192:6 195:24 196:3 199:1,7
filtered 196:1
filtering 196:7
filters 252:25
finalize 205:12
finally 77:13
financial 56:8
financially 264:13
find 15:23 58:24 72:7,9 119:21 128:18 191:1 207:21 216:8 233:6,8 233:19,20,24
finding 155:5
fine 133:25 260:23
finish 10:16
finished 9:12 15:14 19:20 20:3
first 6:23 11:17 14:22 24:24 27:18 33:3 39:16 42:15 43:3,10 45:11 45:14,15,19 46:7 47:9,17 47:22 48:7,18 49:14 68:16,23 86:18 90:24 91:7 93:4 109:16 133:25 201:8 202:14 228:10 241:4 245:18 257:17
fiscal 229:19
five 68:9 92:3,5 141:9
flag 188:19,24 189:7 190:7,19
flexible 175:17
floor 3:5
flow 154:12
focus 163:12
focused 30:13 97:2
folder 41:14
folders 43:25
followed 123:16
following 24:3 74:9 145:14 162:7
follows 6:24
footnote 144:4 144:13 146:16 150:12,12 171:2 172:7
ford 24:8
form 45:14 75:13,16,20 76:1,19,21,23 79:11,15 82:19 82:25 83:9,17 83:25 96:7 99:8,16 106:6 119:3 123:20 129:17 144:18 146:19 147:11 148:15 151:25 152:20 156:7 161:7 167:14 171:3,18,19 172:18,24 174:13,23 175:8 180:12 186:18 187:9 197:25 207:6 219:7 220:24 250:16,24

253:5 254:10 255:5 259:22 260:8
forms 75:19 189:25
formula 158:5 209:17 211:6 211:23
formulating 57:14
forth 264:7
forward 209:13
foster 67:18
found 52:22,25 131:2,7 241:9 243:17 249:21
foundation 61:9 87:6,14 94:24 95:15 100:16 119:4 119:15 120:23 122:9 134:13 135:25 136:22 136:23 144:19 146:19 147:12 150:18 151:4 151:25 152:21 153:8,19 155:10 156:8 161:8 163:24 164:22 165:19 166:4 168:1,24 171:4 172:19 172:25 174:3 174:13,23 175:9 180:13 184:15 206:18 215:25 225:24 234:21 250:17 255:6 257:19 258:2
foundational 234:18
four 93:16 96:15,19 178:19
fragment 71:18
frame 44:14 46:18 49:24 55:1 58:2 68:20 71:7 96:21 148:22 162:17 197:23 211:11 222:24 227:2,10 228:25 229:17 230:4 246:3
fraud 55:9,16 56:3,5 57:1,4
fraudulent 55:20 56:1
free 9:16,25 10:4,10,15 15:12 62:2
frequently 92:16
fresh 133:6,7 133:11 134:3
friend 56:22
front 47:18
full 90:10,14 91:2,17,20 104:21 128:12 128:25 129:18 130:10,19 152:8 162:19 163:4 168:4 169:10,16 198:21 201:13 202:19,22 226:19,25 253:15
fully 9:1 32:9 74:19 90:9 91:21 95:4 102:5 103:5 105:10 162:7 162:25 163:5 201:13 226:23
function 54:17 54:21 55:14,24
functions 55:10
funny 148:7
further 4:5 14:20 47:6 57:8 75:21 102:1 132:2 246:24 260:25 261:3 264:12
future 107:17 107:21 108:6 108:14 109:8 110:7 119:1,2 119:13 121:6 121:14,18 123:7,10,18,21 124:2,22 125:2 125:9 126:19 126:21,23 129:24 131:24 132:5 134:9,21 135:5,21 136:1 136:5,9 138:9 203:19 230:14 230:17 238:7 238:12,15 241:25 243:4,9 244:3 249:5,7

g

g 6:1 184:24
gao 74:9
general 3:22 26:15 29:5 34:19,25 35:4 102:21,22 104:15 120:3 124:7 140:20 154:23 156:3 198:1 217:11 238:24 239:25 249:17 253:20 253:22,25
generalization 104:12 119:20

generally 20:10 30:1,3 35:7 94:11 105:11 176:1,4 180:18 188:7 191:24 217:16 227:13 254:6
generate 43:25
generated 43:19 200:4
getting 45:20 45:24 51:15 58:17 97:24 98:22 102:1 114:14 115:3 123:22 146:11 189:14 190:3 192:4,18,20 253:18 258:6
give 10:11 15:7 16:13 56:4 100:24 102:10 129:18 130:6 134:7 139:2 157:8 161:17 165:22 169:12 200:24 201:13 201:15,18 207:21 221:5 230:15 236:2
given 184:10 242:16 243:5 264:9
gives 202:3
giving 41:12 162:14 194:1
go 12:13 15:11 22:1 31:9,10 34:24 36:14 40:6,9 50:7 52:14,19 59:4 77:5,7,22 79:21 84:10,13 103:5 109:12 110:16 112:8,9 112:10 116:23 120:13,14,15 122:22 126:13 131:18 132:2 136:6 137:22 137:25 138:2,9 139:12 141:5 141:12,14 148:1 149:13 151:7 154:15 158:17 159:5 160:6 161:21 165:25 168:7,7 170:16 172:6,7 175:19 188:4,6 189:16,17 191:5 193:12 193:19 194:10 194:11,13,18 195:9,13,22,24 196:13,23,25 207:1 211:18 212:8,18 219:21,25 220:7,14,16,21 220:21 221:2,6 221:10 223:20 229:18 232:10 232:12 234:24 237:3 239:6,16 251:12 261:5
god 201:2
goes 124:1 127:13 203:15 234:3
going 9:4 10:3 11:2,18 23:16 25:1 28:22 36:14 38:11 40:9 45:25 53:1 61:13 62:21 67:14 69:13 77:13 79:10 81:8 82:15 84:13 93:3 94:1 110:16 111:3 120:1 121:1,6 121:16 122:11 124:10,13,14 125:1 130:18 131:22 136:20 137:22 138:9 139:12 141:14 143:7 148:20 152:5,10 154:12 157:8 159:4 163:12 168:14 169:16 175:19 176:12 176:13 178:24 195:13 198:13 201:10,11,13 201:15,18 207:13 210:10 211:15 219:21 220:7 222:10 223:24 224:6 226:5,19 230:16 232:2 232:12,18 240:18 241:25 245:11 248:6 252:24 261:5
golkow 6:5
good 7:2,5,19 7:20 128:15 139:9 175:15 228:12 229:19 241:2,3 246:7 260:1
gotten 105:24 106:2 162:22
governing 85:24 86:12 93:10
government 8:17 18:1 21:21 22:11 34:7 85:17,21

145:4
gpo 85:11,15 89:23
grades 87:19 94:15
graham 3:9 7:14
grand 3:5
granted 72:10 77:8 112:8 184:5
granting 101:18 102:4 247:17
greater 88:9
green 141:6,8
gregory 24:11
gross 160:19 165:14 184:25 185:7,13,18
ground 58:5
group 7:4,15 7:24 19:5 66:18 67:5 69:11,23
groups 64:25 65:4,12,21 66:12 68:10
guarantee 30:5
guess 69:12 96:11 108:9,15 129:5 131:12 152:1 158:21 159:20 162:24 169:21 171:13 171:14 175:16 207:18,20 219:8 233:17 233:20,24,25 234:8 245:3 247:9
guidance 48:20 64:14,20 66:15 67:5 81:14 82:2
guide 94:3
gulf 181:14

h

h 4:10 170:19 185:2
half 26:23 139:14 241:8
halfway 70:7
hand 264:18
handful 241:12
handle 52:24 237:5,8
handled 52:2
handles 73:6
happen 58:16 118:10 121:6 124:9 126:11 129:23 137:21
happened 56:24 65:13 78:5 90:22,24 100:23 111:1,6 111:9 112:18 121:4 123:15
happening 54:6 206:21 250:9 250:14
happens 56:9 105:19 118:15 123:20 124:15 126:8 139:8 198:16
happy 149:12
harder 9:10
hasan 24:10
head 9:6 26:21 92:12 159:19 161:24
header 217:23
health 50:19 60:7 75:14,17 75:25 76:4,6,9 76:13,17,22 77:10 140:2,6 140:22 141:25 142:5 161:23 254:14
hear 8:17 35:5 124:6 125:13 163:17
heard 6:17 7:22 204:5,9 249:19
hearing 46:20 246:4
heather 24:8
heavily 48:13
held 6:9 82:24 199:16
help 27:23 128:20 160:5 169:12 170:3 170:14 176:1 205:4 206:10
helpful 85:12 163:7,11 190:13 209:25
helping 42:1 69:4
helpless 186:10 186:11,14,16 186:20 187:1
helps 260:15
henry 24:10
hereinbefore 264:7
hereof 262:14
hereunto 264:17
hey 39:13,17 42:19 50:24 63:12 64:4,5 65:13 72:14 98:21 101:17 102:2 103:3,10 104:1 108:13 117:10,18 118:3 133:19 149:6 158:19 183:5 190:18

195:10 206:4 207:3 210:9 219:20 231:2 236:4,5 245:25 246:6 258:23 258:25 259:7
high 37:24 197:22
higher 114:15 114:15 216:17
highest 202:13
highlighting 53:5
highly 63:21,25 125:3,10 126:25 243:11
hip 103:13,14
historical 194:17 203:21
history 130:24 131:1,23
hit 220:20
hold 37:21 168:14
home 10:23 58:9,14,15
honor 194:12 195:1
hosting 78:20
hour 26:23
hours 26:24 63:16 200:6
housebound 192:15,21
housed 53:17
hub 53:14
huh 9:6 20:2 27:1 111:19 141:23 173:21 180:1,4,7 197:16 211:7 211:10 224:2,5 225:8
hundred 205:21
husband 39:18
hypothetical 122:5 130:14 152:6
hypothetically 138:18

i

i.e. 81:16
identification 13:20 17:12 18:7 22:5,17 33:7 34:16 85:8 89:17 142:14 239:18
identified 12:5 18:1 73:19 84:5 119:8 150:23 177:20
identifies 155:1 157:10 166:2 168:16
identify 122:25 153:16 155:6 163:20 174:19 211:8,23 212:22
identifying 155:3 174:9 233:3
iii 4:21
illnesses 94:14 157:17
illustrate 160:5
illustrative 205:17 206:9 211:20
imagining 106:18
immediately 212:6
impact 64:6 65:16 115:16 134:21 182:8
impacts 65:14 67:1 73:14
impairment 94:8 95:12
impairments 86:24 87:12 94:21
implement 57:13 65:2,23 66:15 69:15 81:24 82:1
implementati... 37:10 63:3 64:15,22 65:2 66:11 67:18 68:1,17,24 74:8,16
implemented 79:8,23
implementing 81:1,2,12 82:3
implicate 29:14
implications 183:8
importance 96:4
important 95:11
imposed 95:6
improper 130:19
improve 61:10 61:12 230:4,8 249:2
improved 61:6 230:12 231:8
improvement 57:13 166:25 230:18 245:22 246:13 249:9
improving 75:22
inability 186:17

inadequate 229:1
inadequately 74:11,22 75:9
incarcerated 57:10,23 58:1 58:12,20,25 59:3,8,10,16,20
incident 94:5
include 60:5 61:22 67:11 194:19
included 21:23
includes 33:2 145:17
including 24:1 61:1 93:9 124:15 135:15 173:19
inclusive 60:23 73:13
income 73:10 114:2,6,7,13,18 114:19 222:1 235:2,4,7
incorporate 72:16
incorporating 72:24
incorrect 239:12
incorrectly 182:16
increase 54:1 59:7 105:15,25 106:5 107:9 120:1 121:7 122:21 125:11 135:16 136:11 179:10 181:3 188:15 234:11 234:17 245:17 251:25 252:3 258:16,17 259:14 260:1
increased 37:11 111:24 112:1 143:22 179:21 259:4 260:7
increases 110:14 188:14
increasing 124:5
indefinite 230:20,21
indefinitely 119:2,13
indemnity 113:7 197:7
indicate 121:5 122:14 123:13 124:19 125:9 132:4 185:11 187:9 190:7 230:16
indicated 32:24 123:17 124:18 124:21 125:2 149:20 184:13 184:18 229:16 230:5,19 262:13
indicates 149:23 150:1 150:13 177:14 230:8
indicating 28:19 123:22 124:2 166:17 175:5 176:16 176:19 190:8 191:11
indication 136:9 167:20 185:22 188:22 247:22
individual 29:3 43:19 92:21 120:5 172:21 173:23 178:2 180:14 202:6,9 203:22 206:16 208:2,18 209:10 215:2 247:7,20 248:6 248:8,9,10 253:21
individuals 23:24
information 29:2 34:2 35:2 35:8 39:20 41:19 43:4,6,8 44:5,15,25 45:18,21 47:18 48:15 51:10 53:23,25 72:24 75:24 85:21 103:25 104:11 128:1,16,18 131:6 132:6 147:6,25 149:9 166:10,15,21 169:1,4 170:21 171:23 176:1 180:15 204:15 204:19,21 205:4,8,14,22 206:7 207:9,11 207:17 208:14 209:2,12 210:2 210:13,16 211:1 212:6,9 213:9 214:10 229:22
informing 11:20
infringes 30:19
inherent 137:9
initial 42:12,13 219:14 230:7 249:9

initially 91:11
injuries 86:22 86:22,25 94:4 94:9 101:2 103:18 157:17 179:15
injury 88:4 177:5 219:15 248:22
input 45:18 53:25 137:17 202:8,24 203:22 206:16 206:22 209:1 212:8 213:6,17
inputs 203:25
inputted 205:14 208:15 209:4
inputting 46:17 202:5 207:8 210:2
inquiries 52:17 209:23 210:15
inquiry 44:5 63:21,22 128:10 129:14 129:17,25
ins 32:6 33:22 84:23
insert 208:1
inside 111:7
inspector 239:25 249:17
instance 136:4 189:10 242:25 243:18 247:10 247:21
instances 114:10,24 220:12 239:11
instruct 8:18
instructions 57:15
insufficient 228:6 229:21
integrated 64:24 67:16
intend 23:25
intended 127:14 186:8 235:15,25
intent 127:10
interact 30:16
interchangea... 190:17
interested 264:13
interim 74:18
intermediate 44:16
internal 63:11 64:2 65:5,5 70:16
internet 58:4
interpret 66:3 66:22 81:23 86:6,11,15 93:11,18 177:17 225:7
interpretation 101:14 102:1 106:17 133:20 155:15
interpretations 155:16
interpreted 43:11 48:9
interpreting 52:10 66:18 82:16 83:7,14 83:23 93:9 96:23 101:9 102:24
interrupt 158:1
interrupting 96:9
intervals 234:22
introducing 239:14
investigate 227:15 230:11
investigations 51:3 52:25
involve 90:21 97:12
involved 35:14 35:16,18 36:11 68:5,5,10 77:19
involvement 69:3 234:23
involving 12:2
ipt 69:11
ipts 67:17 68:2 68:4,9 69:13 69:21 70:1
iris 44:6,8,14
issue 74:18 208:20,22 240:12
issued 21:5 107:15 108:4,5 110:6 191:11
issues 62:20 69:4 75:8 103:15 207:9 218:7 240:10 240:13
issuing 82:2
items 74:10
iteration 90:21 91:7

j

j 186:1 196:19
jadine 1:13 2:2 4:13,15 5:2 6:11,22 8:1 13:12 14:4 16:18 23:6 63:12,13 109:8 158:16 167:8 238:23 262:23

263:23 264:6
january 45:5 50:3 160:18
ji 24:10 144:9 172:10
job 1:25 15:19 17:14,15,18,22 18:4 36:19,21 45:15 46:7,8 47:9,17,19 48:17 52:16,23 59:2 61:19 65:23 66:1,3,9 66:21 72:7,20 78:17,22 81:9 82:23 86:10 93:9,21 97:22 97:23 98:14,16 171:18 191:3 259:15
jobs 48:8 241:8
joey 3:15
joined 7:8
joseph 7:9
journey 45:3
judgment 47:23
july 8:3
june 40:20 75:18 121:10
junior 49:17
justice 3:14 7:8 7:10 32:8 33:2 139:13,24
167:6

k

k 186:4 192:4,7 192:18 215:11 215:13,18 216:8,15,16
keep 26:1,5 136:3 203:16 232:8 245:2 246:9,16
keeping 98:23
keller 110:15 110:15 120:16 121:9 122:25 160:8,13 178:12
kidney 170:19 171:12 172:3
kind 41:12 42:24 44:9 50:13,15 51:19 52:20 55:8 56:1,11 61:9 61:11 71:3,16 73:11 103:6 107:20 111:5 118:13 123:13 135:9 154:10 170:5 193:23 194:15,16 213:4 220:9 221:4,11 223:13 225:12
227:11 237:20
klotzbucher 3:15 4:4 7:6,7 25:25 40:8 79:10,15 82:19 82:25 83:9,17 83:25 87:5,13 94:23 95:14 96:7 99:8,16 100:15 106:6 119:3,14 120:22 122:8 134:12 135:24 136:19 144:18 146:18 147:11 148:15 150:17 151:3,24 152:20 153:7 153:18 155:9 156:7 161:7 163:23 164:21 165:18 166:3 167:25 168:23 171:3 172:18 174:2,12,22 175:8 180:12 184:14 206:17 215:24 225:23 240:24 250:16 250:24 251:6 253:5 254:10 254:18 255:5 255:14 257:18 258:1 259:22
260:8 261:2
knee 103:12,13 103:16 231:21 231:22
know 8:12 9:22 10:16,20 11:6 15:13 16:11 19:20,21 24:17 24:19,20,22 32:5,6,11 34:25 53:25 54:1 55:6,12 58:11 59:2,22 61:11 62:18,20 65:14 66:6 72:13 73:9,10 75:4 91:6 92:8 101:16 104:8 104:18 105:20 108:11 109:9 111:6,21 112:14 113:20 114:9,15 116:25 117:9 119:19 121:1,2 121:12,14 122:13 123:14 123:18,25 124:15,18,23 125:5,25 126:1 126:19 130:4 130:12,17 132:2 133:3,16 136:13 137:23

138:4,5,15,19
138:23 139:18
147:16 148:5
154:5 156:24
156:25 161:10
161:13 162:4
163:5,14
164:10 165:4
166:7,9,25
167:3 169:7
170:12 171:6
171:24 187:7
189:3,12,19
190:2,11 191:5
192:11,13
194:4 195:18
198:1,8 204:3
208:11 210:9
210:21 214:17
216:5,19
221:18 222:11
223:10,12
225:10 227:13
230:14 231:19
231:23 232:1
233:5,7,19
236:16,18
238:16,17
241:5 243:13
243:19 244:1
245:25 251:16
258:7
knowing
119:21,23
121:1 124:10
124:12 125:4
156:14 162:2
162:19 165:4
202:10
knowledge
100:8 107:6
190:6 235:8,11
242:17
knowledgeable
167:5 217:15
240:18
known 56:9
knows 56:22

l

l 181:10 186:8
186:22 192:7
192:11,16,18
197:14
labeled 14:21
181:20,22
182:9,15,20
183:4,9
lane 3:21 6:4
language 48:8
71:19,20 72:15
72:23 73:12
94:19 95:9
100:12 140:15
141:21,25
154:16,17
168:16
laptop 147:5
large 29:1
larry 24:9
latest 127:23
127:25 176:19
177:9,12 178:8
180:5 181:5
law 5:4 32:20
64:24 65:3,13
65:15,15,24
66:16 69:16
70:22 71:1,10
71:14,21,23
72:14 73:14
74:1 77:1,3,5,8
100:14,20
101:21 102:4
105:1 106:22
106:25 107:6
126:5,10,12,24
136:7 137:21
138:13 139:5,6
157:22 161:22
221:4 224:22
225:10,13
226:14 227:1
252:14 257:4
laws 43:12 48:9
52:10 66:2,3
66:19 71:1
82:16 83:15,23
100:7 189:19
226:21 227:4
252:18
lawyer 82:12
lawyers 78:7
lccb 74:12
lead 67:7,9,10
95:12 204:15
218:21 219:5
leadership 7:4
7:15,23
leading 69:3,3
learn 11:17
learned 217:10
left 18:17 85:13
89:22 178:15
178:18 179:6
201:9 202:16
legal 20:17
38:13,16
legs 10:14
lejeune 1:4 6:9
13:23 18:18
19:1,4 20:22
22:25 23:22
25:4,8,14 32:4
32:8 33:2
36:12 81:4,6
139:13,24
140:8,12,16,17
140:23 141:1
142:2,7 143:17
143:23 144:6,7
144:16 145:17
145:19,23,25
146:6,15
149:17 150:2

150:11,14,24 150:25 151:6 151:11,18 153:5,16 154:19,21 155:3,8 161:4 161:6,20 163:21 164:19 164:19 165:16 165:17 167:6 167:22 168:19 168:21 172:9 173:24 174:1 174:10 175:7 262:4
lens 133:7,7,11 134:3
letter 70:9,14 70:22,23 71:4 71:19,19,22 72:9,12,15,19 74:3,12 123:9 123:11,12,17 123:22,24 131:21 138:6 138:20,22 185:11 245:25
letters 23:18 45:23 70:24,24 71:2,11,12,12 71:14,15 81:17
level 14:19 45:3 233:15
leveled 51:22
levels 51:18 213:23
lhi 50:18 238:2
liaison 52:23
life 189:25 254:1,20
likelihood 230:17 244:11
likely 126:25 136:11,16 201:7 230:22 242:13,13,15 242:18
likes 154:9
limit 187:15 218:3 232:6
limitation 95:5 95:11,25 96:4 96:12 99:7,15
limitations 95:12 219:19 219:22
limited 24:2 55:3 91:15
line 19:22 26:16 30:20 36:3 47:13 124:1 137:15 160:11 164:2,9 164:15 165:12 183:13,25 184:13,22 191:7,13,17 198:20 214:22 223:25 224:1 225:10 263:3,6 263:9,12,15,18
lines 30:17 31:13 112:17 131:4,14 170:5 171:9 224:4
list 18:20 20:6 24:6 78:15 110:1 184:20 202:20
listed 19:16 20:12 38:12 61:18 76:19 173:25 196:20
lists 110:10
litigation 1:4 6:10 12:3 13:23 18:2,18 19:1 20:8 21:5 21:13 22:25 23:23,24 24:1 25:4,8,14 32:5 32:15 33:10,16 34:5 143:4 262:5
little 43:1 70:7 99:25 105:9 175:25 202:20
live 58:11 183:19
lived 39:1,2,3
lives 126:2
living 120:11 122:3,17 123:1 124:5 189:14 190:2 191:16 191:20 194:6 198:17 224:9 235:18,22,25 242:10 244:23 245:10
loan 30:5
located 10:21
logic 148:13
logical 163:3,5
logically 158:20
logistics 50:19 78:21
long 26:22 39:7 39:15 77:15,17 99:21 124:1 193:17 197:5 198:20 201:4 202:22 203:14 223:20
longer 44:14 232:4 246:10
longest 66:5
look 13:6 15:6 39:12 45:16 47:11 52:14,20 56:12 64:5,9 65:25 70:25 71:4,14 73:2

76:11 78:11 81:8 84:22 92:14 98:15,18 101:22 102:25 103:2,24,24 104:11,18 105:3 106:2,10 109:25 110:15 110:17,22,24 111:5,11 113:13,15 116:8,13 117:9 117:14 118:2 120:16 123:4,5 123:23 128:4,5 128:6,17,22,24 129:9,15,18,19 130:5,13,13 131:15,17,19 132:2,8,24 133:6,21 134:2 134:6,21 137:14 138:3 147:3,15 148:1 148:22 150:24 153:12 158:24 160:7,12,23 166:20 170:2 176:12,14,18 178:11 179:4 179:23 181:9 181:13 183:14 183:17,25 184:1 187:24 187:25 188:2 190:24 191:13 193:11,15,16 193:21 195:8 196:3 197:1,14 197:21,24 198:9 212:5 215:22 216:12 216:14 220:3 223:24 224:7 225:3,13,20 226:5,18,20 227:8 230:17 231:1,16,18 232:2 242:23 243:4 244:14 245:17 247:24 248:10 251:8 251:17 252:24 258:8 259:1,16

looked 35:3 59:23 74:25 116:1 146:16 149:19 150:11 154:17 203:8 232:23

looking 10:4 13:6 22:8 36:18 40:15 41:9,18 43:3 46:10 49:20,25 51:17 60:1 70:21 73:17 97:16 98:8 101:10,15,20 103:21 104:9 104:21,23 105:23 108:12 111:7 119:16 119:18 120:2,5 123:15 125:4 128:10,11 129:11 130:21 131:23,25 133:7,17,20 141:21 147:24 152:5 155:15 156:17 159:10 160:17 163:18 168:20 172:8 176:15 183:2 190:15 198:21 223:25 226:15 231:2,3,13 232:19 243:16 248:8 251:14 251:18,21

looks 37:13 178:16,20,23 179:9,20 180:20 183:18 196:10 224:7

loss 46:20 94:13 192:5,17 192:18

lot 28:22 48:16 58:1,3 73:6 211:13 226:1 258:25

lower 178:17 178:18 179:6

lunch 175:15

luxenberg 3:4 7:3

m

m 5:11 142:18

m.d. 144:9 172:10

m21 65:8,9

m21-1 28:19 29:6 48:3,19 81:16

made 45:10 107:16 110:2 133:2 157:15 238:13 241:18 241:21

maff 5:12 142:18

mail 58:17

main 3:10

maintain 61:5

maintained 60:2 62:10 66:13

maintains 69:8

majority 41:4 55:22 110:13

make 8:22,24 9:3 31:11 42:3 42:17 46:6,10

47:2,20 55:16 56:21 65:9 89:8 117:11,17 119:20 120:3,6 124:12 125:6 129:7,15 130:14,19 132:1 133:10 141:4 162:13 162:18 182:11 183:3 199:18 200:1,18 207:12 211:2 228:16 229:21 229:24 230:24 232:1 233:17 238:5 243:21 245:3 250:7
makes 9:10 67:2 117:11 152:7 201:8 209:10 213:12 234:18
making 45:21 49:20 90:12,19 104:12,21 148:8 204:6,20 208:6,22 209:8
managed 68:18
management 5:15 50:4 51:5 51:7,13 52:1 52:16 53:8,13 54:4 60:5,14 97:10 98:18 205:10 210:6 210:18,23 236:19 240:4 240:14
manages 30:7
managing 60:18
manual 29:7 48:3 64:4 65:8 65:10 74:12 76:25 77:4 81:16,17 204:4 204:10 205:5 205:16 206:5 206:13 207:20
manually 200:3 203:23 206:11 209:4 212:8
map 201:4
march 37:18 173:9 198:14 264:18
mark 13:17 17:8 18:4 22:2 22:15 33:5 34:13 85:5 89:15 142:12 220:20 239:15
marked 13:19 17:11 18:6 22:4,16 33:6 34:15 85:7 89:16 142:13 215:11 239:17
marlboro 10:22
married 189:21 190:3
maryland 10:22 16:9
master 38:6
match 15:20 214:20
materials 11:11 11:14 66:14 67:18,20 148:23,24 162:22
math 146:8 147:17 148:5,8 148:12 149:4 152:16 154:3,7 156:25 158:3,3 158:15 159:19 160:2 163:2 175:1 201:17 205:3 206:12 209:17 211:6 239:8
matter 6:9 12:9 57:10 83:22 88:23 262:10
mcilroy 24:8,17 28:5
mde 57:19
mdes 57:16
mean 33:21 64:19 68:12 71:24 78:1 84:22 94:19 95:16 96:10 101:8 103:23 105:7 108:11 112:14 114:18 116:21,25 117:5 119:21 119:23,24 128:3 129:10 130:1 141:10 147:15,16,17 148:4,14 151:14 155:11 156:11,16,20 161:10 162:24 165:20 166:7 173:17 174:4 177:16 178:10 182:25 189:10 189:18,19 190:12,15 191:1 197:17 206:20 216:1 218:25 219:18 223:3 224:17 226:8 230:25 233:16,24 238:2,16 248:8 250:13 254:11 254:19,20 256:23 257:14

257:20,22 258:3,4,20,21 259:12,24 260:11,21,21
meaning 47:11 54:18 69:20 90:16 192:4,18
means 36:25 37:1 41:7 65:6 71:18 103:3 106:10 114:18 178:8 181:24 186:15 190:11 192:21 196:12 223:4,11 225:11 228:1,9
measures 57:4
mechanism 44:25 58:19 107:20 167:14
medal 194:12 194:25
medical 45:24 46:2,11,14,17 46:23 52:4 57:20 60:6,21 60:24 61:1 95:4,19,21 96:5 97:3,12 98:4,12 99:2,6 100:8 107:6 131:7 180:23 181:1 186:19 198:3 227:24 227:25 228:1 228:15,20 229:1,4 236:1 236:11,12,20 237:11,12,14 237:19,20,23 237:24 238:4,7 238:10,12,15 238:18,21 239:3 243:2,16 243:17 244:9 246:5,8 248:23 249:22
meet 25:22 26:8,18 59:5 114:25 257:8
meeting 26:22 26:25 27:18 97:17
meets 127:15 236:6
members 70:17 78:6 79:3
memorial 39:22
memory 75:1 116:13
mental 75:14 75:17,25 76:3 76:5,13,17,22 77:10 100:9 107:7,10
mentally 76:9
mentioned 59:11 230:2
mentor 49:13 49:17
mess 210:14
messages 23:19
met 26:11,12 26:12 27:14 50:21 66:13
method 189:4
michael 3:16 7:9 24:11 26:13 27:6
michael.w.cr... 3:18
michigan 3:6
microsoft 27:16
middle 81:11
milestones 66:1
military 94:6 116:4,16 157:18,22 181:10 182:3 220:18 222:5 222:13 223:7 223:19
miller 24:10
million 44:2
mind 117:1,8 159:4 175:1 201:14
minimum 136:13 138:10
minor 186:23 186:25
minus 175:2
minute 59:22 74:25 101:6 105:6 116:1 185:9,14 197:13 201:1 212:4 219:23 222:23
minutes 22:7 141:9 201:5
misrepresent 10:2
missed 41:14
missing 141:2 162:11,16 163:7 169:11 169:24
mission 64:17
misunderstan... 9:24
modification 72:9
modifications 70:9,14 74:3
modify 70:23 72:20
modifying 179:18
moment 12:13 19:19 34:18,24 40:7 85:16 96:25 100:4

113:20 139:15 157:8 223:25 232:11,19 253:1
moments 15:7
money 54:19 56:19 88:15 167:1,12 213:11 236:5,7
monitor 68:19 92:16
monitoring 69:1
monitors 68:9
montana 39:9
month 27:19 145:16 146:10 153:23 165:8,9 165:11 198:11 198:18,19,23
monthly 5:13 88:20 145:20 145:23 146:25 151:19,23 160:14,19 192:1,3 240:3
months 49:15 109:19 111:18 120:1 121:8 229:13,23 231:22 244:5
morning 7:2,5 7:19,20
move 61:13 183:12 256:6
movements 256:7
moving 98:23
multiple 54:5 63:17 155:16 158:24 176:25 247:14,15
multiply 153:24
musculoskele... 99:11

n

n 4:1,1 6:1 187:19
nail 50:25
name 6:4 7:6 7:21,24 8:1 19:16 20:4
names 18:21
national 31:5,8 38:23,25 39:6
nature 6:15 66:7 69:14 231:19 243:3 248:7
navarro 24:11
nca 31:8
ne 3:16
necessarily 35:1
necessary 206:15
need 10:9,14 11:6 19:21 46:6 54:17,19 54:20 63:6,12 64:4,5 72:13 73:8 78:19,22 84:8 98:22 102:11,25 109:20 118:19 124:15 129:14 132:2 133:11 141:9,11 147:19 148:5 157:3,6,23 162:14 169:4,6 169:12,13 171:17 191:5 214:17 228:4 231:18 243:19 244:11 247:18 247:25
needed 47:3,4 51:10 75:24 149:13 156:24
needing 127:22 202:24 243:8
needs 64:1 66:25 167:13 186:19
negative 112:19 135:10
nephropathy 179:25
net 185:2,6,13
neurodegener... 256:1,8
neuropathies 179:7
neuropathy 178:18,22 179:9,10,17,19
never 25:3,7,11 58:16 69:17 90:24 103:2 138:11 139:3,6 190:17 195:10 195:11 220:11 221:13,17 244:18 258:20 258:25 259:1 259:12,15 260:2
new 65:11,15 66:19 71:1,11 72:11,16,24 73:25 83:4,6 84:7 101:7,18 102:5 103:4 123:22 126:24 133:21 134:1 134:25 135:17 179:11,18 189:13 191:11 217:8 228:22 229:5 230:1

231:7,10,15 232:5 247:17 253:19 254:7 254:15 257:3,4 257:4,12 258:22
newer 226:23
nicholas 24:9 24:19 25:3
nodded 26:21
nodding 9:5
nonstatic 252:10
normal 105:18 111:3 162:24 220:4 221:2,7 252:11 253:12 253:14
normally 128:8 129:16 131:20 201:20
north 1:1 3:10 3:10,16 18:14 22:24
notated 182:6
note 7:12 109:15 144:4
noted 6:18
notice 2:3 4:12 4:14,25 11:21 13:11 14:13 16:8,17 17:9 21:22 23:4 25:17 39:16 67:19
noticed 17:25
notices 80:4,11
notification 131:21
notified 138:17
notify 124:25 126:7,9,20 127:1 138:12 222:19
notifying 126:16
november 110:18 160:13 180:6
nuances 55:12 217:12 223:21
number 23:17 76:10 153:2,3 168:15 173:7 174:20 177:23 186:2,4,23 187:20 188:14 188:25 189:7 190:19 195:10 197:21 216:4 243:20
numbers 150:7 153:17 154:24 155:4 156:4 161:3 162:9 169:8,18 249:23 258:9
nutshell 42:9

o

o 4:1 6:1
oar 70:20
oath 8:6 262:16
object 8:17 26:1 79:10 172:18 174:22 225:23
objection 8:20 79:15 82:19,25 83:9,17,25 87:5,13 94:23 95:14 96:7 99:8,16 100:15 106:6 119:3,14 120:22 122:8 134:12 135:24 136:19,20,23 144:18 146:18 147:11 148:15 150:17 151:3 151:24 152:20 153:7,18 155:9 156:7 161:7 163:23 164:21 165:18 166:3 167:25 168:23 171:3 172:24 174:2,12 175:8 180:12 184:14 206:17 215:24 250:16,24 251:6 253:5 254:10,18 255:5,14 257:18 258:1 259:22 260:8
objections 4:25 23:4
obligations 50:22 51:23 97:18
obtain 33:24 127:16 198:3 229:24 256:16 257:12
obtained 49:5
occupations 86:25 94:10
occur 56:2 106:3 112:20 121:14 137:21 138:8,13,19 236:21 254:23 254:24 257:25 260:12
occurred 56:5 90:23 110:21 117:17 120:9 123:7 129:1 138:5
october 39:5 110:21
offer 167:16 262:15

offered 236:19 238:21
offering 238:7 238:15,20 239:3
offers 30:3
offhand 79:19 182:4 185:8 188:3,12 189:20
office 3:22 26:15 56:12,14 60:6,6,8,8,14 60:16 61:1 70:19 73:4 85:18 206:2 236:20 237:24 239:24 249:16
officer 42:24 77:24
officers 59:5 63:23
offices 40:1 52:24 60:9
official 49:2
offset 145:23 153:22 154:15 155:17 156:14 158:15 222:17 222:19 223:1,2 223:8
offsets 20:18,22 167:7
offsetted 222:15
ofo 60:9
oh 38:8 80:8 159:18 201:2
oig 74:9,10,13 75:2 249:21,25 250:3,6,8,11,13
okay 8:12,14 8:15 9:6,7,13 9:14,17,18,25 10:1,5,6,11,12 10:18,19 11:4 11:5,10,15,16 12:17,19,22,24 13:2,8,9,10,17 13:25 15:11,14 15:15,16 16:2 16:4,13 19:6,7 19:24 23:16 29:18,21 32:1 32:12 35:3,3 36:18 38:11 40:8,15,17 45:2 46:8 48:25 50:2 53:3 61:13 62:3,4 70:6 74:7 75:12 77:12 79:14,17 79:17 80:2 82:5 84:10 85:10 92:18 97:4,11 98:24 99:4,5 100:3 106:16 107:13 108:8,11,19,23 109:5,6,12,18 111:13,15 118:20 122:1 127:22 139:10 139:20,20,20 139:22,23 140:18 141:12 141:20 142:10 142:16 144:23 145:13 147:6 147:24 151:10 151:12,13 152:24 153:20 156:25 157:8 158:4 159:1,13 159:20 162:2 163:16 165:10 166:19 167:18 171:25 172:1,2 172:6 173:5 174:15 175:14 176:18 177:15 182:14,17 186:1 194:3 196:7,18 199:1 199:3,6,9 204:11 209:16 215:5 224:7,13 224:20 227:5 232:10,18 239:1 242:6
old 224:23,25 226:2 228:4 231:10,13
older 228:21 243:1 247:22 253:12,15
once 41:21 47:8 66:24 82:1 112:25 125:22 204:21 205:12 207:9 213:6 214:9 222:23 231:16 232:1 246:19
ones 45:24 46:16 68:10,25 76:18 79:24 91:5 115:6 224:8 226:24
ongoing 68:20 68:21 69:18,25
online 44:9 192:3
open 11:13 12:14 15:11 16:15 17:1 109:10 192:6 225:2
opening 132:10
operated 57:9
operations 60:9 97:22 260:24
old 224:23,25 226:2 228:4 231:10,13
older 228:21 243:1 247:22 253:12,15
once 41:21 47:8 66:24 82:1 112:25 125:22 204:21 205:12 207:9 213:6 214:9 222:23 231:16 232:1 246:19
ones 45:24 46:16 68:10,25 76:18 79:24 91:5 115:6 224:8 226:24
ongoing 68:20 68:21 69:18,25
online 44:9 192:3
open 11:13 12:14 15:11 16:15 17:1 109:10 192:6 225:2
opening 132:10
operated 57:9
operations 60:9 97:22

opinion 20:17 20:20 21:1 24:1 46:23 144:8 171:25 172:10 238:7 238:12,20 239:3
opinions 20:8 20:15 21:9,16 23:24 46:18
opposed 31:4 132:18 181:21
opposite 226:11
opposition 21:10
option 184:11
options 66:2,4 181:13 183:17 183:18 184:1,2 192:6 196:3
orange 183:2
orchestrated 71:8
order 81:23 178:24 179:1 202:13
organization 206:1
organizational 49:1
organizing 67:16
origin 234:9
original 126:13 191:14 219:3 247:11
outcome 264:13
outdated 228:15
outline 67:21 203:18
outlined 48:2
outs 32:6 33:22 84:24
outset 109:15
outside 124:23 167:2 205:22 222:12
overall 170:24 197:11 205:3 248:12
overarching 54:5
overcomplica... 122:23
overlap 115:15
oversaw 74:11 74:14 75:13
oversee 68:14 236:3 237:22
overseeing 64:20 65:18 67:4 68:5 97:14
oversees 64:14
oversight 69:8 236:7
overturn 42:25
overview 200:24
own 50:11 118:15 193:5 210:8,14 211:11
owned 81:6

p

p 4:22 6:1 188:18 197:15
p&t 74:11,22 75:4
p.m. 141:15,16 141:16,18 175:19,20,20 175:22 232:13 232:14,14,16 261:6,8
packet 72:11
pact 73:18 80:14,24 101:1 101:7,16 103:18,20 104:2,4,19
page 4:2,11 15:12 19:14,17 23:17 33:3,5 44:4 53:2 60:2 61:19,19,20,20 67:15 69:8 81:10 121:17 139:14 143:8 263:3,6,9,12,15 263:18
pages 5:7
paid 88:22 137:5 161:13 166:8 167:6 189:23 223:7
paper 66:2 74:15 154:2
paragraph 16:20 24:4 57:9 67:15 70:8 81:11 145:14 149:14 149:19,21 150:25 166:1 167:19 174:8
parent 187:20 187:23 188:3,8 196:13
parents 188:10
parkinson's 255:25,25 256:5
parlor 51:1
part 5:9 10:8 33:15 38:23 52:15 69:2 79:3 82:23 86:14 90:1 93:16,17 96:15

96:19 98:1 99:20 109:7 110:25 197:2 204:23 219:25 237:11,23 252:11 253:14
partially 129:3
participate 68:19 82:2
participated 80:2,6,7,9 83:7
participates 68:9
participating 69:1
particular 35:12,24 110:2 129:23 132:8 134:17 139:9 143:5 159:24 160:2 173:6 176:14 183:5 209:8 248:22 259:20 260:6
parties 6:12,17 264:15
parts 10:10 13:5 215:23
party 23:22 24:7
pass 64:24 116:5 126:10 126:12 136:7 138:13 189:12 190:1 198:10 199:9 240:21
passed 39:18 65:3 80:17 83:4 116:4 126:5,24 197:22 198:5,8 198:14
passes 112:21 112:23,25 125:20,22 127:5,7,12 138:22 198:12
past 50:12 55:20 56:6 108:4 110:2,10 110:16 121:20 135:20 137:6 220:6 238:7,12 238:15 241:20
pattern 118:25
patterns 258:5
pause 6:16 9:13
pay 190:4 191:19 196:11 222:10,11,13 222:18 223:11 224:4,19,21 225:9 226:6,10 227:3 235:19 236:6
payee 195:15 195:20
paying 127:6,7
payment 36:6,7 41:24 47:15 108:4,5,8,13,14 108:24 110:1 110:20 120:18 124:5 131:8 137:9 160:7,9 160:21,24 195:13 197:20 197:25 198:7 198:13,15,25
payments 33:17 44:1 87:20 107:15 107:16,20,21 110:2,6,11,11 118:8 119:2 120:19 131:15 135:20,21 137:4,10 145:4 170:7 235:1
pdf 29:3,10
peacetime 181:14,21,24
pen 154:2
penalty 262:7,8
pending 39:14 218:18
pension 44:1 47:24 70:18 73:7,9,11 113:14,16,19 113:21,24 114:4,4,10,12 114:13,17 115:2,13 165:5 183:19,22 184:6,7,11,13 184:19,21,22 196:10 197:10 197:18,20 221:22,24 222:1,6,11,12
people 65:8 73:4 88:21 105:19 110:13 130:2 189:22 190:3,4 195:5 201:2 206:1,10 210:12,16 213:5 222:11 224:24 253:3 253:12 256:5 258:3 259:1
people's 211:15
percent 55:23 58:22,24 59:11 59:18,25 75:21 87:21,21,22,22 87:22,22,23,23 87:23,24 88:3 88:4,10,22 104:22 106:11 112:6 113:19 116:10 118:1 170:8,10,23 171:12 173:6,8

173:8,13 177:22 189:6 191:14,15,19 192:22,22 193:15,20 200:20,22 201:8,8,9,11,14 202:15,16 212:1,10,11 222:22,24 223:6,9,15 226:13 227:3 233:22 234:20 245:1,2,6
percentage 94:6 114:3 146:24 173:7 178:1 194:20 194:23 200:10 201:6,11 208:2 208:18 209:12 211:9,24 212:24 213:10 216:7,15 218:2 222:10,15 233:4,15 246:1 248:21
percentages 88:17,19 111:9 162:5 202:12 203:19 205:3 209:18 210:21 234:16
perform 64:25
performance 62:19
performing 174:19
period 100:5 106:20 107:2 109:19 149:10 181:11 182:6 183:5 219:17 230:9,10
periodically 252:10
perjury 262:7,8
permanent 37:7,14 61:15 61:23 75:6,8
permanently 37:2
permissible 76:18
permission 12:18
permit 28:24
person 24:13 25:12 27:15 42:2 44:20 56:20,24 104:1 108:13 109:6,9 109:14 128:16 137:14 154:9 156:13 157:1 158:14,25 159:3,18 182:9 183:5 189:11 191:17 192:4 192:17,20 196:6 199:4 201:6 202:13 202:14 213:16 216:7,16 217:13 220:10 221:12 223:20 224:11 229:16 257:10
personal 147:5
personnel 57:16 62:10,13 62:16,25 63:7 70:9
perspective 98:25 121:18
persuade 78:17
pertaining 23:22 35:21 62:24 124:24
pertains 47:20 158:22 161:19 162:12
phase 4:21 19:10
phone 11:8 27:15 227:8
physical 70:10 100:8 107:6,10
physically 10:21
picked 178:20
picking 100:4
picture 152:8 161:15
piece 35:1 95:24 96:1 155:17 157:4 209:12 235:7 237:17,23
pieces 129:2 161:17 162:11 163:4 169:11 169:14
piper 1:13 2:3 4:13,15,17,19 5:3 6:11,22 7:19 8:1 12:12 12:24 13:12 14:4 16:18 23:6 26:5 34:18 35:7 40:16 79:12 84:18 85:10 96:8 120:24 136:24 142:17 173:1 175:24 232:18 241:1 247:1 255:19 261:3 262:23 263:23 264:6
place 12:11 13:4 16:14 29:10 32:18 34:12 51:16

57:6 58:10 89:14 138:15 167:10 226:22
placed 17:14
placing 16:24 18:9 22:14 85:4 142:11
plaintiff 135:22 137:5,10,11 172:21 227:15 230:3 238:8,13 239:4
plaintiffs 2:5 3:3 4:12,14,25 7:4,14,23 11:22 13:11 16:17 18:24 19:4,4,5 20:22 21:6 23:4 33:17 34:1,4 36:12 176:23 176:25 180:14
plans 63:3
platform 132:12
play 44:14 66:6 218:9 227:1 235:9
played 234:5
please 6:15 7:1 7:24 8:13 9:11 9:16 10:10 11:13 29:15 62:2 163:12
plus 192:18 201:16,21 205:21
point 9:23 10:13 33:13 49:17 97:1 98:8 122:23 187:13 206:14 209:18 232:3 234:5
policies 57:11 62:15 64:16,22 65:24
policy 36:23 62:9,13 63:1,5 63:19 64:7,11 65:14,16 66:10 66:21 67:11 69:2 78:5 80:3 80:10 81:7,17
populate 212:11
populates 208:19 214:10
populating 214:14
population 57:17,23 260:10
portion 156:14 158:9 161:5 207:7
position 4:18 37:2,11 38:12 40:19 45:3,15 45:19 52:1 98:7,9,18 241:7
positions 53:16
positive 112:19 135:10
possibility 230:3 245:11 252:5
possible 69:16 74:5,6 88:2 92:22 93:2 103:17,23,23 104:16,17 106:18 122:16 135:13,14 204:6 215:1 219:16 249:10 252:17,19,20 252:23 257:14 257:22 258:7 260:21
possibly 42:23 114:11 127:16 231:16 252:7 254:20
post 47:11 53:19 54:18 170:19 172:3
potential 55:16 56:1 75:23 117:21 122:3 124:22 133:14 220:20 248:5,9 256:24
potentially 104:4 115:16 118:9,24 119:25 121:2 125:17 128:22 135:2,6,19 218:12,22 237:10
practicable 86:23
practicably 94:7
practice 156:23 159:9 227:14
practices 57:12 249:18 252:14 252:22
preexisting 258:15 260:20
premised 252:14
preparation 36:11
prepare 25:18 25:23 27:24 28:2,15 29:19 201:17
prepared 23:14 144:8 172:10 180:16 202:21
present 3:20 109:25 212:13

presentation 67:20
presented 164:16 188:24 248:15
presenting 147:23 163:13
presently 37:21
presidential 39:22
presumably 147:12 173:25 189:1
presume 157:22
presumptive 72:12 73:19,22 101:1 103:18 104:3
prevent 55:9
previous 45:8 48:8 49:10,10 50:8 53:16 57:6 61:20 117:21 164:2 165:2 179:18 188:25 219:15 231:8 241:7 242:16
previously 24:13 25:12 60:22 76:20 86:9 242:9
primarily 81:15 94:3
primary 103:15
prior 38:25 47:6 61:6 74:1 97:2 100:25 103:20 104:4 104:19 177:6 186:20 227:14 234:10 240:7 240:11 241:23 242:12
prioritizing 66:7
priority 236:23
prison 59:20
probable 125:3 125:10
probably 29:10 69:23 98:2 111:10 117:2 193:23 201:4 223:20 225:14 225:16
procedurals 81:15
procedure 2:4 19:11 65:7 72:1
procedures 29:7 30:21 43:12 48:2,10 52:11 57:12,15 66:20 81:15,16 217:15
process 39:16 39:18,21 41:20 42:10 44:1 55:18 56:22 57:13 61:10,11 67:22 90:19 95:20,21 96:5 156:3 166:24 176:4 198:2 204:4,5,8,24 205:5,8,17 206:5,12,15 207:20 208:3 208:11 212:21 213:17 214:11 217:5,6,8,9,10 217:16 237:12 245:15 246:6 246:12,15 252:11 259:15
processed 54:3 221:1 222:20
processes 53:21 204:19 208:1
processing 41:23 47:14 53:15 54:19 55:4,5 70:10 213:16 214:19
processors 65:12
produce 5:16 14:12 35:19 240:5
produced 15:21 17:19 34:7 35:21 121:19 143:3
production 5:2 14:21 15:9 21:23 22:9 23:5,12 25:18 28:18 35:15,17
productive 43:23
products 66:25
professional 264:4,22
proficient 53:7
program 37:9 62:22 65:1 66:10 74:8 78:13 98:21,23 161:12 167:4 196:20 197:9 223:13
programmed 212:3
programs 11:14 30:5 53:9 64:16 115:17
progress 256:4
progresses 256:4

project 64:24 66:1 67:16 69:11 139:7
projected 135:21
projections 134:22
projects 69:9 69:17,20,25 70:3
promise 124:8
proper 129:17 130:11,12
properly 45:22 52:2 158:6 231:4
proportionate 94:14
proposal 245:24
propose 245:25 246:14
proposed 123:9 136:5
prove 157:24
provide 20:7,15 21:9,16 30:8 31:13 47:16 53:9 74:17 75:24 78:9,13 78:19 87:19 194:13 210:15 235:23 237:12 237:15,18 249:5
provided 17:2 21:21 22:12 71:25 72:2 77:9 115:20,23 127:20,24 135:4,22 136:17 137:10 137:11 163:20 163:22 166:21 167:7 176:10 222:1 229:23 236:12 239:4
provides 31:3 31:23 64:14
providing 64:20 67:4 156:1 238:4,11
psychology 38:2
ptsd 76:1,5,7 76:21
public 5:4 32:20 41:25 44:11 77:1,3 116:25
publication 85:17
publicly 32:11 32:23 56:8
published 91:12
pull 12:12
pulled 207:11
pulling 213:8
purpose 166:23 217:19
purposes 144:14 204:21 205:18 211:13 211:20
pursuant 2:3,4 4:22 19:10
pursued 32:15
put 57:6 58:14 77:13 100:3 108:15 119:22 126:3 128:16 136:20 141:20 148:21,25 149:4 151:8 159:19,21 162:1,6,10 169:24 171:14 194:16 197:1 200:1 201:20 202:1,12,14,15 204:19 205:9 210:13
puts 204:22
putting 56:23 169:14 210:22
puzzle 161:17 162:12 163:4

q

qtc 50:17 238:2
quadrants 179:7
qualifications 188:2
qualify 187:23 188:8,10
quality 49:4 64:5 65:17 97:19 98:1,5
quantify 92:9
question 8:21 9:15,17,19 10:17 31:14 68:13 76:16 79:13 86:8 88:15 98:3 99:1 105:10 108:17 109:3 110:9 119:6 122:23 126:14 137:1 140:18 147:23 156:2 158:2,18 159:14 166:6 168:22 169:2,5 170:3,14 180:17 182:11 190:20,23 195:14 203:8 206:3 228:25 229:3 238:22

248:15 254:12
255:10 256:18
257:1
questionnaire
228:18 243:18
244:4
questions 8:10
8:18 12:2
29:13 34:21
97:21 99:24
130:2 135:16
136:23 147:13
149:12 163:13
167:17 168:9
191:2 217:12
241:3,13
246:23 260:25
quick 113:13
113:17 117:9
118:3 167:9
190:20 192:24
193:22 197:6
211:16
quickly 192:23
197:12
quite 75:1
quote 48:20
56:15 116:10

r

r 4:22 6:1
191:21 215:7
randomly
208:19,21
range 218:6
rare 114:10
130:2 219:23
220:7,11
249:14
rate 88:22
110:17 136:3
146:23 147:16
152:2 192:11
192:22,22
193:5,10,11,13
193:17,18,21
194:12,17
195:1,6,9
197:24 212:5
212:12 216:2
216:10 233:16
233:18,23
234:3,18,19
235:21 236:2
rated 88:13,13
103:8,19
200:15 259:25
rater 44:17
49:14 54:15
214:9,9
raters 49:17
rates 115:9
192:7 193:1
194:5,19,21,22
194:24 214:7
235:12
rather 70:15
rating 5:9,16
35:23 36:1
41:20,22 42:6
42:7 43:24
45:4,20 46:4
46:13,13,15,23
46:25 47:7,8
47:12,24,25
48:14,15,17
49:3,3,15,23
51:11 52:20
53:20,23,24
54:2,17,20
76:11 78:10
84:20 85:2
86:3,22 87:4
88:3,10,19
89:7 90:1,4,6
92:15 93:6
94:2 97:7,7
98:16,17
100:14 102:19
105:12,13
116:10 120:17
124:18,25
125:1,5,8
127:23,25
131:21,25
132:4,13
134:17 136:8
138:11,24
143:19 144:15
144:16 145:17
146:16 151:11
153:16 162:3
168:17 170:11
173:6,13,23
174:11 176:20
177:3,4,9,10,12
178:1,2 179:18
179:18 180:9
180:20 181:5,7
181:20 191:18
193:3 200:10
200:21,25
202:7,9,15
203:4,6,8,9,10
203:17,21,22
204:21 205:8
205:12 206:16
206:22 207:10
207:12,15
208:2,2,5,14,18
208:21 209:1
209:11,17,24
210:4 211:8
212:23,24
213:6,6,9,15
214:13,15,21
226:13 230:7
230:15 232:5
232:23 233:2
233:12,12
235:5,7,10
237:11 238:5
240:4 241:15
241:21,24
244:8,17,20

245:1,12,14
246:16,17
247:2,7 248:4
248:18,21
249:9 250:22
251:4,20 252:1
252:6,8 256:16
256:17,20,21
257:13,16
258:14,15
259:5,5 260:6
260:19,20
ratings 53:15
61:7 86:20
88:9,17 89:2
92:21 94:6
98:14 100:21
101:11 115:6
143:21,23,24
144:5,7 145:19
146:6 149:18
150:3,11,13
151:1,6,18,21
153:6 167:23
167:24 170:16
172:9 173:24
177:1 200:19
202:6 217:5
218:11,13
227:15,19
230:20 242:24
243:8,10 247:8
252:9
reaching 47:15
read 15:13
19:19 23:17
24:4 86:18
87:9,25 93:15
94:1,16 95:7
100:10 101:14
101:19 139:23
146:3 151:17
167:7 178:4
181:10 184:24
185:2 186:1,4
186:22 187:19
188:18 195:15
262:9,11
reading 20:3
61:17 87:17
88:25 95:2
101:4 109:2
143:12 145:15
178:8
readjust 89:2
reads 203:25
ready 45:12,20
46:9,16 47:14
67:18 207:10
real 56:24
realize 77:16
realized 195:25
really 49:15
102:6 104:18
105:3 149:2
162:5 163:6
220:10 231:24
258:20 259:12
realm 63:19
91:5
reason 111:4
122:5 190:16
209:22 210:6
220:8,15,25
221:5,10,12,16
227:20,23
228:10 229:4,8
229:11,13
230:1 263:5,8
263:11,14,17
263:20
reasonable
155:6 159:2
242:17
reasons 191:8
221:18 224:1
recalculate
152:15
recall 14:17,25
16:7 22:7 23:9
27:18 59:24
60:17 75:10
79:6,18,24
85:16 92:1,10
97:5 99:6,12
100:20 117:23
189:19 199:14
202:11 225:17
253:2
recalled 23:11
recap 137:3
receipt 184:20
receive 11:21
41:17 44:15
51:10,24 52:16
54:22 58:20,25
59:8,25 70:24
110:19 111:17
113:24 114:4,4
115:2 116:5
123:1 138:18
140:11 146:5
150:2 153:15
167:12 176:5
176:25 188:15
198:6 218:24
219:10,16
222:25 223:15
233:23 235:1
243:23 256:20
257:16 260:18
received 11:19
11:24 13:14
14:7 15:18
16:25 28:17
33:17 38:1
39:19 63:13
83:6 104:2
108:11 122:17
123:12 137:14
138:6 143:24
145:18,22
146:5,14
149:16,17

151:17,21 153:5,14 155:1 155:2 160:8 167:1 174:10 175:6 191:14 191:17 222:23 223:8,18 224:18 226:21 227:2 236:23 259:4
receives 41:22 111:24 113:4 127:18 160:18 165:3 166:10 166:12 167:10 213:12 233:11 244:22 245:7
receiving 16:7 58:2 105:13 143:14,17 145:20 150:3 151:19,22 153:4 170:7 174:21 179:17 184:21 191:15 191:19 196:10 222:20 257:17
recent 71:23 79:9 120:18 132:24 133:1 177:4 225:1
recess 40:11 84:14 141:16 175:20 232:14
recipient 110:2
recognize 137:8 173:5 189:21
recognized 73:20,21 137:4 154:17 257:5
recognizing 49:8 73:24 231:7
recollection 75:7 91:23 223:23 227:5 259:20
recommendat... 74:17 79:7
recommendat... 78:9,13,16,19 79:21,22
recommending 57:14
record 6:4,18 7:25 8:20 11:4 40:10,13 58:8 58:14,16 63:8 79:16 84:11,13 84:15 109:21 121:5,24 122:2 128:12,14 136:21 141:12 141:15,18 175:19,22 232:11,13,15 241:5 261:6
264:9
records 46:2 98:12
redirect 246:23
reduce 75:19 223:4 245:24 246:1,10,14
reduced 59:17 75:21 223:17
reductions 86:21
reevaluate 242:24 243:19
reevaluated 243:14 252:10
reevaluates 245:13
reevaluation 244:11,12 249:13
reevaluations 242:22 248:1
reexamination 249:18 250:21 251:3 252:5
reexaminations 249:1,23 250:1 250:4,8,12,14
reexamine 228:4
refer 25:1 87:3 100:25 127:22 130:21 226:7 254:14
reference 194:25
referenced 116:17 153:3 171:2 215:19 221:19
references 48:4 76:3
referencing 194:2 195:8
referred 48:22 74:21 113:5
referring 19:5 56:5 90:3 91:22 97:9 117:21 122:3 127:24 130:22 130:24 132:16 140:21 141:25 143:8 145:3 146:15 151:2 155:18 177:19 177:25 221:24 221:25 247:6 253:10,17,18 253:23 254:6,8 254:15
refers 140:2 142:22 150:10 195:18
reflect 16:8 133:1
reflected 76:16 135:21 215:18

215:21
reflects 145:21 146:13 175:6 224:15
refresh 75:1 116:13
regard 18:25 34:8
regarding 25:4 25:8 243:8
regards 147:19
regional 40:1 52:23 56:12,14
register 80:4
registered 80:11 264:3,22
regulation 65:4 65:25 66:16 81:1 93:12,17 94:18 95:10 96:16,19 97:1 157:22 252:14
regulations 43:12 48:1,2,9 52:10 63:2 66:19 80:3,10 81:14 82:9,17 83:15,24 86:11 93:10 248:25 249:4
reiterate 26:1 160:1
relate 67:22 232:22
related 30:11 31:16 36:12 38:18 52:5 60:20 62:9,13 63:1,4,5,5,18 74:3 76:9 80:24,25 81:3 140:11,16,16 142:9 143:17 143:23 144:5,7 144:15 145:17 145:19,24 146:6 149:17 150:2,11,13,23 150:25 153:5 155:3,6 161:4 161:5,19 163:21 164:18 164:19 165:15 165:16 167:22 172:9 173:24 174:1,11 235:13
relates 1:5 18:21
relating 80:4 80:11 140:2,7 140:22,25 142:1,6 145:22 146:14 154:18 154:20 155:7 168:18,20 175:6
relationships 60:3 61:5 205:25
relative 264:14 264:15
release 49:15
released 49:25 75:18
relevant 202:9 209:11
relied 48:16
remain 187:1
remains 251:20
remarried 190:1
remember 11:25 15:5,16 16:10,12 56:11 56:13 75:2 99:19 161:24 185:10 188:1,4 188:6,7,11 199:18 200:7 200:12 201:12 201:12,12 202:11,18 225:15
remembering 188:3
remission 243:22
remote 3:1 6:8 6:15 9:9
remotely 1:15 6:13,14
removal 170:19 172:3
remove 176:22 252:25
removing 112:16
renal 144:10,16 146:17 150:15 150:22 151:12 151:22 170:18 171:1,1,12 172:3,12,17 173:19
render 24:1
rendering 47:24
renders 81:14
repeat 86:8 119:5 121:22 238:22 239:1 250:2,10 251:2 254:12 255:10 255:17 256:18
rephrase 9:17 149:18 172:15 181:18 189:9 245:5 254:2
report 5:11 78:15 142:18 143:5 144:8,14 147:13 149:14 152:19 154:25

160:17 166:1 171:2 172:7,10 172:23 173:22 240:7
reported 1:23
reporter 6:19 9:4,11 17:8 18:4 22:2 34:13 264:4,4 264:22,23
reporting 6:15
reports 21:5,10 143:3 156:1
represent 15:18 33:1 94:7 186:8 250:6
representative 40:20 41:4,6 45:4 46:19 47:10 207:8,14 214:12
represented 154:8
representing 3:3,13 7:11
request 12:18 14:25 15:8 16:11,12 21:21 24:24 25:17 28:23 32:10 39:15 74:13,14 198:18 231:14 243:3 244:18 246:4 247:25
requested 11:23 14:14 28:21 33:16,19 34:2,4 198:22 244:17
requesting 133:22,23 231:4 244:14 247:24 248:6
requests 14:21 15:4 21:22 22:8,12 23:12 28:18 44:12 74:10 125:12
require 100:6 101:11 106:21 107:3
required 14:12 46:22 95:5 119:12 209:25 210:19 235:16 243:14
requirement 117:22,24
requires 101:22 235:17
rerate 106:10
rerating 101:17 102:3 103:3 104:25 105:4 106:5,12,20,23 106:24 107:3 107:10
reratings 100:7 105:7 106:22
research 99:25 226:1
researched 33:12 55:2
researching 33:23
reserved 261:10
residence 10:24
residual 94:10
residuals 243:20,24
resolved 68:22 74:19
respondent 14:12
respondents 75:23
response 22:12 28:18 74:18 102:11
responses 4:24 23:3 171:20
responsibilities 37:6,12 86:10 241:7
responsibility 65:1,19 86:14 91:6
responsible 41:23 45:24 46:17 51:17 60:18 68:17 73:8 78:20 234:15 237:14 238:9,17
rest 15:3 119:12 122:6 150:14 170:23
restate 136:25 137:1 140:18
restriction 55:13
restrictions 56:10,25
result 76:25 94:5 127:11 215:18 252:6,7
resulted 75:16 100:21
resulting 86:24 94:4,9
results 5:17 182:23 240:5
resume 207:1
resumed 110:22
retire 224:21
retired 224:3 224:18 225:9 226:6
retiree's 222:5
retirement 222:10,11,13 222:18 223:7 223:11,19

226:9,16 227:3
retrieved 109:17
retroactive 129:4,6 196:11 197:15,17,19 197:25 198:4 218:21,24 219:2,5,6,11,12 219:17
return 214:21
revert 253:15
review 10:9 15:8 28:24 42:24 49:19 63:15,20 64:4 64:6 70:20 98:1,1,11,19 99:22 134:3 139:16 192:24 250:19
reviewed 15:3 21:4,12 23:13 28:14,19 32:24 34:25 35:24 43:11,18,24 48:8 64:1 98:5 143:3,5
reviewers 98:5
reviewing 14:17,25 15:16 16:10 23:11 25:16 41:13 42:11,16 44:24 47:1 49:2,16 52:9 57:11 66:18 80:3,7 97:25 99:2,6 104:14 227:19
reviews 49:3 73:5 97:20 211:14
revision 75:13
revisit 227:14 227:24 228:1 230:10
richard 24:8
right 23:3 49:12 51:16 67:6 68:3 69:13,18 76:20 77:12,25 79:19 84:12 91:1,13 93:22,25 100:22 102:15 102:18,22 103:22 107:4 109:5,6 111:14 113:13,20 115:14 119:10 120:25 123:8 125:17 126:6 127:5,21 135:14 136:1 139:5,12 143:6 143:11 148:3,8 149:22 150:9 158:1,4,5 163:19 164:20 170:4,19 172:3 172:5 173:11 175:14,18,24 178:15,17 179:6 182:4 185:8 188:12 202:11,17,25 211:5,10,17 214:5,8 216:23 217:3,17 224:4 225:22 228:14 230:5 253:22
role 36:25 37:1 37:5,7,14,17 38:16,21,22 40:23 41:2,3 41:24 45:8,9 45:11 49:10 50:2,9,16 51:25 52:8 53:2 58:1 61:14,15,20,23 61:24 62:7 77:22 78:5,6 80:20,23 81:20 82:23 86:5,10 97:2,5,12,21 98:9 99:5 107:23 233:3,8 233:13 234:5 235:9
roles 37:10,21 61:7 62:3 82:14 93:9
ros 60:9
rotations 41:25
routed 51:21
routine 230:14 230:17 243:4 244:2 249:5,7
routing 44:5,15
row 153:1 176:15 178:2 179:24
rpr 1:23
ruck 24:8
rule 19:10 54:23
rules 2:4
running 60:2
runs 139:14
russo 24:12
rusty 102:17
rvsr 44:23 56:16
rvsrs 51:11
ryan 24:9,22 25:7 28:5

s

s 4:1,10 6:1 191:7 192:7 224:1,15
safe 177:5 188:13 241:17
salisbury 3:10

sat 92:9 101:24 103:2 258:20 258:25 259:1
satisfactory 50:25
save 262:12
saw 28:7 117:6 161:11 162:2
saying 9:5,6 31:12 43:23 44:10 48:8 88:12 92:23 93:20 98:11,17 101:5,12 102:1 102:2,13,16 103:1,9 104:1 104:4,6,10,20 105:2,5,5,16,22 106:19,23,24 107:19 108:13 108:16,23 109:5,7 110:25 111:6,16 124:6 129:22 130:1,3 130:4,16 131:20 132:3 132:22,24 133:17,18 135:7 136:16 137:20,23,25 138:8,14 139:1 139:3 142:9 144:14,21 146:9 148:6 149:6,21 151:5 151:10,12 153:21,22 155:19 156:23 158:25 159:13 159:18 161:15 162:8 163:1,3 164:1,7 167:4 167:9,13 170:22 171:10 171:13,15,16 171:17 179:15 179:17 182:8 185:17 189:22 199:23 200:13 205:3 206:11 207:5,19,23 208:7,10 212:2 212:7,14 213:2 213:19,25 219:1,9,19 220:13 225:12 226:14,18 228:8 229:7,10 229:11,17 233:18,21 238:23 243:6 244:25 251:13 253:11 255:11 258:7 259:6,19 260:11
says 13:11 14:11 16:16 18:17 19:8 23:3,18 24:6 43:11 47:23 49:1 53:7 64:13 67:15,25 68:8 69:8 74:22 75:12 81:11 85:20 86:2,19 87:18 89:1,25 94:2 100:5 106:20 107:1 109:16 132:1 140:5 142:17 143:13 144:3,6 145:6 145:10,15 149:6,7 150:6 150:20,25 160:10,15,20 161:1 166:6 170:11 172:8 172:14 183:14 196:15 226:6,8 233:23 239:23 240:2,6
scar 178:21
scenario 152:10 224:15 226:12 258:19
scenarios 221:20 253:23
schedule 5:9 47:25 48:13,16 51:9 76:11 78:10 84:20 85:2 86:3,20 87:4,11,18 89:2,7,12 90:1 90:4,6 91:11 92:20 94:2,21 95:3 98:16 102:19 110:6 177:20 228:22 229:14,25 230:13 232:23 233:2 244:2 247:19,23
scheduled 110:11 134:17 230:16 249:8 249:22
schedules 252:4
scheduling 229:18
school 37:24 187:3,8,10
science 38:2
scope 169:16 198:21
scott 110:15 178:11
screen 12:13,17 12:25 13:3,5 17:1,16 18:10 22:20 34:23 36:16 85:6 89:20 142:16 149:4 232:19

239:16
script 67:20
scroll 14:20 19:21,23 23:16 38:11 45:2 50:2 53:1 61:18 67:14 86:1 93:3 139:19 143:7 144:24 145:13 147:3 152:24 160:16 176:23 183:13 215:22 216:3 224:10 225:3
scrolling 13:25 14:10 19:13 40:18 57:8 81:10 148:20 170:2
search 113:17
second 4:20 9:13 16:20 19:9 41:9,13 43:2,4,9 44:4 46:8 47:2,19 49:2,19 64:13 81:10 121:25 150:24 211:14 224:8 257:16
secondary 103:8,14,19 104:2,5
secretary 63:23 78:4,9,15 79:1 84:19,25 86:19 89:1,6
section 14:21 15:9,13 19:20 20:3 24:24 33:3,4 81:6 84:7,19 86:2 86:19 93:4,24 102:7,9,13,17 102:24 139:21 140:1,5 143:8 143:13 161:22 232:21,22
see 12:24 13:10 13:22 14:1,15 14:22 16:16,21 17:15 18:10,12 18:20 19:14,16 19:25 22:19,22 23:2 32:19 34:23 36:15 37:23 39:13 40:19 41:18 42:22 43:10,17 44:5 45:16 47:22 53:4,4 57:9 60:2 62:5 64:6 67:1 70:2 70:8 71:17 74:7 79:9 85:11 86:2 89:19,22,25 93:5 103:25 104:19 105:4 106:3 110:23 119:19 120:18 123:4 127:23 132:12 133:11 134:16 138:16 139:8,14 140:1 140:4,5 142:17 142:21,24 143:8 144:25 145:2,6 147:17 152:11 153:1,2 154:1 156:11 156:18 157:13 159:5,7 160:8 160:13,17 161:11 162:8 163:25 164:1 164:10,23 165:13 167:7 168:3 169:6,18 170:17,21 171:11,17 172:2 173:12 173:14 174:15 175:1,25 176:16 177:11 177:13 179:1 180:2 184:18 184:24 191:7 191:21 192:7 194:18 195:4 195:15,16,17 195:23 196:2,4 196:9,14,19 197:14,24 199:2 208:25 209:1 211:17 212:6 216:6 219:23 224:3 224:21 225:2 227:1 239:20 245:17 246:6 259:16
seeing 16:12 23:9 152:2 164:10 165:1 178:10 185:8
seem 199:9 250:7
seemed 199:11
seems 108:18 111:1 158:20 159:2,18,19 163:3 186:9
seen 23:8 35:10 35:12 185:9 189:10,13,23 190:2 244:18 259:25 260:11 260:13,22
send 39:15 45:23 58:15 72:8 245:24
senior 40:19
sense 8:22 34:20 67:2

117:11 152:8 202:1 211:2 213:12 234:18
sensitivity 75:22
sent 13:7 34:11 34:11,14 39:20
sentence 150:15 151:17
sentences 86:18
separate 114:21,23 115:20 132:10 134:1 140:21 149:4 164:1,9 164:15 166:6 167:10,11 189:24 195:2,4 195:6 204:19 210:3,7,15,20 213:3 231:10
separately 193:2
september 37:14 50:3
series 178:13
serve 54:21 55:14
service 30:4 36:22 40:2,20 41:3,5 45:4 46:19 47:10 59:5 60:3 63:23 65:6 70:16 75:15,18 94:6 101:23 102:3 103:8,10 103:12,16,19 104:5 106:1 113:17 114:20 116:3,6,16 127:9,11 157:15,16,19 157:23,24 170:12 173:14 173:16 178:15 178:17 179:5 179:11 181:10 181:23,25 182:1,4,6,10 183:6,11 197:3 202:1 203:12 205:25 207:7 207:14 214:12 220:17,22 231:16,20,20 247:13 256:25 257:6,7,21 258:6,24
services 30:6 50:20 239:4
serving 49:2
set 119:1,11 127:15 156:15 233:16 234:9 234:12,19 264:7,17
setting 233:8 233:18
several 94:15 258:17
severe 243:24 246:11 251:16
severity 94:15
shahnasarian 24:11
share 12:17,18 85:5 157:9 232:18 239:16
shared 28:7
sharing 13:5 16:5 18:10 36:9 89:14,19 96:25 107:13 139:11 142:11 142:16 154:14 199:13 234:25 239:21 240:20 254:3
sheet 203:3,4 203:11,15,18 208:25 209:2 214:14,15,20 262:1,14 263:1
shift 98:25
shop 39:25
short 149:9 241:3,12
shortly 17:8
show 13:3 108:8 110:1 111:8 153:10 164:2 166:22 166:23 168:11 169:14 180:20 183:4 184:22 186:19 191:13 244:10 247:12 247:18
showed 123:24 135:7 161:22 181:2 200:11 200:12 206:8 220:10
showing 10:7 33:13 166:20 231:17 245:22
shown 158:12 163:19
shows 164:24 168:12 170:7 172:5 173:7 174:15,16 178:12 180:24 192:3 196:9 199:8 224:17 243:2 244:4 248:24 251:24
side 178:16
sign 262:17
signature 49:2 49:19 211:14 261:10 263:22 264:21

significant 99:7 99:15 249:23
silent 244:9
similar 31:16 189:5
similarly 227:16,17
simpler 108:17
simply 110:9
single 35:1 75:16 91:18 162:20
sir 162:12 240:9,12,16
sit 101:13 105:6 128:6 148:18 241:9
site 50:22 194:15
sitting 97:16 117:23 124:7 225:18 260:5
situation 130:14
situations 242:23
six 69:8 229:13 229:23 231:22 244:5
size 29:8
skew 210:14
skipping 150:14
slate 42:14
slide 66:13
small 34:23 122:12 161:25 168:3 169:14 234:17
smc 115:9 191:22,25 192:11,18,19 193:1,5,21 194:5,19,21 195:1,6 214:7 214:8 215:7,13 215:18 235:12
smck 192:23
smcl 192:12
smcs 192:14 214:9
sme 12:1,5,7 57:10
snap 117:9
snapshot 128:14 129:1 129:18 130:6 161:25 168:4 214:16
snapshots 169:15
social 38:6
solely 31:7
solicitation 67:19
somebody 23:13 88:9 189:1 206:15 216:9 256:11
someone's 102:2 133:6
something's 133:4
soon 69:16 111:12
sorry 12:20 19:25 31:9 73:21 96:8 112:9 121:24 149:16,18 154:15 156:9 168:17 179:25 189:8 201:17 239:1 245:5
sort 49:7
sound 47:23 158:20
sounds 164:16 214:23 241:8
source 167:21 190:24 191:6
south 38:3,7 39:1,2,3,8
southern 1:2
space 81:1
speak 11:23 27:22 28:1 39:8
speaking 6:16 9:13 20:10
spec 224:21 225:10
special 5:13 88:20 186:19 192:1,3 225:12 240:2
specialist 38:14 38:17 45:20 46:4,13,13,15 46:24,25 48:16 49:4,23 51:12 53:16 54:17,20 92:15 97:8,22 98:15,17 181:7 206:22 207:15 208:14 213:15 214:22
specialists 51:11
specific 10:8 30:11 48:7 86:21 100:24 104:14 172:21 180:14 217:12 217:15 248:2 253:21
specifically 8:18 31:22 141:25
specified 94:11
spend 200:6 210:1 236:4
spent 41:4

sphere 76:13
split 236:25 237:4
spoke 86:9
spoken 28:12 93:8
spot 100:1
spousal 190:4 196:5
spouse 39:17 39:19 113:1 115:21 116:14 116:15 127:14 127:16 186:13 188:19,22 189:2,11 190:9 190:11 196:12 196:12 198:2,4 198:10,17
spouses 189:12 189:14,24,25
spreadsheet 35:10,13,15,17 109:10 128:2 128:11,19,21 130:13 136:21 160:6 161:14 168:5 170:15 172:20 173:25 176:13 215:6 215:23 216:13 216:18
staff 36:23 63:1 63:20 64:7 65:2,7,14 66:10,22 67:12 69:2,4 70:19 78:6 81:7,12 91:6 117:14 234:7 240:17 240:18
stage 42:13 49:8 177:10
stamp 85:11,20 89:23
stand 29:24 57:19
standard 126:8 194:23
standards 62:19
standing 50:16 69:9,11,12,17 69:20,24 70:2 126:11
stands 12:7 53:22 75:5 172:24
start 84:7 128:25 143:12 171:22,22 201:7 227:11 227:12
started 37:13 37:17 49:18 50:11 116:18 178:16 227:11 234:13
starting 39:5 50:10 81:10 178:20 179:10 179:12
starts 207:6 256:3
state 7:24 59:6 59:20 125:18 125:21 133:18 133:24 189:20 243:5 244:7 251:9,14,17,19 251:22 255:3
stated 14:13 89:11 134:24 143:2 152:19 254:25
statement 75:14,16 120:4 121:13 135:8 141:5
states 1:1 4:20 4:24 18:13 19:9 21:6 22:23 23:3 59:4 81:13 95:23 157:11 157:14 189:20
static 249:13
stating 187:12
status 39:11,13 55:19 74:10,13 112:11 124:25 130:23 170:19 172:3
statuses 53:10
statute 33:9,12 33:14 86:6,15
statutes 32:23 82:7 83:4,6 86:11 93:10
statutory 192:15,21
stay 125:3,7,10 125:14 126:17 230:22 244:22
stayed 120:17 138:22 195:10
staying 247:16
stays 110:13 194:12 244:21
stenographic 6:18
stenographic... 264:10
step 174:18 233:25
steps 130:12
stewards 229:20
stone 119:1,11
stop 16:5 36:9 39:25 44:23 57:1 89:14 96:25 107:13 139:10 142:10 154:14 199:13 232:9 234:24

240:20 254:3
stopped 145:14
stops 112:24
store 141:5
strategic 60:10
street 3:10,16
strength 253:15
stretch 10:14
strides 204:6 208:6
strike 258:18 259:11
striking 259:21
strong 205:24
studied 249:17 258:4 259:19 260:2
stuff 73:6 102:23 210:18
subject 12:9 57:10 83:22
submit 44:19 47:4 78:14 187:9 198:3,18 229:12 245:23 246:5
submitted 15:2 45:13,22 76:1 76:23 181:1
submitting 47:6 123:21
subpart 93:4
subpoena 5:1 14:1,13 23:5 25:17
subset 138:4
substance 26:2
substantive 26:6
subtract 201:10
subtracting 153:14
successful 68:1 68:16 106:4 218:10,20
suffered 219:15
suffering 220:6
sufficient 228:16,19
suggest 120:19
suicidal 62:20
summarize 38:20 50:7 57:21 191:24
supersedes 177:6
supervisor 11:20
supervisors 27:23
supervisory 55:19 80:20
supplemented 109:21,25
support 21:9 34:4 48:3 49:1 64:16 75:14,17 77:2 78:24 240:17
supported 74:11,22 75:9
supposed 52:22 149:3 156:18 159:16,22,23 171:15
sure 8:24 9:21 9:22 11:24 15:10 31:11 34:24 42:3,17 45:21 47:2 49:20 84:22 90:19 93:17 100:23 113:19 117:12,17 118:1 128:7 139:17 147:18 148:8,9,18 154:4,11 162:13,20 180:25 182:11 183:3 189:6 197:22 198:7 198:20 199:25 203:7 206:4 217:12 222:8 233:17 236:22 237:2 245:3 257:1
surgery 231:22 231:23
surviving 113:1 116:14 198:2
survivor 73:12
survivor's 115:21
survivors 114:1 115:20
swear 6:20
sworn 6:14,23 264:8
syed 24:10
system 5:15 44:5,6 45:18 45:25 51:5,6 51:12,13,20 52:14,19 53:8 53:13,21 54:3 54:12,14,25 55:11 60:19 66:5 91:3,18 108:7,12 110:5 137:18 200:1,2 200:4,17 202:2 203:25 204:13 204:14,16,22 205:9,10,15 207:12,16,17 208:15 209:5 209:13,20 210:2,6,13,18 210:23,25 211:4,16,18,22

212:3,10
213:11 214:1
224:25 225:14
225:20 239:8
240:4,15,17
systems 39:12
54:5,8 55:8,15
55:25 66:7
90:18 91:8
97:23 201:20
213:3

t

t 4:1,1,10
tab 35:23
109:16 110:1
111:8 128:1
131:3,3 160:11
170:16 183:13
184:12 195:13
196:1 223:25
table 144:2,24
144:25 145:1
146:1,23 147:2
147:19 148:1
149:6,7 152:25
153:12 163:19
170:2 212:5
216:2 233:23
234:3
tables 143:21
147:17 152:2
214:3 215:19
tackaberry
24:9,19 25:4
28:5
take 10:18
19:19 34:24
50:13 72:25
99:24 105:6
130:10 131:13
138:15 148:14
191:4 201:5
221:12 228:20
229:9
taken 2:3 21:13
40:11 55:19
84:14 141:16
154:25 175:20
198:15 232:14
262:10 264:10
takes 246:12
talk 9:9 39:3
56:3 62:1
102:22 112:14
135:12 156:9
211:13 256:6
259:13
talked 25:22
118:5 196:22
199:14 200:9
206:24
talking 9:12
60:21 76:14
88:21 97:5
117:2 131:5,14
131:15,24
134:2 159:9
170:6 173:3
179:6 199:25
200:5,14
204:18,25
205:2,6,16
208:24 213:4
223:14 224:16
247:9,17
253:20,21,24
254:1
talks 96:12
116:7,19 117:5
117:20
targeted 91:16
91:22
tasker 63:9,20
64:2,8
taskers 63:2,10
63:17
tasks 64:11
81:20
taught 128:23
129:13
taylor 1:23
6:20 264:3,22
tbi 49:24
teach 206:10,12
teaching
205:23
team 50:16
66:11 68:18
98:2 190:14,22
teammates
27:23
teams 27:16
64:24 67:16
technical 23:20
53:7
technician
43:24
techniques
57:14
telephone 40:3
tell 9:16,24
12:7 26:11
33:21 59:14
60:13 74:21
91:4 96:3
99:14 101:25
107:14 117:18
120:3 167:14
178:7 207:3
216:10 217:22
225:19 226:22
232:9 236:4
250:11 260:5
telling 25:21
117:12 133:6,8
139:6 208:7
tells 166:13
167:11
temporary
69:14 231:19
243:3 248:24
ten 87:19 92:7
219:16,21,21

220:1,6,8
221:1,10,14
tenure 90:7
term 105:7
106:8,12,24
123:13 202:19
229:6
terminated
112:25
terminates
125:23 127:6
termination
41:16
terms 106:10
test 14:1
testified 6:24
176:3 232:21
241:5 247:1
254:5
testify 9:1 14:1
155:25 172:22
242:3 247:5
testifying 134:6
253:2
testimony 4:21
19:9 21:17
167:16 248:16
248:20 252:13
254:22 264:9
testing 51:12
tests 20:18
text 23:19
149:13
thank 8:15
12:10,21 14:6
16:24 17:7
21:20 25:16
26:17 27:17
28:25 35:5
40:4 69:6
98:24 113:10
139:10 141:13
175:14 181:9
183:12 184:24
191:21 199:12
209:9 240:21
240:25 241:4
246:19 260:25
261:2
thing 41:11
43:7 47:1
57:25 59:1
66:6 126:8
128:8 129:12
130:7 134:25
138:16 151:2
151:14 155:21
158:13 159:1
165:14,21
170:12 178:13
183:1 205:20
206:9 213:2,19
221:4 234:15
236:22 237:15
things 9:3
39:22 46:20
55:6 62:15,16
62:21 63:10
69:19 105:20
107:25 111:20
118:5,7 128:22
142:8 154:10
162:16 163:8
169:24 178:14
192:2 202:19
205:6,20
206:23 207:2,2
209:14,22
210:3,8 211:12
214:12,21,23
231:24 247:15
253:16 254:5
254:25 255:4
255:12,13
think 9:15,23
34:10 36:17
42:14 43:7
47:1 49:7
57:22 61:4
66:5 76:15
77:12 88:11
90:9 101:8
108:17 110:23
116:24 117:1
118:13 122:20
122:22 124:11
126:4 128:6
129:5 131:4
134:15,23
135:13 152:14
159:11 163:10
167:16 171:19
179:14 182:4
182:12,25
187:16 190:20
195:14,21
196:2,22 197:8
197:11 200:9
200:12,17
201:14 204:18
205:6 212:6,18
212:20 213:2,3
213:19,21
216:5,7,11
220:23,24
227:21 247:20
251:7 253:25
254:12 257:9
260:23
thinking 117:3
255:9
third 43:22
48:25
thought 166:19
166:22 253:24
258:21 259:12
three 26:19,20
27:22 51:21
65:23 93:17
116:12 192:8
194:18
throwing 103:6
thursday 1:14
16:21

time 6:7,7 10:11,18 27:18 28:23 30:14,15 34:11 39:7 41:4,9,10 44:13 46:1,18 47:2 49:24 50:13,15,17,18 51:4,8 55:1,2 55:23 56:10 58:2,7 60:15 68:20 71:7,11 72:6 75:10 76:7 77:18 79:24 80:21 88:5 89:1,1 90:20,23 91:19 91:19 92:1 93:16,17 94:13 96:21 99:19,25 100:19,23 101:11,16,20 102:6,9,14 105:9,19 106:20 115:1 117:15 119:9 123:19,19 128:5,6,24 129:18,19 148:17,22,24 149:10 152:15 154:3 162:1,17 162:22 171:8 175:15 176:13 177:1,8 183:6 189:15,22,24 190:5,19 197:23 198:7 198:25 200:20 201:4 204:2,9 205:24 207:13 209:4 210:1,19 211:10 219:17 220:3,14 222:24 223:5 225:17 226:17 227:1,10 229:17 230:4,9 230:10 232:13 240:21 241:9 241:10 245:19 246:3,20 247:14,19 256:13 261:1

times 26:17,19 26:20 79:20 91:24 177:12 222:16 232:7

tinnitus 46:20

title 5:7 13:10 16:16 23:2 36:19,21 81:13 85:23,24 89:25 93:5 176:15 177:16 178:4 181:10 186:1,7 186:22 187:19 188:18 240:2

titled 75:16

today 6:11,19 7:23 8:7 9:1 10:13,20 11:4 11:11,15,18 13:3 16:3 19:3 29:13 32:2 34:1 77:17 84:5 93:14 96:21 108:25 109:4,6,20 117:23 121:20 122:7,24 124:8 124:16 152:15 202:22 219:20 220:4 225:18 240:8,11 252:15 253:3 260:5

today's 6:6 16:21 25:10,19 25:23 28:2,15 29:19 261:4

together 42:4 65:7 73:15 108:15 148:21 148:25 151:9 162:1,6,10 169:25 171:14

told 129:7 190:23 204:14

tomorrow 108:21,23,25

took 201:5

tooken 198:15

tool 44:9 210:20

top 18:12 32:19 37:23 69:7 85:10,13 89:22 92:12 103:22 120:17 161:24 176:15,24 183:13 239:23

topics 9:22 20:11,14 23:23 23:25 64:10 102:20

tosic 24:12

total 75:6,8 83:13 87:23 130:24 131:1 145:24 146:24 153:14 155:1 164:5,11,17 166:11 168:11 168:20 173:14 173:16 174:20 201:18 214:25 215:14

totaling 44:2

totally 207:20 217:7,9

towards 204:7

tracks 218:18

train 67:9 210:12

trainees 49:4
training 65:11 65:11 66:25 129:8
transcript 262:9
transcripts 21:12
transferred 160:24
transition 113:12
transitioned 38:24
transpired 123:15
trauma 75:22
traumatic 75:15,18
travel 78:22
travels 208:23
treated 144:15
treatment 243:23 244:5
treatments 243:21
trends 258:5 259:2,14,16 260:2
trial 20:18
tricia 5:11 24:12 142:18
trigger 231:7
triggered 231:4
triggering 221:11
true 21:8,15 25:6,11 36:4,7 174:7 214:6,24 250:21 251:3 257:11 262:11 264:8
truly 241:10
truthfully 8:10 9:1
try 9:11,17 59:7,9 66:3 122:1 147:22 224:25 229:19 252:25
trying 9:24 33:24 34:22 42:3,21 43:4 46:11 47:20 59:2 65:25 68:13 69:15 72:7,8 78:13 96:17 108:9,15 116:22,24 117:1,3 119:21 121:23 122:2 132:6,7 148:6 148:7,21,25 149:1,2,5,8 151:8 155:14 156:18 157:1 158:8,10,21 159:15,21 161:25 162:1,6 162:10,13 163:6,10,11 167:8 179:22 183:10 199:18 200:18 201:14 205:17 207:18 207:21 219:22 220:23 228:25 229:21 233:17 233:20,24,25
tune 44:15
turn 51:20
turner 3:15 7:9
tutorial 202:22 211:12
tutorials 210:15
tweak 71:16
tweaking 72:23
two 9:13 15:19 15:24 19:22 26:24 53:16 59:9 65:20,22 78:14 86:18 103:4 107:25 110:10,16 113:18 115:12 115:17 140:21 142:8 146:7 150:7 151:14 153:17 155:4 167:15 183:21 183:22 189:14 189:22,23,23 189:24 190:2,3 190:4 200:19 201:2 204:18 205:5,6 209:21 210:3 216:14 224:4,7 241:8 245:22 246:12 253:23
ty 3:22 24:9 26:13,14,16 27:8
type 35:8 55:13 56:4 69:2 113:9 125:1 135:11 164:24 166:24 167:14 170:18 177:16 181:11 182:2 183:15 184:1 184:13 185:12 185:15 191:22 191:25 195:15 196:20 197:9 215:7,13,18 221:3 244:2
types 94:4 112:15 113:11 183:22
typically 111:17 194:5 249:8 253:4 254:25 255:11

typo 38:8

u

u.s. 3:14 7:7 22:3 81:23 85:21 143:15 239:23
uh 9:6 20:2 27:1 111:19 141:23 173:21 180:1,4,7 197:16 211:7 211:10 224:2,5 225:8
unable 15:23 28:22 92:17 235:21 256:6,6
unaware 240:9
uncommon 162:21 242:1,2 242:6 247:2 248:3,17,19,21 253:14 256:15 256:19,22 257:2,9 258:18 259:11,17,21 260:6,13,18
uncontrollable 256:7
under 8:6 20:4 32:15 33:10 37:6 53:2 62:6 63:23 86:19 103:18 115:9 152:25 170:18 179:23 187:22 191:21 196:3 196:19 197:8 217:23 221:2,7 223:16 224:1 224:14 262:7,8 262:16
underlying 193:3,9 194:22
underneath 18:21
understand 8:6 9:20 12:4 18:23 25:2 29:1,8 31:15 32:14,22 33:10 33:15,25 61:10 82:11 84:4,25 85:23 91:10 93:19 94:19 98:10 102:16 104:10,13 105:7 106:4 107:24 108:3 110:9 111:5,16 113:23 115:15 117:19 118:18 129:21 131:13 132:21 140:10 140:14,20 141:4,7,24 142:4 144:13 146:7,15 147:9 148:12 149:8 151:1,13,20 153:13 154:8 156:25 159:14 160:1 163:10 163:16,17 165:7 170:25 171:9 174:8 176:1 177:15 177:25 179:14 179:16,22 186:7 191:10 194:1 199:20 207:25 211:3 211:25 212:4 221:25 223:22 225:6,9 226:7 234:1 235:12 235:24 245:4 250:13 255:19 259:18 260:4
understanding 20:11 32:1,3 36:1 57:3,5 66:23,24 67:3 79:2 87:10 89:5 92:19 93:23 95:10 100:13 106:14 107:14 134:5 151:16 152:18 162:25 184:6 185:16 187:11 194:2 212:15 213:25 255:23 262:15
understood 29:16,17 69:6 98:10 149:20 195:12 198:24 199:12 209:9 232:22 240:20
unfilter 196:2 224:6
unhelpful 29:10
unique 57:22 59:1
united 1:1 4:20 4:24 18:13 19:8 21:6 22:23 23:3 59:4 81:13 157:11 189:20
university 38:3 38:7
unmanageable 29:9
unmistakable 133:5,15
unquote 48:20
unrelated 27:11
unselect 224:20
unsure 190:23 206:12 237:9
unwarranted 250:1,4,12

update 30:21 65:10 71:2 72:14 74:10,13 90:11,15 91:8 91:21 92:23,24
updated 71:13 72:15 90:9,17 91:1,18,21,24 92:11,20
updates 89:10 90:8,12,15,20 91:4,14,15,23 92:3,5,7,8,14 92:16
updating 62:18 71:12,19
upload 199:24 203:24 204:23 205:11
uploaded 131:11 132:19 199:16 200:3 204:13
uploading 204:14
upper 10:22
usa 4:17,19
usc 84:19 232:21
usdoj.gov 3:17 3:18
use 13:4 48:14 51:6 54:7 55:7 55:11 67:18 82:2 177:13 190:19 192:5 192:17,18 202:6 204:11 211:21 222:12 222:13 260:12 260:22
used 187:16,17 190:17 209:14 217:7 224:24 229:6 237:3
using 16:2 48:13 143:20 189:6 190:18 216:18
usually 46:18 56:9 63:21,22 63:25 64:25 65:20,24 71:16 72:4,18,22 73:8 76:9 78:7 78:10 105:21 105:25 112:23 112:24 114:5 115:3 126:8 130:7 135:8 177:11 181:4 185:12 186:10 186:18 192:21 198:9,11,13,25 208:21 220:1,3 220:13,14 221:4 222:14 222:21 224:24 228:3,9,10,12 228:15 230:5 243:16 246:11 246:12 253:12 253:16 256:2,5
utilize 210:25
utilizing 47:25 95:22

v

va 24:14 25:13 31:2,23 38:18 38:24 39:1,5 40:24 43:12,24 45:14 47:24 48:2,9,13,16 50:10 52:10,23 53:9,14,24 57:1 58:23 60:4,10 66:19 75:13,19,21 76:11 77:15,19 78:10 79:1,4 84:20 85:1 87:4 89:6 107:23 123:12 128:24 129:8 129:25 131:18 145:6,7 146:10 146:22 147:6 157:17,21 166:11,17,21 167:2,11,13 177:20 187:9 201:4,16,19,25 203:8 204:6 205:3,22 206:12 207:6 208:13 209:17 210:21,24,25 211:6 212:5 217:6,8 219:25 222:1,4,12,16 222:17,20 223:8,17 227:24 229:5 230:10 232:23 234:13 235:7 235:19 237:5,7 239:8 241:14 242:21,23 245:12 246:15 248:25 249:4 249:16 250:1,4 250:12 251:25 252:4 257:7
va's 30:22 39:24 47:25 50:21 52:2 78:4 249:17 252:11
va.gov 194:15
vacancy 37:4
vaf 75:13
vaguely 32:9 249:19
valid 216:19

validate 152:17 160:2,3 162:23 171:8
validating 154:23 162:7
validation 163:2
value 88:8 129:12 155:1,2 174:9 193:6 211:23 212:23 213:1 214:2,6 215:15,21 216:4 229:9 233:9 238:20 239:3
values 152:17 160:3 193:8,22 194:4
vanslyke 3:4 4:3,5 7:2,3,12 7:18,21 12:21 12:23 13:17,21 17:13 18:8 22:6,18 26:10 33:8 34:17 40:6,14 80:1 82:21 83:3,12 83:20 84:3,10 84:17 85:9 87:8,16 89:18 95:1,17 96:24 99:13 100:2,18 106:13 119:7 120:7 121:15 122:19 134:14 136:15 137:2 141:19 142:15 144:22 147:1 147:21 149:11 150:21 151:15 152:13,23 153:11,25 155:24 157:7 163:9 164:13 165:6,24 166:16 168:13 169:3 171:21 173:4 174:6,17 175:3,13,23 181:8 184:23 207:24 216:20 226:4 232:10 232:17 239:19 246:22,25 250:20,25 251:11 253:6 254:13,21 255:7,16 257:23 258:11 260:3,16,24
variable 215:2
variables 88:7 88:16 176:9 212:25 214:2 215:1
variance 145:21 146:7 146:13
variants 150:7
various 30:5 143:20
vba 5:5,6 20:21 24:14 25:14 26:15 29:21,24 30:1,3,23 31:3 31:7,13,24 33:16 34:2,4,7 34:13 36:20 50:12 51:4 52:5 54:22 55:21 66:8 70:19 74:10,22 77:19 78:9,16 82:7,17 83:5 83:15,24 86:12 87:10 90:7 91:25 93:10 94:19 100:19 107:14,19,23 122:25 140:11 143:16,18,20 144:6 150:13 160:7 170:16 172:8 176:2 217:5 218:17 227:14 235:1,5 236:12,17,21 237:12,14,19 237:22 238:1,4 238:9,14,17,23
vba's 5:13 38:23 110:5 143:20 240:2
vbms 53:18,23 54:14 55:1 130:23 131:2 131:10,11 132:9,11,11,18 132:19 199:16 199:17,24 204:22 211:4 213:3,8,13 239:8
vbmsa 53:18 54:19 55:7 213:7 214:10
vbmsr 53:22 54:16 204:20 213:5
vendors 50:20 51:21 237:1,17 237:18,25 238:2,3
verbally 9:5
verified 207:14
verify 148:5,11 152:3 192:14 192:23 205:4 205:21 206:4 208:4,8,13 209:6,24
veritext 6:5
versed 106:12

version 17:5,22 117:24
versus 69:11 90:15 107:15 108:5 115:13 131:10 161:4 163:21 165:16 167:23 180:9 183:22 199:16 200:17 204:13 226:23
ves 50:19 238:2
veteran 39:2,8 40:20 41:3,5,7 41:11,12,17,18 41:21 42:18,22 43:14 45:22 46:19 47:10,15 47:16,19 51:12 57:10 58:12,13 58:21 59:5,15 75:20 88:3 105:12 107:15 107:16 108:4 111:24 112:21 112:23,25 113:4,24 114:1 114:11,13 115:24 116:15 118:11 123:18 124:22,25 125:11,15,20 125:22 126:1,7 126:9,16,17,20 127:1,5,7,10,12 127:14,17 129:10 131:16 132:9 134:24 135:5 136:4,13 136:17 138:6 138:12,17,20 157:24 158:14 165:3 166:10 166:12 167:10 179:5 186:9 188:14 189:21 189:23 190:3 191:13 196:24 197:22 198:5,8 198:9,12,14 200:15,19 201:9 203:12 203:15 205:1 205:25 206:24 207:7,13 208:23 212:1,9 213:12 214:12 216:6 217:21 217:22,24 218:4,10,23 219:13 220:17 221:9,20 223:5 227:16 230:23 231:1,4,6,9,21 231:21 232:1,4 232:6,8 233:11 233:22 234:25 235:17,20,21 236:6 237:6 242:25 243:7 243:10,13,18 243:22,22 244:12,13,16 244:18,22,25 245:7,13,16,18 245:21,24 246:3,4,7 247:11,21,24 248:6 256:16 256:20 257:16 258:14 259:4,6 260:18
veteran's 39:15 39:19 45:1 47:21 52:20 92:24 100:6,13 107:2 114:6 116:15 123:24 124:19 127:4,8 128:13 129:23 132:13 133:18 134:9 187:23 195:21 198:16 202:1 203:1,6 203:18 209:2 213:10 217:17 222:9,14 243:5 244:6,20,24
veterans 3:22 5:7,15 29:25 30:4,7,8 31:3,6 31:7,14,23 39:10,25 42:1 43:13 44:9,18 44:19,21 45:4 45:10,13,17,23 50:4,19,24 51:5,15 52:3 52:13,17 53:8 53:12 54:4 56:17 57:17,23 58:1,6,17,20,25 59:3,8,10 60:7 60:8 63:22 64:16 70:10,23 72:13 73:8,9 76:8 80:20 85:24 92:21 97:10,18,24 98:22 100:21 105:25 106:21 111:17 114:20 114:24 116:2 123:11 130:7 131:18,25 140:10 143:9 143:15,16 145:3 155:23 157:15 158:13 166:25 176:5 185:22 186:13 195:22 202:3 202:12 203:7 203:20 205:10 210:5,17,22 216:14 222:21

223:14 235:16 237:13,21 238:18,21 239:24 240:3 240:14 241:24 244:8 247:2 248:3,17 249:22 258:5 258:13
vh 238:2
vha 45:25 50:11 51:9,18 55:5 60:8,16 74:15,17 236:13,15,21 236:22,23 237:5,17,18 238:2
vha's 237:5
video 6:8
videoconfere... 1:11
videographer 3:21 6:3,5 7:1 12:19 40:9,12 84:12,15 141:14,17 175:18,21 232:12,15 261:4
videotaped 1:11 2:2
vietnam 181:15 181:22 182:10 183:1,2
view 179:24
visibility 213:24
visible 63:22 64:1 176:23
visits 50:22
visualize 200:13
vitae 4:16 14:23 15:19,24
voicemails 23:20
voluminous 48:19
vote 71:5
vso 205:23 208:1
vsos 52:17
vsr 44:23 47:5 53:19,19 54:18 56:16
vsrs 51:11
vulnerable 57:17

w

w 3:16
wait 9:11 39:7
walk 193:23
wallace 3:9,9 7:13,13
wallacegraha... 3:11
wang 24:10 144:9 172:10
want 31:11 43:6 55:7 77:22 84:8 102:12 112:14 114:8 117:17 118:2 129:14 131:14 132:23 133:10,16 135:11,11 148:3 149:8 158:23 159:5 163:14 169:15 169:22,23 175:16 182:2,5 182:10 183:3 205:7 208:4,8 208:13 210:12 216:8 227:7,11 228:7 230:25 231:2 239:6 241:4 244:6 245:3 246:19 259:13 260:12 260:22
wanted 129:22 206:4
wants 232:8 258:22
war 181:14,23 181:25 182:1 183:6
wardens 59:7
warrant 252:3
warranting 246:9
warrants 258:23
wartime 114:20
washington 3:17
water 1:4 6:9 10:15 13:23 18:18 19:1 22:25 32:4 140:3,7,23,25 142:2,6 154:19 154:21 155:8 168:18,21 262:4
way 8:25 42:8 51:14 52:21 58:24 71:24 72:7 78:17 103:5 109:8 119:22 123:3 128:12,19 129:24 130:17 132:7 155:6,12 155:20 156:5 158:20 176:9 196:2 206:10 207:21 210:15 214:18 216:5 216:12,18

217:1 219:8 229:2 233:21 256:3
ways 214:17 218:23
we've 55:3,4 72:15 82:15 214:3
website 32:10
weigh 157:4,6 158:8,10,23
weighing 158:3 158:4 159:6,23
weird 214:14
weitz 3:4 7:3
weitzlux.com 3:7
welcome 13:6 40:5 241:11 246:21
welfare 62:23
went 32:10 90:17 111:2 159:12 190:18 191:18 200:11 206:25
west 3:5
whereof 264:17
whichever 115:3
white 74:15
whitney 3:9 7:13
wide 218:6
william 3:15 7:7
william.v.kot... 3:17
wish 193:12
withhold 185:11
withholding 185:12,15,18 185:23,24
witness 6:14,20 7:5 26:8,21 79:14,17 83:2 83:11,19 84:2 87:7,15 94:25 95:16 96:10 99:10,18 100:17 106:8 119:5,16 120:25 122:10 136:1,25 144:20 146:21 147:14 148:16 150:19 151:5 152:1,22 153:9 153:20 155:11 156:11 161:9 163:25 164:23 165:20 166:5 168:2,25 171:5 173:2 174:4,14 174:25 175:11 180:19 184:17 206:20 216:1 225:25 240:22 250:18 251:7 254:11,19 255:15 257:20 258:3 259:24 260:9 264:6,9 264:17
word 103:6 106:15 190:7 190:17 222:12 260:13,22
words 151:14 161:21 169:9
work 28:21 29:21 30:10,12 38:6,17 42:17 49:20 58:18 59:2 62:16 63:1,4 64:25 65:4,6,12,21 66:11,17,25 67:5 68:9 69:4 69:11,23,23 73:15 80:23,25 81:3 102:8,13 105:8 117:10 171:7 211:15 237:25
worked 41:6 74:12 97:23
workgroup 67:7,9,10
workgroups 67:8
working 24:14 25:13 40:24 44:18 55:5 56:20 60:3,17 77:19 78:8 90:8 91:24 94:13 95:19 117:5,6 234:13 241:5
works 24:20 26:15 73:11 245:15
worse 105:20 105:22,24 106:2 243:21 253:13,16,18 254:6 255:1,4 255:12,13 259:7
worsen 253:4 256:13
worsened 252:2
worsening 251:25 254:8 254:15,17 256:4
write 41:18 66:1
written 21:21 22:12

wrong 133:4,19
228:2,5,9
229:15
wwallace 3:11

x

x 4:10 103:10
103:11 109:6,6
236:5 246:1
xyz 72:14

y

y 236:5 246:1
yeah 10:24
19:23 20:2
30:13 34:22
37:1,8 38:22
44:8 50:10
53:14 54:10
56:7 57:5
59:13,15 70:15
73:24 76:5
77:4 79:18
91:16 96:10
99:18 101:13
104:8,17
105:18 111:4
113:8 115:21
116:20,22
117:25 119:16
121:3 126:23
128:3 131:12
133:3 138:1
141:11,11
146:9,21 147:4
147:14 148:16
152:1 154:5
156:11 161:9
164:23 165:20
170:22 171:5
173:14,21
174:4,25
178:15 180:19
182:19,22
186:16 187:14
187:16 188:1
190:10 195:3
196:9 199:10
201:15,25
206:20 208:20
213:21 219:8
224:17,23
225:5,16,25
230:13 238:9
250:18 254:11
254:11,19
257:14 259:6
259:24
year 59:9 70:11
122:7 126:5,6
126:10,12
136:8 137:19
137:21,24
138:12,15
139:8,9 165:3
165:7 170:9
194:14 216:22
216:25 220:18
220:20,21
228:3,12,12,13
228:19,21
229:12 234:11
234:17
yearly 234:11
years 65:23
78:14 83:14
100:5 107:2
110:17 116:9
116:10 194:18
219:16,21,22
220:1,7,8
221:1,11,14
249:9
yesterday
108:21,22
yields 233:12
young 24:9
yount 5:11
24:12 142:18
154:25 166:1
174:9,19 175:5

z

z 236:5
zip 237:7
zoom 1:15 2:3
7:15 10:20
11:7,15 27:15
85:12 175:25

Exhibit 782

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF NORTH CAROLINA
SOUTHERN DIVISION

IN RE:	)	
CAMP LEJEUNE WATER LITIGATION	)	Case No. 7:23-CV-897
	)	
This Document Relates to:	)	
ALL CASES	)	
	)	
_____	)	

VIDEOCONFERENCE VIDEOTAPED DEPOSITION
OF
RICHARD RUCK, M.D.
Wednesday, February 11, 2026
(Taken remotely)

Reported by: Christine A. Taylor, RPR

Job No.: 7873194

On February 11, 2026, commencing at 8:54 a.m., the videotaped videoconference deposition of RICHARD RUCK, M.D., was taken via Zoom pursuant to notice and pursuant to the Federal Rules of Civil Procedure, on behalf of the Plaintiffs.

* * *

REMOTE APPEARANCES:

Representing the Plaintiffs:

WALLACE & GRAHAM, P.A.
BY: WHITNEY WALLACE WILLIAMS, ESQ.
525 North Main Street
Salisbury, North Carolina 28144
704.633.5244
wwallace@wallacegraham.com

Representing the Defendant:

U.S. DEPARTMENT OF JUSTICE
BY: GIOVANNI ANTONUCCI, ESQ.
JOEY TURNER, ESQ.
950 Pennsylvania Avenue NW
Washington, DC 20530
202.514.2000
giovanni.antonucci@usdoj.gov
joseph.b.turner@usdoj.gov

Also Present:

Weston Borkenhagen, Defense Health Agency

C O N T E N T S

	PAGE
EXAMINATION BY MS. WALLACE	7
EXAMINATION BY MR. ANTONUCCI	181

* * *

E X H I B I T S

EXHIBIT	DESCRIPTION	PAGE
Exhibit 1	The United States' Second Disclosure of Expert Testimony for Phase III Pursuant to Fed.R.Civ.P.26(a)(2) and D.E. 630	38
Exhibit 2	Plaintiffs' Notice of Deposition of Dr. Richard Ruck	38
Exhibit 3	United States' Responses and Objections to Plaintiffs' Notice of Deposition and Subpoena for the Production of Documents to Richard Ruck	38
Exhibit 4	2/5/2026 Letter	38
Exhibit 5	TRICARE 2026 Costs and Fees RUCK_USA_1 - 4	38
Exhibit 6	Curriculum Vitae - Richard C. Ruck, M.D., RUCK_USA_5 - 8	38

Exhibit 7	The Hill Article	141
Exhibit 7A	The Hill Article	141
Exhibit 8	1/17/2025 Letter from Marilyn Strickland	146
Exhibit 10	2/15/2019 Federal Register	93
Exhibit 12	Fiscal Year 2025 Agency Financial Report, U.S. Department of Defense	109
Exhibit 13	Expert Report of Dr. Henry Miller - December 15, 2025	134

(Exhibits 9 and 11 were not used.)

REPORTER'S NOTE: All quotations from exhibits are reflected in the manner in which they were read into the record and do not necessarily indicate an exact quote from the document.

P R O C E E D I N G S

* * *

THE VIDEOGRAPHER: My name is David Lane, the videographer for Golkow, a Veritext division. Today's date is February 11, 2026. The time is 8:54 a.m. Eastern Time.

This remote video deposition is being held In Re: Camp Lejeune Water Litigation.

Our deponent today is Dr. Richard Ruck.

All parties are appearing remotely and have agreed to the witness being sworn in remotely.

Due to the nature of remote reporting, please pause briefly before speaking to ensure you are heard completely.

Counsel, please introduce yourselves and state whom you represent.

MS. WALLACE: Good morning. Whitney Wallace for the plaintiff leadership group in the Camp Lejeune litigation.

MR. ANTONUCCI: Good morning. Giovanni Antonucci for the United States.

I'm joined by my colleague, Joseph Turner. Weston Bokrenhagen from the Defense Health Agency is also here.

THE VIDEOGRAPHER: The court reporter is Christine Taylor and she will now swear in our witness.

* * *

RICHARD RUCK, M.D.,

having first been duly sworn, was examined and testified as follows:

* * *

THE VIDEOGRAPHER: Please begin.

EXAMINATION

BY MS. WALLACE:

Q. Good morning, Dr. Ruck.

A. Good morning.

Q. Thank you for being here today. Before we get started on your questioning, I'm going to be taking your deposition today. I am required by a case management order number 3 to state this sentence on the record and affirm as -- and both parties have to affirm as counsel that they agree with this statement. I've done this in every deposition. And I will read it.

"The parties agree that no

communication with the deponent by any means, including but not limited to text messaging will occur out of the view of the other parties while the deposition is proceeding on the record."

And I affirm that for the record.

MR. ANTONUCCI: As do I.

BY MS. WALLACE:

Q. Okay.

A. And there's nobody else in the room with me here. So --

Q. Okay. Great. That's one of my questions. You're ahead of me.

Will you please state your full name for the record.

A. Dr. Richard Ruck.

Q. What's your date of birth, sir?

A. My date of birth is [redacted], 1969.

Q. Who is your current employer?

A. My current employer is the Defense Health Agency.

Q. And your current job title, please.

A. My job title is -- I am the chief medical officer for the TRICARE health plan.

Q. Do you understand that all of your testimony is under oath today?

A. I do.
Q. Is there any reason that you're not capable of testifying fully and truthfully today?
A. No. I can do that.
Q. Where are you physically located?
A. I am here at -- in my office at the Gatehouse facility here in Falls Church, Virginia.
Q. That's your typical office that you work out of, Doctor?
A. Yes.
Q. Is that a TRICARE type facility or does the -- does the building heed on more than that?
A. This is a -- the Defense Health Agency has a few rented facilities across the country. This is one of those. The headquarters building is right across the beltway for me. They own that building. But work in a building that we rent two floors of, and I think other folks rent other parts of it.
Q. So you're joined there in your work environment with other DHA administrators?
A. Yes. We -- it's -- most of the TRICARE health plan is in this building. They

have personnel. But there are DHA entities here as well.

Q. Such -- what are examples of those?

A. There is a -- part of a -- the contracting group. I'm not sure exactly which part that they work with. The -- let's see. Upstairs used to have some individuals that worked with medical affairs, but I think most of those have been relocated over to the headquarters building. Those are some examples.

Q. And when you said "contractor," do you mean such as TriWest or --

A. I think most of the -- of the TRICARE contractors are actually out in Aurora. I think these contractors manage other contracts like the pharmaceutical contract and other things. But I don't really interact all that much with them. They're on the other side of the building.

Q. And you stated earlier before I asked, but just to confirm, there's no one in the room with you this morning?

A. No, there is not. And the door is closed.

Q. I'm sorry, excuse me.

A. I said and the door is closed, so --

Q. Great. Are you in your actual office?

A. Yes.

Q. Do you have any materials in front of you this morning?

MR. ANTONUCCI: Objection.

THE WITNESS: Go ahead.

MR. ANTONUCCI: You can go ahead and answer, Dr. Ruck.

MS. WALLACE: Yeah. So he's going to make -- just so you understand, he will make a number of objections today. And unless he says "do not answer that question," he's stating his objection for the record, and then your answer follows right behind it.

THE WITNESS: Okay. So the only piece of information I have in front of me is what I provided you already in case you asked me questions about the cost and fee schedule.

BY MS. WALLACE:

Q. Thank you. And I'll ask you today if you don't mind, unless I direct your attention to an exhibit or a document, don't refer to any

materials you may have with you today or on your computer.

A. Understood.

Q. Are you familiar with the Camp Lejeune litigation?

A. Yes, I -- I am familiar with it as far as what I, you know, heard in the newspapers and, you know, et cetera. And -- and then, you know, what we've discussed. So...

Q. Have you ever read the Camp Lejeune Justice Act?

A. No. Actually, I don't think I actually have read that.

Q. Do you know anyone who has -- who has served at Camp Lejeune personally?

A. Are you referring to the period in question or more recently?

Q. Let's say the period in question.

A. No, I do not.

Q. Do you know of anyone personally who has filed a claim for the Camp Lejeune litigation?

A. No. I am not familiar with anyone who has filed a claim.

Q. Do you understand that you have been

named as an expert witness in the Camp Lejeune litigation?

A. Yes, I -- I understand that, yes.

Q. Do you know on what topic you've been asked to testify about as an expert?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. I'm here to answer any questions that you may have regarding the TRICARE, you know, the medical benefit established by Congress, managed by TRICARE.

BY MS. WALLACE:

Q. Are you -- do you know anything about the bellwether plaintiff cases in the Camp Lejeune litigation that are pending before the Eastern District of North Carolina?

A. Other than the name, no.

Q. Which name?

A. The bellwether.

Q. Okay. You just know that there are bellwether plaintiffs in the Camp Lejeune litigation before the Court currently?

A. That's correct. That's all I know about it.

Q. Were you asked to prepare an expert

report for your testimony in Camp Lejeune?

MR. ANTONUCCI: Objection.

THE WITNESS: Just the -- what I was submitted, you know, as part of -- I guess the deposition or the RD.

BY MS. WALLACE:

Q. Do you mean --

A. Disclosure.

Q. Yes. The designations is the word maybe you're looking for?

A. Yeah. What we submitted to the Court regarding my CV and my -- and the history that I submitted.

Q. Have you ever prepared an expert report before, to be distinguished from designations?

A. No, I have not prepared a report other than -- like I said, other than the type that you already have.

Q. Before the Camp Lejeune litigation, did you ever prepare designations in another matter?

A. Yes, I have.

Q. What matter was that, please?

A. I have prepared -- those designations

for a case in Hawaii, a case -- these are all TRICARE related cases, and they are very similar to the one today, to answer questions about TRICARE. One in South Carolina and one in South Dakota.

Q. And that has all been since you became the CMO of TRICARE in approximately September of 2022?

A. That is correct.

Q. Can you tell me what this -- if you know, what the subject matter of those cases was, for the Hawaii one, for example?

MR. ANTONUCCI: Objection.

THE WITNESS: The Hawaii was the Red Hill case.

BY MS. WALLACE:

Q. Is that a jet fuel spill?

A. What?

Q. A jet fuel spill?

A. That is correct.

Q. And the government was the defendant in that case?

A. Yes.

Q. Did you prepare a declaration in that case?

A. I prepared, you know, essentially the same documents as we prepared this -- for this case.

Q. Did you testify before the Court in that case?

A. Yes, I did.

Q. And where was that testimony?

A. That was at the courthouse in Honolulu.

Q. Did you have -- were there any other TRICARE representatives that testified in that case?

A. I was told that there were. I didn't actually meet any of them. We were all brought in separately.

Q. Are you familiar with a TRICARE employee, Carmen DeLeon?

A. Only the name.

Q. Are you aware if she testified in that case?

A. I would have to review, you know, the documents to find out if she was listed as a witness. If you tell me that she was, then I will believe you.

Q. Okay. If I told you that she was a

witness in that case, you believe me?

A. Yes.

Q. Do you have any knowledge as to whether Carmen DeLeon is still an employee of TRICARE?

A. Actually, I do not.

Q. Can you tell me what you know about the South Carolina case that you testified -- or that you prepared designations for?

A. I believe that was an individual case of -- that was brought, you know, the government was the defendant and they were the plaintiff. I would have to review my -- that was a few years ago, I would have to review my records to find out exactly what the subject matter was for that.

Same with the South Carolina case. Again, I know that that one was also individual, but -- and I'm not sure how much I can disclose about protected health information anyway.

Q. And so I believe you just testified this -- both the South Carolina and the South Dakota cases were on behalf of a single plaintiff?

A. That is my recollection, yes.

Q. Do you know who the defendant was in

that case -- both cases?

A. The South Carolina case, I would have to review. The name is not coming to mind. I do know the last name of the individual who was in the South Dakota case. Am I allowed to share that since that is an individual?

Q. Yes. It would have been public if it was the plaintiff.

A. Okay. Ten Eyck was the last name.

Q. Of the plaintiff?

A. Of the plaintiff, yes, sir. T-E-N space E-C-K [sic]. Ten Eyck.

Q. Thank you for spelling that. I had it wrong.

Who was the defendant?

A. The -- they were -- they had filed a case against the government, but I would have again -- I would have to review the specifics to find out -- to remember exactly what it was that they were -- you know, was the issue.

Q. In the cases that you have testified in, did you give any expert testimony regarding the topic of an offset?

MR. ANTONUCCI: Objection.

THE WITNESS: The -- are you

referring to, you know, like financial offsets?

BY MS. WALLACE:

Q. Yes.

MR. ANTONUCCI: Same objection.

THE WITNESS: The -- that is -- was outside of my area of expertise, as far as financial, you know, any type of financial matters. I believe that they have discussed that as part of the case, but it wasn't what I was there to talk about.

BY MS. WALLACE:

Q. Do you know what the result of your testimony was in the Red Hill case?

A. No. Actually, I -- I try not to follow these in case I have to, you know, go back for anything. So I try to not pay attention to anything that I've been involved in so I can -- don't have any coloring to my perspective.

Q. You never ask?

A. No.

Q. Can you tell me what you did to prepare for your deposition today, please?

A. I submitted some information for the -- you know, the declaration documents that

you had. I met with counsel, Mr. Antonucci, Mr. Ortiz, Mr. Borkenhagen, and reviewed the final product prior to submission. Provided my CV. That was -- that's essentially it.

Q. You stated you met with three individuals. One is defense counsel Giovanni Antonucci who's on our deposition today?

A. Correct.

Q. And another is Ortiz. Did you mean David Ortiz, also an attorney with the DOJ?

A. Yes.

Q. And can you name and spell the third name that you mentioned whom you met with, please?

A. Mr. Wes Borkenhagen. B-O-R-C-K-E-N-H-A-G-E-N [sic].

Q. Who is that, if you know, please?

A. He is a Defense Health Agency counsel.

Q. So he's general counsel for the Defense Health Agency?

A. I believe that is correct.

THE WITNESS: Is that correct, Mr. Antonucci?

BY MS. WALLACE:

Q. You can't -- I'm sorry, you can't ask him questions during the deposition. It's deposition rules. I know that's -- it's kind of natural inclination to do that.

But it's your understanding that he is general counsel for DHA?

A. Yes.

Q. Is he on our Zoom today?

A. I -- I believe he was introduced at the beginning.

Q. Okay. I see. Yes, I see him there. Okay. Thank you.

And is it your understanding you're represented by both the DHA general counsel and counsel for DOJ today during your testimony?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. Although, Mr. Antonucci is the primary one that I'm working with today.

BY MS. WALLACE:

Q. We talked about the three cases that you have given expert opinions in. Have you ever been involved in any other civil litigation?

A. I -- when I was a general pediatrician, I was asked to speak as an expert

witness in two child abuse cases for the plaintiffs.

Q. That's terrible. Can you think of any other litigation that you've been a part of either as an expert witness or as a party?

A. I think I had a traffic citation I had to appear for at one point.

Q. And that's all you can think of?

A. Correct.

Q. Have you ever given a deposition before?

A. If you're referring to what we're doing today, just -- yes, in those three cases -- or actually, the five cases, since we're talking about the child abuse one as well.

Q. And of the five cases -- I know you testified that you actually appeared before the court and testified in the Red Hill case. Have you appeared before the Court and testified in any other of the cases?

A. The other two were remote.

Q. But it was before the Court?

A. Yes, definitely for the South Dakota case, and I believe it was also -- I think the judge was also present for the South Carolina

case.

Q. Thank you.

So we are going to take some time and look at your designations. But I want to see if I understand what you're not giving an opinion about today as well, if you don't mind.

It sounds like you are not designated to offer any opinions about individual Camp Lejeune plaintiffs?

A. No, I am not.

Q. And have you prepared any documents on behalf of TRICARE specific to the bellwether plaintiffs in this litigation?

A. No, I have not.

Q. Any TRICARE data or data extractions that I have received or the plaintiffs have received from TRICARE, you were not involved in preparing those; correct?

A. No, I have not prepared any documents that you may have received, other than what I submitted personally.

Q. And you also haven't reviewed any TRICARE data extractions for the Camp Lejeune litigation?

A. That is correct. I have not.

Q. You are a doctor, but you are not offering any opinions on medical causation in this case or medical relatedness or clinical determinations as it relates to any bellwether plaintiff; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, that is correct. I am not here to offer any -- I am not a subject matter expert in, for instance, toxicology.

BY MS. WALLACE:

Q. What was that last phrase you used? I'm sorry.

A. Toxicology or -- yeah.

Q. Did you say forensic toxicology?

A. No, I just said toxicology.

Q. Oh, okay. Thank you.

You are not offering any opinions on the accuracy of the TRICARE coda -- coding or billing data that the plaintiffs have received in this litigation; is that right?

MR. ANTONUCCI: Objection.

THE WITNESS: No, I am not a coding subject matter expert either.

BY MS. WALLACE:

Q. You are not designated to have -- to opine on the calculation of alleged offsets in this case, past or future; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: No.

BY MS. WALLACE:

Q. You have not reviewed any of the plaintiff life care plans in this case; is that correct?

A. No, I have not.

Q. And you are not testifying that TRICARE will pay for any of the future medical care identified by the plaintiffs in those life care plans; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I am here to discuss how TRICARE can be utilized and what circumstances and to provide some general information about how the TRICARE health benefit works. But, you know, the individual life decisions are not something I have reviewed.

BY MS. WALLACE:

Q. You are not offering any opinion predicting the future TRICARE reimbursement rates

or fee schedules for any of the plaintiffs; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I did submit a -- the current chart of cost fees and et cetera that -- and that's on the tricare.mil website, if you wanted to pull it up yourself, the -- that discuss how, you know, the fees are currently structured as mandated by Congress.

BY MS. WALLACE:

Q. But you're not offering any opinion predicting future TRICARE reimbursement rates or fee schedules for the plaintiffs as it is outlined in their life care plan; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Could you be more specific as to how, you know -- how that would be, you know, what you're asking about? I'm not sure that I understand. The --

BY MS. WALLACE:

Q. Sure. You -- you included, as a reliance material, a 2026 costs and fees schedule. You're not testifying as to any

changes that may occur to the cost and fee schedule in the future, as might be reflected in a life care plan of the plaintiff; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: The cost fee schedules are determined by Congress. They're up through 2027. They are there -- they have been published. As far as what they will be after that, you know, Congress will -- will set them based upon -- you know, they will either issue, you know, a new ten-year plan or they will put out the yearly -- any yearly changes to that fee structure based upon health care costs across the country, et cetera.

BY MS. WALLACE:

Q. And you don't know what those yearly costs and fees will be until Congress establishes them?

MR. ANTONUCCI: Objection.

THE WITNESS: Not after 2027, currently, we do not have a fee structure for that.

BY MS. WALLACE:

Q. And as it relates to the plaintiffs,

you're not able to say with any certainty which one of these costs and fees for 2026-2027 might apply to them because you haven't -- you don't know anything specific about the plaintiffs?

MR. ANTONUCCI: Objection.

THE WITNESS: The -- I do not know individually which plan they would apply for. However, I can give you examples of how -- you know, for instance, if they were a Select patient, a TRICARE For Life patient, et cetera, how the TRICARE health benefit would -- you know, would affect them and -- you know, the fee structures, et cetera.

But I -- since I have not reviewed them individually, I can't tell you this person, this person, this person would be -- you know, would receive -- have these copays or enrollment fees.

BY MS. WALLACE:

Q. Are you -- in your designations, are you able to guarantee the scope, duration, or payment level of future TRICARE benefits for any individual plaintiff?

MR. ANTONUCCI: Objection.

THE WITNESS: Can you rephrase that question?

BY MS. WALLACE:

Q. Why? Do you not understand it?

A. Well, no -- so the -- I'm not sure what you're asking, you know, what specific that was -- there was a broad number of topics in that question. So what specifically are you asking me to comment on? You know --

Q. Well, let me break it down and see if that helps.

Can you guarantee the scope of future TRICARE benefits for any individual plaintiff -- and I mean the scope beyond what you just testified to, the 2026-2027 time frame that's already established by statute?

MR. ANTONUCCI: Objection.

THE WITNESS: The -- we do not anticipate that any -- any benefits to any specific group will be decreasing. The -- we -- you know, as far -- you know, that at this point, we have a -- we just started an eight-year contract with -- you know, under T5 and are already preparing for the next contract which will be

awarded after that, T6.

And -- and at this point we are anticipating that it will continue on as currently structured.

BY MS. WALLACE:

Q. But the ultimate decisionmaker is Congress; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: This is a health benefit that's encoded under Title 10 U.S. Code in the 1070 series.

So, yes, Congress is the one who -- who enshrined it into law, and they are the ones who decide which benefits to add or to continue. However, off of past history, we've never seen a decrease in benefits, only increases in -- in what is allowed.

BY MS. WALLACE:

Q. Yes. And that's why my question, when I phrased it both times, uses the word "guarantee."

So you cannot guarantee the scope, duration, or payment level of future TRICARE benefits. That is up to Congress on an annual

basis. Do you agree with that?

MR. ANTONUCCI: Same objection.

THE WITNESS: It is -- so the fee structure is established by Congress, and so we take our direction from them when it comes to that, yes.

BY MS. WALLACE:

Q. And so we can look at the history of what's been authorized and what changes have been made under TRICARE, but we can't guarantee what will -- what Congress will do in the future?

MR. ANTONUCCI: Objection.

THE WITNESS: All I can tell you is that -- that from, you know -- that the -- you know, that the Defense Health Agency anticipates that -- that TRICARE will continue. The -- there has been no political appetite to remove any benefits from the -- you know, from the population.

BY MS. WALLACE:

Q. And that's been since you started working at TRICARE in 2022?

A. Actually, you know, the -- TRICARE goes all the way back, as history goes all the way back to the CHAMPUS program, which was

started in the 1960s. The TRICARE was reformed into -- or renamed, reorganized under the -- in TRICARE, under the 1994 National Defense Authorization Act established in 1997. And since then, we've only seen additional groups be added to the benefit and none removed.

Q. Are you aware of Congress's consideration to eliminate the TRICARE program?

MR. ANTONUCCI: Objection.

THE WITNESS: No, I have not been told that they wish to eliminate the TRICARE program. Congress is always looking for ways to make TRICARE more efficient, but there has been no discussion on removing the TRICARE benefit.

BY MS. WALLACE:

Q. So if another expert of the government in this case has stated that approximately ten years ago lawmakers promoted eliminating TRICARE, you are unaware of that; is that right?

MR. ANTONUCCI: Objection.

THE WITNESS: Are -- I would need to review any such testimony to find out what

they were, you know, referring to. I am aware of discussions on how the TRICARE benefit might be more economically administered and there -- but there has never been a discussion on the removal of the TRICARE benefit.

BY MS. WALLACE:

Q. And that's to your knowledge?

A. Yes, to my knowledge. And I've read multiple reports, you know, that -- discussing that. But, you know, there -- so -- so, you know, possibly the name might change, as simply as it went from CHAMPUS to TRICARE, but the benefit itself I doubt would change.

Q. You're not aware of Congress ever considering an elimination of a TRICARE program in its entirety?

MR. ANTONUCCI: Objection.

THE WITNESS: No. Actually, I am not aware of any discussion to eliminate it in its entirety.

BY MS. WALLACE:

Q. You stated that you are aware of more recent discussions that have raised concern about overpayments, waste, and fraud in the TRICARE

system?

MR. ANTONUCCI: Objection.

THE WITNESS: What specifically are you referring to as far as, you know -- are the -- the TRICARE -- you know, the Defense Health Agency is always looking to minimize fraud, waste, and abuse, and we have a robust system that looks for that to include oversight by the general accounting office, the inspector general office, all of which helped to look for any instances of fraud, waste, and abuse so we can make corrections and seek any type of recoupment that's necessary.

BY MS. WALLACE:

Q. Yes. I'm actually asking you about your knowledge of what current lawmakers and policymakers have stated as to some of their more recent concerns in the TRICARE system.

Can you tell me what you are aware of --

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q. -- as hot topics with lawmakers concerning TRICARE?

MR. ANTONUCCI: Same objection.

THE WITNESS: There's been multiple discussions within Congress and, you know, there's always questions from things related to, you know, how should the autism care demonstration be administered to the -- you know, to make it the best program possible, to -- you know, to questions regarding reimbursements of providers when the contract changed over, et cetera, et cetera.

So I guess if you have a specific one that you would like me to comment on, I'd be happy to do so.

BY MS. WALLACE:

Q. Are you aware of concerns regarding billing overpayments, waste, and fraud in the TRICARE system that have been being addressed among Congress men and women?

MR. ANTONUCCI: Objection.

THE WITNESS: A specific document, no. I -- or -- but the -- the issue of fraud, waste, and abuse, as I said, you know, we are always looking to find if there have been any cases of overpayment,

fraud, you know, waste, abuse, that -- and we work very closely with the managed care support contractors to do, you know, audit records, et cetera, to look for those, you know, those instances.

I would imagine that Congress would be interested in pursuing any of those, and we agree with them, and -- and look for ways to -- to minimize the ability of that to happen.

BY MS. WALLACE:

Q. So you are aware of concerns raised by lawmakers about fraud, waste, and abuse of the TRICARE system?

MR. ANTONUCCI: Objection.

THE WITNESS: As I said, you know, Congress is always concerned, you know, about any -- any ways that that could occur, and have directed us to help minimize that, which we do.

BY MS. WALLACE:

Q. Is that a yes?

MR. ANTONUCCI: Objection.

THE WITNESS: That they are concerned, yes.

MS. WALLACE: Okay. I am going to -- so the way that we share exhibits in a Zoom deposition is I upload them into the chat feature and I spend a moment identifying them verbally for the record so that the court reporter can take down what I'm putting in the chat.

So I am going to upload a number of exhibits for you and describe them as I upload them.

Is that background noise coming from the witness or --

MR. ANTONUCCI: No.

THE WITNESS: No.

MS. WALLACE: What is that?

MR. ANTONUCCI: Can we go off the record?

THE VIDEOGRAPHER: Yeah. Go off the record, 9:34 a.m.

(Recess taken from 9:34 a.m. until 9:34 a.m.)

THE VIDEOGRAPHER: Back on the record, 9:34 a.m.

MS. WALLACE: Dr. Ruck, I am going to upload six exhibits into the chat feature. And I am going to describe them verbally

and then upload them.

Exhibit Number 1 is the United States Second Disclosure of Expert Testimony for Phase 3, dated December 15, 2025. This is the document that contains your disclosures.

Exhibit 2 is your deposition notice and subpoena dated January 27, 2026.

Exhibit Number 3 is the United States Response and Objections to Plaintiff's Notice of Deposition and Subpoena for the Production of Documents to Richard Ruck, dated February 4, 2026.

Exhibit 4 is a DOJ cover letter dated February 5, 2026, regarding the production of documents for Richard Ruck.

Exhibit 5 is the TRICARE 2026 costs and fees that bears the Bates Number Ruck_USA_5.

Exhibit 6 is the CV of Richard Ruck which bears the Bates Number Ruck_USA_5 through 8.

(Exhibits 1 - 6 marked for identification.)

BY MS. WALLACE:

Q. Dr. Ruck, can you confirm that I have uploaded those six exhibits?

A. No, I -- nothing has come across my screen. So I know the ones that you're talking to -- about. So I will, I guess, believe you on that one and -- but I cannot see anything coming across my screen at this point.

Q. Okay. No problem. I will share the first exhibit with you that I uploaded. It's in the chat feature is where it --

A. Oh, I'm not sure I have a chat feature on -- this is through the web browser version because this is a government computer. So we don't really use Zoom over at the Defense Health Agency. So it's not allowed to be on our computer. So this is a stripped down model that they gave me that has no security on it. So ...

Q. No worries. I'm going to share it on the screen for you.

Okay. I am showing you what's been marked and added into the chat feature for the court reporter and defense counsel.

Do you recognize this document?

A. Just a second. I've got to lean close in here. I have seen that, yes.

Q. And if you scroll to page 7, you see paragraph 5, "Dr. Richard Ruck"?
A. Yes.
Q. Does this text under your name look familiar to you?
A. Yes.
Q. What is this?
A. This is a description of my past history that, you know, what I'm going to be here to offer testimony on. And a basic description of what TRICARE is.
Q. Did you prepare or assist in preparing this content?
A. Yes.
Q. Were you able to -- so based on your opinion today, you've identified A through K as topics that you are -- believe that you are an expert witness in as it relates to TRICARE?
A. Correct.
Q. And you prepared or -- and/or edited or contributed to this content; is that correct?
MR. ANTONUCCI: Objection.
THE WITNESS: Yes, that is correct.
BY MS. WALLACE:
Q. Did you use some of your past

designations or declarations in order to prepare your testimony topics in this litigation?

MR. ANTONUCCI: Objection.

THE WITNESS: The -- most of my past declarations have used similar wording to this. I prepared this. So, you know, to assist in any of, you know, future declarations. So I didn't use one specifically. It's more I used this information to make all others sort of thing.

BY MS. WALLACE:

Q. The subject of your testimony in this case is similar to the subject of your testimony in the other litigations that we discussed earlier; the Hawaii, South Carolina, and South Dakota?

MR. ANTONUCCI: Objection.

THE WITNESS: Correct.

BY MS. WALLACE:

Q. All right. I am going to put on the screen for you your CV, which is marked as Exhibit 6.

Is this your CV, Dr. Ruck?

A. Yes.

Q. Did you prepare this CV?
A. Yes. This is totally my creation.
Q. Can you walk us through your career, if you don't mind?
MR. ANTONUCCI: Objection.
THE WITNESS: Sure. The -- I went to medical school at Northwestern University in -- in 1991 through 1995. I did a pediatric internship at William Beaumont Army Medical Center in '95-'96. I was undersea medical officer for the Navy for the next four years after that. The -- went back to complete my pediatric residency at Walter Reed Army Medical Center and Bethesda Naval Medical Center in 2000 to 2003.
I was stationed at Fort Benning as a general pediatrician and later as the department chief until 2007. Became an Army -- at that point, became an Army flight surgeon, stationed in Germany, was deployed to Afghanistan. Came back, did a pediatric infectious disease fellowship, was stationed at Walter Reed Army Institute of Research as a clinical

researcher for several years.

Then became the DCCS, which is the deputy commander for clinical services, at -- out in Hawaii at Schofield Army Health Clinic.

And then did a -- and I was there for three years. Then I did another four years as the deputy commander of clinical service -- deputy commander for clinical services and chief medical officer at Evans Army Community Hospital at Fort Carson, Colorado.

I then retired with my -- my 30 years of service. And was retired for six months and went back to work for the Defense Health Agency. And I've been in that position since.

BY MS. WALLACE:

Q. Thank you.

When did you know that you wanted to be a doctor for the military?

A. I decided I wanted to become a doctor in -- eliminating other potential career choices in 1990 and decided in 1990, also, that it would -- that I was interested in doing it

through the military.

Q. Did the military pay for your schooling?

A. I was in the health profession scholarship program, yes.

Q. And does that mean -- did they pay for undergrad and medical school and fellowships and residency?

A. No. They only pay for the -- the medical school. The -- I personally paid for my undergraduate. And then there is a year-for-year payback based upon the -- commitment payback based upon your -- the number of years that you're in the health professions scholarship program which, for me, was four years.

Internship and residency are not -- they're not paid for. We -- you know, that's simply our jobs.

Q. Right. You earn money --

A. Yes.

Q. -- when you do -- okay.

A. We do it within the military health system, in their hospitals, not -- you know, not in private hospitals.

Q. And you're -- my understanding is you

are board-certified in general pediatrics -- general pediatrics and pediatric infectious diseases; is that correct?

A. That is correct.

Q. Based on those credentials, has your career primarily been spent clinically treating children and dependents of service members?

MR. ANTONUCCI: Objection.

THE WITNESS: My career has been a wide variety of things, ranging from operational medicine to clinical medicine to clinical research to -- to administration.

So I have spent, you know, a minimum of five years in each of those fields. So it's -- it's fairly broad. Not often intentionally, but that's how things just worked out.

BY MS. WALLACE:

Q. So approximately five years in treating children or dependents of service members, approximately five years in administrative roles prior to TRICARE. Is that what you mean?

A. No.

MR. ANTONUCCI: Objection.

THE WITNESS: Actually, some of them overlapped. I did five years in operational -- actually, it's seven years in operational medicine. But during that time, I was also treating children one day a week. The -- I spent -- see, one -- four -- eight -- 12, 13 -- 13 in direct, you know, clinical care of children, plus another -- you know, again, I still do pediatric clinic in my role here. So I've never stopped treating pediatric patients clinically.

The -- you know, some years it was -- that was all I did and, others, it was mixed in with other things. And I would -- and I spent ten years now in administrative roles.

BY MS. WALLACE:

Q. Did you testify that even now in your TRICARE role you continue to treat children?

A. Yes, I am -- I hold credentials at Walter Reed National Military Medical Center in the pediatric clinic.

Q. How often are you doing that

currently?

A. Right now, about once or twice a month.

Q. And can you tell me when your career shifted into the administrative role and how much -- and just quantify how much -- how many years of administrative role experience that you have?

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q. Or to TRICARE, if you don't mind.

MR. ANTONUCCI: Same objection.

THE WITNESS: So you know, TRICARE and the direct care system are not, you know, completely separate entities. In the direct care system, we work directly with -- TRICARE health benefit is what manages the care that is received outside. It's a supplement to the direct care system.

So what can't be provided at a particular Navy or Army post and needs to be referred out to the community is -- falls under the TRICARE benefit. So, you know, people go in and out of that benefit

all the time. So we never really stop working with TRICARE.

As far as my role in administration, I was asked to be the DCCS in 2015 and -- out in Hawaii and then have maintained primarily an administrative position and work closely for the first seven years with TRICARE while stationed at a military treatment facility. So, you know, in the direct care system.

And then for the last -- you know, since 2022, I have been working on the other side under the Defense Health Agency. But I still continue to work with the direct care system. So it's all integrated.

BY MS. WALLACE:

Q. The TRICARE position that you obtained in September of 2022, after a six-month retirement break --

A. Correct.

Q. -- did you apply for that position or were you recruited? Tell me how that happened.

A. I applied for the position.

Q. Was that a process, like, interview

and --

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. Yes.

BY MS. WALLACE:

Q. Okay. Can you tell me once you obtained the position, does -- who -- how did it change who paid you before versus who pays you now or --

A. I mean, you know, funding for the military health program is something that's established through Congress. So same as, you know, active duty soldiers are paid through designations by Congress. Congress also pays me now as a GS civilian.

Q. Your -- you work for the DHA now in the Department of Defense?

A. Yes. I mean, the DHA is part of the Department of Defense. You know, same as the Army and the Navy are part of Department of Defense.

Q. So as far as your paycheck, was it coming from -- did it have a different source?

A. It all comes from DFAS.

Q. So not much changed there, just the amounts?

A. Yeah. So -- and not an awful lot there either.

Q. So was it a large pay bump for you, the CMO position?

MR. ANTONUCCI: Objection.

THE WITNESS: No. Actually, I mean, you know, when you count military benefits and pay and things like that, it really amounts to the same amount. I now get my retirement on top of that. So it's a little bit more.

BY MS. WALLACE:

Q. TRICARE is administered by the Department of Defense, which is now subject to the executive order, and is sometimes referred to as the Department of War now; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: That is what the department has renamed itself.

BY MS. WALLACE:

Q. And for our purposes today, it's the same thing; Department of Defense, Department of War?

MR. ANTONUCCI: Same objection.

THE WITNESS: Yeah, my understanding

is Congress never officially changed it outside as to the Department of Defense. Confusing.

BY MS. WALLACE:

Q. TRICARE is -- do you agree with me TRICARE is not administered by the Department of Veterans Affairs?

A. That is correct. We are separate from the Department of Veterans Affairs.

Q. And the TRICARE is not administered by the Center for Medicaid and Medicare Services?

A. That is correct. We are separate. All under different secretaries in the government.

Q. Okay. Last question before our one-hour break.

Can you tell me how you are being compensated for your time today for this deposition?

A. This is just a regular duty day for me.

Q. Meaning your federal salary, which you receive from the Department of Defense, is compensating you for your time, not any separate monetary amount?

A. Correct. Yes. I'm not receiving any financial incentive to testify here today. This is -- this is all part of the job.

Q. Part of your regular duties with the federal government?

A. Correct.

Q. All right. And I'm going to stop every hour so that you can keep a clear head and give you a break. So I think we're right at the hour since we started a touch early.

How much of a break would you like, Dr. Ruck? Five or ten minutes?

A. I'm good with five. But if anybody else needs more, I'm happy with that too.

THE VIDEOGRAPHER: All right. We're going to go off the record at 9:55 a.m.

(Recess taken from 9:55 a.m. until 10:01 a.m.)

THE VIDEOGRAPHER: We're back on the record at 10:01 a.m.

BY MS. WALLACE:

Q. Thank you.

Dr. Ruck, we are going to start talking about the TRICARE policy. Can you tell me what statute governs TRICARE policy?

A. So can you hear me?

Q. Yes, sir.

A. Okay. So TRICARE policy -- well, it was established through the National Defense Authorization Acts. It is coded under Title 10 U.S. Code at, I believe, 1072 through 1076.

Q. You testified earlier Congress created the TRICARE program?

A. Yes, Congress established it.

Q. You do not have the authority to change Title 10 independently; is that correct?

A. That is correct. That is under the purview of Congress.

Q. TRICARE eligibility. Will you explain to us what type of persons are eligible for TRICARE, please?

A. Yeah -- so, yeah. So TRICARE eligibility, obviously, the active duty service members, their family members, the -- and so it's automatic for service members and -- and it is also automatic for the TRICARE For Life population. There's no opt in or opt out. You are simply covered by that. The other ones, you can opt in or opt out.

So family members, retirees, certain reserve categories, National Guard categories.

The TRICARE Young Adult Program for those between 23 and 26 who are not yet married and don't have their own health insurance. So those are the basic groups.

Q. If you are not active duty and not a family member of active duty, how else would you qualify for TRICARE?

A. If you're a retiree, you are eligible.

Q. And define a retiree.

A. And retiree family members, by the way.

The -- so retiree is someone who has either completed 20 years of service honorably or has -- or not dishonorably -- and has -- or has been medically retired.

Q. So in order to qualify for TRICARE, you either have to be active duty or have achieved 20 or more years of service or be a family member of either?

A. Or have been medically retired for medical reasons.

Q. Or have been medically retired for medical reasons?

A. Right.

Q. Would you agree with me that it is harder to qualify for TRICARE than it is the VHA program?

MR. ANTONUCCI: Objection.

THE WITNESS: It's a different category. If you are a veteran, you are eligible to be taken care of, regardless of the terms, you know, the length of your service.

However, the VA system does not automatically treat everyone who is a veteran. If you are a -- you know, relatively young, healthy person who did one tour of service and has no medical issues, you are -- they categorize them into different categories based upon the amount of the -- based upon their service history, their medical conditions, et cetera. And depending upon the VA in that area, you may or may not get care within the VA.

The -- for -- for TRICARE, you have to meet one of those enrollment categories, you know, enrollee categories, to be eligible for TRICARE.

BY MS. WALLACE:

Q. For retirees that are eligible for TRICARE, their eligibility reflects decades of service to the United States, not short-term or provisional status. Do you agree with that?

MR. ANTONUCCI: Objection.

THE WITNESS: Unless medically retired.

BY MS. WALLACE:

Q. Yes. Unless they qualify under medically retired?

MR. ANTONUCCI: Objection.

THE WITNESS: Right. So if you completed one or two tours as an enlisted person and decided to get out and, you know, before your -- the 20 years was up and were not medically retired, then you would not be eligible for TRICARE.

BY MS. WALLACE:

Q. Do you have to -- for the medical retirement eligibility, can you give me an example of somebody that that would apply to, just so I understand what it means to be medically retired?

MR. ANTONUCCI: Objection.

THE WITNESS: Yeah. So the -- if you are -- if you have a condition which precludes your continued service in the military, you develop a medical condition that you are unable to, you know, perform your duties as -- as required in the military and cannot be reasonably accommodated through profiles, et cetera, then you would -- and are not expected to improve, then the military would go through a -- a process by which they evaluate you, determine if you are expected to get better or to the point where you can complete your duties; or if not, then they help you transition out of the military with retirement status.

BY MS. WALLACE:

Q. So for that category of eligibility, they start -- they're active military and then some type of medical condition, whether it happened in service or out of service, makes them not able to continue in their contract with the military?

A. If they -- right, if they are active duty. If they -- they can also receive medical

retirement if you are a reservist who is activated during that time frame and then, you know, sustained an injury or developed an illness that precluded you from continued service, you would still eligible to go through that process and receive medical retirement.

Q. Are you qualified to tell me approximately how many people have TRICARE?

MR. ANTONUCCI: Objection.

THE WITNESS: We serve about 9.2 million beneficiaries.

BY MS. WALLACE:

Q. And are you -- do you know the breakdown of qualifying individuals as related to the three categories that we've just discussed, active -- active duty, they're in the reserves or, otherwise, retiree with 20 or more years of service and medically -- medically discharged?

MR. ANTONUCCI: Objection.

THE WITNESS: I would have to -- off the top of my head, I would not be able to give you exact numbers. So I would -- I could find that information if the Court wanted me to look that up.

BY MS. WALLACE:

Q. Do you know if one category is the largest majority?

MR. ANTONUCCI: Objection.

THE WITNESS: The -- the -- typically, the active duty -- active duty family member group is the largest. However, we also have approximately equal size of retirees and those who still qualify for the TRICARE For Life.

BY MS. WALLACE:

Q. Based on your 20 or more years of service with the federal government, are you an individual who would be eligible for TRICARE, you and your family?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. We have TRICARE.

BY MS. WALLACE:

Q. And your family -- do you have a spouse?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. She is also retired military. And she would qualify, even if she wasn't.

BY MS. WALLACE:

Q. Understood. So for individuals like

you and your family, TRICARE functions like a health coverage benefit earned through long-term federal service; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Right. We -- we receive the -- we are eligible for the medical benefit, yes.

BY MS. WALLACE:

Q. As a result of your long-term service with the federal government. It -- it's an earned coverage.

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. It is -- we qualify based upon our -- our length of service.

BY MS. WALLACE:

Q. And that's a benefit incentive to achieve -- one of the many benefit incentives to achieve 20 or more years of service with the military?

MR. ANTONUCCI: Objection.

THE WITNESS: It -- yes, it is a -- it is a benefit and one of many towards getting retirement status. But, yes, it's, I guess, an important one.

BY MS. WALLACE:

Q. TRICARE eligibility is not contingent on suffering an injury; is that correct?

A. No. TRICARE is -- unless -- unless the injury was what caused you to be medically retired. So if you had a -- you know, a significant amputation or something like that where you are unable to perform your duties. Although, we do have many people who are amputees who remain on active duty these days with the advances in medical science.

But the -- you know, if it was significant to the point where you were unable to, then, yes, that would be a reason -- that would be considered an injury to be medically retired, and so that injury would then be your primary cause for receiving medical -- you know, medical benefits. However, you are not required to have any injuries when you retire to be eligible.

Q. Once a service member earns retiree status, TRICARE eligibility is not contingent on suffering an injury; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: That is correct.

BY MS. WALLACE:

Q. TRICARE eligibility is also not dependent upon whether an injury is service connected; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: No, it is not dependent upon whether or not it is service connected. You may get some disability attached to -- usually to the VA, for those service-related injuries. But that is a different process and it's not -- it's not -- it does not determine your eligibility to enroll in TRICARE.

BY MS. WALLACE:

Q. Right. So that qualification distinguishes TRICARE from the Veterans Health Administration?

MR. ANTONUCCI: Objection.

THE WITNESS: TRICARE is not dependent upon that. And the VA, as I said, the -- they use a calculus to determine, you know, which -- you know, based upon level of disability, length of time in service, et cetera, to determine who is going to receive care in and for

what conditions.

You may receive it for all conditions. You may only receive it for things that are service related or simply not be eligible based upon your time in service or -- and/or availability to receive care at that -- in that particular area.

So there's a different calculus. You don't have to have an injury to be enrolled in the Veterans Health Administration care either. But, you know, it does move you up in the calculus.

BY MS. WALLACE:

Q. Right. They have calculus dependent upon sometimes disability status, sometimes on earning capacity. They have an entirely different formula?

MR. ANTONUCCI: Objection.

THE WITNESS: Correct.

BY MS. WALLACE:

Q. You testified earlier that -- is it only active duty service members are automatically enrolled in TRICARE Prime? Is that a correct statement?

A. Yes. Those are the ones who are only automatically enrolled in TRICARE Prime because it is mandated by Congress.

Q. All other beneficiaries or potential beneficiaries of TRICARE, they must affirmatively elect to enroll in the program; correct?

A. Yes, that is correct. They must enroll. There is -- and then they can choose, depending on where they live, if they wish to be in the Prime or in the Select categories.

Q. Can -- does Prime attach to nonactive duty service members?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. You can be -- you can be a family member enrolled in Prime. You can be a retiree enrolled in Prime.

BY MS. WALLACE:

Q. The -- other than active duty automatic enrollment, all other recipients select to enroll. Was that your testimony?

A. That is correct -- you know, the -- for family members, it's -- it's often done, you know, for them as they in process a unit. So it's very easy for them.

Retirees must go online or call up

and enroll initially. And then provided they don't disenroll, they can -- you know, they'll remain on.

Q. Do you agree that failure to enroll or re-enroll when required can result in a loss of TRICARE coverage?

MR. ANTONUCCI: Objection.

THE WITNESS: If a -- we have people that go in and out of TRICARE periodically. They may get other health insurance and decide not to have TRICARE and then come back in later on. It isn't a "once you leave, you can never come back to it" situation.

BY MS. WALLACE:

Q. Do you agree that failure to enroll or re-enroll when required can result in a loss of TRICARE coverage?

MS. WALLACE: Objection.

THE WITNESS: So re-enrollment is the -- you would have to disenroll or decide to stop payment in order to be disenrolled, in order to be disenrolled. The -- you don't have to call in every year to re-enroll. You have to do it once

and then provide -- and then make sure your payment method stays up to date.

But other than that, the -- you know, you would remain then on, you know -- within either TRICARE Prime or TRICARE Select, depending upon where you elected to be.

For family members, when they move from -- you know, one place to another, they continue. But then they're allowed, again, to choose if they wish to be in Select or Prime.

BY MS. WALLACE:

Q. Is it your testimony that --

A. If they elect not to enroll, then, of course, they are not enrolled.

Q. Is it your testimony that there is an automatic re-enrollment and that you would actually have to actively disenroll once you've enrolled initially?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. The -- you -- or you decide to stop payment, in which case the managed care support contractor would contact you to try to determine if that

was an error or if it was intentional.

BY MS. WALLACE:

Q. When you say "payment," you're referring to premiums, copayments, coinsurance, patient -- any type of patient payment that may be due and owed?

MR. ANTONUCCI: Objection.

THE WITNESS: Yeah. So enrollment fees are primarily the issue there. The coinsurance is not a requirement. The -- and copays would depend upon which plan you were in and where you were seen.

BY MS. WALLACE:

Q. How many of the TRICARE plans require enrollment fees?

A. So that would -- you know, the best way to demonstrate that is on that sheet that I gave you. That goes through all the different -- that table. That goes through the different fee structures as to which groups require enrollment fees.

So, for instance, active duty family members and active duty do not have enrollment fees. TRICARE For Life does not have an enrollment fee. Reserve and reserve family

members do. Reserve -- you know, retiree and retiree family members do. TRICARE young adult does. I think I covered the major categories there.

Q. Do every program -- every TRICARE plan except for Prime and TRICARE For Life has an enrollment fee?

MR. ANTONUCCI: Objection.

THE WITNESS: Yeah, the -- yes, the -- there are fees as established by Congress for enrollment and for those other groups. But, again, the active duty Prime and active duty family members who are enrolled in Prime, not -- not, you know, not for the --

BY MS. WALLACE:

Q. And the -- I'm sorry?

A. Not for the retiree Prime. They do have enrollment fees too.

Q. Just to be clear, every plan but TRICARE Prime and TRICARE For Life has an enrollment fee; yes?

MR. ANTONUCCI: Objection.

THE WITNESS: As I said, you know, if you are a retiree in Prime, you do have an

enrollment fee, but -- also.

BY MS. WALLACE:

Q. Okay. So the only individuals that do not have an enrollment fee are active duty?

MR. ANTONUCCI: Objection.

THE WITNESS: And active duty family members.

BY MS. WALLACE:

Q. Understood.

A. Yeah. I believe that states right there on the -- on that sheet that I gave you.

Q. Thank you.

Is the same true for premium payments? Every program but TRICARE Prime, and even within TRICARE Prime, it's only active duty members and their families that are not subject to copays and coinsurance?

MR. ANTONUCCI: Objection.

THE WITNESS: The copay structure is also listed on that sheet there that I gave you. The -- there -- again, it depends upon the plan you're in as to what the copays are.

And then to put it in perspective, you know, the enrollment premium, you

know, that's the enrollment fee is about one-tenth or one-twelfth of what you would, you know, be able to purchase it in, you know, if you were to purchase your own independent one.

So -- and the same, you know, with copays, that they are -- they -- they exist if you receive care in the -- you know, through -- you know, in the civilian network, you do not have copays if you are seen within the military treatment facility.

BY MS. WALLACE:

Q. All beneficiaries of TRICARE programs, with the exception of active duty members and their family, can be subject to copays, premiums, and coinsurance?

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q. As well as enrollment fees. Is that a true statement?

MR. ANTONUCCI: Objection.

THE WITNESS: The -- not regarding other health insurance. The -- if you have other health insurance, they are

typically the first billed. TRICARE is always second payor in those cases. But you are not required to have other health insurance.

BY MS. WALLACE:

Q. Yes, and I don't think that was my question. I'm talking about if they're using the TRICARE program.

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q. Not if they're using other health insurance.

A. It would --

MR. ANTONUCCI: Same objection.

THE WITNESS: -- it would depend on where they're being seen. If they're seen in the MTF, the military treatment facility, then there is no copay, regardless of which. If you're seen out in the civilian network, then, yes, there are typically copays associated with that.

And the amount is dependent on whether you are a Prime enrollee or a Select enrollee. Select enrollees typically have something higher copays,

but lower premiums for enrollment, and -- versus the Prime category.

BY MS. WALLACE:

Q. And I think you're giving me more information than I'm asking for in my questions. So I'm going to ask -- which is probably because you're so knowledgeable, but let me ask my question one more time. Okay?

Is it true that all beneficiaries of TRICARE, when they are receiving benefits under the TRICARE plans, all beneficiaries can be subject to deductibles, copayments, premiums, enrollment fees, and coinsurance?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, depending upon the -- on which, you know, they are Prime or Select, then, yes. You know, the amount would change, but, yes, they do have those.

BY MS. WALLACE:

Q. Okay. So the only TRICARE recipients that are not subject to patient payments of any kind are active duty members and their families, or are those beneficiaries also sometimes subject to those patient payments, depending upon the

circumstances?

MR. ANTONUCCI: Objection.

THE WITNESS: The family members, if they are seen in the community, while they don't have enrollment fees, they sometimes will have copays. The active duty never have copays or premiums.

BY MS. WALLACE:

Q. Okay. So just active duty members are the ones that are not subject to copayments or patient payments of any kind?

MR. ANTONUCCI: Objection.

THE WITNESS: That is correct. The -- and then TRICARE For Life is -- is a -- that is a different structured program. The copays set there -- we do not establish copays for that group.

You know, your primary coverage is typically Medicare, you know, in that group and we are the second payor for that. So we are wraparound insurance. We don't require copays on that. We pick up the charges that Medicare doesn't.

BY MS. WALLACE:

Q. But what TRICARE does require, as it

relates to TRICARE For Life, is you require the TRICARE beneficiary to opt in to Plan B coverage, which has a premium associated with it; is that true?

MR. ANTONUCCI: Objection.

THE WITNESS: If they are eligible, they have to enroll in Plan B.

BY MS. WALLACE:

Q. And they are eligible to be eligible for TRICARE For Life, they're always eligible?

MR. ANTONUCCI: Objection.

THE WITNESS: Yeah. I can't -- off the top of my head, I can't think of a situation where they would not -- well, no, I think -- I think -- yes, I can't think of a reason why they would not be eligible for Plan B, off the top of my head.

BY MS. WALLACE:

Q. So for TRICARE For Life to receive -- to receive it, you have to pay a premium due to a required enrollment in Part B. Meaning everyone that's on TRICARE For Life is paying a premium, period; is that right?

MR. ANTONUCCI: Objection.

THE WITNESS: It's not our requirement. That's -- you know, that's the Medicare's requirement.

BY MS. WALLACE:

Q. Yes. Exactly.

Do you have an understanding on how TRICARE eligibility can change based on life -- life events affecting the beneficiary status?

MR. ANTONUCCI: Objection.

THE WITNESS: Could you be more specific as to --

BY MS. WALLACE:

Q. Yes, I can.

So, for example, does a spouse's TRICARE coverage, can it end at midnight on the date of a divorce from the qualifying military recipient?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. And the -- this -- you can find this in Title 10 U.S. Code as, you know, in the 1070s series. So it lists out all -- all those conditions.

But the -- it would depend upon the length of time that they were married to

the spouse, the spouse's service period, you know, how -- the -- whether they were married to them for the entire time that they were in the service, et cetera, et cetera.

So there's different scenarios for -- for that. It's a rather complicated calculus.

BY MS. WALLACE:

Q. But a life event such as a divorce, can end an individual's access to TRICARE coverage?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, in some circumstances it can or if they remarry.

BY MS. WALLACE:

Q. That was my next question.

If a -- let's say a qualifying military individual passes away and the surviving spouse remarries, can TRICARE eligibility be terminated under the plan rules?

MR. ANTONUCCI: Objection.

THE WITNESS: The --

BY MS. WALLACE:

Q. And my question is can?

A. Can --

MR. ANTONUCCI: Same objection.

THE WITNESS: Yes, it can.

BY MS. WALLACE:

Q. Can children's eligibility for TRICARE be terminated?

A. When they reach certain ages.

Q. Do you know those ages?

A. Yes. It's 21, unless you are in a -- you know, in an institute of higher learning, in which case you can continue to age 23. Between 23 and 26, they are, in most cases, eligible for the TRICARE Young Adult Program. And they can also be eligible if they are declared -- if they are a dependent adult, who -- you know, relies on their parents who have the benefit and they can then remain eligible for their entire life.

Q. Under the plain language of the TRICARE plan in regulations, continued TRICARE coverage for spouses, children, and other dependents can be conditional.

Would you agree with me?

MR. ANTONUCCI: Objection.

THE WITNESS: Typically, even if the spouse remarries, the children remain

eligible for TRICARE, provided the service member, you know, sponsor is still eligible, and they meet the age requirements.

BY MS. WALLACE:

Q. Their eligibility can be conditional under the TRICARE statute?

MR. ANTONUCCI: Objection.

THE WITNESS: I -- as I said, as long as they meet -- as long as the sponsor is still eligible for the TRICARE benefit, meaning they're still in service or they're a retiree and they were within the proper age, their -- the children -- the dependent, you know, because they are still considered the dependents of that individual or that sponsor, they even -- even if the spouse remarries someone else, they are still eligible for coverage under the sponsor's benefit.

BY MS. WALLACE:

Q. And I think you're answering with respect to what? Children under the age of 18?

A. 21.

Q. Under the age of 21.

Spouse's coverage can be conditional. Do you agree with that statement?

MR. ANTONUCCI: Objection.

THE WITNESS: Spouse's coverage would be -- could be conditional based upon marital status.

BY MS. WALLACE:

Q. Is the continued health care benefit program one that must be enrolled, opted in?

A. I'm sorry. Could you repeat that question?

Q. The continued health care benefit program, is that one that you must actively enroll in?

A. The continued health care program. I mean, are you referring to TRICARE or --

Q. Yes.

A. Well, as I said, you know, for active duty, you're automatically enrolled. For TRICARE For Life, you're automatically enrolled. For the other ones, you are enrolled and then you continue until you're disenrolled or -- and then you can't disenroll and come back into it. But, yes, you would need to have been enrolled at some point.

Q. And the same for the TRICARE Young Adult Program, you have to enroll?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, that is correct.

BY MS. WALLACE:

Q. And there are deductibles and applicable copayments and cost shares associated with that program?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, there are enrollment fees and copays associated with that.

BY MS. WALLACE:

Q. Your designations discuss that TRICARE is typically the secondary payor. Will you explain that for the Court?

A. So if you -- let's say you are a retiree, but -- and then you have a second job and you're -- and your job offers health insurance through Blue Cross. Blue Cross would the primary payor and TRICARE would be the secondary payor.

So they would pick up whatever fees that, for instance, you know, copays that -- that the primary insurer might require, TRICARE can

step in and cover those for you. So, basically, you owe nothing.

Q. And your designation states, quote, "TRICARE benefits are also secondary to medical insurance." Is that right?

A. That is correct. The -- to other health insurance, you know, OHI, other health insurance, they are primary. Same thing with Medicare, they are primary, Medicare, and then TRICARE is secondary.

Q. What about VHA benefits?

MR. ANTONUCCI: Objection.

THE WITNESS: No, actually those two are not exclusive. You can have both for that and you can use either/or.

BY MS. WALLACE:

Q. Meaning TRICARE is not secondary?

MR. ANTONUCCI: Objection.

THE WITNESS: Yeah, that is correct.

BY MS. WALLACE:

Q. If TRICARE receives a claim before the other insurer processes it, TRICARE is permitted to deny the claim; is that correct?

A. It wouldn't necessarily be a denial. It would be a return to -- to the person who

filed it, stating that they need to refile it under their primary insurance first and then list TRICARE as secondary. And they can either do that themselves and file it themselves or most -- in most cases, the -- the -- the provider will simply do that for them.

Q. Does the care under TRICARE program have to be determined to be medically reasonable and necessary in order to be covered?

A. So we do have a requirement, as stipulated by Congress, that the -- that the care that is rendered through the TRICARE health benefit must be, you know, safe and effective.

Q. You don't have a reasonable and necessary requirement?

A. And have -- and there must be a medical necessity for that. For instance, we would not be able to cover cosmetic surgery, if there was no medical necessity for it.

Q. So TRICARE does have a medical necessity requirement to -- prior to authorizing the coverage for that particular service?

A. Yes. If there was -- for instance, if there was car accident trauma, then cosmetic surgery would be authorized because there's a

medical necessity for it.

Q. There are a number of reasons that TRICARE may deny coverage. One is medical necessity that we just talked about. One is if other -- other insurance could pay on the claim.

Are there other instances of coverage denial under the TRICARE system?

MR. ANTONUCCI: Objection.

THE WITNESS: You know, for the case of other health insurance, I said it's not really a denial, it's a -- you know, they need to go through the proper filing in order to be coverable. You know, they have to file it correctly through the other health insurance first and them second.

The -- and, you know, so the -- the -- if Congress has specifically excluded a -- a -- a medical benefit, then we can't cover that. Otherwise, it just has to meet medical necessity.

BY MS. WALLACE:

Q. So approval of services is subject to the strict policy that Congress has set out as to which services are covered; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: So Congress has the ability to place restrictions on certain things. For instance -- I can give you an example.

TRICARE For Life individuals, we're not allowed to pay for, at this point, GLP-1s for obesity management because it was specifically excluded by Congress.

BY MS. WALLACE:

Q. And Congress can, at any point in time, make changes to the TRICARE services covered; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: We -- we can sometimes see them make -- make changes to the health benefit -- mostly to add benefits through the National Defense Authorization Act each year.

BY MS. WALLACE:

Q. At any point in time, Congress can make changes to the services that TRICARE covers; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Congress can decide

to -- to -- to add benefits or change eligibility -- eligibility based upon status of the medical -- you know, of medical science, medical benefit determinations, et cetera. Yes. So they can make changes through law.

BY MS. WALLACE:

Q. They can also make changes to limit coverage; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: It is -- it is possible they could do so. I said most of the time when they make a change is to add a benefit.

BY MS. WALLACE:

Q. But sometimes they limit benefits and that's within their capacity to do; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: It is possible that they could do so.

BY MS. WALLACE:

Q. Would you agree with me that change is something that occurs within the TRICARE system?

MR. ANTONUCCI: Objection.

THE WITNESS: TRICARE is always looking for ways to improve the benefit.

BY MS. WALLACE:

Q. Are you able to answer my question?

A. Well, I mean -- I would --

MR. ANTONUCCI: Same objection.

THE WITNESS: -- I would imagine those are --

BY MS. WALLACE:

Q. I'm sorry. What was that, Dr. Ruck?

A. Those are -- as we make changes to -- you know, to make improvements, those would be considered changes.

Q. Right. Changes of any kind occur within the TRICARE system; changes to copayments, increasing those copayments. Would you agree with me?

MR. ANTONUCCI: Objection.

THE WITNESS: We have no ability to change that. We can only make recommendations on medical benefit determinations to change it or change how, you know -- how certain processes are performed in the management of the contract. But we do not -- we do not --

we are not allowed to make any changes regarding -- within the DHA regarding payments.

BY MS. WALLACE:

Q. And my question was about Congress.

A. Oh, I'm sorry. I thought you were talking about DHA.

Q. No, that's okay.

Congress can make changes -- increases to copayments. Do you agree with that?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, they have the ability to do so.

BY MS. WALLACE:

Q. Congress can also make changes to cover services, either improving covered services or making certain services not available to claimants. Do you agree with that statement?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, they can -- they can change, you know, through legal -- they can update the -- the legal code.

BY MS. WALLACE:

Q. TRICARE policy manuals have been amended many times over the life of the program.

Do you agree with that?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. Every time we make, you know, a change in how the -- the contract is administered or a benefit is -- medical benefit determination is made, is considered a manual change.

BY MS. WALLACE:

Q. Do you know how many times that Congress has changed, modified, the TRICARE policy manual?

MR. ANTONUCCI: Objection.

THE WITNESS: The TRICARE policy manuals are updated through the Defense Health Agency. We sometimes receive direction from Congress to -- you know, as to what they want to have done. But we actually have to be the ones that go in and update the policy to meet the law.

So it's not so much Congress who changes the policy manual, as it is we update it to be in sync with what is the medical benefit.

BY MS. WALLACE:

Q. Thank you.

Do you know how many times the DHA has modified policy to be consistent with Congress's statute changes?

MR. ANTONUCCI: Objection.

THE WITNESS: Off the top of my head, because it isn't just Congress that -- that requires updates. Like I said, if we do a medical benefit determination, if we -- and decide to add, you know, that a benefit now meets, you know, safe and effective criteria, that requires a -- an update, you know. But, again, those were -- are not something that Congress would direct. They -- you know, that sort of blanket oversight that we are supposed to do those things. So we update those.

So however many times -- we do it based on Congress. I would have to go and research that.

BY MS. WALLACE:

Q. Do you know if online your program redlines the number of changes that have occurred to the TRICARE policy manual?

MR. ANTONUCCI: Objection.

THE WITNESS: Any time there's a

change, we update either the operations manual, the policy manual, the reimbursement manual, et cetera. Those always involve redline changes because we change wording within it.

I could not tell you the number of times that that has occurred. But any time that something is updated, it's considered a redline change.

BY MS. WALLACE:

Q. Do you -- if your colleague, Carmen DeLeon, testified in the Red Hill litigation that there were over 125 changes to the TRICARE policy manual, the 2015 manual, do you have any reason to disagree with her testimony under oath in that litigation?

MR. ANTONUCCI: Objection.

THE WITNESS: I -- that is entirely possible. I would have to go look up the exact number of times that it was -- but that is a reasonable number.

BY MS. WALLACE:

Q. There is now a TRICARE policy manual, April 2021 edition, T5, that was last updated on September 12, 2025. And according to your online

website, it states the most recent change number was 42.

Do you have any reason to disagree with that change number on the current policy manual?

MR. ANTONUCCI: Objection.

THE WITNESS: No, I have no reason to disagree with that.

BY MS. WALLACE:

Q. The -- TRICARE -- are you aware that TRICARE Select replaced the TRICARE Standard plan under TRICARE?

A. Yes. I mean, it was -- there was originally three plans: TRICARE Prime, TRICARE Extra, and TRICARE Standard. Congress decided to remove the Extra and Standard and replace that with TRICARE Select.

Q. Are you aware that when Congress replaced Standard with Select, it changed the enrollment requirement?

MR. ANTONUCCI: Objection.

THE WITNESS: I am not aware personally of a change in enrollment requirement for that. The -- I would have to go research that.

The TRICARE Select has been, you know, since I've been in leadership position, has been the -- the plan that's been in place. I would have to go back and research that to determine if that did occur.

BY MS. WALLACE:

Q. Are you aware that when Congress replaced TRICARE Standard with TRICARE Select, they authorized greater cost sharing for the patients under Select for many beneficiary categories?

MS. WALLACE: Objection.

THE WITNESS: I would not be surprised if they restructured the fee structure when they did that. The -- again, I would have to go and look at the exact numbers to be able to tell you to what degree it changed.

BY MS. WALLACE:

Q. Are you generally aware that beneficiaries have to pay more out of pocket to access the same or similar care under the TRICARE Select program, which replaced the prior TRICARE Standard plan?

MR. ANTONUCCI: Objection.

THE WITNESS: I would have to check which -- what were the copays required under Standard to be able to answer that question truthfully.

The -- you know, the -- for the current structure, you know, Prime versus Select, the enrollment fees are typically lower for Select, but the copays are slightly more, but it also gives you greater choice. So you can choose your own provider.

Whereas, Prime, you know, there is slightly higher enrollment fees, but lower copays, but it's also you have to receive an authorization through your -- through your, you know, primary care manager to be referred to specialty care. Those are the differences in why the fee structures are different.

MS. WALLACE: I'm going to upload into the chat feature what's been previously marked as Exhibit 10 and I'm going to share it on the screen for you.

(Exhibit 10 marked for

identification.)

BY MS. WALLACE:

Q. Do you recognize this document?

A. Federal Register? No, I do not recognize this document. I would have to read it.

Q. Do you recognize the Department of Defense Office of the Secretary 32 CFR part 199, Establishment of TRICARE Select and other TRICARE Reforms?

A. 32, I -- I believe that I am aware of the general gist, but I have not read this specific document to determine if it's the -- you know, the specifics of what it says here. I would have to take a minute to read it.

Q. Sure. Take a moment and see if you can familiarize yourself with it.

It looks like it states, "For further information, contact Mark Ellis, Defense Health Agency, TRICARE health plan."

A. Okay. I can go on to the next page.

Q. And if it helps, I'm going to ask you about the part highlighted at the top of 437 -- I'm sorry, 4327.

A. Sorry, taking a little bit. This is

very small on my screen.

Q. Let me know if I need to increase it for you. How's that?

A. There we go. Now it's changed.

Q. So I will represent to you that the document we're looking at is the Federal Register, which is the federal government's official daily publication where agencies publicly announce new roles, proposed changes, and legal notices so that the public can see what the government is doing.

A. Yes. I just haven't read this specific edition here. So just --

Q. And the public comments that you're reading, they state, "Establishment of the TRICARE Select," and the date on this is February 15, 2019.

Do you see that?

A. Yes.

Q. And I was going to ask you --

MR. ANTONUCCI: I'm sorry. Dr. Ruck, were you finished reading the document?

THE WITNESS: I'm not quite finished reading the document yet.

BY MS. WALLACE:

Q. Okay. Go ahead. You take your time. Can you see the whole document now?

A. I can see most of it now.

Okay. I can see it now, yes.

Q. Tell me when you're ready for the question. Take your time.

A. Okay.

Q. Would you agree with me after reading the document that TRICARE Select did increase out-of-pocket costs for certain TRICARE beneficiaries under the new plan?

A. So it looks like what they're talking about here is that they went from being a percentage to a fixed amount. So that the -- if you went to a specialist who had a much higher fee, that you wouldn't be paying on a percentage, you would be paying on a straight fee for that. This would apply mostly to folks who started their service after 2018. So that would be Group B.

And so they had slightly higher fee structures compared to Group A, which is those who had first period of enlistment 4/20/18, which, I believe, would be the case for all the people who we're considering here in this case.

Q. Would you agree with me that TRICARE Select increased beneficiary total out-of-pocket costs for certain TRICARE beneficiaries?

MR. ANTONUCCI: Objection.

THE WITNESS: The -- the --

BY MS. WALLACE:

Q. If you can say --

A. -- there are likely some areas where they paid more than they may have in the past and other areas where they probably paid less.

Q. So, yes, for some it increased out-of-pocket costs?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, in certain cases, there probably were a few areas where those costs increased based upon the new structure that they introduced.

BY MS. WALLACE:

Q. And it looks like --

A. Congressionally mandated.

Q. -- in the public comment section, which is highlighted on your screen, it looks like one of the complaints of the public was -- and I'll read this for you.

"The department received multiple

comments expressing dissatisfaction with the TRICARE Select cost sharing, grandfathering, higher catastrophic caps, and how the increased fees were calculated. Many comments generally noted that fixed rates create a barrier to health care. It was expressed that service members and their families were promised free health care and that promise has been broken."

Do you read that?

MR. ANTONUCCI: Objection.

THE WITNESS: I -- yeah, I can see where it says that there, yes.

BY MS. WALLACE:

Q. You weren't involved in this process back when TRICARE Select replaced TRICARE Standard?

A. No. No, I was not involved in any of the decision-making that went into this. And this was -- this at the direction of Congress. So, really, nobody was involved in the decision-making except for them.

Q. Yes, exactly. And that's actually what the response says, if you read the very next section.

It says, "Response: We recognize the

TRICARE Select cost shares and enrollment fees are higher than many expected. First, for Group B beneficiaries, the newly enacted out-of-pocket expenses are fixed by law" -- and then they quote 10 U.S.C. 1075 -- "and the department has implemented them without any modification."

I read that to mean, yes, we realize that those costs are higher, but we are doing exactly what we have been told to do by Congress.

Do you agree with that recap?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. I mean that -- I agree with the response that they implemented them as directed by Congress, yes.

BY MS. WALLACE:

Q. And so I had asked you a question earlier as to whether you were aware of increase in out-of-pocket costs and cost sharing on behalf of the beneficiaries of TRICARE.

Can we agree that this is an example where Congress has made a change that increased costs for beneficiaries over their objections?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, that there was a change in the fee structure here, particularly for those who started their service after 2018. The -- and, yes, there, you know -- there were increases for certain categories.

BY MS. WALLACE:

Q. And those categories was the higher catastrophic caps, increased cost sharing for some, would you agree?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. They are still much lower than what you would find in most commercial health plans, if you were to try to get your own health insurance.

But, yes, they are increased from what they were previous.

MS. WALLACE: All right. And my paralegal has told me we are at an hour.

Would you like to take a 5- to 10-minute break.

MR. ANTONUCCI: I would.

THE WITNESS: Yes.

THE VIDEOGRAPHER: We're going to go off the record. 11:06 a.m.

(Recess taken from 11:06 a.m. until 11:16 a.m.)

THE VIDEOGRAPHER: Back on the record. Time is 11:16 a.m.

BY MS. WALLACE:

Q. Dr. Ruck, before the break we were talking about changes to the TRICARE program, such as changing TRICARE Standard to TRICARE Select and how that affected cost sharing.

You produced, in this case, a reliance document that we've mentioned several times today. It's entitled the "TRICARE 2026 Cost and Fees," with the Bates Stamp Number Ruck_USA_1 through 4.

Based upon that document that you just closed, does it also reflect a change for 2026 and TRICARE pharmacy copayments to increase those changes -- those payments effective January 1, 2026?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, there -- the pharmacy copays have been adjusted. This goes along with that fee structure from Congress. This is predecided. We just implement their -- the fee structure as they require per year.

BY MS. WALLACE:

Q. Correct. So effective January 1st, 2026, TRICARE beneficiaries are subjected to an increase in their copayments, as it relates to pharmacy copayments, which is consistent with the document that you produced; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, there's a slight increase for home delivery and retail network pharmacy drugs. The MTF is still free.

BY MS. WALLACE:

Q. Were there other increases for the 2026 reflected on the document that you rely upon?

MR. ANTONUCCI: Objection.

THE WITNESS: I would have to pull up 2025 to see if there was any changes to the other fee structures to compare them.

BY MS. WALLACE:

Q. Are families -- how are families informed of these changes to their out-of-pocket fees?

A. They are -- these are posted on the tricare.mil website, which are available to

anyone who wants to pull up -- you don't have to have any special CAC card or anything else like that, access so you can pull these up to see them.

And then the pharmacy costs, I believe that there was a -- an email that went out to -- I think I remember getting one of those that said this is the new fee structure for the pharmacy.

Q. And do they have any say in these copayment increases?

MR. ANTONUCCI: Objection.

THE WITNESS: By "they," who are you referring to?

BY MS. WALLACE:

Q. The beneficiaries.

MR. ANTONUCCI: Same objection.

THE WITNESS: No, this is -- this is established by Congress.

BY MS. WALLACE:

Q. The old -- before TRICARE was enacted in the '90s, this program used to be called CHAMPUS; is that correct?

A. That is correct. Yeah. This is the -- yeah, how it was reorganized, yes.

Q. TRICARE is how CHAMPUS was reorganized?

A. Correct.

Q. And are you aware that the original CHAMPUS program did not have premium and enrollment fees, like traditional insurance?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I am aware that -- of how -- the basics of how CHAMPUS was operated. But, yes, it was simply, you know, basically the providers would send in their -- their -- the fees for the service and the MTF would then pay it.

BY MS. WALLACE:

Q. And as your designations reflect now, the amount of beneficiary contribution can change based upon whether the beneficiary receives care -- direct care through a military treatment facility, network/participating providers, or nonparticipating providers; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. Yes. The -- the fee structure is different, particularly between the MTF, which is basically free, and the -- and then the -- if you were

sent to a civilian provider. The -- if you go to a nonnetwork provider without a referral, meaning -- so if the managed care support contractor sends you to them, then the fee structure is the same.

If you -- if you go to that because you elect to -- like, under the Select plan, you can choose to go to out-of-network, then you have -- then your fee structure is higher.

BY MS. WALLACE:

Q. So under the TRICARE program, you can see a doctor that you want to see, but you're going to pay more for it. Is that a fair and accurate representation?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, that is correct. You can choose to go and see a provider who is not a network provider, but you will end up paying more as far as copays or point-of-service charges.

BY MS. WALLACE:

Q. Tell the Court who administers the TRICARE program.

A. So the Defense Health Agency and,

specifically, the TRICARE health plan portion of the Defense Health Agency, provides oversight for the contract for the TRICARE health benefit.

Q. Contractors administer the TRICARE program?

A. We contract out, you know, for -- to Human and TriWest, International SOS, to administer the TRICARE program, the TRICARE overseas program are -- you know, and then we provide oversight to them to make sure that they are performing as required and meeting contract requirements.

Q. And so the Department of Defense and the department -- I'm sorry. The Defense Health Agency, they hire a third-party administrator to administer the TRICARE program?

A. Correct.

Q. And is that similar to how it's done with a regular insurance policy, to your knowledge?

MR. ANTONUCCI: Objection.

THE WITNESS: No. There's some differences between a -- you know, a commercial health plan and -- and the health benefit program as set up by

Congress.

So we provide a lot more oversight. We have a lot more requirements for things like population health, case management, disease management, audits, then a traditional, you know, commercial health plan one would have.

The -- we also establish the fee structures, not the commercial health plan. We are the folks who have the ultimate authority for appeals for pharmacy and -- and medical benefit cases, so on and so forth.

BY MS. WALLACE:

Q. And is it Congress that establishes the fee schedules?

MR. ANTONUCCI: Objection.

THE WITNESS: Congress will -- has established the fee structure with how it relates to enrollment fees, copays, the catastrophic cap, et cetera. They are the ones who set those numbers.

BY MS. WALLACE:

Q. As far as funding for TRICARE, would you agree with me that it is funded by both

patient contribution, which are the enrollment Ps, premiums, deductibles, copayments, coinsurance, out-of-pockets that we've talked about today, as well as a Congressional appropriation?

MR. ANTONUCCI: Objection.

THE WITNESS: The -- the amount that is contributed by the individuals is fairly small compared to what is given by the -- you know, through the -- appropriated by Congress.

BY MS. WALLACE:

Q. I didn't ask about the proportionate difference. I asked if it was funded by both patient out of pockets, as well as Congressional appropriations.

MR. ANTONUCCI: Objection. Please be respectful to the witness.

THE WITNESS: So the -- the -- those -- those fees that the -- that are provided by the -- there are some contributions by the patient, and they go to the managed care support contractor as, you know -- you know, for to -- you know, I'm not sure it's used -- I'm not sure the

term "to help to support" is correct.

But they do go to the managed care support contractor, as allowable by Congress as part of the funding for that. They don't go to the -- like, for instance, to the Defense Health Agency.

MS. WALLACE: I'm going to upload a document for you, sir.

(Exhibit 12 marked for identification.)

MS. WALLACE: Please let the record reflect that I've uploaded Exhibit 12 for the witness, and I am going to show it to him and counsel on the screen.

THE WITNESS: It's not here yet.

MS. WALLACE: One moment. Trying to get it ready for you.

BY MS. WALLACE:

Q. In your role as the CMO of TRICARE, are you familiar with the Department of Defense Agency Financial Report?

A. I am aware that there is one. I do not contribute to the making of it.

Q. Do you know who at TRICARE does?

A. No. I would have to ask my boss if

there are any ones -- any folks who -- from our area or if this is strictly someone in -- from, like, the sixth section of the Defense Health Agency who puts this together.

The -- so -- yeah, more than likely, the -- the financial folks are the ones who do this, and they are not part of the TRICARE health plan.

Q. Do you know, is this document prepared by the Department of Defense?

A. It appears to be so. It's got the Department of Defense logo on it there.

Q. And you are an employee of the Department of Defense?

A. That is correct.

Q. And so based upon your knowledge, the Department of Defense is responsible for the accuracy of the statements in this report; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: That would be my understanding.

BY MS. WALLACE:

Q. And do you know if this document, the Agency Financial Report is prepared for Congress

and the public?

MR. ANTONUCCI: Objection.

THE WITNESS: I do not know if the public is -- is -- has access to this or not.

BY MS. WALLACE:

Q. If it's on the web, would you assume that the public has access to it?

MR. ANTONUCCI: Objection.

THE WITNESS: That is a very distinct possibility. I would have to go and pull it up -- try and see if I can pull it up myself outside of the Department of Defense to see if it's something that requires any special login key to receive it. But if it's out on the general web, then I would guess it is probably available to anyone.

BY MS. WALLACE:

Q. And on -- I'm scrolling through the document. And I was going to show you, on page 4, there's a message from the Secretary of War, who is currently Pete Hegseth.

A. Yes.

Q. All right. I want to draw your

attention to page 157 of this document.

Can you see this screen?

A. Yes. Let me -- I can see it now, yes.

Q. Can you read for me the title of this section in the report.

A. "Other Military Insurance Programs."

Q. And can you please read for me how the Department of Defense classifies TRICARE in the first highlighted section?

A. Okay. So these are referring to the Premium Base Health Benefit plans, consist of several programs, offered active duty, active duty family members, retirees, reserve members. The TRICARE insurance portfolio includes the TRICARE Prime, TRICARE Select, and Continued Health Benefits Programs (CHCBP) -- the TRICARE Young Adult Program, TRICARE Reserve Select, TRICARE Retired Reserve. The majority of these programs are intended to be budget neutral, meaning that the premiums should match the outlays. Premiums are adjusted either upward or downward for each calendar year to maintain this neutrality.

Q. So my first question about the

document is would you agree with me that this document, which was prepared by the Department of Defense, explicitly labels TRICARE as an insurance portfolio?

MR. ANTONUCCI: Objection.

THE WITNESS: No, I would not categorize this as a health insurance portfolio. It's a -- these are health benefit plans.

BY MS. WALLACE:

Q. Would you agree with me that the plain language of this document states, and I quote, "The TRICARE insurance portfolio includes TRICARE Prime, TRICARE Select," et cetera.

Do you agree with me that those words exist on the page?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, those words exist on the page. I would -- they -- whoever put this together, apparently, is not familiar with Congressional terminology.

BY MS. WALLACE:

Q. So you disagree with how the TRICARE program has been verbalized by your own department?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say that the -- since we are a Congressionally-defined program, that the -- that the Congressional language would take precedence over, you know, what was included here by the Secretary of Defense.

So it's -- so I'd say that's how Congress defines it and that's how we have to operate. So I would say that that was an error that was put on the page and not caught.

BY MS. WALLACE:

Q. And it's not just at that component of the page, it's in the title, "Other Military Insurance Programs."

Do you agree with me?

MR. ANTONUCCI: Objection.

THE WITNESS: I agree that those words are on the page, yes.

BY MS. WALLACE:

Q. Do you agree with me it also states, "The total amount of insurance premium collections were $1.0 billion in fiscal year 2025."

Do you see that language?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I can see that.

MR. ANTONUCCI: I'd like to note for the record, this is a 262-page document the witness testified he's never seen before.

BY MS. WALLACE:

Q. Do you also agree with me that the report discusses, on page 157, which is where TRICARE appears, do you agree with me that it says, "The benefit cost for fiscal year 2025 correlates to the premium collections reported"?

MR. ANTONUCCI: Objection.

THE WITNESS: I'm sorry. I'm trying to find that again. Where?

BY MS. WALLACE:

Q. My pleasure. It's right here.

A. Okay. Are you implying that the -- that the amount spent on the TRICARE health plan was 1 billion and that correlates to the 1 billion collected in premiums?

Q. No. I'm actually just asking you to confirm that that sentence is on the page.

A. Yes, that sentence is on the page.

Q. Can you explain the sentence that we read earlier. It says, "The TRICARE insurance portfolio" -- and then it names the different types of plans under the TRICARE program.

And then the next two sentences have to do with how the premiums are set. It states, "The majority of these programs are intended to be budget neutral, meaning that the premiums should match the outlays. Premiums are adjusted either upward or downward for each calendar year to maintain this neutrality."

Do you see that language?

A. Yes. But by "budget neutral" there, they're referring to previous years budgets. They're not referring to the outlay of premiums collected by beneficiaries.

They're -- the actual costs, which are a matter of public record, are -- we have spent approximately $9 billion each year on just the TRICARE portion of the -- of the -- you know, of the military health system.

So, you know, the majority of this, you know, is -- comes from Congress. They are intending the contributions, I believe, to be budget neutral, is what they're referring to

here.

Q. Meaning Congress can increase or decrease the amount of the premiums in any given fiscal year to ensure that the programs remain budget neutral?

MR. ANTONUCCI: Objection.

THE WITNESS: That is the intent behind it. But they are also cognizant of the -- so, for instance, as health care costs rise across the country, per member, per month costs rise. The amount of funding that they put into it has to match that, as well as they -- any premiums contributions made by the enrollees.

BY MS. WALLACE:

Q. Would you agree with me that TRICARE can be both statutorily authorized and also function like an insurance program, as it indicates in the Department of Defense document we're looking at right now?

MR. ANTONUCCI: Objection.

THE WITNESS: There are some similarities between a -- a health insurance plan -- plan and a health -- our health benefits program. They both, you

know, process referrals. They both, you know, receive claims and process claims for reimbursement to the providers. They -- they both have enrollment fees.

The scope is what's different there. They have copays in some conditions. But for us -- you know, for them, they have copays all the time; for us, we have copays some of the time.

And then there -- how the pharmacy benefit is managed is quite different compared to how they typically manage theirs -- their program. So there are lots of differences, but there are some similarities.

BY MS. WALLACE:

Q. And one of those similarities is that the TRICARE program collects insurance premiums, calls them insurance premiums, and tracks them as insurance revenue?

MR. ANTONUCCI: Objection.

THE WITNESS: Inside the DHA, we do not refer to them as insurance premiums. They are enrollment fees and enrollment premiums.

BY MS. WALLACE:

Q. And a premium is a premium. Do we agree on that point?

And a deductible is a deductible. The words mean the same thing, whether it's TRICARE or it's a regular insurance policy.

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, they are -- they are both premiums and they are both copays or, you know, deductions.

BY MS. WALLACE:

Q. And so premiums, deductibles, plans, copays, coinsurance, all of that is consistent with insurance plans. Do we agree on that?

MR. ANTONUCCI: Objection.

THE WITNESS: They -- they all -- they both have them, yes. The scope of what is paid is what is different. And who sets the -- the -- you know, the copay, the premiums, et cetera. One is set by Congress, the other is set by a corporation.

BY MS. WALLACE:

Q. And would you agree that the fact that TRICARE is statutory in origin does not

eliminate the fact that it does have insurance characteristics?

MR. ANTONUCCI: Objection.

THE WITNESS: As I said, there are some similarities.

BY MS. WALLACE:

Q. The bottom sentence on the page, will you read that verbatim into the record, please.

If -- and I'll be happy to zoom in on it so you can see it clearly.

A. Now I can see it, yes. Okay.

"Unfunded actuary liabilities" in parentheses "4.23.3 [sic] billion for fiscal year 2025 related to MHS are reported in Table 13A where it is referred to as Military Pre Medicare-Eligible Retiree Health Benefits. The estimated MHS liability for incurred-but-not-reported" in parentheses -- actually, that's beyond what you wanted me to.

Q. It is, but I didn't mind.

A. Okay.

Q. My question has to do with the phrase at the very beginning of the sentence, "Unfunded actuarial liabilities." And my question for you is Congress must vote every year to fund TRICARE;

is that right?

A. It is part of the defense health -- of the defense budget, yes.

Q. And so to keep the TRICARE program operating, Congress has to agree to fund it on an annual basis?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, they -- they have to approve a budget every year.

BY MS. WALLACE:

Q. Is there any text that you can point me to today that states that future TRICARE programming and/or funding is guaranteed indefinitely?

MR. ANTONUCCI: Objection.

THE WITNESS: I can only look to the past to state and what we -- and the direction that we've been given by folks higher than us in the Department of Defense, that -- that TRICARE has always been funded -- TRICARE has only received -- while sometimes it is -- you know, the attempt to keep it budget neutral, it -- it -- we -- we have always received funding for the TRICARE programs

and CHAMPUS since their inception.

And we -- and our direction by, you know, our higher-ups within the Department of War, are that to continue to operate with the, you know, assumption that the -- that funding will continue to be provided.

BY MS. WALLACE:

Q. Is there any text that you can point me to today that says that TRICARE funding is guaranteed indefinitely or the program itself?

MR. ANTONUCCI: Objection.

THE WITNESS: In this report, no.

BY MS. WALLACE:

Q. Is there any text anywhere?

MR. ANTONUCCI: Same objection.

THE WITNESS: I would have to look into Congressional law to find out if there is any mandatory place where it says that TRICARE funding must continue, period.

But I cannot, off the top of my head, point you to any text that says that.

BY MS. WALLACE:

Q. As we sit here today, you're not aware of any text that says that?

MR. ANTONUCCI: Objection.

THE WITNESS: No. Just -- just directives from higher-ups. But, you know, those are from Department of War.

BY MS. WALLACE:

Q. Directives? Are you talking about oral directives? I'm not clear.

A. So, as I said, you know, our -- those higher-up -- you know, within Department of Health Affairs within the Department of Defense, those -- that's who we work for, fall under, you know, what their guidance is regarding the preparation for T6 and what we anticipate it will cost, et cetera. Those are all written directives and so those are all written with anticipation that we will continue to have funding.

Q. Understood. So you're writing the next year's program with anticipation that it continue to be funded, but there's no text you can point me to that says it's going to be funded?

MR. ANTONUCCI: Objection.

THE WITNESS: I -- I cannot point to a -- a text because, you know, Congress

is, you know -- you know, they -- they are the ones who write that law.

MS. WALLACE: Okay. I am uploading into the chat feature -- I wish I hadn't labeled it.

We're going to call it Exhibit 13, if that's okay with everybody. I'm going to put it on the screen for you.

BY MS. WALLACE:

Q. Earlier in the morning we were talking about whether you were aware or not that approximately ten years ago lawmakers were considering eliminating the TRICARE program.

Do you remember that testimony?

MR. ANTONUCCI: Objection.

THE WITNESS: I remember you mentioning it earlier, yes.

BY MS. WALLACE:

Q. And so I've put on the screen for you -- it is -- I'll represent to you it is a news article by The Hill, which states in the first -- in the title "Lawmakers Debate Scrapping TRICARE."

Do you see that?

A. I see the title, yes.

Q. And do you -- is this jogging your memory at all on what occurred in approximately 2015 on Capitol Hill?

MR. ANTONUCCI: Objection. Foundation.

THE WITNESS: So I would have to read this article to -- these headlines are sometimes designed to catch people's eyes and not necessarily what is stated within the system as to what -- what they mean by changes to TRICARE. So --

BY MS. WALLACE:

Q. Why don't you read the first three paragraphs into the record for me.

A. The future of the program became a hot topic on Capitol Hill after a blue-ribbon panel released a series of recommendations for changing the way that military compensates service members." Then in parentheses, "mosads."

"One of the recommendation was replacing Tricare with a new system that allows members of the military to choose a private insurance plan, with the cost of premiums shouldered by the government.

"While lawmakers have in the past --

have in the past shied away from major changes to pay and compensation for troops, lawmakers say the idea deserves serious consideration."

Q. And so based on the first three paragraphs of this news article, does it sound like lawmakers, in the past, have considered a total elimination of the TRICARE program?

MR. ANTONUCCI: Objection.

THE WITNESS: So I have -- you know, we've heard talk about, you know, in the past about how TRICARE might be made more efficient. You know, as I -- you know, as I recall from earlier, you know, we had a program called CHAMPUS, which they decided was largely inefficient. And they reorganized it to be TRICARE.

The benefit itself, you know, was still essentially the same. We were paying for care that was received in the community that couldn't be provided in the military treatment facilities. But how it was organized was different. It was going to be we were going to start using managed care support contractors to assist us in the processing of claims so they could be

paid faster, and provide some, you know, consistency as to how the program was being administered to hopefully make it more efficient.

The benefit, you know, which is that, you know, we will help -- you know, we will -- we will provide the ability of our active duty service members, family members, retirees, TRICARE -- you know, and then they agreed to something called TRICARE For Life to differentiate those who are Medicare eligible, that, you know, they would still be -- you know, they were still -- had that health benefit available to them that they had had previously.

So what I believe that they are referring to here, without having read the entire article, is that -- on how that benefit is being administered, not the removal of the benefit itself.

MR. ANTONUCCI: Whitney, before you ask your next question, do you intend to allow the witness read the article, like he asked?

MS. WALLACE: Oh, I didn't know he

had asked to read. Would you like to --

THE WITNESS: I said if I was going to go and talk more about the article, I would need to review it.

Could you go up a little bit? There.

Okay. There we go. Okay.

Okay. You can go to the next page.

Okay. Go ahead.

Are we missing a sentence there? It says "a piecemeal approach." Is there something -- another sentence we're missing there somewhere?

MS. WALLACE: I don't think so. I also have the Internet version of this document. Let's take a look really quick.

Can you see my screen, Doctor?

THE WITNESS: Yeah. I read that part.

BY MS. WALLACE:

Q. I'm looking for piecemeal.

Did you see it?

A. Let's see here.

Q. Here it is, "taking a piecemeal approach."

A. Yeah. So it looks like the two

paragraphs above it may have been removed somehow in that.

Q. Okay. And if I can figure out a way to re-PDF this version, I will replace the exhibit to make sure it's accurate. I just did a print PDF on the page.

Doctor, will you let the record reflect that you can see the entire article?

A. Yes, I can see the entire article now.

Okay. Got it.

Q. All right. And so from your review of this article, would you agree with me that Congress was taking a very serious look at some substantive changes to the TRICARE program in -- approximately ten years ago, including potentially completely replacing the program with more of a private insurance plan?

MR. ANTONUCCI: Objection.

THE WITNESS: I agree that they discussed that, as what is placed on here. And these are, you know, what you have said here, you know, this article says would meet with what we remember hearing around that time.

As you can see, they also discussed in here, you know, ways to improve the current plan, which is what they actually opted to do in this particular case by reorganizing it under the Defense Health Agency, to try that approach first, as well as, you know, they also discussed, you know, use of pilot programs to see if there was any interest.

And they also mentioned what we typically hear from beneficiaries is -- is that they are very cautious about going to a new program. It's, you know, the -- you know, based on, you know, what they have. That's one of the -- you know -- you know, it speaks to the popularity of the plan by how many people choose to retain TRICARE as opposed to going to find their own health plan.

BY MS. WALLACE:

Q. Do you remember what my question was, Dr. Ruck?

A. About did they discuss making substantive changes. Yes, they did discuss in this article making some substantive changes.

They were considering a multitude of them by -- by what's reported here.

Q. And one of those options that was being seriously considered is eliminating the TRICARE program.

Do you agree with that?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say that they were discussing eliminating the TRICARE program as it is currently administered, not the benefit, which is, you know -- and that's the difference between it.

The benefit would still be there. It would be how it would be administered to the people, you know, under what -- you know, under what umbrella.

BY MS. WALLACE:

Q. Yeah. And let's look at this paragraph that I've highlighted on the screen.

"The TRICARE overhaul, combined with several other healthcare changes suggested by the commission could save the Defense Department about 26.5 billion from fiscal 2016 to fiscal 2020 and generate 6.7 billion per year in savings by 2053, according to a panel spokes --

spokesman."

So would you agree with me that they were considering a potential overhaul of the TRICARE system, based on that language?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, they were considering an overhaul to, you know, how the -- like I said, how the program was being administered.

BY MS. WALLACE:

Q. And some of which would have saved the government billions of dollars?

MR. ANTONUCCI: Objection.

THE WITNESS: I also remember from that time period that there was a discussion that that -- those numbers may not have been accurately drawn. So there was disagreement with how much would actually be saved or potentially cost more by doing that.

BY MS. WALLACE:

Q. And my question was --

A. And I think that they even said so lower in the document there, that they weren't sure about the numbers generated by the

commission.

Q. But it looks like it could be up to 26.5 billion. So we're -- we're looking at billions.

MR. ANTONUCCI: Objection.

THE WITNESS: That was what the -- that particular commission reported.

MR. ANTONUCCI: For the record, I would like to lodge an objection to the authenticity and admissibility of Exhibit 13.

MS. WALLACE: Doctor, I'm going to upload another exhibit for you. I always forget I have to put it in the chat feature before I can open it.

Doctor, I've uploaded into the chat feature what I had premarked as Exhibit 13, and I think I recognize that I had named The Hill article 13.

So if it's okay with defense counsel, I'm going to -- if it's okay with you guys, produce a full and complete copy of The Hill article as the prior exhibit and we can name it an Exhibit Number 7, if that's okay with you, Defense Counsel.

MR. ANTONUCCI: Just so I understand, the article that you were previously questioning Dr. Ruck on, which was previously as Exhibit 13, will now be referred to as Exhibit 7; is that right?

MS. WALLACE: Exactly. And you and I, after the deposition, if we could just -- I want to make sure that that PDF has the full text for the -- for accuracy purposes. So I'm going to resubmit Exhibit 7 to you and the court reporter.

MR. ANTONUCCI: That works for me.

MS. WALLACE: Okay. Great.

(Exhibit 13 marked for identification.)

BY MS. WALLACE:

Q. So, Doctor, the document we are looking at is your Deposition Exhibit Number 13.

Are you familiar with -- do you see there on the screen that this looks like it's an expert report submitted by Dr. Henry Miller in the Camp Lejeune Water Litigation on behalf of a plaintiff Gary McElhiney on December 15, 2025?

A. Yes, I can see that on the screen here.

Q. And I will represent to you that Dr. Henry Miller is an expert witness for the Department of Justice in the United States government in this case.

Are you familiar with him?

A. No, I am not.

Q. All right. I am going to go down in this document to Dr. Miller's paragraph where he describes in paragraph 7 on page 7 "TRICARE Coverage."

Do you see that on the screen there?

A. I can see it, yes.

Q. All right.

A. I would need to have a second to read it, though.

Q. Oh, sure. My pleasure.

Let me know when you want me to scroll down.

A. Okay. I'm down to the last paragraph. You can scroll up there, if you want.

Okay. Got it.

Q. Is there anything based on the paragraphs that you have just read under "TRICARE Coverage" in Dr. Miller's report, that you disagree with Dr. Miller on?

MR. ANTONUCCI: Objection.

THE WITNESS: Reading this -- these two pages here, you know, this is -- this seems factually accurate.

The -- that, yes, CHAMPUS did originate in the 1960s. It was reorganized in the 1990s under TRICARE. And, you know, those are approximately numbers that we serve. And that's approximately the defense -- the percentage of the defense budget.

And as you -- you know -- as your article previously mentioned, there was some talk among the lawmakers in around 2015. It did not -- ended up, you know, they did not elect to do so.

And that it says that may -- the benefit, you know -- you know, the benefit was widely supported and that the talk had been mostly about, you know, the coverage may take different forms in the future, but the benefit would remain.

BY MS. WALLACE:

Q. Do you see the sentence -- the second-to-last sentence of Dr. Miller that

states, "Approximately ten years ago, some lawmakers promoted eliminating TRICARE and instead the funding the purchase of private health insurance by TRICARE enrollees"?

A. Yes, I see that sentence.

Q. Do you see footnote 39 beside that sentence?

A. Yes.

Q. And if we scroll down to footnote 39, it states Martin Matishak as the author of an article from The Hill dated February 11, 2015, that's entitled "Lawmakers Debate Scrapping TRICARE."

Do you see that?

A. Yes, I see that. Yes.

Q. And does that appear to be the exact article that we just reviewed that your counsel objected to the authenticity of?

MR. ANTONUCCI: Objection.

THE WITNESS: I see that it is referred in here the -- and I would need to double-check on the author to make sure it's the same article. But it's from the same year and month.

BY MS. WALLACE:

Q. Now, do you have any reason to disagree with any of the statements that are in Dr. Henry Miller's TRICARE coverage section?

A. I -- I have -- I cannot find anything that would -- that in here that it would be factually incorrect.

Q. And so he also states that the TRICARE program may change over time.

Do you also agree with that?

MR. ANTONUCCI: Objection.

THE WITNESS: The TRICARE -- each contract with TRICARE plan coverage changes slightly. We typically add more benefits -- you know, telehealth is now part of the -- of the contract, more robust disease management programs, more of a focus on alternate payment methods, bundlings, a greater focus on quality of care and outcomes versus fee for service.

So every TRICARE contract is different from the last contract. So TRICARE continually changes, as we attempt to make the benefit better and -- and more economically feasible. And -- but -- you know, but better for the beneficiaries.

BY MS. WALLACE:

Q. And sometimes better can result in increased patient payments?

MR. ANTONUCCI: Objection.

THE WITNESS: That is -- you know, again, those are established by Congress, not by the Defense Health Agency. So -- so whether or not you would consider those a benefit or not, I guess would be -- would be up to interpretation.

But our focus is on the actual management of the TRICARE benefit or the -- you know, the health -- you know, the health benefit established by Congress.

BY MS. WALLACE:

Q. And just to refresh your memory of the author, I'm going to show you again The Hill article.

Can you see my screen, Doctor?

A. Yep, that's the same article.

Q. Okay.

MR. ANTONUCCI: For the record, this is the PDF version of Exhibit 7.

MS. WALLACE: Yes, and I'm going to

re-PDF to make sure it includes the entire -- I don't know why it didn't include that one paragraph. That got tripped up. But I'm going to re-PDF it right after this break, if that's okay with you, and mark it as Exhibit 7.

We are coming up on a break. Do you guys want to take a lunch break?

MR. ANTONUCCI: Yes, please.

MS. WALLACE: Can we go off record.

THE VIDEOGRAPHER: We're going to go off the record at 12:11 p.m.

(Lunch recess taken from 12:11 p.m. until 12:59 p.m.)

THE VIDEOGRAPHER: Back on the record at 12:59 p.m.

MS. WALLACE: Can we go back off the record one more second?

THE VIDEOGRAPHER: Yeah. We're going to go off the record at 1:00 p.m.

(Recess taken from 1:00 p.m. until 1:04 p.m.)

THE VIDEOGRAPHER: Back on the record at 1:04 p.m.

MS. WALLACE: Before we went back on the record, I conferred with defense

counsel and we have agreed to mark as Exhibit 7 The Hill article in both corrected and its original form.

So those documents are going to be Exhibit 7, The Hill article, with -- and then also 7A, which was the PDF of that article in the original version that it was shown.

Is that right, Giovanni?

MR. ANTONUCCI: Yes.

MS. WALLACE: Okay.

(Exhibits 7 and 7A marked for identification.)

BY MS. WALLACE:

Q. All right. Dr. Ruck, thank you for letting me clear up that administrative matter.

We are going to move on to talk about our additional questions regarding TRICARE. Are you generally aware that last year -- as recently as last year, TRICARE beneficiaries have complained regarding administrative issues with the new administrator party, TriWest?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I am aware that there -- that there have been some

complaints.

BY MS. WALLACE:

Q. Would you agree with me that some of those complaints have included beneficiaries potentially losing coverage?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, there was a problem with the -- with the -- essentially the autopay method that TriWest had set up. We directed them to fix that and make sure that people who were accidentally dropped received full coverage.

BY MS. WALLACE:

Q. Are you aware that there were also issues with TriWest regarding access to their customer service department?

MR. ANTONUCCI: Objection.

THE WITNESS: I am aware there have been some complaints.

BY MS. WALLACE:

Q. Regarding being able to get in touch with TriWest by beneficiaries?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. There were

initially some -- some issues, difficulties with patients getting in contact with them at the start of health care delivery last year. Those have been since corrected.

BY MS. WALLACE:

Q. Are you aware of issues that beneficiaries had last year regarding services being missed, including surgeries, as a result of these issues?

MR. ANTONUCCI: Objection.

THE WITNESS: I am not aware of surgeries that were missed. There -- you know, I'm not aware of every single case. However, I had not heard of any surgeries that had been missed because of this.

BY MS. WALLACE:

Q. What about are you aware of complaints that under the TRICARE program, there was an incomplete network of providers being provided by the TriWest administrator?

MR. ANTONUCCI: Objection.

THE WITNESS: It was not a matter of the -- of the network size. It was -- it was some difficulties with processing the

referrals to get them to the network providers.

BY MS. WALLACE:

Q. Were you involved, as the CMO, with trying to correct some of the deficiencies and concerns that were identified --

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q. -- last year?

A. Yes, I was -- as part of the team, I was involved in pursuing corrective actions.

Q. Did beneficiaries lose coverage last year as a result of some of these issues?

MR. ANTONUCCI: Objection.

THE WITNESS: There was some temporary loss, but we directed them to reinstate every one and cover them until such point as they were able to determine that they had corrected the problem with their payment system. So it was very brief.

BY MS. WALLACE:

Q. Were you involved -- would you have been a recipient of letters from Congress regarding outlining some of these concerns if she

had sent that to the Department of Health?

MR. ANTONUCCI: Objection.

THE WITNESS: No, they would not have come straight to me. No.

BY MS. WALLACE:

Q. If they were sent to Lieutenant General Telita Crosland, director of the Defense Health Agency, and David -- Dr. David J. Smith, acting principal deputy for the Defense Health Agency, would those letters have also reached you in your role as the CMO?

MR. ANTONUCCI: Objection.

THE WITNESS: No. Only the ones where I was -- I would have been asked to comment on within my area of expertise. Most of them would not have come to me.

BY MS. WALLACE:

Q. But, in your role, would you have been part of the team that fixed the complaints?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. The -- as areas were identified that had failed to -- where they failed to meet contractual requirements in the management of it, we were involved. I was involved as part of

the team in -- in working to ensure that they did institute corrective actions on that.

MS. WALLACE: Okay. I'm going to upload into the chat feature what's been previously marked as Exhibit 8. And I'm going to share it on the screen for you.

(Exhibit 8 marked for identification.)

BY MS. WALLACE:

Q. Can you see this document, Doctor?

A. Yes.

Q. Do you recognize it?

A. Not this particular document. If you give me a second, I will read it though.

Okay. Move to the next page.

Okay.

Q. Would you agree with me that this letter from Marilyn Strickland, member of Congress, to leaders in the Defense Health Agency, expresses concerns regarding TriWest as the third-party administrator of the TRICARE program?

MR. ANTONUCCI: Objection.

THE WITNESS: I agree that this is a

letter of concern from a member of Congress addressing the issues you mentioned.

BY MS. WALLACE:

Q. And do you see that the Congresswoman opines in the second paragraph that "The combined effect of this mismanagement has led to cancelled referrals, appointments, and even surgeries"?

A. I would agree that there were some cancelled referrals and appointments. I do not know about the surgeries. I said I would have to go back and check.

I -- I did not -- I did not hear about missed surgeries. The -- that would have been something that we would have, you know, gone to great lengths to make sure did not happen.

The -- but, yes, there were some -- as it states there, there was some concern about cancelled appointments and referrals.

Q. Do you see that Congresswoman also notes that she is deeply concerned about press reports that the network of health providers covered by TriWest is significantly smaller than what is offered under Health Net Federal Services?

A. I see where it states that in the letter. The -- as I said before, that was not the underlying cause when we looked into it. It was a matter -- it was not that the network was smaller, it was the getting them to the providers through the authorization process.

Q. So there was some denied authorizations that affected patient's access to care?

MR. ANTONUCCI: Objection.

THE WITNESS: It -- it was -- there was delay in processing them. They weren't necessarily denied. In fact, most of them, almost all of them, were not denied.

But the -- there were technical issues that they had not foreseen that prevented them from processing the referrals in a timely manner.

BY MS. WALLACE:

Q. So you disagree with the statement here that "The network of healthcare providers covered by TriWest is significantly smaller than what was offered under the Health Net Federal Services"?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. Although, I am not the SME for the network size. The reports that we were given by those who are was that the network size is, if anything, was larger. It was a matter of them being able to utilize that network that was the issue.

BY MS. WALLACE:

Q. And so where she writes "there was an incomplete network of providers," you disagree with that?

MR. ANTONUCCI: Objection.

THE WITNESS: I would -- I would dis -- I would disagree that that was the root cause of this, and that it -- that was -- is -- was factually incorrect after further analysis. Although, I can understand how she would perceive that as the cause.

BY MS. WALLACE:

Q. Do you see the sentence in the third paragraph, "Despite the extensive difficulties documented by beneficiaries in contacting TriWest customer service and website problems, the

current plan to disenroll beneficiaries who cannot establish a recurring payment is untenable. I strongly urge the Defense Health Agency (DHA) to extend the deadline to allow all eligible beneficiaries to establish recurring payments until a time when TriWest can adequately manage its customer contact inquiries."

A. I see that, yes.

Q. Do you know how many beneficiaries lost coverage as a result of these transition issues with TriWest?

MR. ANTONUCCI: Objection.

THE WITNESS: I do not know the direct number; however, the -- that -- that was the date that TriWest had set originally. We directed them to push it out much further and make sure that they resolved their issues before this requirement went into effect.

BY MS. WALLACE:

Q. Will you say that answer one more time, if you don't mind?

A. So since we have oversight over that process, although, you know, a direction had been given via TriWest to disenroll people who -- you

know, because they didn't have their payment information, because we recognize that it wasn't the beneficiary's fault, we directed them to extend their deadline to a much further date --

Q. So --

A. -- to avoid them losing coverage.

Q. Your testimony is that you took these concerns of Congresswoman Strickland and you extended the deadline as she requested so that no one lost access based on the issues identified in the letter?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. I mean, we were aware of the issue and we -- I believe -- you know, it wasn't just Congresswoman Strickland that, you know -- but, you know, our analysis as well. But we agreed with her assessment there and we were already taking steps to make sure that that did not happen.

BY MS. WALLACE:

Q. Is it your testimony no one -- like, no persons lost coverage based on this issue?

MR. ANTONUCCI: Objection.

THE WITNESS: I cannot say for

certainty if anyone did or not as -- as this transition was taking effect. We did direct TriWest to reach out to all involved to make sure that they had a chance -- so that they -- each and every individual could make a decision if they wished to stay with TriWest or not, and --

Q. Where would --

A. -- a bit of information.

BY MS. WALLACE:

Q. Did they have an option to go to a different third-party administrator other than TriWest if they were in the West region?

MR. ANTONUCCI: Objection.

THE WITNESS: No, but some people just choose not to participate in TRICARE, period.

BY MS. WALLACE:

Q. So their option is to stay with TriWest or disenroll -- isn't that word you used earlier? -- disenroll from TRICARE entirely?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. In this particular case, they -- you know, they could choose not to -- and they had other

health insurance, for instance, they could elect to take a pass on TRICARE.

They are still eligible to re-enroll at a later date, if they wish to do so. That benefit is always available to them provided they meet the enrollment criteria as far as the different groups we discussed earlier.

BY MS. WALLACE:

Q. So if a beneficiary of TRICARE was trying to get a surgery or an appointment authorized during this time, and they couldn't get it done because of the issues identified in this letter, their option to get timely medical treatment would have been to disenroll in TRICARE and seek where you use other health insurance in order to get that treatment?

A. The -- through our direction, we directed them to ensure that -- that no one would be missing appointments or surgeries due to either a -- you know, the payment issue or the referral issue. So, essentially, we -- we authorized TriWest to institute a broad waiver process during this time to make sure that all beneficiaries could get the care that they

needed.

Q. And if one of those beneficiaries was concerned about coverage and had experienced the delays identified here, they would have had to disenroll from TRICARE to get the treatment timely, could that have been the case?

MR. ANTONUCCI: Objection.

THE WITNESS: No. If they were -- because of what we directed TriWest to do, if they had been a -- if they had had coverage, they would have, you know, still been allowed to -- you know, we essentially had them print out letters that people could take in guaranteeing coverage and payment. They could just download those and take them in and say, you know, I had an appointment, here is my coverage letter.

So that people -- that were caught up by this -- you know, this payment issue or, you know, had not received an authorization yet because of the delays in referrals would be eligible to get that without having to wait for it further. And they can get it -- they can continue

with their appointments and surgeries.

BY MS. WALLACE:

Q. Do you know how long the period was where these concerns were happening with delays and authorizations until you gave that broad authority to TriWest?

MR. ANTONUCCI: Objection.

THE WITNESS: We directed them to do so before the end of January. I don't remember the exact date, but it was sometime between the 17th and the 30th.

BY MS. WALLACE:

Q. So it could have been three or four weeks?

MR. ANTONUCCI: Objection.

THE WITNESS: Well, the payment issue wasn't due to take effect until the 31st. So nobody should have been caught up by that. The -- and then the referral issue, yes, there was a significant delay in referrals in that first couple of weeks.

But after we directed them to take the broad corrective actions that we had -- you know, that we instituted, then that resolved that issue as well.

BY MS. WALLACE:

Q. And you authorized them to take the broad corrective actions end of January, you stated?

MR. ANTONUCCI: Objection.

THE WITNESS: The Defense Health Agency did, not me. But the Defense Health Agency, through -- you know, through the TRICARE health plan, directed them to do so.

BY MS. WALLACE:

Q. How many states are served in the West under TriWest's umbrella of third-party administration for TRICARE?

A. I'd have to count them, but it's everything west of the Mississippi, also including Illinois, Wisconsin, and Louisiana and Missouri. No -- yeah. No, Missouri's on the other side.

So, yeah, so everything to include Wisconsin, Illinois, and Louisiana.

Q. And so all of those beneficiaries in those states, which I imagine would be in the millions, could have been affected by this difficult transition?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. There -- as we stated before, there was some -- there were problems with their rollout. We -- we acknowledged that.

BY MS. WALLACE:

Q. What is the Government Accountability Office, GAO, and what does that entity do with respect to TRICARE, if you know?

MR. ANTONUCCI: Objection.

THE WITNESS: So the GAO is a -- is an oversight agency that looks at not just the Department of Defense, but all, you know, departments to help provide, you know, help do deep dives into -- into practices and reports to see if we are administering our departments with the best or the -- in the most efficient ways possible --

BY MS. WALLACE:

Q. There are --

A. -- and by recommendations.

Q. Would it be fair to characterize GAO as an oversight entity?

MR. ANTONUCCI: Objection.

THE WITNESS: That is how I would view them, yes.

BY MS. WALLACE:

Q. Are you -- in your role as the CMO, are you made aware of GAO recommendations for the Department of Defense in Defense Health Agency as it relates to TRICARE?

MR. ANTONUCCI: Objection.

THE WITNESS: I am aware of the ones that they, you know, of -- they have -- I have seen certain GAO reports when they pertain to clinical issues within the TRICARE health plan.

BY MS. WALLACE:

Q. You're generally made aware of GAO reports?

A. I'm made aware of the ones that pertain to the areas that I am considered an SME in, a subject matter expert in. I don't receive all GAO reports.

Q. Do -- under your subject matter expertise, are you part of the team that assesses whether TRICARE is making integrity analyses and improper payment measurements?

A. I am a -- I am not one of the people

who does those audits, but I am -- I am aware that we -- that we do them to -- we direct the managed support contractors to perform audits and then we review those audits and sometimes do our own audits, if we have concerns.

Q. So that -- is that a GAO report that you would see if it had to do with improper payment measurements?

A. I would see some of those if they had to do with, you know, clinical areas. If they were -- if there were nonclinical conditions, you know, the -- then that would -- might go to a different TRICARE division, or, yeah -- yeah, TRICARE health plan division.

Q. If it relates to medical record reviews, would that come to you?

A. I would be involved in it, yes. One of several people.

Q. Are you aware of --

MR. ANTONUCCI: I apologize, I got disconnected for about a minute.

Would it be possible to have a readback of the questions from the last two minutes, please.

MS. WALLACE: Yeah. Let's go to have

record.

THE VIDEOGRAPHER: We're going to go off the record. Time is 1:29 p.m.

(Recess taken from 1:29 p.m. until 1:31 p.m.)

THE VIDEOGRAPHER: Back on the record at 1:31 p.m.

MR. ANTONUCCI: For the record, my Internet connection was disconnected after Ms. Wallace asked the witness what the GAO is. I just heard a readback of the questions during a break and the questioning, and I object to every question after what is GAO.

BY MS. WALLACE:

Q. All right. Dr. Ruck, are you generally aware that the GAO, in February of 2015, has encouraged the Department of Defense to adopt medical record review of its payments in order to verify coding accuracy and claims for reimbursement?

MR. ANTONUCCI: Objection.

THE WITNESS: I am not aware of that specific report. But as a general practice, we do make an effort to ensure that we -- that claims are being processed

properly.

BY MS. WALLACE:

Q. Based on your knowledge of TRICARE as the CMO, does TRICARE perform a medical record review of claims submitted for reimbursement?

MR. ANTONUCCI: Objection.

THE WITNESS: Most of the medical record reviews are done at the level of the managed care support contractor as part of their requirements to ensure that no fraud, waste, or abuse is being performed. And we review those, you know, those reports, hear any concerns or findings that they -- that they have found and assist in the resolution of any that are -- that are found to be improper.

Does that answer your question?

BY MS. WALLACE:

Q. Do you know when, based on your understanding, your MCOs began reviewing medical records to corroborate claims for reimbursement?

MR. ANTONUCCI: Objection.

THE WITNESS: I am personally not aware of that. I was not with the TRICARE health plan before 2022. They have been

doing it since that time. And I'm sure they were probably doing it before then too. But I cannot confirm with any accuracy as to the date that they started doing such.

BY MS. WALLACE:

Q. Do you think it is important to verify claims submitted for reimbursement with verification of medical record review as the CMO of TRICARE?

MR. ANTONUCCI: Objection.

THE WITNESS: I agree that there -- that there needs to be an audit process to -- to help ensure that these are being performed. The -- you know, are being submitted and reimbursed properly. The -- an audit process is typically a selection of those claims for review to verify and to -- and then to make sure that the documentation comes over with the billing for each of them is appropriate for the procedure that they were authorized for.

BY MS. WALLACE:

Q. Is that a yes?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I agree that it is important to do so.

BY MS. WALLACE:

Q. And I asked earlier if you know when medical record review began at TRICARE.

Do you know when?

MR. ANTONUCCI: Objection.

THE WITNESS: No, I could not give you a date as to when it started.

BY MS. WALLACE:

Q. If I told you that it was not implemented in March 22nd of 2024, do you have any reason to disagree with that?

MR. ANTONUCCI: Objection.

THE WITNESS: I know that we were reviewing medical records. As I said, there is an audit process. The audit process does not mean that 100 percent of records are reviewed. It means that the medical records are reviewed during the audit process and that they -- and that documentation for claims is being properly submitted and checked against what was authorized for those -- those services, you know, when the authorization was --

was administered.

BY MS. WALLACE:

Q. What is your testimony regarding when TRICARE began an audit process that involved the use of confirming claims submitted for reimbursement with an evaluation of medical records?

MR. ANTONUCCI: Objection.

THE WITNESS: As I said, I know that we've been -- we've been performing audits since at least 2022, for -- looking for fraud, waste, and abuse. That's been part of the -- of the -- you know, of the contractual responsibilities of a managed care support contractor.

MR. ANTONUCCI: Excuse me.

MS. WALLACE: Yes.

MR. ANTONUCCI: Can you articulate how this is connected to Dr. Ruck's disclosure as a nonretained expert witness?

MS. WALLACE: Yes. We're talking about the reimbursement of TRICARE, which I understand that he's an expert in.

MR. ANTONUCCI: You're asking him

about the audit process, not reimbursement.

MS. WALLACE: Well, the audits are related to reimbursement.

MR. ANTONUCCI: I mean, they're technically related to the entire program, aren't they? I don't think that's within the scope of his -- his disclosure.

MS. WALLACE: I think that it is.

MR. ANTONUCCI: All right. Well, I object on the basis that this line of questioning is beyond the scope of Dr. Ruck's disclosure as an expert witness.

MS. WALLACE: Okay.

BY MS. WALLACE:

Q. All right. Doctor, I have a couple of more questions about medical record review.

Are you aware that in your role as CMO that Congress, the ranking member committee on the budget, has recommended to the Department of Defense that it should implement a more comprehensive TRICARE and proper payment measurement methodology that includes medical records review?

MR. ANTONUCCI: Objection.

THE WITNESS: I am not aware specifically of that -- of that recommendation.

BY MS. WALLACE:

Q. And so that is not something that you personally as a CMO have been working on TRICARE?

MR. ANTONUCCI: Objection.

THE WITNESS: No, I -- we have -- I am not involved in the -- in individual medical record reviews in response to claims processing.

Again, that is a responsibility of the managed care support contractor, and then a -- we have other subject matter experts who review the findings of those audits.

BY MS. WALLACE:

Q. Is it your testimony that the process of medical record review would fall on an administrator or MCO and not on TRICARE itself for those reviews or audits?

MR. ANTONUCCI: Objection.

THE WITNESS: So, yes, the -- contractually, the managed care support

contractor is required to have a program that looks for fraud, waste, and abuse to include audits and medical record reviews as necessary to ensure that they are -- this is being accomplished.

You know, as the -- the TRICARE health plan has individuals other than myself -- I do not review that particular report -- who look at those results and to ensure that they are meeting their contractual requirements.

BY MS. WALLACE:

Q. And that's not under your purview, if I'm understanding your testimony correctly?

MR. ANTONUCCI: Objection.

THE WITNESS: Correct.

BY MS. WALLACE:

Q. Okay. Can you tell me how TRICARE assists beneficiaries residing in rural areas?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. So I can describe that. It's a broad area.

Do you want to, you know, to limit the -- or redefine the question? Or do you want me to just launch into a

30-minute talk about how we -- how we help rural areas?

BY MS. WALLACE:

Q. Let me narrow.

If there are TRICARE beneficiaries in rural areas that, due to access to care, have to use nonparticipating providers, is that the type of beneficiary that can sometimes be subject to increased fees for that reason, out-of-pocket pays?

MR. ANTONUCCI: Objection.

THE WITNESS: So if you are a beneficiary who resides in an area that -- and in those areas, you know, it depends if you're at a Prime network -- you know, in a Prime service area or if you live outside a Prime service area. So we have many bases that are in rural areas. But those are -- those are closer to Prime service areas if they are surrounding a military treatment facility and base.

The -- if you -- but they live outside and are not within the -- a required radius of the -- of a Prime service area, the -- then you are a

TRICARE Select member.

So, in those areas, if there are network providers within the area that you are -- you know, that are available to you, you are required to use those. If there are non -- if there are no network providers within a radius, then the direction from -- you know, to the managed care support contractors are to essentially utilize them as network providers to reimburse them.

You know, that the -- because they are nonnetwork providers, that usually means there's a higher cost to the government, but we want to minimize the -- you know, the cost to the individuals themselves.

If -- but if a person chooses to go to a nonnetwork provider when there are alternatives, then, yes, there would higher point of service charges and out-of-network charges.

BY MS. WALLACE:

Q. Thank you.

A. And if we need to send them to, you

know, to a place -- you know, that's also -- again, we -- those are -- those are other considerations to make sure that they -- that they get the proper care, you know, regardless of where they live.

We've also increased our telehealth programs to help with some of that to make up the difference for primary care and some specialties, like dermatology, for instance, to allow them, you know, greater access where they might -- they don't have to drive as far to get care if they live in what's considered a health desert.

Q. One of your designations in this case is TRICARE's funding sources.

TRICARE does not operate from a trust fund, like the Medicare system; is that accurate?

MR. ANTONUCCI: Objection.

THE WITNESS: We receive our funding each year through the Department of Defense budget.

BY MS. WALLACE:

Q. And it's not from a trust fund within the Department of Defense budget. Is that your understanding?

A. That is my understanding.

Q. And so there's no -- if TRICARE pays a medical claim, a submitted claim, do you know if there are funds set aside to be recovered later?

A. The -- the TRICARE contract is already funded because it's a contract. It's -- the -- although our operating costs come from the department, you know, through the Department of Defense, you know, for instance, if we go on furlough, they're still covered, they're still paid because it's a contract. So they're not subject to those government shutdowns and et cetera.

Q. Does TRICARE do subrogation liens, do you know?

MR. ANTONUCCI: Objection.

THE WITNESS: I am not familiar with that term.

BY MS. WALLACE:

Q. So -- and you're not aware on whether TRICARE seeks to recover payments that have been made on behalf of a beneficiary who's received payment from a third party? It's called a lien.

MR. ANTONUCCI: Objection.

THE WITNESS: Oh, yes, I -- we do

recover things through -- from other health insurance, if they -- you know, even within our MTFs, if they come in and they have other health insurance, we will submit a claim to other health insurance to -- for that.

BY MS. WALLACE:

Q. Is there a department that manages liens at TRICARE?

MR. ANTONUCCI: Objection.

THE WITNESS: There are -- not within TRICARE. There are within the Defense Health Agency, but that's not within us.

BY MS. WALLACE:

Q. Is that an outsourced component of TRICARE or is it in-house?

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q. If you know.

MR. ANTONUCCI: Objection.

THE WITNESS: I am not an expert on the financial recovery steps that go -- you know, there's steps we go through to accomplish that. I know that some of that is accomplished through the managed

support contractors. Some of that is done through the MTFs and their patient administration divisions.

So we would probably need to consult somebody else to get a more detailed answer.

BY MS. WALLACE:

Q. Because of the interplay between TRICARE For Life and Medicare, do you know how TRICARE For Life might be affected if Medicare's funding or structure was altered in the future?

MR. ANTONUCCI: Objection.

THE WITNESS: We are not dependent upon Medicare for the operation of the TRICARE For Life program. We are simply the -- its called wraparound insurance -- you know, coverage. The -- so what Medicare doesn't pick up, we do.

And there are a small number of instances where we can even cover things that Medicare doesn't and then we would pick up that bill for them.

BY MS. WALLACE:

Q. And so if Medicare were to cease being a party of the TRICARE For Life, it's your

testimony that nothing would change for TRICARE absorbing those additional costs?

MR. ANTONUCCI: Objection.

THE WITNESS: I am not an expert on the financial aspects of this program. I would imagine that there would be an increase in costs. How they would be paid for or funded, I do not know.

But, as I said, you know, we do not -- our TRICARE For Life program would not shut down if Medicare were to cease to exist.

BY MS. WALLACE:

Q. Could Congress make changes to the TRICARE For Life, if that occurred, if it wanted to?

MR. ANTONUCCI: Objection.

THE WITNESS: You know, Congress can always choose to make changes. The question would be is would there be a political appetite to do so.

BY MS. WALLACE:

Q. Do you have any knowledge, as we sit here today, as to whether the TRICARE plans that currently exist will be -- will exist in the

future?

MR. ANTONUCCI: Objection.

THE WITNESS: As far as I understand things, the -- the -- you know -- since we are -- have just initiated and started a new eight-year contract, all of those programs will continue in their entirety at a minimum through the end of that contract.

And -- and, as I said, we are already planning the next contract to simply build upon, not to -- not to change the existing contract.

MS. WALLACE: All right. Let's take a break.

THE VIDEOGRAPHER: We're going to go off the record at 1:52 p.m.

(Recess taken from 1:52 p.m. until 2:02 p.m.)

THE VIDEOGRAPHER: We're back on the record at 2:02 p.m.

BY MS. WALLACE:

Q. Dr. Ruck, thank you for your patience today. I just have a couple of more questions, then I'm going to turn it over to defense counsel.

We talked earlier about the many changes that have been made to the TRICARE policy manuals over the life of the program.

Do you remember that testimony?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I recall us talking about that.

BY MS. WALLACE:

Q. Would you agree with me that there is no guarantee that the program will continue to exist in its current form as it relates to the remainder of the plaintiffs, the bellwether plaintiffs' life expectancies in this case?

Do you agree with that?

A. As much as anyone can point to at the moment -- looking at the past history of the health benefit, there does not seem to be any political appetite to remove the benefit, even if they decided to restructure how it was administered.

Can I absolutely say that it will remain in this -- in its current form? No.

Q. And to the extent that a plaintiff has access to other health care in the future, TRICARE is always, as you state in your

declarations, always the secondary payor, according to the policy and statutes that control it; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, it is -- that is correct that we are -- if they have other health insurance, which they are not required to have, then we would be second payor. If not, we're primary payor.

BY MS. WALLACE:

Q. And the nonprovider, non -- I think you word it in your designation as the nonparticipating providers, that is controlled that -- even the nonparticipating providers is controlled by TRICARE policy and MCOs?

MR. ANTONUCCI: Objection.

THE WITNESS: Nonparticipating providers are not -- are providers who have not agreed to join the network and have not agreed to accept TRICARE reimbursement as payment in full.

So they can -- so there's a difference between a nonnetwork participating provider and a nonparticipating nonnetwork provider.

A nonparticipating network provider is -- is subject to payment -- sorry, participating nonnetwork provider is subject to -- to TRICARE payment issues. They -- but they will -- you know, they have not agreed to, like, for instance, any discounts.

The -- a nonnetwork, nonparticipating provider may not accept TRICARE as their -- as a method of reimbursement in which case, you know, the patient may be required to pay additional. They can submit bills, you know, to the -- for reimbursement to the managed care support contractor, but they will not get back the entire amount that they may get billed.

BY MS. WALLACE:

Q. A non -- there are a number of nonnetwork, nonparticipating providers that don't take TRICARE insurance?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. Similar to, you know, there are providers that don't take United Health or Aetna or other -- you know, from other entities.

BY MS. WALLACE:

Q. Right. And so there's a large number of providers that if you have TRICARE you still can't see, just like with any other insurance plan?

MR. ANTONUCCI: Objection.

THE WITNESS: Correct. You know, you can see them, but the -- but your payment would be significantly more than it would be if you saw a network provider.

BY MS. WALLACE:

Q. And you may not be compensated through TRICARE insurance?

MR. ANTONUCCI: Objection.

THE WITNESS: Certainly not fully.

BY MS. WALLACE:

Q. And can you tell me, do -- could you confirm for me that TRICARE rates typically follow in line with Medicare rates, which are some of the lower reimbursement rates for providers in the country?

MR. ANTONUCCI: Objection.

THE WITNESS: We are required by law to pay like Medicare. We're applicable.

BY MS. WALLACE:

Q. And do you agree with me that Medicare rates are among the lowest reimbursement provider rates in the country?

MR. ANTONUCCI: Objection.

THE WITNESS: I am not a financial expert. But I have -- I have heard that mentioned.

BY MS. WALLACE:

Q. And would you agree that reimbursement rates for providers will need to stay competitive so that providers will continue to treat the beneficiaries?

MR. ANTONUCCI: Objection.

THE WITNESS: That would be outside the scope of my duty performance to make that determination.

BY MS. WALLACE:

Q. If Congress were to decide to fund less than the expenses of the TRICARE program, do you have any idea how they might try to make up that difference in appropriation, for example, paying providers less or charging beneficiaries more?

MR. ANTONUCCI: Objection.

THE WITNESS: That is not -- those

are not mechanisms that are allowable within -- or that are in the current contract. The -- it would require changes to U.S. Code from my understanding.

BY MS. WALLACE:

Q. And so as we sit here today, if -- if Congress were to make the determination that they're not willing to fully fund the expenditures associated with TRICARE, you aren't certain how that would affect the TRICARE program?

MR. ANTONUCCI: Objection.

THE WITNESS: I could not comment upon that.

MS. WALLACE: Okay. Thank you so much, Dr. Ruck. No further questions.

MR. ANTONUCCI: Okay. Really quick.

EXAMINATION

BY MR. ANTONUCCI:

Q. Thanks for your patience, Dr. Ruck.

Based on your experience with TRICARE, is it fair to say it's reasonably likely the TRICARE program will continue into the future?

A. Yes, within the realm of my

expertise, that is -- we anticipate it extending into the future -- into the foreseeable future.

MR. ANTONUCCI: Thanks. That's all for me.

MS. WALLACE: No further, Dr. Ruck. Thank you for being here today.

THE WITNESS: Thank you.

THE VIDEOGRAPHER: This ends today's deposition. We're going to go off the record at 2:11 p.m.

* * *

(Deposition concluded at 2:11 p.m.)

* * *

(Signature not reserved.)

* * *

CERTIFICATE

I, CHRISTINE A. TAYLOR, Registered Professional Reporter, Certified Court Reporter, do hereby certify:

That RICHARD RUCK, M.D., the witness whose deposition is hereinbefore set forth, was duly sworn by me, and that such deposition is a true record of the testimony given by such witness taken stenographically by me to the best of my ability.

I further certify that I am not financially interested in the outcome of this action, a relative, employee, attorney or counsel of any of the parties, nor am I a relative or employee of such attorney or counsel.

IN WITNESS WHEREOF, I have hereunto set my hand this 17th day of February, 2026.

CHRISTINE A. TAYLOR
Registered Professional Reporter
Certified Court Reporter #4736

&

& 3:4

1

1 4:10,23 38:2 38:23 101:13 101:18 115:21 115:22
1.0 114:24
1/17/2025 5:3
10 5:5 30:10 53:4,10 75:20 93:23,25 99:5 100:21
100 163:18
1070 30:11
1070s 75:21
1072 53:5
1075 99:5
1076 53:5
109 5:6
10:01 52:17,19
11 1:16 2:1 5:13 6:6 137:11
11:06 100:25 101:1
11:16 101:1,3
12 5:6 46:8 90:25 109:9,12
125 90:13
12:11 140:12 140:14
12:59 140:14 140:16
13 5:8 46:8,8 124:6 133:11 133:18,19 134:4,14,18
134 5:8
13a 120:14
141 5:1,2
146 5:3
15 5:9 38:4 95:17 134:23
157 112:1 115:10
17th 155:11 183:18
18 78:23
181 4:4
1960s 32:1 136:6
1969 8:17
199 94:8
1990 43:24,24
1990s 136:7
1991 42:8
1994 32:3
1995 42:8
1997 32:4
1:00 140:20,21
1:04 140:21,23
1:29 160:3,4
1:31 160:4,6
1:52 175:17,18
1s 84:8
1st 102:2

2

2 4:12,14 38:7
2/15/2019 5:5
2/5/2026 4:21
20 54:14,19 56:16 58:17 59:11 60:19
2000 42:16
2003 42:16
2007 42:19
2015 48:4 90:14 125:3 136:15 137:11 160:17
2016 131:23
2018 96:19 100:4
2019 95:17
202.514.2000 3:11
2020 131:24
2021 90:24
2022 15:8 31:22 48:12,19 161:25 164:11
2024 163:12
2025 5:6,9 38:4 90:25 102:18 114:25 115:12 120:14 134:23
2026 1:16 2:1 4:22 6:6 26:24 38:8,13,15,17 101:11,16,18 102:3,14 183:18
2026-2027 28:2 29:15
2027 27:7,21
2053 131:25
20530 3:11
21 77:9 78:24 78:25
21572 183:22
21st 8:17
22nd 163:12
23 54:2 77:11 77:12
26 54:2 77:12
26.5 131:23 133:3
262 115:5
27 38:8
28144 3:5
2:02 175:18,20
2:11 182:10,12

3

3 4:16 7:20 38:4,9
30 43:13 168:1
30th 155:11
31st 155:17

32 94:8,11
38 4:10,14,16 4:21,22,24
39 137:6,9

4

4 4:21,23 38:13 38:14 101:13 111:22
4.23.3 120:13
4/20/18 96:23
42 91:2
4327 94:24
437 94:23
4736 183:24

5

5 4:22,25 38:15 38:17,19,21 40:2 100:20
525 3:5

6

6 4:24 38:20,23 41:23
6.7 131:24
630 4:13

7

7 4:3 5:1 40:1 133:24 134:5 134:11 135:9,9 139:24 140:6 141:2,5,12
704.633.5244 3:6
7873194 1:25
7:23 1:4
7a 5:2 141:6,12

8

8 4:25 5:3 38:22 146:6,8
897 1:4
8:54 2:2 6:6

9

9 5:13 116:19
9.2 58:11
90s 103:22
93 5:5
95 42:10
950 3:10
96 42:10
9:34 37:19,20 37:20,22
9:55 52:16,17

a

a.m. 2:2 6:6 37:19,20,20,22 52:16,17,17,19 100:25 101:1,1 101:3
ability 36:9 84:3 86:19 87:13 127:7 183:11
able 28:1,22 40:15 57:22 58:21 70:3 82:18 86:4 92:18 93:4 142:22 144:18 149:7
above 129:1
absolutely 176:21
absorbing 174:2
abuse 22:1,15 34:7,12 35:23 36:1,13 161:11 164:12 167:2
accept 177:20 178:9
access 76:11 92:23 103:3 111:4,8 142:16 148:8 151:10 168:6 170:10 176:24
accident 82:24
accidentally 142:12
accommodated 57:8
accomplish 172:24
accomplished 167:5 172:25
accountability 157:7
accounting 34:10
accuracy 24:19 110:18 134:9 160:19 162:4
accurate 105:15 129:5 136:4 170:16
accurately 132:17
achieve 60:18 60:19
achieved 54:19
acknowledged 157:5
act 12:11 32:4 84:19
acting 145:9
action 183:14
actions 144:11 146:2 155:23 156:3
activated 58:2
active 49:12 53:17 54:5,6 54:18 57:19,24 58:16,16 59:5 59:5 61:10 63:23 64:18 67:22,23 68:12 68:13 69:4,6 69:15 70:15 72:23 73:6,9 79:18 112:13 112:13 127:8

actively 66:19 79:13
acts 53:4
actual 11:1 116:17 139:11
actually 10:14 12:12,13 16:14 17:6 19:15 22:14,17 31:23 33:19 34:16 46:2,4 50:6 66:19 81:13 88:18 98:22 115:23 120:19 130:3 132:19
actuarial 120:24
actuary 120:12
add 30:14 84:17 85:1,13 89:9 138:13
added 32:5 39:21
additional 32:5 141:18 174:2 178:12
addressed 35:18
addressing 147:2
adequately 150:6
adjusted 101:21 112:22 116:9
administer 106:4,8,16
administered 33:4 35:6 50:13 51:6,10 88:5 127:3,19 131:10,14 132:9 164:1 176:20
administering 157:17
administers 105:23
administration 45:13 48:3 62:17 63:12 156:14 173:3
administrative 45:23 46:18 47:5,7 48:6 141:16,21
administrator 106:15 141:22 143:21 146:22 152:12 166:21
administrators 9:23
admissibility 133:10
adopt 160:18
adult 54:1 68:2 77:13,15 80:2 112:18
advances 61:11
aetna 178:24
affairs 10:8 51:7,9 123:10
affect 28:12 181:10
affected 101:8 148:8 156:24 173:10
affecting 75:8
affirm 7:21,22 8:5
affirmatively 64:5
afghanistan 42:22
age 77:11 78:3 78:14,23,25
agencies 95:8
agency 3:15 5:6 7:3 8:20 9:16 20:18,21 31:15 34:6 39:15 43:16 48:14 88:15 94:20 105:25 106:2 106:15 109:6 109:21 110:4 110:25 130:6 139:7 145:8,10 146:21 150:4 156:7,8 157:12 158:6 172:13
ages 77:7,8
ago 17:14 32:20 124:12 129:16 137:1
agree 7:23,25 31:1 36:8 51:5 55:1 56:5 65:4 65:16 77:22 79:2 85:22 86:16 87:10,18 88:1 96:8 97:1 99:11,14,22 100:10 107:25 113:1,11,15 114:17,19,22 115:9,11 117:16 119:3 119:14,24 121:5 129:13 129:20 131:6 132:2 138:9 142:3 146:18 146:25 147:9 162:12 163:1 176:9,14 180:1 180:9
agreed 6:13 127:10 141:1 151:17 177:19 177:20 178:6
ahead 8:12 11:7,8 96:1 128:8

alleged 25:2
allow 127:23
150:4 170:9
allowable
109:3 181:1
allowed 18:5
30:18 39:15
66:10 84:7
87:1 154:12
allows 125:21
altered 173:11
alternate
138:17
alternatives
169:20
amended 87:25
amount 50:9
51:25 55:17
71:22 72:18
96:14 104:16
108:7 114:23
115:20 117:3
117:11 178:16
amounts 49:25
50:9
amputation
61:7
amputees 61:9
analyses
158:23
analysis 149:18
151:17
announce 95:9
annual 30:25
121:6
answer 11:9,13
11:15 13:8
15:3 86:4 93:4
150:21 161:17
173:6
answering
78:22
anticipate
29:19 123:13
182:1
anticipates
31:16
anticipating
30:3
anticipation
123:16,19
antonucci 3:9
4:4 6:24,25 8:6
11:6,8 13:6
14:2 15:13
18:24 19:5
20:1,7,24
21:16,18 24:6
24:22 25:4,15
26:3,16 27:4
27:20 28:5,25
29:17 30:8
31:2,12 32:9
32:23 33:18
34:2,22 35:1
35:20 36:15,23
37:13,16 40:22
41:3,18 42:5
45:8 46:1 47:9
47:12 49:2
50:5,17,24
55:4 56:6,12
56:25 58:9,19
59:3,15,20
60:4,12,21
61:24 62:5,18
63:19 64:13
65:7 66:21
67:7 68:8,23
69:5,18 70:18
70:22 71:9,14
72:14 73:2,12
74:5,11,25
75:9,18 76:13
76:22 77:2,23
78:8 79:3 80:3
80:9 81:12,18
83:8 84:1,14
84:24 85:10,18
85:25 86:6,18
87:11,19 88:2
88:12 89:4,24
90:17 91:6,21
93:1 95:21
97:4,13 98:10
99:12,25
100:11,22
101:19 102:7
102:16 103:12
103:17 104:7
104:21 105:16
106:21 107:17
108:6,17
110:20 111:2,9
113:5,17 114:1
114:18 115:2,4
115:14 117:6
117:21 118:21
119:7,15 120:3
121:7,15
122:11,15
123:1,23
124:15 125:4
126:8 127:21
129:19 131:7
132:5,13 133:5
133:8 134:1,12
136:1 137:19
138:10 139:4
139:23 140:9
141:10,23
142:6,18,24
143:11,22
144:7,14 145:2
145:12,20
146:24 148:10
149:1,13
150:12 151:12
151:24 152:14
152:22 154:7
155:7,15 156:5
157:1,10,25
158:8 159:20
160:7,21 161:6
161:22 162:11

162:25 163:7 163:14 164:8 164:16,18,25 165:5,10 166:1 166:8,23 167:15,20 168:11 170:17 171:16,24 172:10,17,20 173:12 174:3 174:17 175:2 176:5 177:4,16 178:21 179:6 179:14,22 180:4,13,24 181:12,17,19 182:3

anybody 52:13

anyway 17:19

apologize 159:20

apparently 113:20

appeals 107:11

appear 22:7 137:16

appearances 3:1

appeared 22:17 22:19

appearing 6:12

appears 110:11 115:11

appetite 31:18 174:21 176:18

applicable 80:7 179:24

applied 48:24

apply 28:3,7 48:22 56:22 96:18

appointment 153:11 154:17

appointments 147:8,10,19 153:20 155:1

approach 128:10,24 130:6

appropriate 162:21

appropriated 108:11

appropriation 108:5 180:21

appropriations 108:16

approval 83:23

approve 121:9

approximately 15:7 32:20 45:20,22 58:8 59:7 116:19 124:12 125:2 129:16 136:8 136:10 137:1

april 90:24

area 19:7 55:20 63:8 110:2 145:15 167:22 168:13,16,17 168:25 169:3

areas 97:8,10 97:15 145:21 158:18 159:10 167:19 168:2,6 168:14,18,20 169:2

army 42:10,14 42:20,20,24 43:4,11 47:22 49:19

article 5:1,2 124:21 125:7 126:5 127:18 127:23 128:3 129:8,9,13,23 130:25 133:19 133:23 134:2 136:13 137:11 137:17,23 139:19,21 141:2,5,7

articulate 164:18

aside 171:3

asked 10:20 11:20 13:5,25 21:25 48:4 99:18 108:14 127:24 128:1 145:14 160:9 163:4

asking 26:19 29:6,8 34:16 72:5 115:23 164:25

aspects 174:5

assesses 158:22

assessment 151:18

assist 40:12 41:7 126:24 161:15

assists 167:19

associated 71:21 74:3 80:7,11 181:9

assume 111:7

assumption 122:5

attach 64:11

attached 62:9

attempt 121:23 138:22

attention 11:24 19:17 112:1

attorney 20:10 183:14,16

audit 36:3 162:13,17 163:17,17,21 164:4 165:1

audits 107:5 159:1,3,4,5 164:10 165:3 166:17,22 167:3
aurora 10:14
authenticity 133:10 137:18
author 137:10 137:22 139:18
authority 53:9 107:11 155:6
authorization 32:4 53:4 84:18 93:16 148:6 154:22 163:25
authorizations 148:8 155:5
authorized 31:9 82:25 92:10 117:17 153:12,23 156:2 162:22 163:24
authorizing 82:21
autism 35:6
automatic 53:19,20 64:19 66:18
automatically 55:11 63:24 64:2 79:19,20
autopay 142:9
availability 63:6
available 87:17 102:25 111:18 127:14 153:5 169:4
avenue 3:10
avoid 151:6
awarded 30:1
aware 16:19 32:7 33:2,15 33:20,23 34:20 35:16 36:12 91:10,18,22 92:8,21 94:11 99:19 104:4,8 109:22 122:25 124:11 141:19 141:24 142:15 142:19 143:7 143:12,14,18 151:14 158:5,9 158:15,17 159:1,19 160:16,22 161:24 165:19 166:2 171:20
awful 50:1

b

b 4:8 20:16 74:2,7,17,22 96:20 99:3
back 19:16 31:24,25 37:21 42:13,22 43:15 52:18 65:12,13 79:23 92:4 98:15 101:2 140:15,17,22 140:24 147:12 160:5 175:19 178:15
background 37:11
barrier 98:5
base 112:12 168:21
based 27:10,14 40:15 44:12,13 45:5 55:16,17 59:11 60:14 62:23 63:5 75:7 79:5 85:2 89:18 97:16 101:14 104:17 110:16 126:4 130:14 132:4 135:22 151:10 151:23 161:3 161:19 181:21
bases 168:18
basic 40:10 54:4
basically 81:1 104:11,24
basics 104:9
basis 31:1 121:6 165:11
bates 38:18,21 101:12
bears 38:18,21
beaumont 42:9
began 161:20 163:5 164:4
beginning 21:10 120:23
behalf 2:5 17:22 23:12 99:20 134:22 171:22
believe 16:24 17:1,10,20 19:9 20:22 21:9 22:24 39:5 40:17 53:5 69:10 94:11 96:24 103:6 116:24 127:16 151:14
bellwether 13:14,19,21 23:12 24:4 176:12
beltway 9:18
beneficiaries 58:11 64:4,5 70:14 72:9,11 72:24 92:22 96:11 97:3

99:3,21,24 102:3 103:16 116:16 130:11 138:25 141:20 142:4,23 143:8 144:12 149:24 150:1,5,9 153:25 154:2 156:22 167:19 168:5 180:12 180:22
beneficiary 74:2 75:8 92:11 97:2 104:16,17 153:10 168:8 168:13 171:22
beneficiary's 151:3
benefit 13:10 25:20 28:12 30:10 32:6,16 33:3,6,14 47:17,24,25 60:2,7,17,18,23 77:16 78:11,20 79:8,12 82:13 83:19 84:17 85:4,14 86:2 86:21 88:5,6 88:23 89:8,10 106:3,25 107:12 112:12 113:9 115:12 118:11 126:17 127:5,14,19,20 131:11,13 136:18,18,22 138:23 139:9 139:12,14 153:5 176:17 176:18
benefits 28:23 29:13,19 30:14 30:17,25 31:18 50:7 61:18 72:10 81:4,11 84:17 85:1,16 112:17 117:25 120:16 138:14
benning 42:17
best 35:7 67:16 157:18 183:10
bethesda 42:15
better 57:13 138:23,25 139:2
beyond 29:14 120:19 165:12
bill 173:22
billed 71:1 178:16
billing 24:20 35:17 162:20
billion 114:24 115:21,22 116:19 120:13 131:23,24 133:3
billions 132:12 133:4
bills 178:13
birth 8:16,17
bit 50:11 94:25 128:5 152:9
blanket 89:15
blue 80:20,20 125:16
board 45:1
bokrenhagen 7:2
borkenhagen 3:15 20:2,15
boss 109:25
bottom 120:7
break 29:10 48:20 51:16 52:9,11 100:21 101:5 140:5,7 140:8 160:11 175:15
breakdown 58:14
brief 144:21
briefly 6:16
broad 29:7 45:16 153:23 155:5,23 156:3 167:22
broken 98:8
brought 16:14 17:11
browser 39:12
budget 112:20 116:8,13,25 117:5 121:3,9 121:23 136:11 165:21 170:20 170:23
budgets 116:14
build 175:11
building 9:13 9:18,19,19,25 10:10,18
bump 50:3
bundlings 138:18

c

c 4:1,24 6:1 18:12 20:16
cac 103:2
calculated 98:4
calculation 25:2
calculus 62:21 63:9,13,15 76:8
calendar 112:23 116:10
call 64:25 65:24 124:6
called 103:22 126:14 127:10 171:23 173:16

calls 118:19
camp 1:4 6:9 6:23 12:4,10 12:15,21 13:1 13:14,21 14:1 14:20 23:8,23 134:22
cancelled 147:7 147:10,19
cap 107:21
capable 9:3
capacity 63:17 85:17
capitol 125:3 125:16
caps 98:3 100:9
car 82:24
card 103:2
care 25:8,13,14 26:15 27:3,14 35:6 36:2 46:9 47:14,16,18,19 48:10,15 55:7 55:20 62:25 63:7,12 66:24 70:8 79:8,12 79:15 82:7,11 92:23 93:17,18 98:6,7 104:18 104:18 105:4 108:23 109:2 117:9 126:19 126:24 138:19 143:4 148:9 153:25 161:9 164:15 166:14 166:25 168:6 169:9 170:4,8 170:11 176:24 178:14
career 42:3 43:23 45:6,9 47:4
carmen 16:17 17:4 90:11
carolina 1:1 3:5 13:16 15:4 17:8,16,21 18:2 22:25 41:16
carson 43:12
case 1:4 7:20 11:19 15:1,1 15:15,22,25 16:3,5,12,20 17:1,8,10,16 18:1,2,5,17 19:10,14,16 22:18,24 23:1 24:3 25:3,8 32:19 41:14 66:23 77:11 83:9 96:24,25 101:9 107:4 130:4 135:4 143:14 152:24 154:6 170:13 176:13 178:11
cases 1:6 13:14 15:2,11 17:22 18:1,21 21:21 22:1,13,14,16 22:20 35:25 71:2 77:12 82:5 97:14 107:12
catastrophic 98:3 100:9 107:21
catch 125:8
categories 53:25,25 55:16 55:24,24 58:15 64:10 68:3 92:12 100:6,8
categorize 55:15 113:7
category 55:6 57:18 59:1 72:2
caught 114:12 154:19 155:18
causation 24:2
cause 61:17 148:3 149:16 149:20
caused 61:5
cautious 130:12
cease 173:24 174:11
center 42:10,15 42:15 46:23 51:11
certain 53:24 77:7 84:3 86:23 87:17 96:10 97:3,14 100:6 158:11 181:10
certainly 179:15
certainty 28:1 152:1
certificate 183:1
certified 45:1 183:4,24
certify 183:5,12
cetera 12:8 26:5 27:15 28:11,14 35:11 35:11 36:4 55:19 57:8 62:24 76:4,5 85:5 90:3 107:21 113:14 119:20 123:14 171:13
cfr 94:8
champus 31:25 33:13 103:23 104:1,5,9 122:1 126:14 136:5

chance 152:5
change 33:12 33:14 49:7 53:10 72:18 75:7 85:1,13 85:22 86:20,22 86:22 87:21 88:4,7 90:1,5,9 91:1,4,23 99:23 100:2 101:15 104:16 138:8 174:1 175:12
changed 35:10 49:24 51:1 88:10 91:19 92:19 95:4
changes 27:1 27:13 31:9 84:12,16,22 85:6,8 86:11 86:13,14,15 87:1,9,15 88:21 89:3,22 90:4,13 95:9 101:6,17 102:18,22 125:11 126:1 129:15 130:24 130:25 131:21 138:13,22 174:14,19 176:2 181:3
changing 101:7 125:18
characteristics 120:2
characterize 157:23
charges 73:23 105:21 169:21 169:22
charging 180:22
chart 26:5
chat 37:4,7,24 39:10,11,21 93:22 124:4 133:14,16 146:5
chcbp 112:17
check 93:2 137:22 147:12
checked 163:23
chief 8:22 42:19 43:10
child 22:1,15
children 45:7 45:21 46:6,9 46:21 77:20,25 78:14,23
children's 77:5
choice 93:11
choices 43:23
choose 64:8 66:11 93:11 105:8,18 125:22 130:17 152:16,25 174:19
chooses 169:18
christine 1:23 7:5 183:3,23
church 9:7
circumstances 25:18 73:1 76:15
citation 22:6
civil 2:5 21:23
civilian 49:14 70:9 71:20 105:1
claim 12:21,24 81:21,23 83:5 171:2,2 172:5
claimants 87:18
claims 118:2,2 126:25 160:19 160:25 161:5 161:21 162:8 162:18 163:22 164:5 166:12
classifies 112:9
clear 52:8 68:20 123:7 141:16
clearly 120:10
clinic 43:5 46:11,24
clinical 24:3 42:25 43:3,8,9 45:11,12 46:9 158:12 159:10
clinically 45:6 46:13
close 39:25
closed 10:23,25 101:15
closely 36:2 48:7
closer 168:19
cmo 15:7 50:4 109:19 144:4 145:11 158:4 161:4 162:9 165:20 166:7
coda 24:19
code 30:11 53:5 75:21 87:22 181:4
coded 53:4
coding 24:19 24:23 160:19
cognizant 117:8
coinsurance 67:4,10 69:17 70:17 72:13 108:3 119:13
colleague 7:1 90:11
collected 115:22 116:16

collections 114:24 115:13
collects 118:18
colorado 43:12
coloring 19:19
combined 131:20 147:6
come 39:3 65:12,13 79:23 145:4,16 159:16 171:7 172:3
comes 31:6 49:23 116:23 162:20
coming 18:3 37:11 39:6 49:22 140:7
commander 43:3,8,9
commencing 2:1
comment 29:9 35:13 97:21 145:15 181:13
comments 95:14 98:1,4
commercial 100:14 106:24 107:6,9
commission 131:22 133:1,7
commitment 44:12
committee 165:20
communication 8:1
community 43:11 47:23 73:4 126:20
compare 102:19
compared 96:22 108:9 118:12
compensated 51:18 179:12
compensates 125:18
compensating 51:24
compensation 126:2
competitive 180:11
complained 141:21
complaints 97:23 142:1,4 142:20 143:19 145:19
complete 42:13 57:14 133:22
completed 54:14 56:14
completely 6:18 47:15 129:17
complicated 76:7
component 114:14 172:15
comprehensive 165:23
computer 12:2 39:13,16
concern 33:24 147:1,18
concerned 36:17,25 147:21 154:3
concerning 34:25
concerns 34:19 35:16 36:12 144:6,25 146:21 151:8 155:4 159:5 161:13
concluded 182:12
condition 57:2 57:4,20
conditional 77:21 78:6 79:1,5
conditions 55:18 63:1,3 75:23 118:6 159:11
conferred 140:25
confirm 10:20 39:1 115:24 162:3 179:18
confirming 164:5
confusing 51:3
congress 13:10 26:10 27:6,9 27:18 30:7,12 30:25 31:4,11 32:12 33:15 35:3,19 36:6 36:17 49:11,13 49:13 51:1 53:6,8,12 64:3 68:11 82:11 83:18,24 84:2 84:9,11,21,25 87:5,9,15 88:10,16,20 89:6,13,18 91:15,18 92:8 98:19 99:10,15 99:23 101:23 103:19 107:1 107:15,18 108:11 109:4 110:25 114:9 116:23 117:2 119:21 120:25 121:5 123:25 129:14 139:6

139:15 144:24 146:20 147:2 165:20 174:14 174:18 180:18 181:7

congress's 32:7 89:3

congressional 108:4,15 113:21 114:5 122:17

congressiona... 97:20 114:3

congresswo... 147:5,20 151:8 151:15

connected 62:4 62:8 164:19

connection 160:8

consider 139:8

consideration 32:8 126:3

considerations 170:3

considered 61:15 78:16 86:13 88:7 90:9 126:6 131:4 158:18 170:12

considering 33:16 96:25 124:13 131:1 132:3,7

consist 112:12

consistency 127:2

consistent 89:2 102:5 119:13

consult 173:4

contact 66:25 94:19 143:3 150:7

contacting 149:24

contains 38:5

content 40:13 40:21

contingent 61:2 61:22

continually 138:22

continue 30:3 30:15 31:17 46:21 48:14 57:22 66:10 77:11 79:22 122:4,6,19 123:16,20 154:25 175:7 176:10 180:11 181:23

continued 57:3 58:4 77:19 79:8,12,15 112:16

contract 10:16 29:23,25 35:10 57:22 86:25 88:5 106:3,6 106:11 138:12 138:15,20,21 171:5,6,11 175:6,9,11,13 181:3

contracting 10:5

contractor 10:11 66:24 105:4 108:23 109:3 161:9 164:15 166:14 167:1 178:15

contractors 10:14,15 36:3 106:4 126:24 159:3 169:9 173:1

contracts 10:15

contractual 145:23 164:14 167:11

contractually 166:25

contribute 109:23

contributed 40:21 108:8

contribution 104:16 108:1

contributions 108:22 116:24 117:14

control 177:2

controlled 177:13,15

copay 69:19 71:18 119:20

copayment 103:11

copayments 67:4 72:12 73:10 80:7 86:15,16 87:10 101:16 102:4,5 108:2

copays 28:19 67:11 69:17,23 70:7,10,17 71:21,25 73:6 73:7,16,17,22 80:11,24 93:3 93:9,15 101:21 105:20 107:20 118:6,8,9 119:9,13

copy 133:22

corporation 119:22

correct 13:23 15:9,20 20:8 20:22,23 22:9 23:18,25 24:5 24:7 25:3,9,14

26:2,15 27:3 30:7 40:19,21 40:23 41:19 45:3,4 48:21 50:16 51:8,12 52:1,6 53:10 53:11 60:3 61:3,23,25 62:4 63:20,25 64:6,7,21 73:13 80:4 81:6,19,23 83:25 84:13,23 85:9,17 102:2 102:6 103:23 103:24 104:3 104:20 105:17 106:17 109:1 110:15,19 144:5 167:16 177:3,6 179:7
corrected 141:3 143:5 144:19
corrections 34:13
corrective 144:11 146:2 155:23 156:3
correctly 83:14 167:14
correlates 115:13,21
corroborate 161:21
cosmetic 82:18 82:24
cost 11:20 26:5 27:1,5 80:7 92:10 98:2 99:1,20 100:9 101:8,12 115:12 123:14 125:23 132:19 169:14,16
costs 4:22 26:24 27:14,18 28:2 38:17 96:10 97:3,12 97:16 99:9,20 99:24 103:5 116:17 117:10 117:11 171:7 174:2,7
counsel 6:19 7:22 20:1,6,19 20:20 21:6,14 21:15 39:22 109:14 133:20 133:25 137:17 141:1 175:25 183:14,16
count 50:7 156:15
country 9:17 27:15 117:10 179:21 180:3
couple 155:21 165:17 175:23
course 66:16
court 1:1 7:4 13:22 14:11 16:4 22:18,19 22:22 37:6 39:22 58:23 80:16 105:23 134:11 183:4 183:24
courthouse 16:8
cover 38:14 81:1 82:18 83:20 87:16 144:17 173:20
coverable 83:13
coverage 60:2 60:11 65:6,18 73:18 74:2 75:15 76:12 77:20 78:19 79:1,4 82:22 83:3,6 85:9 135:10,24 136:20 138:3 138:12 142:5 142:13 144:12 150:10 151:6 151:23 154:3 154:11,15,18 173:17
covered 53:22 68:3 82:9 83:25 84:13 87:16 147:23 148:23 171:10
covers 84:22
create 98:5
created 53:7
creation 42:2
credentials 45:5 46:22
criteria 89:11 153:6
crosland 145:7
cross 80:20,20
current 8:18,19 8:21 26:5 34:17 91:4 93:7 130:3 150:1 176:11 176:22 181:2
currently 13:22 26:9 27:22 30:4 47:1 111:23 131:10 174:25
curriculum 4:24
customer 142:17 149:25 150:7
cv 1:4 14:12 20:4 38:20 41:22,24 42:1

d

d 6:1
d.e. 4:13
daily 95:8
dakota 15:5 17:22 18:5 22:23 41:17
data 23:15,15 23:23 24:20
date 6:5 8:16 8:17 66:2 75:16 95:16 150:15 151:4 153:4 155:10 162:4 163:9
dated 38:4,8,13 38:14 137:11
david 6:3 20:10 145:8,8
day 46:6 51:20 183:18
days 61:10
dc 3:11
dccs 43:2 48:4
deadline 150:4 151:4,9
debate 124:22 137:12
decades 56:3
december 5:9 38:4 134:23
decide 30:14 65:11,22 66:23 84:25 89:9 180:18
decided 43:22 43:24 56:15 91:15 126:14 176:19
decision 98:18 98:21 152:6
decisionmaker 30:6
decisions 25:21
declaration 15:24 19:25
declarations 41:1,5,8 177:1
declared 77:14
decrease 30:16 117:3
decreasing 29:20
deductible 119:4,4
deductibles 72:12 80:6 108:2 119:12
deductions 119:10
deep 157:15
deeply 147:21
defendant 3:8 15:21 17:12,25 18:15
defense 3:15 5:7 7:2 8:19 9:15 20:6,18 20:21 31:15 32:3 34:6 39:14,22 43:16 48:13 49:16,18 49:20 50:14,22 51:2,23 53:3 84:18 88:14 94:8,19 105:25 106:2,13,14 109:6,20 110:3 110:10,12,14 110:17 111:14 112:9 113:3 114:7 117:19 121:2,3,20 123:10 130:5 131:22 133:20 133:25 136:10 136:11 139:7 140:25 145:7,9 146:20 150:3 156:6,7 157:13 158:6,6 160:17 165:22 170:20 170:23 171:9 172:12 175:24
deficiencies 144:5
define 54:10
defined 114:3
defines 114:9
definitely 22:23
degree 92:19
delay 148:12 155:20
delays 154:4,22 155:4
deleon 16:17 17:4 90:12
delivery 102:9 143:4
demonstrate 67:17
demonstration 35:6
denial 81:24 83:7,11
denied 148:7 148:13,15
deny 81:23 83:3
department 3:9 5:7 42:19 49:16,18,19 50:14,16,19,22 50:22 51:2,6,9 51:23 94:7 97:25 99:6 106:13,14 109:20 110:10 110:12,14,17 111:13 112:9 113:2,25 117:19 121:19 122:3 123:4,9 123:10 131:22

135:3 142:17 145:1 157:13 158:6 160:17 165:21 170:19 170:23 171:8,8 172:8
departments 157:14,17
depend 67:11 71:15 75:24
dependent 62:3 62:6,20 63:15 71:22 77:15 78:15 173:13
dependents 45:7,21 77:21 78:16
depending 55:19 64:9 66:6 72:15,25
depends 69:22 168:14
deployed 42:22
deponent 6:10 8:1
deposition 1:13 2:3 4:14,18 6:8 7:19,24 8:4 14:5 19:23 20:7 21:2,3 22:10 37:3 38:7,11 51:19 134:7,18 182:9 182:12 183:7,8
deputy 43:3,8,9 145:9
dermatology 170:9
describe 37:9 37:25 167:21
describes 135:9
description 4:9 40:8,10
desert 170:12
deserves 126:3
designated 23:7 25:1
designation 81:3 177:12
designations 14:9,16,21,25 17:9 23:4 28:21 41:1 49:13 80:14 104:15 170:13
designed 125:8
despite 149:23
detailed 173:5
determination 88:6 89:8 180:16 181:7
determinations 24:4 85:5 86:22
determine 57:12 62:12,22 62:24 66:25 92:5 94:13 144:18
determined 27:6 82:8
develop 57:4
developed 58:3
dfas 49:23
dha 9:23 10:1 21:6,14 49:15 49:17 87:2,7 89:1 118:22 150:4
difference 108:14 131:12 170:8 177:23 180:21
differences 93:19 106:23 118:14
different 49:22 51:13 55:5,16 62:11 63:9,18 67:18,19 73:15 76:6 93:20 104:23 116:3 118:5,11 119:18 126:22 136:21 138:21 152:12 153:7 159:13
differentiate 127:11
difficult 156:25
difficulties 143:2,25 149:23
direct 11:24 46:8 47:14,16 47:19 48:10,15 89:14 104:18 150:14 152:3 159:2
directed 36:19 99:15 142:10 144:16 150:16 151:3 153:19 154:9 155:8,22 156:9
direction 31:5 88:16 98:19 121:18 122:2 150:24 153:18 169:8
directives 123:3,6,7,15
directly 47:16
director 145:7
dis 149:15
disability 62:8 62:23 63:16
disagree 90:15 91:3,8 113:23 135:25 138:2 148:21 149:11 149:15 163:13
disagreement 132:18
discharged 58:18

disclose 17:18
disclosure 4:10 14:8 38:3 164:20 165:8 165:13
disclosures 38:6
disconnected 159:21 160:8
discounts 178:7
discuss 25:16 26:8 80:14 130:23,24
discussed 12:9 19:10 41:15 58:15 129:21 130:1,7 153:8
discusses 115:10
discussing 33:10 131:9
discussion 32:15 33:5,20 132:16
discussions 33:2,24 35:3
disease 42:23 107:5 138:16
diseases 45:3
disenroll 65:2 65:21 66:19 79:23 150:1,25 152:20,21 153:15 154:5
disenrolled 65:23,23 79:22
dishonorably 54:15
dissatisfaction 98:1
distinct 111:10
distinguished 14:15
distinguishes 62:16
district 1:1,1 13:16
dives 157:15
division 1:2 6:5 159:13,14
divisions 173:3
divorce 75:16 76:10
doctor 9:10 24:1 43:21,22 105:13 128:16 129:7 133:12 133:16 134:17 139:20 146:11 165:17
document 1:5 5:22 11:25 35:21 38:5 39:23 94:3,5 94:13 95:6,22 95:24 96:2,9 101:10,14 102:6,14 109:8 110:9,24 111:21 112:1 113:1,2,12 115:5 117:19 128:15 132:24 134:17 135:8 146:11,14
documentation 162:20 163:22
documented 149:24
documents 4:19 16:2,22 19:25 23:11,19 38:12,16 141:4
doing 22:13 43:25 46:25 95:11 99:9 132:20 162:1,2 162:5
doj 20:10 21:15 38:14
dollars 132:12
door 10:22,25
double 137:22
doubt 33:14
download 154:16
downward 112:23 116:10
dr 4:15 5:8 6:10 7:15 8:15 11:9 37:23 39:1 40:2 41:24 52:12,22 86:10 95:21 101:5 130:22 134:3,21 135:2 135:8,24,25 136:25 138:3 141:15 145:8 160:15 164:19 165:13 175:22 181:16,20 182:5
draw 111:25
drawn 132:17
drive 170:11
dropped 142:12
drugs 102:10
due 6:15 67:6 74:21 153:20 155:17 168:6
duly 7:9 183:7
duration 28:22 30:24
duties 52:4 57:6,14 61:8
duty 49:12 51:20 53:17 54:5,6,18 57:25 58:16 59:5,5 61:10 63:23 64:12,18 67:22,23 68:12 68:13 69:4,6 69:15 70:15

72:23 73:6,9 79:19 112:13 112:14 127:8 180:15

e

e 4:1,8 6:1,1 18:11,12 20:16 20:16
earlier 10:19 41:16 53:6 63:22 99:19 116:2 124:10 124:17 126:13 152:21 153:8 163:4 176:1
early 52:10
earn 44:19
earned 60:2,11
earning 63:17
earns 61:21
eastern 1:1 6:7 13:16
easy 64:24
economically 33:3 138:24
edited 40:20
edition 90:24 95:13
effect 147:7 150:19 152:2 155:17
effective 82:13 89:11 101:17 102:2
efficient 32:14 126:12 127:4 157:18
effort 160:24
eight 29:23 46:8 175:6
either 22:5 24:24 27:11 50:2 54:14,18 54:20 63:12 66:5 81:15 82:3 87:16 90:1 112:22 116:10 153:21
elect 64:6 66:15 105:7 136:16 153:2
elected 66:6
eligibility 53:13 53:17 56:3,21 57:18 61:2,22 62:2,13 75:7 76:20 77:5 78:6 85:2,2
eligible 53:14 54:9 55:7,25 56:2,18 58:5 59:13 60:6 61:20 63:5 74:6,9,9,10,17 77:12,14,17 78:1,3,11,19 120:16 127:12 150:5 153:3 154:23
eliminate 32:8 32:11 33:20 120:1
eliminating 32:21 43:23 124:13 131:4,9 137:2
elimination 33:16 126:7
ellis 94:19
email 103:6
employee 16:17 17:4 110:13 183:14,16
employer 8:18 8:19
enacted 99:3 103:21
encoded 30:10
encouraged 160:17
ended 136:15
ends 182:8
enlisted 56:14
enlistment 96:23
enroll 62:13 64:6,8,20 65:1 65:4,5,16,17,25 66:15 74:7 79:14 80:2 153:3
enrolled 63:11 63:24 64:2,15 64:16 66:16,20 68:14 79:9,19 79:20,21,24
enrollee 55:24 71:23,24
enrollees 71:24 117:14 137:4
enrollment 28:19 55:23 64:19 65:20 66:18 67:8,15 67:20,23,25 68:7,11,19,22 69:1,4,25 70:1 70:20 72:1,13 73:5 74:22 80:11 91:20,23 93:8,14 99:1 104:6 107:20 108:1 118:4,24 118:24 153:6
enshrined 30:13
ensure 6:17 117:4 146:1 153:19 160:24 161:10 162:14 167:4,10
entire 76:3 77:17 127:18 129:8,9 140:2 165:6 178:16

entirely 63:17 90:18 152:21
entirety 33:17 33:21 175:7
entities 10:1 47:15 178:25
entitled 101:11 137:12
entity 157:8,24
environment 9:23
equal 59:7
error 67:1 114:11
esq 3:4,9,10
essentially 16:1 20:4 126:18 142:9 153:22 154:13 169:10
establish 73:17 107:8 150:2,5
established 13:10 29:16 31:4 32:4 49:11 53:3,8 68:10 103:19 107:19 139:6 139:14
establishes 27:18 107:15
establishment 94:9 95:15
estimated 120:17
et 12:8 26:5 27:15 28:11,14 35:11,11 36:4 55:19 57:8 62:24 76:4,5 85:5 90:3 107:21 113:14 119:20 123:14 171:13
evaluate 57:12
evaluation 164:6
evans 43:11
event 76:10
events 75:8
everybody 124:7
exact 5:22 58:22 90:20 92:18 137:16 155:10
exactly 10:5 17:15 18:19 75:5 98:22 99:10 134:6
examination 4:3,4 7:13 181:18
examined 7:9
example 15:12 56:22 75:14 84:5 99:22 180:21
examples 10:3 10:10 28:8
except 68:6 98:21
exception 70:15
excluded 83:19 84:9
exclusive 81:14
excuse 10:24 164:16
executive 50:15
exhibit 4:9,10 4:14,16,21,22 4:24 5:1,2,3,5,6 5:8 11:25 38:2 38:7,9,14,17,20 39:9 41:23 93:23,25 109:9 109:12 124:6 129:5 133:11 133:13,18,23 133:24 134:4,5 134:11,14,18 139:24 140:6 141:2,5 146:6 146:8
exhibits 5:13 5:20 37:2,9,24 38:23 39:2 141:12
exist 70:8 113:16,18 174:12,25,25 176:11
existing 175:12
expectancies 176:13
expected 57:9 57:13 99:2
expenditures 181:9
expenses 99:4 180:19
experience 47:7 181:21
experienced 154:3
expert 4:11 5:8 13:1,5,25 14:14 18:22 21:22,25 22:5 24:9,24 32:18 38:3 40:18 134:21 135:2 158:19 164:20 164:24 165:13 172:21 174:4 180:6
expertise 19:7 145:15 158:22 182:1
experts 166:16
explain 53:14 80:16 116:1
explicitly 113:3
expressed 98:6

expresses 146:21
expressing 98:1
extend 150:4 151:4
extended 151:9
extending 182:1
extensive 149:23
extent 176:23
extra 91:15,16
extractions 23:15,23
eyck 18:9,12
eyes 125:8

f

facilities 9:16 126:21
facility 9:7,12 48:9 70:12 71:18 104:19 168:21
fact 119:24 120:1 148:13
factually 136:4 138:6 149:17
failed 145:22 145:23
failure 65:4,16
fair 105:14 157:23 181:22
fairly 45:16 108:9
fall 123:11 166:20
falls 9:7 47:24
familiar 12:4,6 12:23 16:16 40:5 109:20 113:21 134:19 135:5 171:17
familiarize 94:17
families 69:16 72:23 98:7 102:21,21
family 53:18,24 54:6,11,20 59:6,14,18 60:1 64:15,22 66:8 67:22,25 68:2,13 69:6 70:16 73:3 112:14 127:8
far 12:7 19:7 27:8 29:21 34:4 48:3 49:21 105:20 107:24 153:7 170:11 175:3
faster 127:1
fault 151:3
feasible 138:24
feature 37:4,24 39:10,12,21 93:22 124:4 133:15,17 146:5
february 1:16 2:1 6:6 38:13 38:15 95:17 137:11 160:16 183:18
fed.r.civ.p.26 4:12
federal 2:5 5:5 51:22 52:5 59:12 60:3,10 94:4 95:6,7 147:24 148:24
fee 11:20 26:1 26:14 27:1,5 27:13,22 28:13 31:3 67:19,25 68:7,22 69:1,4 70:1 92:15 93:19 96:16,17 96:21 100:2 101:22,24 102:19 103:8 104:23 105:5 105:10 107:8 107:16,19 138:19
fees 4:22 26:5,9 26:24 27:18 28:2,19 38:18 67:9,15,21,24 68:10,19 70:20 72:13 73:5 80:11,23 93:8 93:14 98:4 99:1 101:12 102:23 104:6 104:12 107:20 108:20 118:4 118:24 168:9
fellowship 42:23
fellowships 44:7
fields 45:15
figure 129:3
file 82:4 83:14
filed 12:21,24 18:16 82:1
filing 83:12
final 20:3
financial 5:6 19:1,8,8 52:2 109:21 110:6 110:25 172:22 174:5 180:5
financially 183:13
find 16:22 17:14 18:19 32:25 35:24 58:23 75:20 100:13 115:16 122:17 130:18 138:4

findings 161:14 166:16
finished 95:22 95:23
first 7:9 39:9 48:7 71:1 82:2 83:15 96:23 99:2 112:10,25 124:22 125:13 126:4 130:6 155:21
fiscal 5:6 114:24 115:12 117:4 120:13 131:23,23
five 22:14,16 45:15,20,22 46:3 52:12,13
fix 142:11
fixed 96:14 98:5 99:4 145:19
flight 42:21
floors 9:20
focus 138:17,18 139:11
folks 9:21 96:18 107:10 110:1,6 121:18
follow 19:16 179:19
follows 7:10 11:15
footnote 137:6 137:9
forensic 24:15
foreseeable 182:2
foreseen 148:17
forget 133:14
form 141:3 176:11,22
forms 136:21
formula 63:18
fort 42:17 43:11
forth 107:13 183:7
found 161:14 161:16
foundation 125:5
four 42:12 43:7 44:15 46:8 155:13
frame 29:15 58:2
fraud 33:25 34:7,12 35:17 35:23 36:1,13 161:11 164:12 167:2
free 98:7 102:11 104:24
front 11:4,18
fuel 15:17,19
full 8:13 133:22 134:9 142:12 177:21
fully 9:3 179:15 181:8
function 117:18
functions 60:1
fund 120:25 121:5 170:16 170:22 180:18 181:8
funded 107:25 108:14 121:21 123:20,22 171:6 174:8
funding 49:9 107:24 109:4 117:12 121:13 121:25 122:6,9 122:19 123:17 137:3 170:14 170:18 173:11
funds 171:3
furlough 171:10
further 94:18 149:18 150:17 151:4 154:24 181:16 182:5 183:12
future 25:3,12 25:25 26:13 27:2 28:23 29:12 30:24 31:11 41:7 121:12 125:15 136:21 173:11 175:1 176:24 181:24 182:2,2

g

g 6:1 20:16
gao 157:8,11,23 158:5,11,15,20 159:6 160:9,13 160:16
gary 134:23
gatehouse 9:7
general 20:20 21:6,14,24 25:18 34:9,10 42:18 45:1,2 94:12 111:16 145:7 160:23
generally 92:21 98:4 141:19 158:15 160:16
generate 131:24
generated 132:25
germany 42:21
getting 60:24 103:7 143:2 148:5

giovanni 3:9 6:25 20:6 141:9
giovanni.ant... 3:12
gist 94:12
give 18:22 28:8 52:9 56:21 58:22 84:4 146:15 163:8
given 21:22 22:10 108:9 117:3 121:18 149:4 150:25 183:9
gives 93:10
giving 23:5 72:4
glp 84:8
go 11:7,8 19:16 37:16,18 47:25 52:16 57:10 58:5 64:25 65:9 83:12 88:18 89:18 90:19 91:25 92:4,17 94:21 95:4 96:1 100:24 105:2,6 105:8,18 108:22 109:2,5 111:11 128:3,5 128:6,7,8 135:7 140:10 140:11,17,20 147:12 152:11 159:12,25 160:2 169:18 171:9 172:22 172:23 175:16 182:9
goes 31:24,24 67:18,19 101:22
going 7:19 11:10 23:3 37:1,8,23,25 39:18 40:9 41:21 52:7,16 52:22 62:25 72:6 93:21,24 94:22 95:20 100:24 105:14 109:7,13 111:21 123:21 124:6,7 126:22 126:23 128:2 130:12,18 133:12,21 134:10 135:7 139:18,25 140:4,11,19 141:4,17 146:4 146:7 160:2 175:16,24 182:9
golkow 6:4
good 6:21,24 7:15,16 52:13
government 15:21 17:11 18:17 32:19 39:13 51:14 52:5 59:12 60:10 95:11 125:24 132:12 135:4 157:7 169:15 171:12
government's 95:7
governs 52:24
graham 3:4
grandfathering 98:2
great 8:11 11:1 134:13 147:16
greater 92:10 93:11 138:18 170:10
group 6:22 10:5 29:20 59:6 73:17,20 96:20,22 99:3
groups 32:5 54:4 67:20 68:12 153:7
gs 49:14
guarantee 28:22 29:12 30:22,23 31:10 176:10
guaranteed 121:13 122:10
guaranteeing 154:14
guard 53:25
guess 14:4 35:12 39:5 60:25 111:17 139:9
guidance 123:12
guys 133:22 140:8

h

h 4:8 20:16
hand 183:18
happen 36:10 147:16 151:20
happened 48:23 57:21
happening 155:4
happy 35:14 52:14 120:9
harder 55:2
hawaii 15:1,12 15:14 41:16 43:4 48:5
head 52:8 58:21 74:13,18 89:5 122:21
headlines 125:7

headquarters 9:17 10:10
health 3:15 7:2 8:20,23 9:15 9:25 17:19 20:18,21 25:19 27:14 28:11 30:9 31:15 34:6 39:15 43:5,16 44:4 44:14,22 47:17 48:13 49:10 54:3 60:2 62:16 63:11 65:10 70:24,25 71:3,11 79:8 79:12,15 80:19 81:7,7 82:12 83:10,15 84:17 88:15 94:19,20 98:5,7 100:14 100:15 105:25 106:1,2,3,14,24 106:25 107:4,6 107:9 109:6 110:3,7 112:12 112:17 113:7,8 115:20 116:21 117:9,23,24,25 120:16 121:2 123:10 127:14 130:5,19 137:4 139:7,13,14 143:3 145:1,8 145:9 146:20 147:22,24 148:24 150:3 153:1,16 156:6 156:8,9 158:6 158:13 159:14 161:25 167:7 170:12 172:2,4 172:5,13 176:17,24 177:7 178:24
healthcare 131:21 148:22
healthy 55:13
hear 52:25 130:11 147:13 161:13
heard 6:17 12:7 126:10 143:15 160:10 180:6
hearing 129:24
heed 9:13
hegseth 111:23
held 6:9
help 36:19 57:15 109:1 127:6 157:14 157:15 162:14 168:1 170:7
helped 34:11
helps 29:11 94:22
henry 5:8 134:21 135:2 138:3
hereinbefore 183:7
hereunto 183:17
higher 71:25 77:10 93:14 96:15,21 98:3 99:2,9 100:8 105:10 121:19 122:3 123:3,9 169:14,21
highlighted 94:23 97:22 112:10 131:19
hill 5:1,2 15:15 19:14 22:18 90:12 124:21 125:3,16 133:19,23 137:11 139:18 141:2,5
hire 106:15
history 14:12 30:16 31:8,24 40:9 55:18 176:16
hold 46:22
home 102:9
honolulu 16:9
honorably 54:14
hopefully 127:3
hospital 43:11
hospitals 44:23 44:24
hot 34:24 125:16
hour 51:16 52:8,10 100:19
house 172:16
how's 95:3
human 106:7

i

idea 126:3 180:20
identification 38:24 94:1 109:10 134:15 141:13 146:9
identified 25:13 40:16 144:6 145:22 151:10 153:13 154:4
identifying 37:5
iii 4:11
illinois 156:17 156:21
illness 58:3
imagine 36:6 86:7 156:23 174:6
implement 101:24 165:22

implemented 99:6,15 163:12
implying 115:19
important 60:25 162:7 163:2
improper 158:24 159:7 161:16
improve 57:10 86:2 130:2
improvements 86:12
improving 87:16
incentive 52:2 60:17
incentives 60:18
inception 122:1
inclination 21:4
include 34:9 140:3 156:20 167:3
included 26:23 114:7 142:4
includes 112:15 113:13 140:1 165:24
including 8:2 129:16 143:9 156:17
incomplete 143:20 149:11
incorrect 138:6 149:17
increase 95:2 96:9 99:19 101:16 102:4,9 117:2 174:7
increased 97:2 97:11,16 98:3 99:23 100:9,16 139:3 168:9 170:6
increases 30:17 87:10 100:5 102:13 103:11
increasing 86:16
incurred 120:18
indefinitely 121:14 122:10
independent 70:5
independently 53:10
indicate 5:22
indicates 117:19
individual 17:10,17 18:4 18:6 23:8 25:21 28:24 29:13 59:13 76:19 78:17 152:6 166:10
individual's 76:11
individually 28:7,16
individuals 10:7 20:6 58:14 59:25 69:3 84:6 108:8 167:7 169:16
inefficient 126:15
infectious 42:23 45:2
information 11:18 17:19 19:24 25:19 41:10 58:23 72:5 94:19 151:2 152:9
informed 102:22
initially 65:1 66:20 143:1
initiated 175:5
injuries 61:19 62:10
injury 58:3 61:3,5,15,16,23 62:3 63:10
inquiries 150:7
inside 118:22
inspector 34:10
instance 24:9 28:9 67:22 80:24 82:17,23 84:4 109:6 117:9 153:1 170:9 171:9 178:6
instances 34:12 36:5 83:6 173:20
institute 42:25 77:10 146:2 153:23
instituted 155:24
insurance 54:3 65:11 70:24,25 71:4,12 73:21 80:20 81:5,7,8 82:2 83:5,10 83:15 100:15 104:6 106:19 112:7,15 113:4 113:7,13 114:16,23 116:2 117:18 117:24 118:18 118:19,20,23 119:6,14 120:1 125:23 129:18 137:4 153:1,16 172:2,4,5

173:16 177:7 178:20 179:4 179:13
insurer 80:25 81:22
integrated 48:16
integrity 158:23
intend 127:22
intended 112:20 116:7
intending 116:24
intent 117:7
intentional 67:1
intentionally 45:17
interact 10:17
interest 130:9
interested 36:7 43:25 183:13
international 106:7
internet 128:14 160:8
internship 42:9 44:16
interplay 173:8
interpretation 139:10
interview 48:25
introduce 6:19
introduced 21:9 97:17
involve 90:4
involved 19:18 21:23 23:17 98:14,17,20 144:4,11,23 145:25,25 152:4 159:17 164:4 166:10
issue 18:20 27:11 35:22 67:9 149:8 151:14,23 153:21,22 154:20 155:16 155:19,25
issues 55:15 141:21 142:16 143:1,7,10 144:13 147:2 148:17 150:11 150:18 151:10 153:13 158:12 178:4

j

j 145:8
january 38:8 101:18 102:2 155:9 156:3
jet 15:17,19
job 1:25 8:21 8:22 52:3 80:18,19
jobs 44:18
joey 3:10
jogging 125:1
join 177:19
joined 7:1 9:22
joseph 7:1
joseph.b.turner 3:12
judge 22:25
june 8:17
justice 3:9 12:11 135:3

k

k 18:12 20:16 40:16
keep 52:8 121:4 121:23
key 111:15
kind 21:3 72:23 73:11 86:14
know 12:7,8,9 12:14,20 13:4 13:9,13,20,23 14:4 15:11 16:1,21 17:7 17:11,17,25 18:4,20 19:1,8 19:13,16,25 20:17 21:3 22:16 25:20 26:9,18,19 27:9,10,11,17 28:4,6,9,12,13 28:18 29:6,9 29:21,21,24 31:14,15,19,23 33:1,10,11,12 34:4,5 35:3,5,7 35:8,24 36:1,3 36:5,16,17 39:4 40:9 41:6 41:7 43:20 44:17,23 45:14 46:9,10,14 47:13,15,25 48:9,11 49:9 49:12,18 50:7 55:8,12,24 56:16 57:5 58:3,13 59:1 61:6,12,17 62:22,22 63:13 64:21,23 65:2 66:3,4,9 67:16 68:1,15,24 69:25 70:1,3,4 70:6,9,9 72:16 72:17 73:18,19 75:2,21 76:2 77:8,10,15 78:2,15 79:18 80:24 81:7 82:13 83:9,11 83:13,17 85:3

86:12,23 87:21
88:4,9,16 89:1
89:9,10,12,14
89:21 92:2
93:6,7,13,17
94:14 95:2
100:5 104:11
106:6,9,23
107:6 108:10
108:24,24,24
109:24 110:9
110:24 111:3
114:6 116:20
116:22,23
118:1,2,7
119:10,19
121:23 122:3,5
123:4,8,9,12,25
124:1,1 126:9
126:10,12,12
126:13,17
127:1,5,6,6,9
127:12,13,25
129:22,23
130:2,7,8,13,14
130:14,15,15
131:11,15,16
132:7 135:17
136:3,8,12,15
136:18,18,20
138:14,25
139:5,13,13
140:2 143:14
147:11,15
150:9,13,24
151:1,15,16,17
152:24 153:21
154:11,12,17
154:20,21
155:3,24 156:8
157:9,14,15
158:10 159:10
159:12 161:12
161:19 162:15
163:4,6,15,25
164:9,13 167:6
167:23 168:14
168:15 169:4,8
169:12,16
170:1,1,4,10
171:2,8,9,15
172:2,19,23,24
173:9,17 174:8
174:9,18 175:4
178:5,11,13,23
178:25 179:7
knowledge 17:3 33:8,9 34:17 106:20 110:16 161:3 174:23
knowledgeable 72:7

l

labeled 124:5
labels 113:3
lane 6:4
language 77:18 113:12 114:5 115:1 116:12 132:4
large 50:3 179:2
largely 126:15
larger 149:6
largest 59:2,6
launch 167:25
law 30:13 85:6 88:19 99:4 122:17 124:2 179:23
lawmakers 32:20 34:17,24 36:13 124:12 124:22 125:25 126:2,6 136:14 137:2,12
leaders 146:20
leadership 6:22 92:2
lean 39:24
learning 77:10
leave 65:13
led 147:7
legal 87:21,22 95:10
lejeune 1:4 6:9 6:23 12:5,10 12:15,21 13:1 13:15,21 14:1 14:20 23:9,23 134:22
length 55:8 60:14 62:23 75:25
lengths 147:16
letter 4:21 5:3 38:14 146:19 147:1 148:2 151:11 153:14 154:18
letters 144:24 145:10 154:13
letting 141:16
level 28:23 30:24 62:23 161:8
liabilities 120:12,24
liability 120:17
lien 171:23
liens 171:14 172:9
lieutenant 145:6
life 25:8,13,21 26:15 27:3 28:10 53:20 59:9 67:24 68:6,21 73:14 74:1,10,20,23 75:7,8 76:10 77:17 79:20 84:6 87:25

127:11 173:9 173:10,15,25 174:10,15 176:3,13
likely 97:8 110:5 181:22
limit 85:8,16 167:23
limited 8:2
line 165:11 179:19
list 82:2
listed 16:22 69:20
lists 75:22
litigation 1:4 6:9,23 12:5,22 13:2,15,22 14:20 21:23 22:4 23:13,24 24:21 41:2 90:12,16 134:22
litigations 41:15
little 50:11 94:25 128:5
live 64:9 168:16,22 170:5,12
located 9:5
lodge 133:9
login 111:15
logo 110:12
long 60:2,9 78:9,10 155:3
look 23:4 31:8 34:11 36:4,8 40:4 58:24 90:19 92:17 121:16 122:16 128:15 129:14 131:18 167:9
looked 148:3
looking 14:10 32:13 34:6 35:24 86:2 95:6 117:20 128:20 133:3 134:18 164:11 176:16
looks 34:8 94:18 96:12 97:19,22 128:25 133:2 134:20 157:12 167:2
lose 144:12
losing 142:5 151:6
loss 65:5,17 144:16
lost 150:10 151:10,23
lot 50:1 107:2,3
lots 118:14
louisiana 156:17,21
lower 72:1 93:9 93:14 100:13 132:24 179:20
lowest 180:2
lunch 140:8,13

m

m.d. 1:15 2:3 4:25 7:8 183:6
made 31:10 88:7 99:23 117:14 126:11 158:5,15,17 171:22 176:2
main 3:5
maintain 112:23 116:11
maintained 48:5
major 68:3 126:1
majority 59:2 112:19 116:7 116:22
make 11:11,12 32:13 34:13 35:7 41:10 66:1 84:12,16 84:16,22 85:6 85:8,13 86:11 86:12,20 87:1 87:9,15 88:4 106:10 127:3 129:5 134:8 137:22 138:23 140:1 142:11 147:16 150:17 151:19 152:4,6 153:24 160:24 162:19 170:3,7 174:14,19 180:15,20 181:7
makes 57:21
making 87:17 98:18,21 109:23 130:23 130:25 158:23
manage 10:15 118:12 150:7
managed 13:11 36:2 66:24 105:3 108:23 109:2 118:11 126:23 159:3 161:9 164:14 166:14,25 169:8 172:25 178:14
management 7:20 84:8 86:24 107:4,5 138:16 139:12 145:24
manager 93:17

manages 47:18 172:8
mandated 26:10 64:3 97:20
mandatory 122:18
manner 5:20 148:19
manual 88:7,11 88:21 89:23 90:2,2,3,14,14 90:23 91:5
manuals 87:24 88:14 176:3
march 163:12
marilyn 5:3 146:19
marital 79:6
mark 94:19 140:6 141:1
marked 38:23 39:21 41:22 93:23,25 109:9 134:14 141:12 146:6,8
married 54:2 75:25 76:3
martin 137:10
match 112:21 116:9 117:12
material 26:24
materials 11:4 12:1
matishak 137:10
matter 14:22 14:24 15:11 17:15 24:9,24 116:18 141:16 143:23 148:4 149:6 158:19 158:21 166:15
matters 19:9
mcelhiney 134:23
mco 166:21
mcos 161:20 177:15
mean 10:12 14:7 20:9 29:14 44:6 45:24 49:9,17 50:6 79:16 86:5 91:13 99:8,13 119:5 125:10 151:13 163:18 165:5
meaning 51:22 74:22 78:12 81:17 105:3 112:21 116:8 117:2
means 8:1 56:23 163:19 169:14
measurement 165:24
measurements 158:24 159:8
mechanisms 181:1
medicaid 51:11
medical 8:23 10:8 13:10 24:2,3 25:12 42:7,10,11,14 42:15 43:10 44:7,10 46:23 54:22,24 55:14 55:18 56:20 57:4,20,25 58:6 60:7 61:11,17,18 81:4 82:17,19 82:20 83:1,3 83:19,21 85:3 85:4,4 86:21 88:6,23 89:8 107:12 153:14 159:15 160:18 161:4,7,20 162:9 163:5,16 163:20 164:6 165:18,24 166:11,20 167:3 171:2
medically 54:16,21,23 56:7,11,17,24 58:18,18 61:5 61:15 82:8
medicare 51:11 73:19,23 81:9 81:9 120:16 127:12 170:16 173:9,14,18,21 173:24 174:11 179:19,24 180:2
medicare's 75:3 173:10
medicine 45:11 45:11 46:5
meet 16:14 55:23 78:3,10 83:21 88:19 129:24 145:23 153:6
meeting 106:11 167:10
meets 89:10
member 54:6 54:20 59:6 61:21 64:15 78:2 117:10 146:19 147:1 165:20 169:1
members 45:7 45:22 53:18,18 53:19,24 54:11 63:23 64:12,22 66:8 67:23 68:1,2,13 69:7 69:16 70:16 72:23 73:3,9

98:6 112:14,14 125:19,22 127:8,9
memory 125:2 139:17
men 35:19
mentioned 20:13 101:10 130:10 136:13 147:3 180:7
mentioning 124:17
message 111:22
messaging 8:2
met 20:1,5,13
method 66:2 142:9 178:10
methodology 165:24
methods 138:17
mhs 120:14,17
midnight 75:15
military 43:21 44:1,2,22 46:23 48:8 49:10 50:7 57:4,7,10,16,19 57:23 59:22 60:20 70:11 71:17 75:16 76:19 104:18 112:7 114:15 116:21 120:15 125:18,22 126:21 168:21
miller 5:8 134:21 135:2 135:25 136:25
miller's 135:8 135:24 138:3
million 58:11
millions 156:24
mind 11:24 18:3 23:6 42:4 47:11 120:20 150:22
minimize 34:7 36:9,20 169:15
minimum 45:14 175:8
minute 94:15 100:21 159:21 168:1
minutes 52:12 159:24
mismanagem... 147:7
missed 143:9 143:13,16 147:14
missing 128:9 128:12 153:20
mississippi 156:16
missouri 156:18
missouri's 156:18
mixed 46:16
model 39:16
modification 99:7
modified 88:10 89:2
moment 37:4 94:16 109:16 176:16
monetary 51:25
money 44:19
month 47:3 48:19 117:11 137:24
months 43:15
morning 6:21 6:24 7:15,16 10:21 11:5 124:10
mosads 125:19
move 63:13 66:8 141:17 146:16
mtf 71:17 102:10 104:13 104:24
mtfs 172:3 173:2
multiple 33:10 35:2 97:25
multitude 131:1

n

n 4:1,1 6:1 18:11 20:16,16
name 6:3 8:13 13:17,18 16:18 18:3,4,9 20:12 20:13 33:12 40:4 133:24
named 13:1 133:19
names 116:3
narrow 168:4
national 32:3 46:23 53:3,25 84:18
natural 21:4
nature 6:15
naval 42:15
navy 42:11 47:22 49:19
necessarily 5:21 81:24 125:9 148:13
necessary 34:14 82:9,15 167:4
necessity 82:17 82:19,21 83:1 83:4,21
need 32:24 79:24 82:1

83:12 95:2 128:4 135:14 137:21 169:25 173:4 180:10
needed 154:1
needs 47:22 52:14 162:13
net 147:24 148:24
network 70:10 71:20 102:10 104:19 105:9 105:19 143:20 143:24 144:1 147:22 148:4 148:22 149:3,5 149:7,11 168:15 169:3,6 169:10,22 177:19 178:1 179:10
neutral 112:20 116:8,13,25 117:5 121:24
neutrality 112:24 116:11
never 19:20 30:16 33:5 46:12 48:1 51:1 65:13 73:6 115:6
new 27:11 95:9 96:11 97:16 103:8 125:21 130:13 141:22 175:6
newly 99:3
news 124:21 126:5
newspapers 12:7
noise 37:11
non 169:6 177:11 178:18
nonactive 64:11
nonclinical 159:11
nonnetwork 105:2 169:13 169:19 177:23 177:25 178:3,8 178:19
nonparticipat... 104:20 168:7 177:13,14,17 177:25 178:1,8 178:19
nonprovider 177:11
nonretained 164:20
north 1:1 3:5,5 13:16
northwestern 42:7
note 5:19 115:4
noted 98:5
notes 147:21
notice 2:4 4:14 4:17 38:7,11
notices 95:10
number 7:20 11:12 29:7 37:8 38:2,9,18 38:21 44:13 83:2 89:22 90:6,20,21 91:1,4 101:12 133:24 134:18 150:14 173:19 178:18 179:2
numbers 58:22 92:18 107:22 132:16,25 136:9
nw 3:10

o

o 4:1 6:1 20:16
oath 8:25 90:15
obesity 84:8
object 160:12 165:11
objected 137:18
objection 11:6 11:14 13:6 14:2 15:13 18:24 19:5 21:16 24:6,22 25:4,15 26:3 26:16 27:4,20 28:5,25 29:17 30:8 31:2,12 32:9,23 33:18 34:2,22 35:1 35:20 36:15,23 40:22 41:3,18 42:5 45:8 46:1 47:9,12 49:2 50:5,17,24 55:4 56:6,12 56:25 58:9,19 59:3,15,20 60:4,12,21 61:24 62:5,18 63:19 64:13 65:7,19 66:21 67:7 68:8,23 69:5,18 70:18 70:22 71:9,14 72:14 73:2,12 74:5,11,25 75:9,18 76:13 76:22 77:2,23 78:8 79:3 80:3 80:9 81:12,18 83:8 84:1,14 84:24 85:10,18 85:25 86:6,18 87:11,19 88:2 88:12 89:4,24 90:17 91:6,21 92:13 93:1

97:4,13 98:10
99:12,25
100:11 101:19
102:7,16
103:12,17
104:7,21
105:16 106:21
107:17 108:6
108:17 110:20
111:2,9 113:5
113:17 114:1
114:18 115:2
115:14 117:6
117:21 118:21
119:7,15 120:3
121:7,15
122:11,15
123:1,23
124:15 125:4
126:8 129:19
131:7 132:5,13
133:5,9 136:1
137:19 138:10
139:4 141:23
142:6,18,24
143:11,22
144:7,14 145:2
145:12,20
146:24 148:10
149:1,13
150:12 151:12
151:24 152:14
152:22 154:7
155:7,15 156:5
157:1,10,25
158:8 160:21
161:6,22
162:11,25
163:7,14 164:8
166:1,8,23
167:15,20
168:11 170:17
171:16,24
172:10,17,20
173:12 174:3
174:17 175:2
176:5 177:4,16
178:21 179:6
179:14,22
180:4,13,24
181:12

objections 4:17 11:12 38:10 99:24

obtained 48:19 49:6

obviously 53:17

occur 8:3 27:1 36:19 86:14 92:6

occurred 89:22 90:7 125:2 174:15

occurs 85:23

offer 23:8 24:8 40:10

offered 112:13 147:24 148:24

offering 24:2 24:18 25:24 26:12

offers 80:19

office 9:6,9 11:2 34:10,11 94:8 157:8

officer 8:23 42:11 43:10

official 95:8

officially 51:1

offset 18:23

offsets 19:2 25:2

oh 24:17 39:11 87:6 127:25 135:16 171:25

ohi 81:7

okay 8:8,11 11:17 13:20 16:25 18:9 21:11,12 24:17 37:1 39:8,20 44:21 49:5 51:15 53:2 69:3 72:8,21 73:9 87:8 94:21 96:1,4,7 112:11 115:19 120:11,21 124:3,7 128:6 128:6,7,8
129:3,11
133:20,21,25
134:13 135:19
135:21 139:22
140:5 141:11
146:4,16,17
165:15 167:18
181:15,17

old 103:21

once 47:2 49:5 61:21 65:13,25 66:19

ones 30:14 39:4 53:22 64:1 73:10 79:21 88:18 107:22 110:1,6 124:2 145:13 158:9 158:17

online 64:25 89:21 90:25

open 133:15

operate 114:10 122:4 170:15

operated 104:10

operating 121:5 171:7

operation 173:14

operational 45:11 46:4,5

operations 90:1

opine 25:2
opines 147:6
opinion 23:5 25:24 26:12 40:16
opinions 21:22 23:8 24:2,18
opposed 130:18
opt 53:21,21,23 53:23 74:2
opted 79:9 130:4
option 152:11 152:19 153:14
options 131:3
oral 123:7
order 7:20 41:1 50:15 54:17 65:22,23 82:9 83:13 153:17 160:19
organized 126:22
origin 119:25
original 104:4 141:3,7
originally 91:14 150:16
originate 136:6
ortiz 20:2,9,10
outcome 183:13
outcomes 138:19
outlay 116:15
outlays 112:22 116:9
outlined 26:15
outlining 144:25
outside 19:7 47:18 51:2 111:13 168:17 168:23 180:14
outsourced 172:15
overhaul 131:20 132:3,7
overlapped 46:3
overpayment 35:25
overpayments 33:25 35:17
overseas 106:9
oversight 34:9 89:15 106:2,10 107:2 150:23 157:12,24
owe 81:2
owed 67:6
own 9:19 54:3 70:5 93:12 100:15 113:24 130:18 159:5

p

p 6:1
p.a. 3:4
p.m. 140:12,14 140:14,16,20 140:21,21,23 160:3,4,4,6 175:17,18,18 175:20 182:10 182:12
page 4:2,9 40:1 94:21 111:22 112:1 113:16 113:19 114:11 114:15,20 115:5,10,24,25 120:7 128:7 129:6 135:9 146:16
pages 136:3
paid 44:10,17 49:7,12 97:9 97:10 119:18 127:1 171:11 174:7
panel 125:17 131:25
paragraph 40:2 131:19 135:8,9,20 140:3 147:6 149:23
paragraphs 125:14 126:5 129:1 135:23
paralegal 100:19
parentheses 120:13,18 125:19
parents 77:16
part 10:4,6 14:4 19:10 22:4 49:17,19 52:3,4 74:22 94:8,23 109:4 110:7 121:2 128:18 138:15 144:10 145:19 145:25 158:22 161:10 164:12
participate 152:16
participating 104:19 177:24 178:3
particular 47:22 63:7 82:22 130:4 133:7 146:14 152:24 167:8
particularly 100:3 104:23
parties 6:12 7:22,25 8:3 183:15

parts 9:21
party 22:5 106:15 141:22 146:22 152:12 156:13 171:23 173:25
pass 153:2
passes 76:19
past 25:3 30:15 40:8,25 41:4 97:9 121:17 125:25 126:1,6 126:11 176:16
patience 175:22 181:20
patient 28:10 28:11 67:5,5 72:22,25 73:11 108:1,15,22 139:3 173:2 178:11
patient's 148:8
patients 46:12 92:11 143:2
pause 6:16
pay 19:17 25:12 44:2,6,9 50:3,8 74:21 83:5 84:7 92:22 104:13 105:14 126:2 178:12 179:24
payback 44:12 44:12
paycheck 49:21
paying 74:23 96:16,17 105:20 126:19 180:22
payment 28:23 30:24 65:22 66:2,23 67:3,5 138:17 144:20 150:2 151:1 153:21 154:15 154:20 155:16 158:24 159:8 165:23 171:23 177:21 178:2,4 179:8
payments 69:14 72:22,25 73:11 87:3 101:17 139:3 150:6 160:18 171:21
payor 71:2 73:20 80:15,21 80:22 177:1,9 177:9
pays 49:7,13 168:10 171:1
pdf 129:4,6 134:8 139:24 140:1,4 141:6
pediatric 42:9 42:13,23 45:2 46:11,12,24
pediatrician 21:25 42:18
pediatrics 45:1 45:2
pending 13:15
pennsylvania 3:10
people 47:25 58:8 61:9 65:8 96:25 130:17 131:15 142:11 150:25 152:15 154:14,19 158:25 159:18
people's 125:8
perceive 149:19
percent 163:18
percentage 96:14,16 136:11
perform 57:5 61:8 159:3 161:4
performance 180:15
performed 86:24 161:12 162:15
performing 106:11 164:10
period 12:16,18 74:24 76:1 96:23 122:20 132:15 152:17 155:3
periodically 65:10
permitted 81:23
person 28:17 28:17,17 55:13 56:15 81:25 169:18
personally 12:15,20 23:21 44:10 91:23 161:23 166:7
personnel 10:1
persons 53:14 151:23
perspective 19:19 69:24
pertain 158:12 158:18
pete 111:23
pharmaceutical 10:16
pharmacy 101:16,21 102:5,10 103:5 103:9 107:12 118:10
phase 4:11 38:4
phrase 24:12 120:22
phrased 30:21

physically 9:5
pick 73:22 80:23 173:18 173:22
piece 11:18
piecemeal 128:10,20,23
pilot 130:8
place 66:9 84:3 92:4 122:18 170:1
placed 129:21
plain 77:18 113:12
plaintiff 6:22 13:14 17:12,23 18:8,10,11 24:5 25:8 27:3 28:24 29:13 134:23 176:23
plaintiff's 38:10
plaintiffs 2:6 3:3 4:14,17 13:21 22:2 23:9,13,16 24:20 25:13 26:1,14 27:25 28:4 176:12,13
plan 8:23 9:25 26:15 27:3,12 28:7 67:11 68:6,20 69:22 74:2,7,17 76:21 77:19 91:11 92:3,25 94:20 96:11 105:8 106:1,24 107:7,10 110:8 115:20 117:24 117:24 125:23 129:18 130:3 130:16,19 138:12 150:1 156:9 158:13 159:14 161:25 167:7 179:5
planning 175:11
plans 25:8,14 67:14 72:11 91:14 100:14 112:12 113:9 116:4 119:12 119:14 174:24
please 6:16,19 7:12 8:13,21 14:24 19:23 20:14,17 53:15 108:17 109:11 112:8 120:8 140:9 159:24
pleasure 115:18 135:16
plus 46:9
pocket 92:22 96:10 97:2,12 99:4,20 102:22 168:9
pockets 108:3 108:15
point 22:7 29:22 30:2 39:7 42:20 57:13 61:13 79:25 84:7,11 84:21 105:21 119:3 121:11 122:8,22 123:21,24 144:18 169:21 176:15
policy 52:23,24 53:2 83:24 87:24 88:11,13 88:19,21 89:2 89:23 90:2,13 90:23 91:4 106:19 119:6 176:2 177:2,15
policymakers 34:18
political 31:18 174:21 176:18
popularity 130:16
population 31:19 53:21 107:4
portfolio 112:15 113:4,8 113:13 116:3
portion 106:1 116:20
position 43:17 48:6,18,22,24 49:6 50:4 92:3
possibility 111:11
possible 35:8 85:11,19 90:19 157:19 159:22
possibly 33:12
post 47:22
posted 102:24
potential 43:23 64:4 132:3
potentially 129:17 132:19 142:5
practice 160:24
practices 157:16
pre 120:15
precedence 114:6
precluded 58:4
precludes 57:3
predecided 101:23
predicting 25:25 26:13
premarked 133:17
premium 69:13 69:25 74:3,21

74:23 104:5 112:12 114:23 115:13 119:2,2
premiums 67:4 70:17 72:1,12 73:7 108:2 112:21,22 115:22 116:6,8 116:9,15 117:3 117:13 118:18 118:19,23,25 119:9,12,20 125:23
preparation 123:13
prepare 13:25 14:21 15:24 19:23 40:12 41:1 42:1
prepared 14:14 14:17,25 16:1 16:2 17:9 23:11,19 40:20 41:6 110:10,25 113:2
preparing 23:18 29:24 40:13
present 3:14 22:25
press 147:21
prevented 148:18
previous 100:17 116:14
previously 93:23 127:15 134:2,4 136:13 146:6
primarily 45:6 48:6 67:9
primary 21:18 61:17 73:18 80:21,25 81:8 81:9 82:2 93:17 170:8 177:9
prime 63:24 64:2,10,11,15 64:16 66:5,12 68:6,13,14,18 68:21,25 69:14 69:15 71:23 72:2,16 91:14 93:7,13 112:16 113:14 168:15 168:16,17,19 168:24
principal 145:9
print 129:6 154:13
prior 20:3 45:23 82:21 92:24 133:23
private 44:24 125:22 129:18 137:3
probably 72:6 97:10,15 111:17 162:2 173:4
problem 39:8 142:8 144:19
problems 149:25 157:4
procedure 2:5 162:22
proceeding 8:4
process 48:25 57:11 58:5 62:11 64:23 98:14 118:1,2 148:6 150:24 153:24 162:13 162:17 163:17 163:18,21 164:4 165:1 166:19
processed 160:25
processes 81:22 86:23
processing 126:25 143:25 148:12,18 166:12
produce 133:22
produced 101:9 102:6
product 20:3
production 4:19 38:12,15
profession 44:4
professional 183:4,23
professions 44:14
profiles 57:8
program 31:25 32:8,12 33:16 35:8 44:5,15 49:10 53:7 54:1 55:3 64:6 68:5 69:14 71:8 73:16 77:13 79:9,13 79:15 80:2,8 82:7 87:25 89:21 92:24 101:6 103:22 104:5 105:12 105:24 106:5,8 106:9,16,25 112:18 113:24 114:4 116:4 117:18,25 118:13,18 121:4 122:10 123:19 124:13 125:15 126:7 126:14 127:2 129:15,17 130:13 131:5 131:10 132:8

138:8 143:19 146:23 165:6 167:1 173:15 174:5,10 176:3 176:10 180:19 181:11,23
programming 121:13
programs 70:15 112:7,13 112:17,20 114:16 116:7 117:4 121:25 130:8 138:16 170:7 175:7
promise 98:8
promised 98:7
promoted 32:20 137:2
proper 78:14 83:12 165:23 170:4
properly 161:1 162:16 163:22
proportionate 108:13
proposed 95:9
protected 17:19
provide 25:18 66:1 106:10 107:2 127:1,7 157:14
provided 11:19 20:3 47:21 65:1 78:1 108:21 122:6 126:20 143:21 153:6
provider 82:5 93:12 105:1,2 105:18,19 169:19 177:24 177:25 178:1,3 178:9 179:10 180:3
providers 35:10 104:11 104:19,20 118:3 143:20 144:2 147:22 148:5,22 149:11 168:7 169:3,7,11,13 177:13,14,18 177:18 178:19 178:23 179:3 179:21 180:10 180:11,22
provides 106:2
provisional 56:5
ps 108:2
public 18:7 95:10,14 97:21 97:23 111:1,4 111:8 116:18
publication 95:8
publicly 95:9
published 27:8
pull 26:7 102:17 103:1,3 111:11,12
purchase 70:3 70:4 137:3
purposes 50:21 134:10
pursuant 2:4,4 4:12
pursuing 36:7 144:11
purview 53:12 167:13
push 150:16
put 27:12 41:21 69:24 113:20 114:11 117:12 124:8,19 133:14
puts 110:4
putting 37:7

q

qualification 62:15
qualified 58:7
qualify 54:7,17 55:2 56:10 59:9,22 60:14
qualifying 58:14 75:16 76:18
quality 138:18
quantify 47:6
question 11:14 12:17,18 29:2 29:8 30:20 51:15 71:7 72:8 76:17,25 79:11 86:4 87:5 93:5 96:6 99:18 112:25 120:22,24 127:22 130:21 132:22 160:13 161:17 167:24 174:20
questioning 7:18 134:3 160:12 165:12
questions 8:12 11:20 13:8 15:3 21:2 35:4 35:9 72:5 141:18 159:23 160:11 165:18 175:23 181:16
quick 128:15 181:17
quite 95:23 118:11
quotations 5:19

quote 5:22 81:3 99:5 113:13

r

r 6:1 20:16
radius 168:24 169:7
raised 33:24 36:12
ranging 45:10
ranking 165:20
rates 25:25 26:13 98:5 179:18,19,20 180:2,3,10
rather 76:7
rd 14:5
reach 77:7 152:3
reached 145:10
read 5:21 7:24 12:10,13 33:9 94:5,12,15 95:12 97:24 98:9,23 99:8 112:5,8 116:2 120:8 125:6,13 127:17,23 128:1,17 135:14,23 146:15
readback 159:23 160:10
reading 95:15 95:22,24 96:8 136:2
ready 96:5 109:17
realize 99:8
really 10:17 39:14 48:1 50:8 83:11 98:20 128:15 181:17
realm 181:25
reason 9:2 61:14 74:16 90:14 91:3,7 138:1 163:13 168:9
reasonable 82:8,14 90:21
reasonably 57:7 181:22
reasons 54:22 54:24 83:2
recall 126:13 176:6
recap 99:11
receive 28:18 51:23 57:25 58:6 60:6 62:25 63:2,3,7 70:8 74:20,21 88:15 93:15 111:15 118:2 158:19 170:18
received 23:16 23:17,20 24:20 47:18 97:25 121:22,25 126:19 142:12 154:21 171:22
receives 81:21 104:17
receiving 52:1 61:17 72:10
recent 33:24 34:19 91:1
recently 12:17 141:19
recess 37:20 52:17 101:1 140:13,21 160:4 175:18
recipient 75:17 144:24
recipients 64:19 72:21
recognize 39:23 94:3,5,7 98:25 133:18 146:13 151:2
recollection 17:24
recommendat... 125:20 166:4
recommendat... 86:21 125:17 157:22 158:5
recommended 165:21
record 5:21 7:21 8:4,5,14 11:15 37:5,17 37:19,22 52:16 52:19 100:25 101:3 109:11 115:5 116:18 120:8 125:14 129:7 133:8 139:23 140:10 140:12,15,18 140:20,22,25 159:15 160:1,3 160:5,7,18 161:4,8 162:9 163:5 165:18 166:11,20 167:3 175:17 175:20 182:10 183:9
records 17:14 36:4 161:21 163:16,19,20 164:7 165:25
recoupment 34:14
recover 171:21 172:1
recovered 171:3
recovery 172:22

recruited 48:23
recurring 150:2,5
red 15:14 19:14 22:18 90:12
redefine 167:24
redline 90:4,9
redlines 89:22
reed 42:14,24 46:23
refer 11:25 118:23
referral 105:3 153:22 155:19
referrals 118:1 144:1 147:8,10 147:19 148:19 154:23 155:21
referred 47:23 50:15 93:18 120:15 134:5 137:21
referring 12:16 19:1 22:12 33:1 34:4 67:4 79:16 103:14 112:11 116:14 116:15,25 127:17
refile 82:1
reflect 101:15 104:15 109:12 129:8
reflected 5:20 27:2 102:14
reflects 56:3
reformed 32:1
reforms 94:10
refresh 139:17
regarding 13:9 14:12 18:22 35:9,16 38:15 70:23 87:2,2 123:12 141:18 141:21 142:16 142:22 143:8 144:25 146:21 164:3
regardless 55:7 71:19 170:4
region 152:13
register 5:5 94:4 95:7
registered 183:3,23
regular 51:20 52:4 106:19 119:6
regulations 77:19
reimburse 169:11
reimbursed 162:16
reimbursement 25:25 26:13 90:3 118:3 160:20 161:5 161:21 162:8 164:6,23 165:2 165:4 177:21 178:10,14 179:20 180:2 180:10
reimburseme... 35:9
reinstate 144:17
related 15:2 35:5 58:14 62:10 63:4 120:14 165:4,6
relatedness 24:3
relates 1:5 24:4 27:25 40:18 74:1 102:4 107:20 158:7 159:15 176:11
relative 183:14 183:15
relatively 55:13
released 125:17
reliance 26:24 101:10
relies 77:15
relocated 10:9
rely 102:14
remain 61:10 65:3 66:4 77:17,25 117:4 136:22 176:22
remainder 176:12
remarries 76:20 77:25 78:18
remarry 76:15
remember 18:19 103:7 124:14,16 129:24 130:21 132:14 155:10 176:4
remote 3:1 6:8 6:15 22:21
remotely 1:17 6:12,14
removal 33:5 127:20
remove 31:18 91:16 176:18
removed 32:6 129:1
removing 32:15
renamed 32:2 50:19
rendered 82:12
rent 9:20,21
rented 9:16
reorganized 32:2 103:25 104:2 126:16 136:7

reorganizing 130:5
repeat 79:10
rephrase 29:1
replace 91:16 129:4
replaced 91:11 91:19 92:9,24 98:15
replacing 125:21 129:17
report 5:7,8 14:1,15,17 109:21 110:18 110:25 112:6 115:10 122:12 134:21 135:24 159:6 160:23 167:9
reported 1:23 115:13 120:14 120:18 131:2 133:7
reporter 7:4 37:6 39:22 134:11 183:4,4 183:23,24
reporter's 5:19
reporting 6:16
reports 33:10 147:22 149:4 157:16 158:11 158:16,20 161:13
represent 6:20 95:5 124:20 135:1
representation 105:15
representatives 16:11
represented 21:14
representing 3:3,8
requested 151:9
require 67:14 67:20 73:22,25 74:1 80:25 101:25 181:3
required 7:20 57:6 61:18 65:5,17 71:3 74:22 93:3 106:11 167:1 168:24 169:5 177:8 178:12 179:23
requirement 67:10 75:2,3 82:10,15,21 91:20,24 150:19
requirements 78:4 106:12 107:3 145:24 161:10 167:11
requires 89:7 89:11 111:15
research 42:25 45:12 89:19 91:25 92:5
researcher 43:1
reserve 53:25 67:25,25 68:1 112:14,18,19
reserved 182:14
reserves 58:16
reservist 58:1
residency 42:14 44:8,16
resides 168:13
residing 167:19
resolution 161:15
resolved 150:18 155:25
respect 78:23 157:9
respectful 108:18
response 38:10 98:23,25 99:14 166:11
responses 4:16
responsibilities 164:14
responsibility 166:13
responsible 110:17
restrictions 84:3
restructure 176:19
restructured 92:15
resubmit 134:10
result 19:13 60:9 65:5,17 139:2 143:9 144:13 150:10
results 167:9
retail 102:9
retain 130:17
retire 61:19
retired 43:13 43:14 54:16,21 54:23 56:8,11 56:17,24 59:22 61:6,16 112:19
retiree 54:8,10 54:11,13 58:17 61:21 64:16 68:1,2,18,25 78:13 80:18 120:16
retirees 53:24 56:2 59:8 64:25 112:14 127:9

retirement 48:20 50:10 56:21 57:16 58:1,6 60:24
return 81:25
revenue 118:20
review 16:21 17:13,14 18:3 18:18 32:25 128:4 129:12 159:4 160:18 161:5,12 162:9 162:18 163:5 165:18,25 166:16,20 167:8
reviewed 20:2 23:22 25:7,22 28:15 137:17 163:19,20
reviewing 161:20 163:16
reviews 159:16 161:8 166:11 166:22 167:3
ribbon 125:16
richard 1:15 2:3 4:15,19,24 6:10 7:8 8:15 38:12,16,20 40:2 183:6
right 9:18 11:16 24:21 32:22 41:21 44:19 47:2 52:7,9,15 54:25 56:13 57:24 60:5 62:15 63:15 69:10 74:24 81:5 86:14 100:18 111:25 115:18 117:20 121:1 129:12 134:5 135:7,13 140:5 141:9,15 160:15 165:10 165:17 175:14 179:2
rise 117:10,11
robust 34:8 138:16
role 46:11,21 47:5,7 48:3 109:19 145:11 145:18 158:4 165:19
roles 45:23 46:18 95:9
rollout 157:4
room 8:9 10:21
root 149:16
rpr 1:23
ruck 1:15 2:3 4:15,20,23,24 4:25 6:11 7:8 7:15 8:15 11:9 37:23 38:12,16 38:19,20,21 39:1 40:2 41:24 52:12,22 86:10 95:21 101:5,13 130:22 134:3 141:15 160:15 175:22 181:16 181:20 182:5 183:6
ruck's 164:19 165:13
rules 2:5 21:3 76:21
rural 167:19 168:2,6,18

s

s 4:1,8 6:1
safe 82:13 89:10
salary 51:22
salisbury 3:5
save 131:22
saved 132:11 132:19
savings 131:24
saw 179:10
says 11:13 94:14 98:12,23 98:25 115:12 116:2 122:9,18 122:22,25 123:21 128:10 129:23 136:17
scenarios 76:6
schedule 11:21 26:25 27:2
schedules 26:1 26:14 27:5 107:16
schofield 43:4
scholarship 44:5,14
school 42:7 44:7,10
schooling 44:3
science 61:11 85:4
scope 28:22 29:12,14 30:23 118:5 119:17 165:8,12 180:15
scrapping 124:22 137:12
screen 39:4,7 39:19 41:22 93:24 95:1 97:22 109:14 112:2 124:8,19 128:16 131:19 134:20,24 135:11 139:20 146:7
scroll 40:1 135:18,20 137:9

scrolling 111:20
second 4:10 38:3 39:24 71:2 73:20 80:18 83:16 135:14 136:25 140:18 146:15 147:6 177:8
secondary 80:15,22 81:4 81:10,17 82:3 177:1
secretaries 51:13
secretary 94:8 111:22 114:7
section 97:21 98:24 110:3 112:6,10 138:3
security 39:17
see 10:6 21:11 21:11 23:4 29:10 39:6 40:1 46:7 84:16 94:16 95:10,18 96:2 96:3,4 98:11 102:18 103:3 105:13,13,18 111:12,14 112:2,3 115:1 115:3 116:12 120:10,11 124:24,25 128:16,21,22 129:8,9 130:1 130:8 134:19 134:24 135:11 135:12 136:24 137:5,6,14,15 137:20 139:20 146:11 147:5 147:20 148:1 149:22 150:8 157:16 159:7,9 179:4,8
seek 34:13 153:16
seeks 171:21
seem 176:17
seems 136:4
seen 30:16 32:5 39:25 67:12 70:11 71:16,16 71:19 73:4 115:6 158:11
select 28:10 64:10,19 66:6 66:12 71:24,24 72:17 91:11,17 91:19 92:1,9 92:11,24 93:8 93:9 94:9 95:16 96:9 97:2 98:2,15 99:1 101:8 105:7 112:16 112:18 113:14 169:1
selection 162:17
send 104:11 169:25
sends 105:4
sent 105:1 145:1,6
sentence 7:21 115:24,25 116:1 120:7,23 128:9,11 136:24,25 137:5,7 149:22
sentences 116:5
separate 47:15 51:8,12,24
separately 16:15
september 15:8 48:19 90:25
series 30:11 75:21 125:17
serious 126:3 129:14
seriously 131:4
serve 58:10 136:9
served 12:15 156:12
service 43:9,14 45:7,21 53:17 53:19 54:14,19 55:9,14,17 56:4 57:3,21 57:21 58:4,18 59:12 60:3,9 60:15,19 61:21 62:3,7,10,24 63:4,6,23 64:12 76:1,4 78:1,12 82:22 96:19 98:6 100:4 104:13 105:21 125:19 127:8 138:19 142:17 149:25 168:16,17,20 168:25 169:21
services 43:3 43:10 51:11 83:23,25 84:12 84:22 87:16,16 87:17 143:8 147:25 148:25 163:24
set 27:10 73:16 83:24 106:25 107:22 116:6 119:21,21 142:10 150:15 171:3 183:7,17
sets 119:19
seven 46:4 48:7
several 43:1 101:10 112:13 131:21 159:18

share 18:5 37:2 39:8,18 93:24 146:7
shares 80:7 99:1
sharing 92:10 98:2 99:20 100:9 101:8
sheet 67:17 69:11,20
shied 126:1
shifted 47:5
short 56:4
shouldered 125:24
show 109:13 111:21 139:18
showing 39:20
shown 141:8
shut 174:11
shutdowns 171:12
sic 18:12 20:16 120:13
side 10:18 48:13 156:19
signature 182:14 183:22
significant 61:7 61:13 155:20
significantly 147:23 148:23 179:9
similar 15:2 41:5,14 92:23 106:18 178:22
similarities 117:23 118:15 118:17 120:5
simply 33:12 44:18 53:22 63:4 82:6 104:10 173:15 175:11
single 17:22 143:14
sir 8:16 18:11 53:1 109:8
sit 122:24 174:23 181:6
situation 65:14 74:14
six 37:24 39:2 43:14 48:19
sixth 110:3
size 59:8 143:24 149:3,5
slight 102:8
slightly 93:10 93:14 96:21 138:13
small 95:1 108:9 173:19
smaller 147:23 148:5,23
sme 149:3 158:18
smith 145:8
soldiers 49:12
somebody 56:22 173:5
sorry 10:24 21:1 24:13 68:17 79:10 86:10 87:6 94:24,25 95:21 106:14 115:15 178:2
sort 41:10 89:14
sos 106:7
sound 126:5
sounds 23:7
source 49:22
sources 170:14
south 15:4,4 17:8,16,21,21 18:2,5 22:23 22:25 41:16,16
southern 1:2
space 18:12
speak 21:25
speaking 6:17
speaks 130:16
special 103:2 111:15
specialist 96:15
specialties 170:8
specialty 93:18
specific 23:12 26:18 28:4 29:6,20 35:12 35:21 75:11 94:13 95:13 160:23
specifically 29:8 34:3 41:9 83:18 84:9 106:1 166:3
specifics 18:18 94:14
spell 20:12
spelling 18:13
spend 37:4
spent 45:6,14 46:7,17 115:20 116:19
spill 15:17,19
spokes 131:25
spokesman 132:1
sponsor 78:2 78:10,17
sponsor's 78:20
spouse 59:19 76:1,20 77:25 78:18
spouse's 75:14 76:1 79:1,4
spouses 77:20
stamp 101:12
standard 91:11 91:15,16,19

92:9,25 93:4 98:16 101:7
start 52:22 57:19 126:23 143:3
started 7:18 29:23 31:21 32:1 52:10 96:18 100:3 162:4 163:9 175:5
state 6:20 7:21 8:13 95:15 121:17 176:25
stated 10:19 20:5 32:19 33:23 34:18 125:9 156:4 157:3
statement 7:23 63:25 70:21 79:2 87:18 148:21
statements 110:18 138:2
states 1:1 4:10 4:16 6:25 38:2 38:9 56:4 69:10 81:3 91:1 94:18 113:12 114:22 116:6 121:12 124:21 135:3 137:1,10 138:7 147:18 148:1 156:12,23
stating 11:14 82:1
stationed 42:17 42:21,24 48:8
status 56:5 57:16 60:24 61:22 63:16 75:8 79:6 85:3
statute 29:16 52:24 78:7 89:3
statutes 177:2
statutorily 117:17
statutory 119:25
stay 152:7,19 180:11
stays 66:2
stenographic... 183:10
step 81:1
steps 151:19 172:22,23
stipulated 82:11
stop 48:1 52:7 65:22 66:23
stopped 46:12
straight 96:17 145:4
street 3:5
strickland 5:4 146:19 151:8 151:16
strict 83:24
strictly 110:2
stripped 39:16
strongly 150:3
structure 27:14 27:22 31:4 69:19 92:16 93:7 97:17 100:2 101:22 101:24 103:8 104:23 105:5 105:10 107:19 173:11
structured 26:9 30:4 73:15
structures 28:13 67:20 93:19 96:22 102:19 107:9
subject 15:11 17:15 24:9,24 41:13,14 50:14 69:16 70:16 72:12,22,24 73:10 83:23 158:19,21 166:15 168:8 171:12 178:2,4
subjected 102:3
submission 20:3
submit 26:4 172:5 178:13
submitted 14:4 14:11,13 19:24 23:21 134:21 161:5 162:8,16 163:23 164:5 171:2
subpoena 4:18 38:8,11
subrogation 171:14
substantive 129:15 130:24 130:25
suffering 61:3 61:23
suggested 131:21
supplement 47:19
support 36:3 66:24 105:4 108:23 109:1,3 126:24 159:3 161:9 164:15 166:14,25 169:9 173:1 178:14
supported 136:19

supposed 89:15
sure 10:5 17:18 26:20,23 29:5 39:11 42:6 66:1 94:16 106:10 108:25 108:25 129:5 132:25 134:8 135:16 137:22 140:1 142:11 147:16 150:17 151:19 152:4 153:24 162:1 162:19 170:3
surgeon 42:21
surgeries 143:9 143:13,15 147:8,11,14 153:20 155:1
surgery 82:18 82:25 153:11
surprised 92:15
surrounding 168:20
surviving 76:19
sustained 58:3
swear 7:5
sworn 6:13 7:9 183:8
sync 88:22
system 34:1,8 34:19 35:18 36:14 44:23 47:14,16,20 48:10,15 55:10 83:7 85:24 86:15 116:21 125:10,21 132:4 144:20 170:16

t

t 4:1,1,8 18:11
t5 29:24 90:24
t6 30:1 123:13
table 67:19 120:14
take 23:3 31:5 37:6 94:15,16 96:1,6 100:20 114:5 128:15 136:21 140:8 153:2 154:14 154:16 155:17 155:22 156:2 175:14 178:20 178:23
taken 1:17 2:3 37:20 52:17 55:7 101:1 140:13,21 160:4 175:18 183:10
talk 19:11 126:10 128:3 136:14,19 141:17 168:1
talked 21:21 83:4 108:3 176:1
talking 22:14 39:4 52:23 71:7 87:7 96:12 101:6 123:6 124:11 164:22 176:7
taylor 1:23 7:5 183:3,23
team 144:10 145:19 146:1 158:22
technical 148:16
technically 165:6
telehealth 138:14 170:6
telita 145:7
tell 15:10 16:23 17:7 19:22 28:16 31:13 34:20 47:4 48:23 49:5 51:17 52:23 58:7 90:6 92:18 96:5 105:23 167:18 179:17
temporary 144:16
ten 18:9,12 27:12 32:20 46:17 52:12 124:12 129:16 137:1
tenth 70:2
term 56:4 60:2 60:9 109:1 171:18
terminated 76:21 77:6
terminology 113:21
terms 55:8
terrible 22:3
testified 7:10 16:11,19 17:8 17:20 18:21 22:17,18,19 29:15 53:6 63:22 90:12 115:6
testify 13:5 16:4 46:20 52:2
testifying 9:3 25:11 26:25
testimony 4:11 8:25 14:1 16:7 18:22 19:14 21:15 32:25 38:3 40:10 41:2,13,14 64:20 66:14,17

90:15 124:14 151:7,22 164:3 166:19 167:14 174:1 176:4 183:9
text 8:2 40:4 121:11 122:8 122:14,22,25 123:20,25 134:9
thank 7:17 11:23 18:13 21:12 23:2 24:17 43:19 52:21 69:12 88:25 141:15 169:24 175:22 181:15 182:6,7
thanks 181:20 182:3
theirs 118:13
thing 41:11 50:22 81:8 119:5
things 10:16 35:4 45:10,17 46:16 50:8 63:4 84:4 89:16 107:3 172:1 173:20 175:4
think 9:20 10:8 10:13,14 12:12 22:3,6,8,24 52:9 68:3 71:6 72:4 74:13,15 74:15,16 78:22 103:7 128:13 132:23 133:18 162:7 165:7,9 177:11
third 20:12 106:15 146:22 149:22 152:12 156:13 171:23
thought 87:6
three 20:5 21:21 22:13 43:7 58:15 91:14 125:13 126:4 155:13
time 6:6,7 23:3 29:15 46:6 48:1 51:18,24 58:2 62:24 63:5 72:8 75:25 76:3 84:12,21 85:12 88:3 89:25 90:8 96:1,6 101:3 118:8,9 129:25 132:15 138:8 150:6,22 153:12,24 160:3 162:1
timely 148:19 153:14 154:6
times 30:21 87:25 88:9 89:1,17 90:7 90:20 101:11
title 8:21,22 30:10 53:4,10 75:20 112:5 114:15 124:22 124:25
today 6:10 7:17 7:19 8:25 9:3 11:12,23 12:1 15:3 19:23 20:7 21:8,15 21:19 22:13 23:6 40:16 50:21 51:18 52:2 101:11 108:4 121:12 122:9,24 174:24 175:23 181:6 182:6
today's 6:5 182:8
together 110:4 113:20
told 16:13,25 32:11 99:10 100:19 163:11
took 151:7
top 50:10 58:21 74:13,17 89:5 94:23 122:21
topic 13:4 18:23 125:16
topics 29:7 34:24 40:17 41:2
total 97:2 114:23 126:7
totally 42:2
touch 52:10 142:22
tour 55:14
tours 56:14
towards 60:23
toxicology 24:10,14,15,16
tracks 118:19
traditional 104:6 107:6
traffic 22:6
transition 57:15 150:10 152:2 156:25
trauma 82:24
treat 46:21 55:11 180:12
treating 45:6 45:21 46:6,12
treatment 48:9 70:11 71:17 104:18 126:21 153:15,17 154:5 168:21
tricare 4:22 8:23 9:12,25

10:13 13:9,11
15:2,4,7 16:11
16:16 17:5
23:12,15,17,23
24:19 25:12,17
25:19,25 26:13
28:10,11,23
29:13 30:24
31:10,16,22,23
32:1,3,8,12,13
32:15,21 33:2
33:6,13,16,25
34:5,19,25
35:18 36:14
38:17 40:11,18
45:23 46:21
47:11,13,17,24
48:2,8,18
50:13 51:5,6
51:10 52:23,24
53:2,7,13,15,16
53:20 54:1,7
54:17 55:2,22
55:25 56:3,18
58:8 59:9,13
59:16 60:1
61:2,4,22 62:2
62:13,16,19
63:24 64:2,5
65:6,9,11,18
66:5,5 67:14
67:24 68:2,5,6
68:21,21 69:14
69:15 70:14
71:1,8 72:10
72:11,21 73:14
73:25 74:1,2
74:10,20,23
75:7,15 76:11
76:20 77:6,13
77:19,19 78:1
78:7,11 79:16
79:19 80:1,15
80:21,25 81:4
81:10,17,21,22
82:3,7,12,20
83:3,7 84:6,12
84:22 85:23
86:1,15 87:24
88:10,13 89:23
90:13,23 91:10
91:11,11,12,14
91:14,15,17
92:1,9,9,23,24
94:9,9,20
95:16 96:9,10
97:1,3 98:2,15
98:15 99:1,21
101:6,7,7,11,16
102:3 103:21
104:1 105:12
105:24 106:1,3
106:4,8,8,16
107:24 109:19
109:24 110:7
112:9,15,16,16
112:17,18,19
113:3,13,14,14
113:23 115:11
115:20 116:2,4
116:20 117:16
118:18 119:6
119:25 120:25
121:4,12,20,21
121:25 122:9
122:19 124:13
124:23 125:11
125:21 126:7
126:11,16
127:9,11
129:15 130:17
131:5,9,20
132:4 135:9,23
136:7 137:2,4
137:13 138:3,8
138:11,12,20
138:22 139:12
141:18,20
143:19 146:22
152:16,21
153:2,10,15
154:5 156:9,14
157:9 158:7,13
158:23 159:13
159:14 161:3,4
161:24 162:10
163:5 164:4,23
165:23 166:7
166:21 167:6
167:18 168:5
169:1 170:15
171:1,5,14,21
172:9,12,16
173:9,10,15,25
174:1,10,15,24
176:2,25
177:15,20
178:4,9,20
179:3,13,18
180:19 181:9
181:10,22,23
tricare's
170:14
tricare.mil 26:6
102:25
tripped 140:4
triwest 10:12
106:7 141:22
142:10,16,23
143:21 146:21
147:23 148:23
149:24 150:6
150:11,15,25
152:3,7,13,20
153:23 154:9
155:6
triwest's
156:13
troops 126:2
true 69:13
70:21 72:9
74:4 183:8
trust 170:15,22
truthfully 9:3
93:5

try 19:15,17 66:25 100:15 111:12 130:6 180:20
trying 109:16 115:15 144:5 153:11
turn 175:24
turner 3:10 7:1
twelfth 70:2
twice 47:2
two 9:20 22:1 22:21 56:14 81:13 116:5 128:25 136:3 159:24
type 9:12 14:18 19:8 34:14 53:14 57:20 67:5 168:7
types 116:4
typical 9:9
typically 59:5 71:1,21,25 73:19 77:24 80:15 93:8 118:12 130:11 138:13 162:17 179:18

u

u.s. 3:9 5:7 30:10 53:5 75:20 181:4
u.s.c. 99:5
ultimate 30:6 107:11
umbrella 131:16 156:13
unable 57:5 61:8,13
unaware 32:21
under 8:25 29:24 30:10 31:10 32:2,3 40:4 47:24 48:13 51:13 53:4,11 56:10 72:10 76:21 77:18 78:7,19 78:23,25 82:2 82:7 83:7 90:15 91:12 92:11,23 93:4 96:11 105:7,12 116:4 123:11 130:5 131:15 131:16 135:23 136:7 143:19 147:24 148:24 156:13 158:21 167:13
undergrad 44:7
undergraduate 44:11
underlying 148:3
undersea 42:11
understand 8:24 11:11 12:25 13:3 23:5 26:20 29:4 56:23 134:1 149:19 164:24 175:3
understanding 21:5,13 44:25 50:25 75:6 110:22 161:20 167:14 170:24 170:25 181:4
understood 12:3 59:25 69:9 123:18
unfunded 120:12,23
unit 64:23
united 1:1 4:10 4:16 6:25 38:2 38:9 56:4 135:3 178:24
university 42:7
untenable 150:3
update 87:22 88:19,22 89:12 89:16 90:1
updated 88:14 90:8,24
updates 89:7
upload 37:3,8 37:10,24 38:1 93:21 109:7 133:13 146:5
uploaded 39:2 39:9 109:12 133:16
uploading 124:3
ups 122:3 123:3
upstairs 10:7
upward 112:22 116:10
urge 150:3
usa 4:23,25 38:19,21 101:13
usdoj.gov 3:12 3:12
use 39:14 40:25 41:8 62:21 81:15 130:8 153:16 164:5 168:7 169:5
used 5:13 10:7 24:12 41:5,9 103:22 108:25 152:20
uses 30:21
using 71:7,11 126:23
usually 62:9 169:13

utilize 149:7 169:10
utilized 25:17

v

va 55:10,19,21 62:9,20
variety 45:10
verbalized 113:24
verbally 37:5 37:25
verbatim 120:8
verification 162:9
verify 160:19 162:8,18
veritext 6:5
version 39:13 128:14 129:4 139:24 141:7
versus 49:7 72:2 93:7 138:19
veteran 55:6,12
veterans 51:7,9 62:16 63:11
vha 55:2 81:11
video 6:8
videoconfere... 1:13 2:2
videographer 6:3,4 7:4,12 37:18,21 52:15 52:18 100:24 101:2 140:11 140:15,19,22 160:2,5 175:16 175:19 182:8
videotaped 1:13 2:2
view 8:3 158:2
virginia 9:8
vitae 4:24
vote 120:25

w

wait 154:24
waiver 153:23
walk 42:3
wallace 3:4,4 4:3 6:21,22 7:14 8:7 11:10 11:22 13:12 14:6 15:16 19:3,12 20:25 21:20 24:11,25 25:6,23 26:11 26:22 27:16,24 28:20 29:3 30:5,19 31:7 31:20 32:17 33:7,22 34:15 34:23 35:15 36:11,21 37:1 37:15,23 38:25 40:24 41:12,20 43:18 45:19 46:19 47:10 48:17 49:4 50:12,20 51:4 52:20 56:1,9 56:19 57:17 58:12,25 59:10 59:17,24 60:8 60:16 61:1 62:1,14 63:14 63:21 64:17 65:15,19 66:13 67:2,13 68:16 69:2,8 70:13 70:19 71:5,10 72:3,20 73:8 73:24 74:8,19 75:4,12 76:9 76:16,24 77:4 78:5,21 79:7 80:5,13 81:16 81:20 83:22 84:10,20 85:7 85:15,21 86:3 86:9 87:4,14 87:23 88:8,24 89:20 90:10,22 91:9 92:7,13 92:20 93:21 94:2 95:25 97:6,18 98:13 99:17 100:7,18 101:4 102:1,12 102:20 103:15 103:20 104:14 105:11,22 107:14,23 108:12 109:7 109:11,16,18 110:23 111:6 111:19 113:10 113:22 114:13 114:21 115:8 115:17 117:15 118:16 119:1 119:11,23 120:6 121:10 122:7,13,23 123:5 124:3,9 124:18 125:12 127:25 128:13 128:19 130:20 131:17 132:10 132:21 133:12 134:6,13,16 136:23 137:25 139:1,16,25 140:10,17,24 141:11,14 142:2,14,21 143:6,17 144:3 144:8,22 145:5 145:17 146:4 146:10 147:4 148:20 149:9 149:21 150:20 151:21 152:10 152:18 153:9 155:2,12 156:1

156:11 157:6 157:20 158:3 158:14 159:25 160:9,14 161:2 161:18 162:6 162:23 163:3 163:10 164:2 164:17,22 165:3,9,15,16 166:5,18 167:12,17 168:3 169:23 170:21 171:19 172:7,14,18 173:7,23 174:13,22 175:14,21 176:8 177:10 178:17 179:1 179:11,16,25 180:8,17 181:5 181:15 182:5
wallacegraha... 3:6
walter 42:14,24 46:23
want 23:4 88:17 105:13 111:25 134:8 135:17,20 140:8 167:23 167:25 169:15
wanted 26:7 43:20,22 58:24 120:19 174:15
wants 103:1
war 50:16,23 111:23 122:4 123:4
washington 3:11
waste 33:25 34:7,12 35:17 35:23 36:1,13 161:11 164:12 167:2
water 1:4 6:9 134:22
way 31:24,25 37:2 54:12 67:17 125:18 129:3
ways 32:13 36:9,18 86:2 130:2 157:18
we've 12:9 30:16 32:5 58:15 101:10 108:3 121:18 126:10 164:10 164:10 170:6
web 39:12 111:7,16
website 26:7 91:1 102:25 149:25
wednesday 1:16
week 46:7
weeks 155:14 155:21
went 33:13 42:6,13 43:15 96:13,15 98:18 103:6 140:24 150:19
wes 20:15
west 152:13 156:13,16
weston 3:15 7:2
whereof 183:17
whitney 3:4 6:21 127:21
wide 45:10
widely 136:19
william 42:9
williams 3:4
willing 181:8
wisconsin 156:17,21
wish 32:11 64:9 66:11 124:4 153:4
wished 152:7
witness 6:13 7:6 11:7,17 13:1,7 14:3 15:14 16:23 17:1 18:25 19:6 20:23 21:17 22:1,5 24:7,23 25:5 25:16 26:4,17 27:5,21 28:6 29:1,18 30:9 31:3,13 32:10 32:24 33:19 34:3 35:2,21 36:16,24 37:12 37:14 40:18,23 41:4,19 42:6 45:9 46:2 47:13 49:3 50:6,18,25 55:5 56:7,13 57:1 58:10,20 59:4,16,21 60:5,13,22 61:25 62:6,19 63:20 64:14 65:8,20 66:22 67:8 68:9,24 69:6,19 70:23 71:15 72:15 73:3,13 74:6 74:12 75:1,10 75:19 76:14,23 77:3,24 78:9 79:4 80:4,10 81:13,19 83:9 84:2,15,25 85:11,19 86:1 86:7,19 87:12 87:20 88:3,13 89:5,25 90:18 91:7,22 92:14

93:2 95:23
97:5,14 98:11
99:13 100:1,12
100:23 101:20
102:8,17
103:13,18
104:8,22
105:17 106:22
107:18 108:7
108:18,19
109:13,15
110:21 111:3
111:10 113:6
113:18 114:2
114:19 115:3,6
115:15 117:7
117:22 118:22
119:8,16 120:4
121:8,16
122:12,16
123:2,24
124:16 125:6
126:9 127:23
128:2,17
129:20 131:8
132:6,14 133:6
135:2 136:2
137:20 138:11
139:5 141:24
142:7,19,25
143:12,23
144:15 145:3
145:13,21
146:25 148:11
149:2,14
150:13 151:13
151:25 152:15
152:23 154:8
155:8,16 156:6
157:2,11 158:1
158:9 160:9,22
161:7,23
162:12 163:1,8
163:15 164:9
164:21 165:14
166:2,9,24
167:16,21
168:12 170:18
171:17,25
172:11,21
173:13 174:4
174:18 175:3
176:6 177:5,17
178:22 179:7
179:15,23
180:5,14,25
181:13 182:7
183:6,9,17
women 35:19
word 14:9
30:21 152:20
177:12
wording 41:5
90:5
words 113:15
113:18 114:20
119:5
work 9:10,19
9:22 10:6 36:2
43:15 47:16
48:7,14 49:15
123:11
worked 10:8
45:18
working 21:19
31:22 48:2,12
146:1 166:7
works 25:20
134:12
worries 39:18
wraparound
73:21 173:16
write 124:2
writes 149:10
writing 123:18
written 123:14
123:15
wrong 18:14
wwallace 3:6

x

x 4:8

y

yeah 11:10
14:11 24:14
37:18 50:1,25
53:16,16 57:1
67:8 68:9
69:10 74:12
81:19 98:11
103:24,25
110:5 128:17
128:25 131:18
140:19 156:18
156:20 159:13
159:13,25
year 5:6 27:12
29:23 44:11,11
65:25 84:19
101:25 112:23
114:24 115:12
116:10,19
117:4 120:13
120:25 121:9
131:24 137:24
141:19,20
143:4,8 144:9
144:13 170:19
175:6
year's 123:19
yearly 27:13,13
27:17
years 17:13
32:20 42:12
43:1,7,8,13
44:13,15 45:15
45:20,22 46:3
46:4,14,17
47:7 48:7
54:14,19 56:16
58:17 59:11
60:19 116:14
124:12 129:16
137:1

yep 139:21
young 54:1
55:13 68:2
77:13 80:1
112:18

z

zoom 2:4 21:8
37:3 39:14
120:9

Exhibit 783

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF NORTH CAROLINA
SOUTHERN DIVISION
No. 7:23-CV-897

IN RE:
CAMP LEJEUNE WATER LITIGATION

This Document Relates to:
ALL CASES

VIDEO-RECORDED EXPERT DEPOSITION OF GREGORY S. RUSSO

Friday, February 27, 2026
9:05 AM Eastern

JOB NO.: 7899780
Reported by: Denise Dobner Vickery, CRR, RMR

Friday, February 27, 2026

9:05 AM Eastern

Video-Recorded Expert Deposition of GREGORY S. RUSSO, held at the offices of:

U.S. DEPARTMENT OF JUSTICE
1100 L Street NW
Washington, DC 20005

Pursuant to notice, before Denise Dobner Vickery, Certified Realtime Reporter, Registered Merit Reporter, and Notary Public in and for the District of Columbia.

APPEARANCES:

Representing the Plaintiffs Leadership Group:

WARD AND SMITH, PA
BY: JENNA F. BUTLER, ESQ.
127 Racine Drive
Wilmington, NC 28406
910.794.4829
JFB@wardandsmith.com

U.S. DEPARTMENT OF JUSTICE
CIVIL DIVISION
ENVIRONMENTAL TORT LITIGATION
BY: GIOVANNI ANTONUCCI, ESQ.
1100 L Street NW
Washington, DC 20005
202.616.8364
giovanni.antonucci@usdoj.gov

VIDEOGRAPHER: RYAN HEATHCOCK

APPEARANCES: (Continued)

ALSO PRESENT:

MELANIE KONSTANTOPOULOS, ESQ. -
U.S. Department of Justice
BENJAMIN BARTON VANSLYKE, ESQ. -
Weitz & Luxenberg - Plaintiffs (VIA ZOOM)
JOSEPH TURNER, ESQ. -
U.S. Department of Justice (VIA ZOOM)

INDEX

EXAMINATION OF GREGORY S. RUSSO	PAGE
BY MS. BUTLER	13
AFTERNOON SESSION	190
BY MR. ANTONUCCI	

RUSSO DEPOSITION EXHIBITS

(Attached to transcript.)

NUMBER		PAGE
EXHIBIT 1	Greg Russo Curriculum Vitae CLJA_USA_RUSSO_0000000019 [Produced Natively]	78
EXHIBIT 2	January 20, 2026 Expert Report of Anirban Basu, Ph.D.	108
EXHIBIT 3	Spreadsheet - Atlantic Radiology Associates - Appendix C for Amsler	128
EXHIBIT 4	Plaintiffs' Notice of Deposition and Request for Production of Documents to Gregory Russo	150
EXHIBIT 5	United States' Responses and Objections to Plaintiffs' Notice of Deposition and Request for the Production of Documents to Gregory Russo	151

NUMBER		PAGE
EXHIBIT 6	BRG Invoice September 10, 2025 CLJA_USA_RUSSO_0000000020 [Produced Natively]	160
EXHIBIT 7	BRG Invoice October 10, 2025 CLJA_USA_RUSSO_0000000021 [Produced Natively]	161
EXHIBIT 8	BRG Invoice November 10, 2025 CLJA_USA_RUSSO_0000000023 [Produced Natively]	161
EXHIBIT 9	BRG Invoice December 10, 2025 CLJA_USA_RUSSO_0000000022 [Produced Natively]	161
EXHIBIT 10	BRG Invoice January 12, 2026 CLJA_USA_RUSSO_0000000018 [Produced Natively]	161
EXHIBIT 11	BRG Invoice February 10, 2026 CLJA_USA_RUSSO_0000000017 [Produced Natively]	161
EXHIBIT 12	BRG Invoices April 10, 2025 to February 10, 2026 - Dr. Miller MILLER_USA_0000000016 front page	180
EXHIBIT 13	Supplemental Materials Considered of Gregory Russo February 20, 2026	191

NUMBER		PAGE
EXHIBIT 14	"Measuring The Value Of Medical Services In Personal Injury Suits August 2017 CLJA_USA_RUSSO_0000000024 [Produced Natively]	208
EXHIBIT 15	Expert Report of Gregory Russo December 15, 2025 - Robert Welch	287
EXHIBIT 16	Materials Considered for Gregory Russo - Robert Welch	287
EXHIBIT 17	Expert Report of Gregory Russo December 15, 2025 - Edgar Peterson	287
EXHIBIT 18	Materials Considered for Gregory Russo - Edgar Peterson	287
EXHIBIT 19	Expert Report of Gregory Russo December 15, 2025 - Richard Sparks	287
EXHIBIT 20	Materials Considered for Gregory Russo - Richard Sparks	288
EXHIBIT 21	Expert Report of Gregory Russo December 15, 2025 - Diane Rothchild	288
EXHIBIT 22	Materials Considered for Gregory Russo - Diane Rothchild	288
EXHIBIT 23	Expert Report of Gregory Russo December 15, 2025 - David Fancher	288

NUMBER		PAGE
EXHIBIT 24	Materials Considered for Gregory Russo - David Fancher	288
EXHIBIT 25	Expert Report of Gregory Russo December 15, 2025 - David Downs	288
Exhibit 26	Materials Considered for Gregory Russo - David Downs	289
EXHIBIT 27	Expert Report of Gregory Russo December 15, 2025 - Allan Howard	289
EXHIBIT 28	Materials Considered for Gregory Russo - Allan Howard	289
EXHIBIT 29	Expert Report of Gregory Russo December 15, 2025 - Jacqueline Tukes	289
EXHIBIT 30	Materials Considered for Gregory Russo - Jacqueline Tukes	289
EXHIBIT 31	Expert Report of Gregory Russo December 15, 2025 - Ronald Carter	290
EXHIBIT 32	Materials Considered for Gregory Russo - Ronald Carter	290
EXHIBIT 33	Expert Report of Gregory Russo December 15, 2025 - Scott Keller	291

NUMBER		PAGE
EXHIBIT 34	Materials Considered for Gregory Russo - Scott Keller	292
EXHIBIT 35	Expert Report of Gregory Russo December 15, 2025 - Terry Dyer	292
EXHIBIT 36	Materials Considered for Gregory Russo - Terry Dyer	292
EXHIBIT 37	Expert Report of Gregory Russo December 15, 2025 - Jefferson Criswell	292
EXHIBIT 38	Materials Considered for Gregory Russo - Jefferson Criswell	292
EXHIBIT 39	Expert Report of Gregory Russo December 15, 2025 - Mark Cagiano	293
EXHIBIT 40	Materials Considered for Gregory Russo - Mark Cagiano	293
EXHIBIT 41	Expert Report of Gregory Russo December 15, 2025 - Stephen Connard	293
EXHIBIT 42	Materials Considered for Gregory Russo - Stephen Connard	293
EXHIBIT 43	Expert Report of Gregory Russo December 15, 2025 - Karen Amsler	218

NUMBER		PAGE
EXHIBIT 44	Materials Considered for Gregory Russo - Karen Amsler	219
EXHIBIT 45	Expert Report of Gregory Russo December 15, 2025 - Joseph Gleesing	293
EXHIBIT 46	Materials Considered for Gregory Russo - Joseph Gleesing	294
EXHIBIT 47	Amended Appendix 1A - Table 1: Past Medical Billed Amounts and Reasonable Value Analyses Based on Plaintiff Expert MHW Reports (2025 Dollars)	200
EXHIBIT 48	1st Amended Appendix for Karen Amsler: Master Totals + Past Medical Billing Summary PLG-EXPERT_HACKETT-WALLACE_0000000060 - 0000000062	227

P R O C E E D I N G S

- - -

THE VIDEOGRAPHER: We are now on the record.

My name is Ryan Heathcock. I am the videographer for Golkow, a Veritext division. Today's date is Friday, February 27, 2016 and the time is 9:05 AM Eastern.

This deposition is being held at 1101 L Street Northwest in Washington, DC. This deposition is being taken in the matter of Camp Lejeune Water Litigation versus USA, Case Number 7:23-CV-897. This case is being heard in the United States District Court for the Eastern District of North Carolina Southern Division.

Today's deponent is Mr. Gregory Russo.

At this time, counsel, would you please identify yourselves, starting with the noticing attorney.

MS. BUTLER: Good morning.

I'm Jenna Butler. I'm with the Plaintiffs Leadership Group.

MR. ANTONUCCI: Giovanni Antonucci for United States.

THE VIDEOGRAPHER: Thank you very much.

At this time will our -- actually, for those joining us on Zoom, would they please identify themselves at this time.

MR. VANSLYKE: Ben VanSlyke also on behalf of the Plaintiffs Leadership Group.

MR. TURNER: Joseph Turner for United States.

THE VIDEOGRAPHER: Thank you very much.

At this time, will our court reporter please swear in the witness.

- - -

GREGORY S. RUSSO

called for examination, and, after having been duly sworn, was examined and testified as follows:

THE VIDEOGRAPHER: Counsel, you may proceed.

MS. BUTLER: Thank you.

- - -

EXAMINATION

- - -

BY MS. BUTLER:

Q. Good morning. We met right before the deposition started and I'm Jenna Butler. I'll be taking your deposition today and I'm here on behalf of the plaintiffs.

Can you please state your full name for the record?

A. Yes. Good morning. My name is Gregory Russo. My middle name is Severin, S-e-v-e-r-i-n.

Q. You've been deposed before, correct?

A. That is correct.

Q. Okay. So just to remind you, the court reporter is going to be taking down the testimony. So I will try to not speak over you, and will you try to not speak over me?

A. Yes, I will do my best.

Q. Thank you.

And if I ask you a question, I am going to assume that you understand the question, unless you ask me to rephrase it or tell me that you don't understand the question.

Is that fair?

A. Yes.

Q. Okay. Now, you understand you're under oath, correct?

A. Yes.

Q. Okay. And if you can also -- please you're doing a great job now -- answer verbally yes or no instead of uh-huh or huh-uh. It's a lot easier for the court reporter.

Is that fair?

A. Yes.

Q. Okay. Thank you.

And if you need to take a break, we can take a break. I just ask that you answer any question that's pending at the time.

Is that fair?

A. Yes.

Q. And typically in these depositions -- we've taken a lot in this case at this point. We typically take a break around an hour. I am

not super good about keeping track of time while I'm taking the deposition if, you know, I'm glad, Mr. Giovanni, if you want to let me know if you think it's time for a break, as long as a question that I've asked is answered, I'm fine with that.

Is that okay?

A. Yes.

Q. Okay. Are you aware of any circumstances here today that might prevent you from understanding my questions or answering them truthfully and honestly?

A. No.

Q. Okay. What do you know about the Camp Lejeune Justice Act?

MR. ANTONUCCI: Objection. To the extent that this question calls for the contents of privileged communications, please do not divulge those.

BY MS. BUTLER:

Q. Beyond what your attorneys may have told you about the Camp Lejeune Justice Act, do you have any independent understanding of the Camp Lejeune Justice Act?

A. No, I do not.
Q. Were you familiar with the Camp Lejeune Water Litigation before you were retained in this matter?
A. I don't believe so. I may have seen a commercial at some point on television, but it wasn't something that was at the top of my mind.
Q. So you didn't see a commercial like do an internet search or anything like that to --
A. No.
Q. Okay. Okay. So is it accurate to state that your understanding of the Camp Lejeune Justice Act is based on anything that your attorney has told you?
A. Yes.
Q. Without divulging what your counsel has told you, what is your current understanding of your role in this litigation?
A. My understanding of my role is to calculate the reasonable value of past medical expenses that have been identified by some of the plaintiffs.
Q. And by identified through some of the plaintiffs, are you referring to the

identification through the expert report of Marjorie Hackett-Wallace?

A. Yes.

Q. Okay. Do you have any friends or family members that you know of who have filed a claim under the Camp Lejeune Justice Act?

A. Not of which I'm aware.

Q. Okay. Do you have any friends or family members who have served or are currently serving in the military?

A. Yes.

Q. Can you explain a little bit more?

A. Yes.

Q. Okay. Who? Is it like a father who has served or a brother who is serving? I'm asking for a little more detail.

MR. ANTONUCCI: Objection.

THE WITNESS: My father served in the military. My father-in-law also served in the military.

BY MS. BUTLER:

Q. Thank you or thanks to them for their service.

Are they out of the military now?

A. Yes.
Q. Do you know what branch of the military they served in?
A. Yes.
MR. ANTONUCCI: Objection.
BY MS. BUTLER:
Q. What branch?
A. My father was in the Army. My father-in-law was in the Air Force. My grandfather served. I mean, you didn't put any limit on this. So --
Q. I'm trying to understand?
A. -- you're going back.
Q. I'm trying to understand if you have any Marines, for example, in your family or amongst your friends who may have served.
MR. ANTONUCCI: Objection.
THE WITNESS: And so now you have expanded it to friends as well.
BY MS. BUTLER:
Q. I thought I had included that previously, but if I hadn't, I was asking if you had any friends or family who have served in the military and now I've asked about the Marine

Corps.

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, and in your initial question, you asked family. So now you've expanded it to friends.

I do believe that there is a spouse of a colleague that I would consider as a friend that has served in the Marines. Otherwise, I don't know of anyone who has served in the Marines.

BY MS. BUTLER:

Q. Do you know if that spouse was ever located at Camp Lejeune?

MR. ANTONUCCI: Objection.

THE WITNESS: No, I don't.

BY MS. BUTLER:

Q. Okay. When were you -- and I'm going to distinguish here in this question between you and Berkeley Research Group.

When do you recall first getting involved in this litigation?

A. I believe that it was last summer.

Q. So summer of 2025?

A. Best of my recollection.

Q. Okay. And what did you understand your role in the litigation to be when you were first involved in the summer of 2025?

A. As I've indicated before in the question that you asked, my role was to calculate the reasonable value of past medical expenses identified by the plaintiffs.

Q. And so has your role in this litigation, as you just defined it, ever changed during the course of the litigation?

A. No.

Q. So your role back in the summer of 2025 up through the current day is to calculate the reasonable value of past medical expenses; is that correct?

A. Correct.

Q. Okay. Do you understand that role to -- sorry. Let me rephrase that.

Do you have any understanding as to whether that role might expand?

A. I do not.

MR. ANTONUCCI: Objection.

THE WITNESS: Sorry.

I do not.

BY MS. BUTLER:

Q. So you do not have an understanding as to your role expanding; is that correct?

I'm just making sure.

MR. ANTONUCCI: Objection.

THE WITNESS: I do not have an understanding as to my role expanding.

BY MS. BUTLER:

Q. Okay. And we will get into in this in more detail, but I do know since you produced your report since December -- on December 15, 2025, I know that you have reviewed some additional materials.

Do you understand that whether you will be asked to testify about those additional materials you have reviewed?

MR. ANTONUCCI: Objection.

THE WITNESS: The additional materials that I have reviewed would not change my opinions. They were duplicative bills or bills that were not relevant.

BY MS. BUTLER:

Q. Do you know how it came about that

you and/or Berkeley Research Group -- because I understand you work for Berkeley Research Group; is that correct?

A. Yes, I do work for Berkeley Research Group.

Q. Okay. Do you understand how Berkeley Research Group or you in particular came to be retained in this litigation?

A. No.

Q. Okay. Were you involved in Berkeley Research Group's retention in this matter?

A. No.

Q. So, for example, you didn't sign any engagement agreements or anything related to Berkeley Research Group's engagement in this matter?

A. No.

Q. Have you ever seen any retention agreements or contracts involving the retention of the Berkeley Research Group for this matter?

A. No.

Q. Are there any separate retention agreements or engagement agreements with respect to your involvement in this matter?

A. No, I don't believe so.
Q. Okay. So, so you haven't seen any, for example, contract engaging you for this matter; is that correct?
A. That is correct.
Q. You just indicated that you first became involved in this matter around the summer of 2025.
Do you know if Berkeley Research Group was involved in this matter prior to that time?
MR. ANTONUCCI: Objection.
THE WITNESS: I believe that they were.
BY MS. BUTLER:
Q. Okay. Do you know how Berkeley Research Group was involved prior to your involvement in the summer of 2025?
MR. ANTONUCCI: Objection.
THE WITNESS: I understood that there were some colleagues that were working on this matter, but I didn't understand the details of what everyone was doing.

BY MS. BUTLER:

Q. What colleagues are you referring to?

A. I had an understanding that Dubravka Tosic was working on the matter and I believe Robin Cantor.

Q. So who is Robin Cantor?

A. She is a managing director of Berkeley Research Group.

Q. Was she involved -- let me -- let me back up.

So I know that with respect to your involvement in this matter, you had some other individuals at -- can I call it BRG?

A. Yes.

Q. Okay. So for purposes of today, if I say "BRG," do you understand I'm referring to Berkeley Research Group?

A. Yes.

Q. Okay.

A. And I'll do the same thing.

Q. Okay. It will save the court reporter a lot of time too.

I understand from your work on this

matter that there are other individuals at BRG working with you; is that correct?

A. That is correct. I had a team that worked at my direction.

Q. Okay. Did -- did -- was Robin Cantor on a team?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know.

BY MS. BUTLER:

Q. Okay. Do you know what -- what her role was with respect to the litigation?

MR. ANTONUCCI: Objection.

THE WITNESS: I do not.

BY MS. BUTLER:

Q. You just -- what did you understand she was doing?

MR. ANTONUCCI: Objection.

THE WITNESS: I didn't have any understanding of what her scope was, if she was even doing anything.

I understood that there was a conversation that -- that I had had at some point where she briefly discussed this litigation.

BY MS. BUTLER:

Q. Do you recall any more about that discussion, other than what you've just described?

A. I do not remember any of the details of it. I remember her referencing Camp Lejeune, which was not a word that I had really heard before, and that's about the extent of what I remember.

Q. Do you remember what she said she was doing for the Camp Lejeune litigation?

A. So --

MR. ANTONUCCI: Objection.

THE WITNESS: -- as I indicated before, I did not.

BY MS. BUTLER:

Q. Okay. And did you also talk to Dubravka Tosic?

MR. ANTONUCCI: Objection.

THE WITNESS: I have spoken with Dubravka before, yes.

MR. ANTONUCCI: I'm going to -- excuse me -- add to my objection to the extent that you're asking about conversations between retained experts,

those are protected by CMO 17.

MS. BUTLER: Okay. And it's my understanding that Ms. Tosic is retained but not Ms. Cantor. Is that correct?

MR. ANTONUCCI: Ms. Cantor is retained as well.

BY MS. BUTLER:

Q. Okay. With respect to Ms. Tosic, what is your understanding of her role in this litigation? Not based on conversations with her, but just what is your general understanding?

A. I don't have an understanding of what her role is.

Q. Have you reviewed any reports that she has prepared?

A. No.

Q. So you previously indicated that before you actually started your work in this litigation, that you had an understanding that colleagues at BRG were working on the matter. We've mentioned Ms. Tosic and I assume Robin Cantor is Ms. Cantor.

Are there any others that you recall

hearing were working on this matter?
A. Yes. Dr. Henry Miller.
Q. And what was your understanding of what Dr. Henry Miller was working on for this matter?
A. My understanding was that Dr. Miller was analyzing services in life care plans to identify what reimbursement government sources would provide with those services.
Q. And do you understand that he has prepared a report along those lines?
A. My understanding is that he has prepared reports --
Q. Okay.
A. -- along those lines.
Q. And do you intend to offer any of the opinions that Dr. Henry Miller has expressed in this case?
MR. ANTONUCCI: Objection.
THE WITNESS: I do not intend to offer opinions on the subject matter that -- I'm sorry, not the subject matter.
I do not intend to offer any

opinions on what Henry Miller has offered as opinions.

BY MS. BUTLER:

Q. Now, Dr. Miller also is with BRG; is that correct?

A. That is correct.

Q. So would it be accurate to state that with respect to your opinions and Dr. Miller's opinions, each of you plan to stay within the scope of your individual report?

MR. ANTONUCCI: Objection.

THE WITNESS: I can't speak for Dr. Miller. I can speak for myself.

Yes, I intend to provide opinions that are solely within the scope of my report -- reports.

BY MS. BUTLER:

Q. You mentioned that you are calculating a reasonable value of past medical expenses.

Did I remember that correctly?

A. You did, yes.

Q. Okay. When you use the term "reasonable value," is that any different from

market value?

A. No, I think they would be synonymous.

Q. When is a reasonable value calculation utilized?

A. It's utilized every day in the healthcare marketplace. When we as healthcare researchers and individuals that are -- that have a responsibility for operating the healthcare markets in the United States, we are concerned with what the reasonable value of services is, and so it's something that I and my team go through on a daily basis and have gone through in the more than 20 years of my career.

Q. In the litigation context, when are you aware of reasonable value calculations being used?

MR. ANTONUCCI: Objection.

THE WITNESS: I am aware that they have been used in a number of different cases. Cases that involve the disagreement as to what has been reimbursed for services between payors and providers.

I understand that they have been used as it relates to the potential injuries that an individual has incurred.

I understand that reasonable value calculations have also been used in a number of other contexts, like context relating to the Anti-Kickback Statute as well.

BY MS. BUTLER:

Q. And have you been involved in testifying in the litigation context in all of those areas?

MR. ANTONUCCI: Objection.

THE WITNESS: I have offered testimony in matters that relate to those areas, yes.

BY MS. BUTLER:

Q. With respect to the area of potential injuries in litigation, can you expand a little bit upon your experience with the use of the reasonable value calculation?

MR. ANTONUCCI: Objection.

THE WITNESS: I have offered testimony in matters where there are

alleged injuries and, as part of those alleged injuries, a plaintiff is offering or seeking compensation for past medical bills, past medical services that have been rendered. And in that context, I have calculated a reasonable value of what those services are.

BY MS. BUTLER:

Q. How many times have you done that for a piece of litigation?

A. I have done that in, at this point, probably hundreds of cases in which I have offered a report. I have offered deposition or trial testimony in maybe about 40 cases of that sort.

Q. In those cases, have you ever brought your reasonable value calculations to current dollars?

MR. ANTONUCCI: Objection.

THE WITNESS: No, I've never done that.

BY MS. BUTLER:

Q. In those cases, has there been an economist who has done that?

MR. ANTONUCCI: Objection.

THE WITNESS: In some of those cases, that has -- there has been an individual -- I don't know what their qualifications were -- who has calculated a net present value.

BY MS. BUTLER:

Q. And is that because calculating the net present value was beyond the scope of the opinions you were expressing?

MR. ANTONUCCI: Objection.

THE WITNESS: In what context?

BY MS. BUTLER:

Q. You said that there were some cases where another individual calculated a net present value, and I'm asking why it was that you didn't do that calculation versus that person.

MR. ANTONUCCI: Objection.

THE WITNESS: It's not something on which I feel prepared to opine.

BY MS. BUTLER:

Q. Okay. Is that because you don't recall or understand why that individual brought

those values to current value?

MR. ANTONUCCI: Objection.

THE WITNESS: No, it's because in those cases, there were both past medical services as well as future medical services, and the calculation of a net present value was a more complex analysis.

One was both -- one was needing to discount and deal with different types of services, and it's just not something that was within my scope.

BY MS. BUTLER:

Q. Is calculating a present value for past medical expenses not within your scope in this litigation?

MR. ANTONUCCI: Objection.

THE WITNESS: That is correct. I was not asked to do so.

BY MS. BUTLER:

Q. If you were asked to do so, could you?

MR. ANTONUCCI: Objection.

THE WITNESS: I would need to study the issue and determine whether or not it is something that I felt I could accomplish.

BY MS. BUTLER:

Q. Have you in either litigation or outside of litigation brought past medical expenses to a present or current value?

MR. ANTONUCCI: Objection.

THE WITNESS: I have applied an inflation rate at times. I have not gone through a calculation of net present value in terms of discounting what may be future services that are then compensated in the current dollars.

BY MS. BUTLER:

Q. When you say you have applied an inflation rate, why have you applied an inflation rate?

A. I don't recollect the context in which I have, but I know that I've dealt with applying an inflation rate. I don't recollect having done so in litigation testimony that I've offered. I recollect having done so in some

consulting matters that I've had that are not litigation.

Q. Why would an inflation rate be applied?

MR. ANTONUCCI: Objection.

THE WITNESS: There can be lots of reasons and it depends on the situation.

BY MS. BUTLER:

Q. Is it correct that if I paid $10,000 10 years ago that that $10,000 I paid 10 years ago would likely be worth more now today?

MR. ANTONUCCI: Objection.

THE WITNESS: Not necessarily.

BY MS. BUTLER:

Q. You understand the concept of the time value of money, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes.

BY MS. BUTLER:

Q. Is that one of the reasons that inflation rates are sometimes applied?

A. I don't know about that.

MR. ANTONUCCI: Objection.

BY MS. BUTLER:

Q. I think I asked you this, but let me make sure.

Do you intend to update, supplement, amend, or correct any of your reports or tables --

MR. ANTONUCCI: Objection.

BY MS. BUTLER:

Q. -- before trial?

MR. ANTONUCCI: Same objection.

THE WITNESS: At this time, I do not intend on updating my reports.

However, I have -- I reserve the right to update them to the extent that additional information is provided by the plaintiffs, which my understanding since I have filed the reports there has been additional information.

BY MS. BUTLER:

Q. But at this time I think you already testified, you do not intend to update in spite of that additional information; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Based on the additional information that I have reviewed since my report was -- my reports were produced, I do not intend on updating with that additional information.

However, I do reserve the right, to the extent that the plaintiffs continue to produce additional materials, that my reports may need to be updated if those additional materials would have an impact on the opinions I'm offering.

BY MS. BUTLER:

Q. So just to make sure I understand.

Based on the materials you've reviewed, as we're sitting here today, you do not intend to correct, amend, update your report, but you're reserving the right to do so should additional materials be made available to you after today; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: That's correct.

BY MS. BUTLER:

Q. Okay. Do you know if Berkeley

Research Group usually requires an engagement agreement before contracting for work?

MR. ANTONUCCI: Objection.

THE WITNESS: My understanding is that we -- we BRG -- typically enter into an engagement letter with a client.

BY MS. BUTLER:

Q. But you're not aware of one existing for this engagement; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I have not asked and I do not have information on whether an engagement letter specifically exists for this work yet.

I would think that our general counsel would have contacted me if I was working on a case for which there was no contract, no agreement.

BY MS. BUTLER:

Q. We previously mentioned Dr. Henry Miller, who you are aware of has provided reports in this case, correct?

A. Yes.

Q. Okay. Have you worked with him on other matters?

A. Yes.

Q. So what is your professional relationship with Dr. Henry Miller?

A. He is a colleague of mine.

Q. And do you two do the same thing or do you complement one another?

I'm trying to understand in what context you might work together.

MR. ANTONUCCI: Objection.

THE WITNESS: Henry and I have very similar skill sets. He has many more years of experience than I do given his age, but we have very similar skill sets and have had a similar scope of work for many years.

BY MS. BUTLER:

Q. Now, Dr. Miller holds a PhD in accounting and economics, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I know that he holds a PhD. I don't know what it's in.

BY MS. BUTLER:

Q. Okay. Do you hold a PhD in accounting and economics?

A. No, I do not.

Q. Okay. Do you hold yourself out as an economist?

A. No, I do not.

Q. And do you -- are you aware that Dr. Miller has an MBA?

A. No, I was not aware of that.

Q. Okay. You do not have an MBA, correct?

A. No. I have a Master's of Health Science.

Q. Did you work with Dr. Miller on his reports in this case?

A. Yes.

Q. What was your role with respect to Dr. Miller's reports in this case?

A. I assisted in coordinating what some of the team was doing and taking direction from Dr. Miller with respect to the analyses that he wanted done.

Q. Did you provide any of the substance of his reports?

MR. ANTONUCCI: Objection.
I'm going to instruct you not to answer as this is protected by CMO 17.

BY MS. BUTLER:

Q. You've already testified that you don't plan to provide testimony in this case with respect to Dr. Miller's reports, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: That is correct.

BY MS. BUTLER:

Q. When Dr. Miller was working on his reports and there was, I believe you said, a team that was working with him; is that correct?

A. Yes, that's correct.

Q. I believe you said that you were working at Dr. Miller's direction; is that correct?

A. That is correct.

Q. Okay. Was there a particular aspect of his report that you were working at his direction on?

MR. ANTONUCCI: Objection.

THE WITNESS: No.

BY MS. BUTLER:

Q. And I believe you said that you were coordinating a team who was helping Dr. Miller; is that correct?

A. I was assisting in the coordination of the team.

Q. Was that more of an oversight or supervisory role than an actual, I guess, substantive involvement?

MR. ANTONUCCI: Objection.

THE WITNESS: I assisted in coordinating to ensure that the staff had an understanding of the tasks and that there were enough staff that were assisting, but I also did at times have a substantive role.

BY MS. BUTLER:

Q. What was that substantive role?

MR. ANTONUCCI: Objection.

I'm going to instruct you not to answer.

BY MS. BUTLER:

Q. Is it your position that any of the opinions expressed by Henry Miller relied on your

expertise?

A. No, they do not.

Q. Will you be expressing opinions on any of the offsets addressed by Henry Miller?

MR. ANTONUCCI: Objection.

THE WITNESS: No.

BY MS. BUTLER:

Q. Do you have any understanding of any agreement about the cost of work for BRG's role in this litigation?

A. No.

Q. Do you know how much has been billed by BRG for their work in this litigation?

A. No.

MR. ANTONUCCI: Objection.

BY MS. BUTLER:

Q. Do you review any of the invoices that BRG submits for this litigation?

A. I have in the past reviewed an invoice. I am not on the critical path with respect to getting those invoices out. So I don't review every one, but I recollect having seen one of them. I don't remember any of the details on it, though.

Q. Do you have any understanding as to how much BRG has billed to date for this litigation?

MR. ANTONUCCI: Objection.

THE WITNESS: No.

BY MS. BUTLER:

Q. Do you have any understanding as to how much BRG has billed to date for your reports in this litigation?

A. No.

Q. Would you be surprised if I told you that almost 500,000 has been billed to date for your reports in this litigation?

MR. ANTONUCCI: Objection.

THE WITNESS: No.

BY MS. BUTLER:

Q. Do you know if BRG or any members of the BRG team working on this litigation have provided anything, such as updates or projections, with respect to the litigation? And by "provided" I mean to DOJ.

MR. ANTONUCCI: Objection.

THE WITNESS: I don't understand your question.

BY MS. BUTLER:

Q. Okay. Has BRG been providing, say, monthly, quarterly, or some type of update or projection to DOJ with respect to its work on this litigation?

MR. ANTONUCCI: Objection.

THE WITNESS: Not of which I'm aware.

BY MS. BUTLER:

Q. You have not been involved in drafting anything like that?

MR. ANTONUCCI: Objection.

THE WITNESS: No, I have not.

BY MS. BUTLER:

Q. Okay. We will look at your specific reports, and if you need to refer one, please let me know. I have them all here.

Am I correct that you are not going to be testifying as to any reasonable values for future healthcare in this litigation?

A. That is correct. As I have indicated, the scope of my work was to provide the reasonable value of past medical services.

Q. And at the current time, that is

with respect to 16 plaintiffs; is that correct?

A. That is correct. I have provided reports for 16 plaintiffs.

Q. And am I correct that you are not, for example, providing opinions with respect to any future healthcare that, say, a life care planner may have included in a life care plan report in this litigation?

A. That is not something that is within the scope of the reports that I have offered.

Q. And so you're not planning to offer those opinions in this case, correct?

A. I am only planning to offer the opinions as to the reasonable value of past medical services.

Q. On other occasions, have you offered opinions with respect to reasonable values of future medical care?

A. I have, yes.

Q. It's just not in the scope of what you're doing for this litigation; is that correct?

A. That is correct.

Q. When you have offered opinions with respect to the reasonable value of medical care

for future medical care, have you done any type of present value calculation in those cases?

A. No.

Q. Okay. And, again, is that because others have taken on that role, or is it because you couldn't do the calculation or you weren't asked to do the calculation?

I'm trying to understand the reason.

MR. ANTONUCCI: Objection.

THE WITNESS: It's not something that has ever been within my scope. There have been situations where others have provided that calculation. It's not something that I do or that I offer to my clients in those matters.

BY MS. BUTLER:

Q. Were you provided any assumptions for your work in this case?

A. No, not that I recollect.

Q. It's my understanding that you reviewed the reports of Marjorie Hackett-Wallace in this case; is that correct?

A. Yes, I did.

Q. And those reports that you refer to

in your reports for this case are dated October 29, 2025; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't recollect the date of when Marjorie Hackett-Wallace submitted her reports. It was sometime in the fall and before my reports were submitted in December.

BY MS. BUTLER:

Q. When you reviewed Marjorie Hackett-Wallace's reports, did you go back to see if she had missed any relevant medical billing pertaining to the injuries in this case?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't understand what you mean by "relevant medical billing."

BY MS. BUTLER:

Q. So let's say Marjorie Hackett-Wallace's report identified $50,000 worth of charges for a bladder cancer patient for billing related to care for that bladder cancer.

Are you with me?

A. Yes.

Q. Okay. And it's my understanding that you reviewed Marjorie Hackett-Wallace's reports; is that correct?

A. I did, yes.

Q. And then that you validated the medical billing amounts; is that accurate?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. I went through to ensure that Marjorie Hackett-Wallace had identified the accurate billed charges that were on each of the bills that she had included within her analyses, and I found that she did not.

BY MS. BUTLER:

Q. How often did you find that she did not?

A. I don't recollect the number of times. There were several instances. And when Marjorie Hackett-Wallace subsequently submitted her rebuttal reports, she agreed with almost all of the instances that I found where she had made an error.

Q. And were those errors generally

maybe a transcription error or a duplication?

MR. ANTONUCCI: Objection.

THE WITNESS: I mean, it seemed like sloppy work that she did where she just didn't check. I don't know why, how she made them or why she made them.

BY MS. BUTLER:

Q. Do you have an understanding as to the percentage of the billing charges that Marjorie Hackett-Wallace identified that you did not find an error with?

A. No.

Q. Would you agree that it was at least over 50 percent of them?

MR. ANTONUCCI: Objection.

THE WITNESS: I would agree that it was over 50 percent, yeah.

BY MS. BUTLER:

Q. Would you agree that it was over 75 percent?

MR. ANTONUCCI: Objection.

THE WITNESS: Over 75 percent. Past that point I'd be

speculating.
BY MS. BUTLER:
Q. Okay. But you'd agree that at least, at least, 75 percent of the billing charges that Marjorie Hackett-Wallace identified you agreed with; is that correct?
MR. ANTONUCCI: Objection.
THE WITNESS: Yeah, I think that's reasonable. I would have expected her to have been complete and accurate in her report.
BY MS. BUTLER:
Q. So it's your position she was not?
A. I don't think it's only -- it's not only my position. It's her position as well that in her initial reports that she was wrong, and then in her rebuttal reports she agreed with the places where I had identified that she had made errors.
Q. If you identified that she made an error, would that be a discrepancy noted on your Table 1 in the total amount versus her original report and appendices? Is that how it would be identified?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I believe it would be identified there. It would also be identified in the packet of materials that I have provided. Appendix C to my report.

BY MS. BUTLER:

Q. Okay. And are you aware that on some occasions the difference between Marjorie Hackett-Wallace's number and your number is less than $2,000?

MR. ANTONUCCI: Objection.

THE WITNESS: In some cases, yes, it is small.

BY MS. BUTLER:

Q. Okay. Did you assume for purposes of your report that the medical billings you reviewed were related to the plaintiff's actionable illness in this case?

MR. ANTONUCCI: Objection.

THE WITNESS: I did not make an assumption I have on that. I have no opinion on whether these bills that were identified by Marjorie Hackett-Wallace

relate to the at-issue conditions.

BY MS. BUTLER:

Q. So along those lines, you took Marjorie Hackett-Wallace's numbers and then either Dr. Ji or Dr. Hasan's numbers and calculated reasonable value based on their determinations?

MR. ANTONUCCI: Objection.

THE WITNESS: I calculated the reasonable value of each of the past medical services that were identified by Marjorie Hackett-Wallace.

I then limited that list of services based on those that Dr. Ji or Dr. Hasan had and identified were related to the condition.

BY MS. BUTLER:

Q. So you were relying on Dr. Ji, Dr. Hasan, and Marjorie Hackett-Wallace for the relatedness determinations in their reports.

You didn't go back and validate any of that; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: That is correct. I'm not a clinician. So I'm

not able to opine on whether a medical service relates to a certain condition.

BY MS. BUTLER:

Q. Did you do any analysis to see if there were relevant medical billings that were missed by either Marjorie Hackett-Wallace or Dr. Ji or Hasan?

MR. ANTONUCCI: Objection.

THE WITNESS: I did not do analysis. As I'm not a clinician, I wouldn't have the ability to determine whether past medical services that had been incurred were related to a specific condition or not.

BY MS. BUTLER:

Q. So am I correct that you're not rendering opinions in this case about the accuracy of the medical billing data that you reviewed?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't necessarily agree with that.

As I indicated, Marjorie Hackett-Wallace provided inaccurate information in her initial

reports -- initial report -- sorry -- and I opined on the accuracy of that. I made corrections.

Marjorie Hackett-Wallace in her rebuttal report agreed with those corrections, and so to that extent, I am offering an opinion as to the accuracy.

BY MS. BUTLER:

Q. Is that more the accuracy of Marjorie Hackett-Wallace's work versus the accuracy of the actual medical billing data, the data that you reviewed that you say you validated the expenses from?

MR. ANTONUCCI: Objection.

THE WITNESS: I am offering no opinion as to the medical coding that is included on the medical bills which were provided related to past medical services.

BY MS. BUTLER:

Q. So I understand your background is in data analytics, correct?

A. I have a background in healthcare finance. That includes a significant

concentration in data analytics.

Q. And it looked from your CV -- and we'll look at it in more detail down the road -- that sometimes you get involved in fraud investigations; is that correct?

A. Yes, I have been.

Q. Okay. But that was not your job in this case, correct?

A. The scope of work in this case was to analyze the reasonable value of the past medical services.

Q. So you weren't analyzing the medical billing data for, like, upbilling, upcoding, miscoding, fraud, things like that; is that correct?

A. That is correct. I did not do that. I assumed that the providers that had submitted the past medical bills had done so accurately and completely.

Q. And you're not offering opinions regarding the reasonableness of the medical care provided, correct?

A. I'm not a clinician. I don't have any opinions on the medical care that has been

rendered.

Q. And you're not offering opinions regarding the amounts paid on those medical bills, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: No, I'm not offering an opinion on the amounts that were or were not paid.

What I'm offering is an opinion on the reasonable value of the past medical services.

BY MS. BUTLER:

Q. And you're not rendering any type of opinion regarding out-of-pocket expenses, premiums, copays, things like that; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I am not offering opinions on premiums or copays.

The opinions that I'm offering in this case are with respect to the reasonable value of past medical expenses.

BY MS. BUTLER:

Q. And your opinions are limited to past medical expenses, correct? They don't include things like veteran disability payments or awards of benefits?

MR. ANTONUCCI: Objection.

BY MS. BUTLER:

Q. Is that correct?

MR. ANTONUCCI: Same objection.

THE WITNESS: My opinions relate to the reasonable value of past medical services and do not include the things that you mentioned.

BY MS. BUTLER:

Q. Did you perform a cost-effectiveness analysis in this case?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know what you mean by "cost-effectiveness."

BY MS. BUTLER:

Q. Did you analyze the effectiveness of any of the medical care or medical billing in this case?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't understand what you mean by "effectiveness" of medical care.

BY MS. BUTLER:

Q. So I take it that means you didn't do that analysis if you don't understand the question; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I wouldn't agree with that. I don't understand the term that you're using.

BY MS. BUTLER:

Q. Did you in any way evaluate effectiveness in this case?

MR. ANTONUCCI: Objection.

THE WITNESS: How would you define effectiveness in your question?

BY MS. BUTLER:

Q. How would you define effectiveness?

MR. ANTONUCCI: Objection.

THE WITNESS: Well, I don't understand your question, so I can't answer it.

BY MS. BUTLER:

Q. You calculated a reasonable value from the medical billing information you were provided; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I have calculated the reasonable value of past medical services.

BY MS. BUTLER:

Q. And what was that based on? The medical billing information you were provided or something else?

MR. ANTONUCCI: Objection.

THE WITNESS: It was based on the medical bills that have been provided in this matter.

BY MS. BUTLER:

Q. What did you do to prepare for today?

A. I reviewed the reports that I've submitted in this case and the materials upon which I relied. I had a conversation with my team and -- and a conversation with attorneys at the Department of Justice.

Q. Was anyone involved in these

meetings or conversations, other than your BRG team or counsel at the Department of Justice?

A. No.

Q. Was Dr. Henry Miller involved in those meetings or conversations?

A. No.

Q. Were any materials supplied to you that are not referred to in your Materials Considered List, or lists?

A. Yes.

Q. What?

MR. ANTONUCCI: Objection.

THE WITNESS: The rebuttal reports of -- or rebuttal report of Marjorie Hackett-Wallace, which was provided after my reports were submitted, and also the report of Dr. Basu, which was provided after my reports were submitted.

BY MS. BUTLER:

Q. Is there anything that you recall disagreeing with when you reviewed the rebuttal report and related documents of Marjorie Hackett-Wallace?

MR. ANTONUCCI: Objection.

THE WITNESS: Without having that report in front of me, I recollect that there were times when I think she mischaracterized some of the work that I had done as being done by Dr. Ji or Dr. Hasan.

BY MS. BUTLER:

Q. What work are you referring to there that you contend Ms. Hackett-Wallace mischaracterized?

MR. ANTONUCCI: Objection.

THE WITNESS: The reasonable value of past medical expenses.

MR. ANTONUCCI: We're at about an hour, Jenna.

MS. BUTLER: Okay. I'm fine taking a break.

THE VIDEOGRAPHER: The time is 9:59. We're going off the record.

(A recess was taken.)

THE VIDEOGRAPHER: This is the beginning of media unit number 2 of the video-recorded deposition of Mr. Gregory

Russo. The time is 10:10 AM Eastern. We are now back on the record.

Counsel, you may proceed.

MR. ANTONUCCI: Quickly for the record, we are now joined by my colleague Melanie Konstantopoulos for the United States.

THE VIDEOGRAPHER: Thank you.

MS. BUTLER: Thank you.

BY MS. BUTLER:

Q. Mr. Russo, during the break, did you have any conversations about the litigation or this deposition with your attorney?

A. No, no substantive conversations.

Q. Thank you.

I wanted to clarify something that we touched on before the break, and it was with respect to the calculation of present value as it pertains to this case.

Do you recall us discussing that?

A. I recall us having mentioned that in our conversation.

Q. My recollection is you said something to the effect that you would have

to -- if you were asked to apply a present value in this case, you'd have to take a look at the situation and see if it's something you're able to do.

Is that accurate, or did you say something else?

MR. ANTONUCCI: Objection.

THE WITNESS: I think that's roughly accurate. I would need to consider what I was being asked to do and analyze and determine whether that is something I could do.

BY MS. BUTLER:

Q. And so you have not done that analysis; is that correct?

A. I have not calculated the present value, and it's not been something I've been asked to do.

Q. And so you also haven't analyzed whether you would be able to do that in this case; is that correct?

A. That's correct. I have not analyzed whether that would be something I could do.

Q. Okay. We were talking about whether

you had reviewed any materials in preparation for today, and I think you mentioned the rebuttal reports and updated appendices of Marjorie Hackett-Wallace; is that correct?

A. Yes, I had mentioned that.

Q. Did you look at anything on your own, meaning anything that wasn't given to you by counsel in this case, since your report?

MR. ANTONUCCI: Objection.

THE WITNESS: Not related to this case, no.

BY MS. BUTLER:

Q. Would it be accurate to say that any of the analysis you performed with respect to the scope of your opinions in this case is reflected in your report -- reports?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, the analyses that I conducted and the opinions that I am offering in this case are contained within the reports and its accompanying appendices.

BY MS. BUTLER:

Q. Okay. Have you kept any personal

notes, logs, or records relating to this matter?

MR. ANTONUCCI: Objection.

THE WITNESS: I have not.

BY MS. BUTLER:

Q. Do you know if anyone on your team has kept such notes?

MR. ANTONUCCI: Objection.

THE WITNESS: I do not.

BY MS. BUTLER:

Q. We've discussed Dr. Henry Miller, Dubravka Tosic, and Robin Cantor as being other individuals involved in providing expert testimony in this case with whom you are familiar.

Do you recall discussing those three individuals?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I do, and to be clear, I'm not certain if all of them are providing expert testimony in this case.

BY MS. BUTLER:

Q. Are you familiar with any of the other experts either that you understand are offering testimony in this case or whose reports

you have reviewed for this case?

MR. ANTONUCCI: Objection.

THE WITNESS: No, I'm not personally familiar with any of them.

BY MS. BUTLER:

Q. Are you professionally familiar with any of them?

MR. ANTONUCCI: Objection.

THE WITNESS: I am not. I would not say I'm professionally familiar. I reviewed reports from Dr. Ji and Dr. Hasan, but I'm not professionally familiar with them.

BY MS. BUTLER:

Q. And I think we already discussed that you have not reviewed any reports prepared by Dubravka Tosic; is that correct?

A. Correct.

Q. Okay. And likewise have you reviewed any reports prepared by a Patricia or Tricia Younts or an Andrew -- I forget his first name -- maybe Andrew Brod, B-r-o-d?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know who

those individuals are.

BY MS. BUTLER:

Q. And you don't recall seeing any reports prepared by those individuals?

A. Not of which I recollect.

Q. Have you worked with the Department of Justice before?

A. Yes, I have.

Q. Can you tell me a little bit about the other matters you've worked with them on?

A. I worked with the Department of Justice in a matter that involved a alleged injury and a question as to the reasonable value of I believe in that case it was future medical services.

Q. Do you remember where that case was pending?

A. I do not.

Q. And were you working with the Department of Justice in the defense of that action?

A. Yes.

Q. Did you render an expert report in that case?

A. I don't believe that I did. I don't believe. I believe it settled before my report was needed.

Q. And so were you also not deposed and did not testify?

A. Correct.

Q. Okay. And did that case involve any reasonable values as to past medical expenses?

A. I don't recollect it involving past medical expenses. I believe it was just future.

Q. And is that a case where there had been a life care planner involved?

A. I believe there was a life care planner.

Q. And so in cases such as that, is it your experience that there might be a life care planner or a vocational rehab specialist, then you take that information and you do your calculations from that information?

A. Yes, in some cases, I use information that a life care planner has provided to determine the reasonable value of future medical services.

Q. Have you ever prepared a life care

plan report or vocational -- vocational rehabilitation report?

A. No, I have not. I'm not a life care planner.

Q. Okay. Other than the other persons who are involved in this case at BRG, have you spoken with any of the other experts in this case whether retained or nonretained?

MR. ANTONUCCI: Objection.

THE WITNESS: I believe I had a brief telephone call with Dr. Ji or Dr. Hasan. I don't recollect which one, but I think I only spoke with one of the two of them.

BY MS. BUTLER:

Q. Any other experts that you've spoken with?

A. Not of which I'm aware.

Q. Okay. And was that just one call with Dr. Ji or Hasan?

A. Yes.

Q. And is the information gained as a result of that call contained within your reports in this matter?

MR. ANTONUCCI: Objection.

THE WITNESS: I didn't gain any information within that call. I identified what I would need to be able to do, the work that I was being provided, and Dr. Ji and Dr. Hasan provided that work then in their reports.

BY MS. BUTLER:

Q. So the information you needed is contained within Dr. Ji and Dr. Hasan's reports?

MR. ANTONUCCI: Objection.

BY MS. BUTLER:

Q. Is that correct?

MR. ANTONUCCI: Same objection.

THE WITNESS: Yes, I believe so. I needed them to identify for each service whether they determined that it was relevant to the at-issue condition.

BY MS. BUTLER:

Q. And is that because you were not making those determinations, correct?

A. Correct. I was not making determinations as to the clinical relevance of

services, as I'm not a clinician.

Q. Okay. What is your date of birth?

MR. ANTONUCCI: Objection.

THE WITNESS: I was born on [redacted], 1981.

BY MS. BUTLER:

Q. And where do you live and work?

MR. ANTONUCCI: Objection.

THE WITNESS: I live in Arlington, Virginia and I work at BRG.

BY MS. BUTLER:

Q. BRG has offices all over the United States; is that correct?

A. We have a number of offices spread throughout the U.S.

Q. Do you work in a particular office?

A. Yes.

Q. Which one?

A. The Washington, DC office.

Q. And you've worked for BRG since 2010; is that correct?

A. Correct.

Q. Okay. And you graduated from William and Mary in 2003; is that correct?

A. That is correct.
Q. And what was your undergraduate degree?
A. Bachelor of Arts.
Q. And then you went to Johns Hopkins and graduated in 2005 with a Master's of Health Science; is that correct?
A. That is correct. I went to the Johns Hopkins Bloomberg School of Public Health.
Q. And since you graduated in 2005 from the school you just mentioned, have you been a consultant ever since?
A. I have worked as a consultant since my time in graduate school until the present.
Q. Have you ever held a position in the healthcare industry other than as a consultant?
A. Yes.
Q. Tell me about that.
A. As is indicated on my CV, I worked for Jersey Shore University Medical Center. I served as both a patient care associate as well as an administrative intern.
Q. And was that while you were in graduate school?

A. Both undergraduate as well as graduate school.

Q. And what were your job duties at Jersey Shore?

A. As a patient care associate, I worked in the emergency room assisting doctors and nurses in the rendering of care to the patients that presented. As the administrative intern, I was supporting the Center for Bloodless Surgery.

Q. Let me go back to when you were in the emergency room as a patient care associate.

You mentioned something about rendering care.

Were you actually rendering care?

A. I was not rendering clinical care, but I would say that I was still caring for patients, in that when doctors ordered certain radiological examinations, I would ensure that the patient got from their room to the CAT scan, to the MRI, that they got back.

I was in the room and handing doctors and nurses supplies when they were then performing procedures on patients, and so while I wouldn't say I was a clinician, I would say that I

was part of the care that was being rendered.

Q. You were part of the care team, correct?

A. I was part of the care team, yes.

Q. And then you mentioned that you had another role and, I'm sorry, I didn't get it written down.

What was that role again?

A. I was an administrative intern in the Center for Bloodless Surgery.

Q. Okay. What were you doing as an administrative intern?

A. I was supporting that center in conducting some financial analyses and ensuring that the department -- that that center was operating as -- as the managers of it had -- had wanted it to operate.

Q. Is it your position that any of the experience you gained in those positions with Jersey Shore provide requisite background or training for your opinions in this case?

MR. ANTONUCCI: Objection.

THE WITNESS: While I don't believe that they provide specific

experience that I'm relying upon, they do contribute to my overall understanding of the healthcare marketplace and the manner in which it operates, which is something that is useful in this case.

BY MS. BUTLER:

Q. I may have asked this already, and I apologize if I did, but you are not a CPA or an accountant, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I do not have CPA, no.

BY MS. BUTLER:

Q. Are you an accountant without a CPA?

MR. ANTONUCCI: Objection.

THE WITNESS: No, I am not an accountant.

BY MS. BUTLER:

Q. And you are not a lawyer and don't have legal training, correct?

A. I am not an attorney.

Q. Do you have legal training?

A. I do not have legal training.

Q. What is LECG where you worked from

2009 to 2010?

A. A consulting firm.

Q. Is it the predecessor to BRG or separate?

A. It was a completely separate operating entity.

Q. And what was your role at LECG?

A. Very much the same role that I have currently. I was assisting healthcare clients.

Q. And you also worked at Navigant Consulting; is that correct?

A. That is correct.

Q. What was your role at Navigant Consulting?

A. Very much the same role that I have now in supporting healthcare clients.

MS. BUTLER: I am going to hand you what has been marked as Exhibit 1.

(Document marked for identification as Russo Exhibit 1.)

BY MS. BUTLER:

Q. Do you recognize this document?

A. (Reviews document.)

Q. And I -- for the record, I will note that it was -- the cover page bears Bates numbers CLJA_USA_RUSSO_ a bunch of 0s and a 19. And then the second page starts with the top says "BRG Berkeley Research Group, Curriculum Vitae."

Is that correct?

A. That is correct.

Q. Is this your current CV?

A. It appears to be my current CV.

Q. Okay. And have you held any teaching positions, presented any lectures, published any articles, or held any positions that are not listed on your resumé?

MR. ANTONUCCI: Objection.

THE WITNESS: No, I have not.

BY MS. BUTLER:

Q. And your resumé generally describes your background as being in health analytics; is that correct?

A. And I'm sorry. Let me clarify.

Yes, I have held previous positions. I worked in high school. I -- I worked in two jobs when I was in high school.

Q. Okay.

A. And they're not on my CV.
Q. Okay. Thank you for that clarification. I appreciate it.
So I was asking if it's correct that generally your background is in health analytics; is that accurate?
A. Yes, I think that's fair.
Q. What exactly is health analytics?
A. Health analytics is the study and research of the healthcare marketplace from a data-informed standpoint.
Q. Going through your resumé, it states in the first paragraph that:
"Mr. Russo primarily focuses on harnessing the wealth of information available in large, multipart data sets to bring results and insights to clients with complex, unstructured issues."
Do you see that?
A. Yes, I do.
Q. Does that still accurately describe your primary focus?
A. I think that's fair. That's something that is a focus that I bring to most of

the engagements on which I work.

Q. And is it accurate that most of the engagements in which you work have a lot of data that needs to be analyzed?

MR. ANTONUCCI: Objection.

THE WITNESS: Most of them involve a lot of data. Not all of them but most do.

BY MS. BUTLER:

Q. Going down -- going down to your Professional Experience, do you see the Litigation Support section?

A. Yes.

Q. And if you go through those bullet points, the first one you assisted a large health insurer. The next one you assisted a large insurer. The next one you assisted several health insurers. The next one you assisted health insurers.

Is a large part of your work with health insurers?

MR. ANTONUCCI: Objection.

THE WITNESS: About -- of my work, I think a good way to look at it is

the testimony that I've offered, and about half of the testimony I've offered is for health insurers and half of the testimony I've offered is for provider organizations.

BY MS. BUTLER:

Q. So that was going to be my next question. Because if you start with the next bullet points, it kind of goes down with care providers, hospital chains, skilled nursing facilities, more hospitals, providers.

So that makes sense that you're about half and half between those type of larger groupings, as you just explained; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I think that's fair. In terms of the testimony that I've offered, it's about half providers and half insurers.

BY MS. BUTLER:

Q. You're very last bullet point says: "Assisted in the calculation of reasonable value of healthcare services in personal injury cases. Analyzed data to determine

the reasonable value of future services included in life care plan as well as past services."

Do you see that?

A. I do.

Q. What percentage would you say that bullet point represents of your overall work?

MR. ANTONUCCI: Objection.

THE WITNESS: Of my billable hours in a year -- I'd say let's be clear first that you have an understanding that I'm taking any administrative work that I'm doing for the firm and putting that to the side.

Of my billable work for the year, that sort of work where I am calculating the reasonable value of healthcare services and personal injuries is maybe about 10 percent.

BY MS. BUTLER:

Q. And would you group this case within that 10 percent?

A. Yes.

Q. There's also a section on Internal Investigations.

Do you see that?

A. Yes, I do.

Q. And on Strategic Support.

Do you see that?

A. Yes.

Q. And, again, is that largely with either the provider side or the insurance side?

MR. ANTONUCCI: Objection.

THE WITNESS: I think that it is accurate to say that it is largely with payors or providers, but there are other entities that I have worked for over the course of my career. Those have included the federal government.

As you see here on page 3, I worked for the California Department of Corrections on the healthcare that they were rendering to inmates. I've worked for New York State. I've worked for the National Rural/Frontier Women's Health Coordinating Centers for the Office of Women's Health.

So I've done a number of things for entities that you would not

consider are insurers or providers.
BY MS. BUTLER:
Q. And that's reflected in your CV, correct?
A. That is correct, yes. I have included here examples of work that I've done over the years.
Q. And your CV shows no background, training, or experience in veteran disability benefits, correct?
MR. ANTONUCCI: Objection.
THE WITNESS: That is correct.
BY MS. BUTLER:
Q. And going down to the Publications, it looks like you and Mr. Miller -- sorry -- Dr. Miller have authored some publications together; is that correct?
A. Yes, that is correct.
Q. And one of those on page 5 is titled "Measuring the Value of Medical Services in Personal Injury Suits."
Do you see that?
A. Yes, I do.

Q. Can you tell me a little bit about that white paper?
A. Yes, I can.
Q. Can you please do so?
MR. ANTONUCCI: Objection.
BY MS. BUTLER:
Q. What was the gist of that white paper?
MR. ANTONUCCI: Objection.
THE WITNESS: As I recollect, that white paper talks about the approach to measuring reasonable value in the healthcare context and how it's inappropriate to rely on or use for the purposes of value the charge that is submitted.
And instead, one should look to the economic concept of the willing buyer/willing seller to determine the reasonable value.
BY MS. BUTLER:
Q. And along those lines in determining reasonable value, is it appropriate to just look at one provider or do you look at multi-providers?

A. In analyzing reasonable value, it is important to analyze the marketplace and that marketplace includes many providers for services.

Q. Would it be inappropriate to analyze just one provider?

MR. ANTONUCCI: Objection.

THE WITNESS: In what context?

BY MS. BUTLER:

Q. If you were calculating a reasonable value.

MR. ANTONUCCI: Same objection.

THE WITNESS: It would be inappropriate to identify a reasonable value that is based on only one data point.

BY MS. BUTLER:

Q. On page 6 of your CV, third up from the bottom, there's reference to an article titled "Navigating the Future of American Healthcare: What Litigators Should Know about Value-Based Reimbursement."

What was the gist of that article?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't believe that was an article. I believe it was a presentation.

BY MS. BUTLER:

Q. Okay.

A. As is indicated on page 5 of my CV. I don't have a good recollection of the specific points in that presentation.

I was presenting with attorneys and we were talking about a value-based -- reimbursement of value-based care.

Q. What is value-based care?

A. Value-based care is where a payor attempts to reimburse based on a definition of a value.

Q. Does that have any bearing on the calculation of a reasonable value in a case such as this one?

MR. ANTONUCCI: Objection.

THE WITNESS: Not exactly. To the extent that those transactions happened in the marketplace and were willing buyer/willing seller, then that

would be included within the analysis that I conducted.

BY MS. BUTLER:

Q. Have you testified in any North Carolina courts?

A. Yes.

Q. There's one identified on page 7 number 7.

Do you see that case?

A. Yes.

Q. Is that the only North Carolina case you have testified in?

A. No.

Q. What other North Carolina cases have you testified in?

A. There are several on here that you did not identify.

Q. Can you tell me the numbers?

A. Yes. Let me just go through it in detail.

Number 15 on page 8. Number 25 on page 8.

I believe that is all that is listed on this CV, which includes my past four years of

testimony history. There may be other cases that are older than four years old.

Q. In any of those cases you just identified as being in the North Carolina court system, were you testifying as to the reasonable value of past medical care?

A. Yes.

Q. Which ones?

A. Case number 7. Oh, sorry.

Would you restate your question for me or read it back?

Q. In any of those cases you identified as ones in which you testified in the North Carolina courts, did they involve calculating the reasonable value of past medical care?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't recollect whether they included the calculation of the reasonable value of past medical care.

They involved my determination of the reasonable value of services, but I don't recollect if it was past and/or future.

BY MS. BUTLER:

Q. Have you ever been excluded as a witness or had part of your testimony or report stricken?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, there were two cases in which the judge determined that the opinions I offered were irrelevant to the trier of fact.

BY MS. BUTLER:

Q. Are those cases on your resumé?

A. One of them is not because it was older than four years old. The other one is case number 20 on page 8.

Q. What can you recall about the case that is not on the CV?

A. It was in the State of Illinois in a county court.

Q. Do you remember the case name?

A. It involved Silver Cross Hospital.

Q. In those cases, were you working with the defendant or the plaintiff?

A. I was working with the defendants.

Q. Do you typically work with the

defense?

MR. ANTONUCCI: Objection.

THE WITNESS: I -- the manner in which I approach my practice is to serve as an independent expert for any party that seeks to hire me.

If you look at my testimony history -- history, I have more often testified for defendants, but I have also testified for plaintiffs.

BY MS. BUTLER:

Q. Would you say that generally in the litigation context when you are testifying as to reasonable value, it has to do with a personal injury?

A. Not always.

Q. What other contexts have you testified about reasonable value in a litigation context?

A. Disputes between payors and providers with respect to the reimbursement for services.

Q. Do you also assist with internal investigations such as fraud investigations?

A. Yes, I have assisted clients on internal investigations.

Q. What is nominal value versus real value?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't have an answer to that.

BY MS. BUTLER:

Q. And is that because you don't know the difference?

A. I don't know what you mean by nominal value nor do I know what you mean by real value.

Q. Are those -- are neither of those terms, terms that you regularly use?

A. No.

Q. Okay. Meaning, just to be clear, those are terms you don't regularly use, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Correct.

BY MS. BUTLER:

Q. Okay. In the testimony you've discussed where you have been involved in making a reasonable value calculation for past medical

losses, are you taking the position that it's inappropriate to express those calculations in current dollars or just that you don't do that?

MR. ANTONUCCI: Objection.

THE WITNESS: Let's be clear first. The cases in which I've offered testimony relates to the reasonable value of past medical services, and you said past medical losses.

BY MS. BUTLER:

Q. Okay. Sorry.

A. I'm not sure --

Q. Okay.

A. -- what past medical losses is.

So I have offered an opinion as to the reasonable value of past medical services, which in those cases was what I was asked to do, and here in this case also what I was asked to do.

Q. Is it your opinion that it's inappropriate to apply a current value calculation to a reasonable value calculation for past medical losses? No. What did you say? Past medical services?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know if it would be appropriate or inappropriate. It would all depend on what you're -- what you're doing and what you're being asked to do.

I was asked to provide the reasonable value of past medical services, and I did so based on the date on which they were rendered.

BY MS. BUTLER:

Q. And so are you taking a position in this case that it would be inappropriate to bring your calculations to current dollars?

MR. ANTONUCCI: Objection.

THE WITNESS: I'm not offering an opinion as to whether it's appropriate nor inappropriate on -- on bringing a reasonable value calculation to present dollars. It would depend on what was being asked.

BY MS. BUTLER:

Q. And here you were not asked to do it, correct?

A. Correct. I was not asked to apply

any inflation to my reasonable value of past medical services.

Q. And your calculations of reasonable value for past medical services in this case are based on the date service was rendered; is that correct?

A. It's based on the date of service that the service or supply was rendered.

Q. I want to ask you a little bit about your methodology in this case.

Is your methodology as to what you've looked at and the formulas you used all set out in your reports?

A. Yes, it's contained within the reports and the accompanying appendices.

Q. Okay. And so any materials you rely upon are either within your report or in your Materials Considered List, correct?

A. That is correct.

Q. And if you could not find a CPT code, am I correct that you used the bill charge?

A. That is correct. When there was not a CPT code, which stands for Current Procedural Terminology, to the extent that that was not

present on one of the past medical bills, I defaulted to using the bill charges that were present and did not calculate any other reasonable value for that service.

Q. If the actual amount actually paid for past healthcare services is greater than the reasonable value you calculated, should the actual paid amount be utilized or the reasonable value calculation?

MR. ANTONUCCI: Objection.

THE WITNESS: I did not consider the paid amounts in my analysis as paid amounts may be greater as well as less than the reasonable value.

Instead, my analysis is based on the services that were rendered and the methodology that I used to identify the reasonable value of those services, which as Dr. Basu says is appropriate and credible.

BY MS. BUTLER:

Q. So do you have an opinion, though, as to if the amount actually paid for past healthcare services is greater than the reasonable

value whether the reasonable value should be used or the amount actually paid?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know what you say by -- what you mean by "used."

BY MS. BUTLER:

Q. As the calculation of damages in this case.

MR. ANTONUCCI: Same objection.

THE WITNESS: That would require someone offering clear guidance on how to calculate damages. I have not seen that articulated.

I don't recollect seeing in Marjorie Hackett-Wallace's report a clear articulation of damages. Neither did I see that in Dr. Basu's report.

I have been asked to calculate the reasonable value of past medical services, which is what I did.

BY MS. BUTLER:

Q. What do you understand to be the

purpose of your calculations in this litigation?
MR. ANTONUCCI: Objection.
To the extent that question calls for attorney-client communications, don't answer it.
BY MS. BUTLER:
Q. Can you not answer that without referring to attorney-client communications?
MR. ANTONUCCI: Objection.
THE WITNESS: I don't believe so.
BY MS. BUTLER:
Q. How have your reasonable value calculations of past medical services in other cases been used?
MR. ANTONUCCI: Objection.
THE WITNESS: I don't know. That's a question for the attorneys.
I -- I'm an independent health expert. I provide the opinion that I'm asked to provide, and then the attorneys use that opinion in whatever way they see fit for the purposes of the litigation in which the opinion is offered.

BY MS. BUTLER:

Q. So you have no idea how your expert opinions in this case will be used?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know the -- I don't have an understanding of that.

BY MS. BUTLER:

Q. Okay. Now, you presented with Mr. Miller or prepared an article. Let me see.

It's under publications titled "Measuring the Value of Medical Services in Personal Injury Suits."

Do you recall that?

A. Yes.

Q. Did you discuss in that paper the use of the reasonable value calculations within a litigation context?

MR. ANTONUCCI: Objection.

Do you need a copy of the paper, Jenna?

MS. BUTLER: I have a copy of the paper. I'm just asking Mr. Russo what his understanding was of the purpose

of that publication.
BY MS. BUTLER:
Q. What use was to be made of the measures you were articulating in that paper?
A. The purpose of writing that paper was to identify that using charges as a measure of value for medical services in any context is inappropriate, and in personal injury suits the measurement of value based on charges was not appropriate and should instead rely on the willing buyer/willing seller concept.
Q. When in personal injury suits do you need to measure the value of past medical services rendered?
MR. ANTONUCCI: Objection.
THE WITNESS: That's a question for an attorney.
BY MS. BUTLER:
Q. So you're just trying to present a measure without understanding the context within which it might be made.
Is that what you're testifying to?
MR. ANTONUCCI: Objection.
THE WITNESS: No, I think

that's mischaracterizing what I'm saying.

What I'm saying is that in personal injury suits, there are life care planners that present value based on charges, and I think that's an inappropriate way to measure value.

Instead, one should look to the willing buyer/willing seller concept, which is agreed upon in the industry. It's something Dr. Basu, for instance, agrees to as well.

BY MS. BUTLER:

Q. And that applies not just to future medical care, but also to past medical care, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Dr. Basu's opinion on using willing buyer/willing seller, he only indicated that it was appropriate for past medical services. I don't recollect him saying anything about future.

BY MS. BUTLER:

Q. What is your opinion about utilizing

that concept for past medical expenses?

MR. ANTONUCCI: Objection.

THE WITNESS: Using the willing buyer/willing seller concept is the appropriate approach to determining the reasonable value of past medical services.

BY MS. BUTLER:

Q. So you agree with Dr. Basu on that, correct?

A. Dr. Basu and I agree that it is appropriate to use a willing buyer/willing seller concept in determining reasonable value for past medical services.

Q. And do you have an understanding in the litigation concept of when that would be used?

MR. ANTONUCCI: Objection. Foundation.

THE WITNESS: I don't know what you mean by "litigation concept" as you say.

BY MS. BUTLER:

Q. Okay. Context. Let's say in the litigation context.

MR. ANTONUCCI: Same objection.

THE WITNESS: My understanding is that it's been used in many personal injury suits.

BY MS. BUTLER:

Q. For what purpose?

MR. ANTONUCCI: Objection. Foundation.

THE WITNESS: That's a question for the attorneys.

BY MS. BUTLER:

Q. You have no idea what purpose it's used for in litigation involving past medical services?

MR. ANTONUCCI: Objection.

BY MS. BUTLER:

Q. Is that what you're saying?

A. I am saying that I have presented my opinions in those cases with respect to the reasonable value of past medical services, and in those cases in which I have provided deposition testimony or trial testimony, I have not sat in the remainder of the litigation and so don't have

an understanding as to how those opinions and those numbers may be used in a damage calculation.

Q. So even outside of those specific instances, you don't have any understanding of how your calculations for reasonable value of past medical services might be used in the litigation context; is that what you're saying?

MR. ANTONUCCI: Objection.

THE WITNESS: What I'm saying is that I don't have a specific understanding as to how they're used in the litigation context.

That's a question, I think, for an attorney who has an understanding of how damages -- alleged damages may be calculated and presented.

My understanding is that my work may inform the attorneys as they present the case to the trier of fact.

BY MS. BUTLER:

Q. You may be aware that after we received your report, which is, they were produced December 15, 2025, we asked for an Appendix C that had Excel formulas.

Are you aware of that?

A. Yes, I am.

Q. Okay. And we did receive an Excel with formulas.

Are you aware of that as well?

A. I understand that you received 16 Excel files.

Q. Yes. Okay. Sorry. 16 Excel files.

One for each of the plaintiffs for whom you prepared a report and they contained formulas; is that correct?

A. Yes, that is correct.

Q. Are there any formulas you utilized for this litigation that were not made available to us in those Excel documents?

A. I don't believe so.

Q. Now, you have indicated that you reviewed Dr. Basu's rebuttal report, correct?

A. Yes.

Q. Okay. Do you disagree with anything that you recall reviewing in that report?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I do.

BY MS. BUTLER:

Q. What do you disagree with?

A. As I sit here today, my disagreement with him concerned the use of GoodRx and his characterization of it as, I think, a paid discount program.

GoodRx does have an option that one could pay to join the discount program, but GoodRx also provides information to individuals who do not pay and how those individuals can access discounts. Those discounts are not as good as if one joined the paid discount program, but there's no requirement that one has to join the discount program.

Q. Other than your disagreement with Dr. Basu about his characterization of GoodRx as a paid discount program, are there other areas of his report that you recall disagreeing with?

MR. ANTONUCCI: Objection.

THE WITNESS: I recollect there being disagreement with respect to the Plaintiff Peterson and the identification of past medical bills.

I don't recollect it being a large differential, but I think Dr. Basu

had some comments about what he perceived as my incorrect attribution of some past medical bills in the analysis, and I disagreed with what Dr. Basu had indicated.

BY MS. BUTLER:

Q. So after you read Dr. Basu's report, did you go back and look at your Peterson reports and appendices to confirm that you continue to disagree with him?

A. Yes.

Q. Okay. Other than the GoodRx characterization as a paid discount program and the situation you just referenced with respect to Plaintiff Peterson, do you recall any other aspect -- aspects of Dr. Basu's report that you disagreed with?

MR. ANTONUCCI: Objection.

THE WITNESS: As I sit here today, no.

MS. BUTLER: I am going to mark a copy of Dr. Basu's report as Exhibit 2 and hand you that.

(Document marked for

identification as Russo Exhibit 2.)

BY MS. BUTLER:

Q. And, please, if you want to go off the record for a minute and take some time to look at it, I'm glad to do that.

Would you like me to do that?

A. No, thank you.

Q. Okay. What I was going to ask is that: You said, as you sit here today, you couldn't recall any other aspects of the report that you disagreed with, other than what we've already gone over.

And I just want to make sure that you had a copy of his report so that you could make sure there aren't any other areas of disagreement. So please take your time.

MR. ANTONUCCI: Sorry, Jenna. For the record, does this copy of the report include Dr. Basu's amended appendices?

MS. BUTLER: I have those and was going to use those as separate exhibits.

BY MS. BUTLER:

Q. If you would like me to give you those at this time, I do have them.

A. I don't need them.

My -- my answer still stands, which is at this time, as I sit here, I don't have other areas of disagreement. However, what I will say is that there are many numbers within -- within this -- within these 16 plaintiffs' past medical bills, and I don't recollect, as I sit here today, whether I had disagreements with any of the other numbers than what I have noted thus far.

Q. Okay. And you're referring to Peterson, correct? And you're saying that you don't know if there are any other disagreements about the numbers.

Is that what you're saying?

I'm trying to understand what you just referred to.

MR. ANTONUCCI: Objection.

THE WITNESS: That is correct. I referred to Peterson -- the Plaintiff Peterson, which is where Dr. Basu and I had, I think, the most disagreement between the numbers and even

that I don't think there was a significant disagreement.

I don't recollect, though, as I sit here today, whether there were additional plaintiffs for which there were some discrepancies between what Dr. Basu and Dr. -- and what I had.

BY MS. BUTLER:

Q. And with respect to Mr. Peterson, if you look at Footnote 7 on page 8 of Dr. Basu's report, is that the discrepancy you're referring to with respect to Mr. Peterson?

A. Yes, it involves the Sanders Clinic --

Q. Okay.

A. -- invoices.

Q. I just wanted to make sure we were clear on that.

A. Yes.

Q. And with respect to any other discrepancies in numbers, whether it is between your numbers and Dr. Basu's numbers or your numbers and Marjorie Hackett-Wallace's numbers, is it correct that those numbers don't impact the

underlying methodology. They just impact the calculation according to that methodology?

MR. ANTONUCCI: Objection.

THE WITNESS: I'm sorry. I don't think I understand your question.

BY MS. BUTLER:

Q. So what I'm trying to get at is: For example, in Footnote 7, there's a discrepancy noted between your numbers and Dr. Basu's numbers with respect to Mr. Peterson, correct?

A. Yes.

Q. Now, any discrepancy such as that with respect to the numbers that are being fed into the calculations don't impact the validity of the calculation formula, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: That is correct. Generally, they do not.

Dr. Basu and I agree, as Dr. Basu has had the opportunity to review the 16 reports, the methodology that I outlined, which he summarized throughout his report and, as he describes it, appropriate and reliable.

BY MS. BUTLER:

Q. And what I'm just trying to get at is: If at trial the fact-finder were to find, for example, that Dr. Basu's number was correct versus yours or yours was correct versus his, that's a correction that can be made and applied within the formula that your report and Dr. Basu's report set forth, correct?

MR. ANTONUCCI: Objection to form and foundation.

THE WITNESS: Dr. Basu doesn't present any methodology other than agreeing with the methodology that I have outlined.

The methodology requires the identification of past medical bills that are at issue. To the extent that there are past medical bills that have not been included in that methodology, then they could be included in that methodology, or to the extent that there were some that were included that should not have been, those could also be added.

The methodology would still

hold, though.

BY MS. BUTLER:

Q. Okay. And that's what I was getting at.

So, for example, if somebody had a hospital event tomorrow and we don't try this case for another year, that could be added and the methodology stays the same, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: To the extent that Marjorie Hackett-Wallace identifies that hospitalization as being at issue, to the extent that I am directed to include that within my report, then, yes, the methodology would hold and I would apply that same methodology to that medical bill.

MR. ANTONUCCI: We're coming up on another hour.

MS. BUTLER: Sure. I'm fine taking a break.

BY MS. BUTLER:

Q. Are you -- is this a good time for you to take a quick break?

A. It is. I can keep going, though, if you want.

MS. BUTLER: It's up to you.

MR. ANTONUCCI: No.

BY MS. BUTLER:

Q. Okay. Why don't we keep going then. I don't even know what time it is.

A. For another 15 minutes of coming up on an hour?

Q. Sure.

A. That way it's not too long.

Q. That sounds good.

A. Okay.

Q. Going back to Dr. Anirban's report, do you take issue with any of his background, training, or education with respect to his ability to render the opinions he has rendered?

MR. ANTONUCCI: Objection.

THE WITNESS: And I'm sorry. You said Dr. Anirban?

BY MS. BUTLER:

Q. Dr. Basu. Sorry.

MR. ANTONUCCI: Same objection.

THE WITNESS: I have not evaluated Dr. Basu's qualifications. I did nothing to independently verify whether he has the degrees that he identifies nor works at the places that he has indicated.

BY MS. BUTLER:

Q. If everything he has indicated as far as the degrees he has and the places he has worked were to be accurate, do you take issue with his ability to render the opinions he has rendered?

MR. ANTONUCCI: Objection.

THE WITNESS: I think what you're asking is for a legal determination as to whether or not he should be admitted as an expert, and I think that's a question for a judge, not for me as a -- as an independent non-attorney.

BY MS. BUTLER:

Q. Let me ask you this.

Is it correct that you have rendered opinions in other litigation cases where you have

challenged the expert reports of other opposing experts?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I have.

BY MS. BUTLER:

Q. Okay. And what bases have you offered in those opinions for challenging those other experts?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't recollect, as I sit here.

BY MS. BUTLER:

Q. Do you plan to express any opinions with respect to reasons that Dr. Basu's opinion in this case should be challenged, other than what we've mentioned with respect to the disagreements you have concerning his report?

MR. ANTONUCCI: Objection.

THE WITNESS: As I sit here today, I have noted the disagreements that I have. I do reserve the right, though, to the extent I find additional disagreements to note them.

BY MS. BUTLER:

Q. With respect to his opinions, you've noted the GoodRx issue and the Peterson issue, correct?

A. Those are the two that I recollect, as I sit here today.

Q. Okay. And you have his report in front of you, and you have indicated that it doesn't refresh your recollection as to any other disagreements, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: No specific points of which I disagree, but I did note there are a number of numbers within Dr. Basu's report and the 16 reports that I've offered and there -- I have a vague recollection that there are some -- there is an additional number or two of which I disagree.

BY MS. BUTLER:

Q. Okay. Similar to the Peterson disagreement that we looked at, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, similar to the Peterson disagreement.

BY MS. BUTLER:

Q. So what I'm trying to get at is: Other than what we've already discussed as far as your disagreements with Dr. Basu, do you have any disagreements with his qualifications to express his opinions, assuming the qualifications he has set forth are correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I have not analyzed his qualifications.

BY MS. BUTLER:

Q. And so you do not have an opinion on that; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I do not have an opinion on his qualifications.

BY MS. BUTLER:

Q. Do you agree that the healthcare market is highly concentrated?

MR. ANTONUCCI: Objection.

THE WITNESS: I think that portions of the healthcare market are highly concentrated. The healthcare market is, as you say without offering

any additional clarity, is a broad international market.

BY MS. BUTLER:

Q. Let's focus on United States market. Would you agree that the United States healthcare market is highly concentrated?

MR. ANTONUCCI: Objection.

THE WITNESS: I think there are elements of the U.S. healthcare market that are highly concentrated. For instance, if you look at insurance in some geographic areas, the Herfindahl–Hirschman Index, or HHI, is high, which would be indicative of high concentration.

BY MS. BUTLER:

Q. Is it also true that the average commercial market is also generally highly concentrated --

MR. ANTONUCCI: Objection.

BY MS. BUTLER:

Q. -- in the U.S.?

MR. ANTONUCCI: Same objection.

THE WITNESS: I don't know what you mean by "average commercial market." For what service?

BY MS. BUTLER:

Q. You referred to the HHI, correct?

A. I did just mention the HHI in my answer.

Q. And what was your reference to the HHI for?

A. Because you had a question about concentration.

Q. Right.

What kind of market were you referring to in your answer to my question in that instance?

A. Health insurance.

Q. Okay. And so it's your position that only certain markets in that context are highly concentrated?

MR. ANTONUCCI: Objection.

BY MS. BUTLER:

Q. Is that what I'm understanding you to be saying?

MR. ANTONUCCI: Same

objection.

THE WITNESS: Yes, that's correct. So the insurance in the United States is regulated at the state level, and the sale of insurance is done based on not only state, but then even smaller than that geographies.

And so the broadest study on market concentration is done by I think it's the American Medical Association that looks at the concentration of health insurance, and I think they do it at the metropolitan statistical area level.

BY MS. BUTLER:

Q. So would you agree that relying on transactional prices from any one private payor would not appropriately represent the reasonable value of services provided in the U.S. healthcare market?

MR. ANTONUCCI: Objection.

THE WITNESS: You'd have to define transactional prices.

BY MS. BUTLER:

Q. How do you define transactional

prices?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't. It's not a phrase that's used in the healthcare marketplace.

BY MS. BUTLER:

Q. Okay. Would it be appropriate in determining the reasonable value of services provided in the healthcare market to rely on one private payor?

MR. ANTONUCCI: Objection.

THE WITNESS: No, it would not.

As I indicated in my response earlier when you asked about relying on one provider, it's not appropriate to rely on a single data point.

One should rely upon the information that's available in the marketplace, which is inclusive of multiple providers and multiple payors, which is what I did in my analysis.

BY MS. BUTLER:

Q. Is it accurate that your general

framework was to start by identifying the services through CPT codes?

A. Not quite.

Q. Okay. Tell me where I'm wrong.

A. So first I used HCPC codes, which are healthcare common procedure coding system codes which are broader than CPT codes. There are Level 1 and Level 2 HCPC codes. The Level 1 HCPC codes are CPT codes or Current Procedural Terminology codes. Level 2 codes are codes that are defined by CMS.

Those are useful -- HCPC codes are useful for identifying outpatient services and professional services.

For services that are rendered in an inpatient setting, one needs to look at the revenue codes, which is also what I've done.

Q. And then did you convert those to Medicare payments?

A. You don't convert procedure codes to Medicare payments.

Q. So what did you do once you got those codes?

A. So what the HCPC code does is the

HCPC code identifies the service or supply that has been rendered, and that has been provided by the provider on the past medical bill.

Once I had the HCPC code, I then went and identified what the relative value units were for that HCPC code. Converted those using the congressionally mandated conversion factor. Geographically adjusted that using the Geographic Practice Cost Index and then inflated that for the geography in which the service was rendered to get what is the willing buyer/willing seller rate based on the data that I have defined in my report.

Q. And that result, the rate that you ultimately determined, is based on the date that the service was rendered?

MR. ANTONUCCI: Objection.

THE WITNESS: The date of service is informative for the purposes of that calculation because the relative value unit and the conversion factor and the Geographic Practice Cost Index are based on the date of service.

BY MS. BUTLER:

Q. And so the ultimate number that you get is also based on the date of service?

MR. ANTONUCCI: Objection.

THE WITNESS: The calculation is based -- the values that are identified in the calculation are based on the past medical services date of service.

BY MS. BUTLER:

Q. Are you disagreeing then that the result of your calculations is also based on the date of service?

MR. ANTONUCCI: Objection.

THE WITNESS: No, I'm not disagreeing. I just wouldn't say that my -- that the result is based on the date of service.

I would say that elements of the calculation are dependent upon the date of service.

MS. BUTLER: I am going to -- or do we want to take a break at this point?

MR. ANTONUCCI: I would like

one.

MS. BUTLER: I was getting ready to mark another exhibit. We'll take a break.

THE WITNESS: Okay.

THE VIDEOGRAPHER: The time is 11:19 AM. We're now off the record.

(A recess was taken.)

THE VIDEOGRAPHER: This is the beginning of media unit number 3 of the video-recorded deposition of Mr. Gregory Russo. The time is 11:32 AM Eastern. We are now back on the record.

Counsel, you may proceed.

MS. BUTLER: Thank you.

BY MS. BUTLER:

Q. Mr. Russo, during the break, did you have any conversations with your attorney?

A. Yes.

Q. Was it with respect to this deposition?

A. No, it was not.

Q. Okay. Thank you.

MS. BUTLER: I'm going to hand

you what I have been -- what I have marked as Exhibit Number 3.

(Document marked for identification as Russo Exhibit 3.)

BY MS. BUTLER:

Q. I know this is kind of an odd large-looking sheet, but I can't read these Excel files printed in other than large print.

So I will represent to you that this is a portion of your Appendix C for Plaintiff Amsler.

Are you able to verify that that's what this look like?

A. I agree that it looks like that, yes.

Q. Okay.

A. I don't -- as you will hopefully agree as well, there are 16 plaintiffs with lots of Excel documents and tabs in them. So I don't -- I haven't memorized every one of them.

Q. Well, and to avoid us being here for days and days on end and going through all of those Excels, I have printed this one page.

And what I was hoping to ask you to

do, just to make sure we understand, is to kind of go through, say, the first line and just explain what everything represents so that we can make sure we're understanding your work in the same manner that you did it.

A. Sure.

Q. Thank you.

MR. ANTONUCCI: Sorry. Before you do that, do you have Bates for this document?

MS. BUTLER: I do not. I can represent to you that it is part of the Appendix C for Amsler, and that perhaps during a break I can find the Bates. But when I printed it, it did not have the Bates on it. It's probably from the one that has the cells in it.

MR. ANTONUCCI: Was this from the production with formulas or the production from December 15th?

MS. BUTLER: I believe it was from the December 15th, actually.

MR. ANTONUCCI: Okay.

MS. BUTLER: I believe it was

the Appendix C attached with or produced with the reports at the time and not from the subsequent Excel.

MR. ANTONUCCI: Got it.

MS. BUTLER: Okay.

BY MS. BUTLER:

Q. So just going, first starting on the far left, you see a number of X's there?

A. I do yes.

Q. What do those X's represent?

A. Those X's represent where the specific line has been included in Marjorie Hackett-Wallace's work, and what is important -- what is important to note is that the absence of an X indicates that it was included within Marjorie Hackett-Wallace's work.

Q. Okay. So if you -- if you look at the first lines on Exhibit 3 going down to 8, there's an X on the left.

So does that mean that it was not included in Marjorie Hackett-Wallace's calculations?

A. That is correct, and therefore for purposes of my work, I did not analyze it.

Q. Okay.
A. And also excluded it then from the totals that I provided in the report for Plaintiff Amsler.
Q. And then starting with line 9, there is the absence of an X, which you noted is important, correct?
A. That is correct. Yes. This indicates that line 9, so having Row ID 9 with no X, is a line that was included within Marjorie Hackett-Wallace's work.
Q. So let's then continue across line 9 if we can, and if you need me to give you a file folder to -- oh, you're doing it.
A. Yeah.
Q. Okay. To keep it straight.
The next is just the Row ID, correct?
A. That is correct. That's the Row ID just so that, as we're sitting here today, we know what row we're all looking at. There was nothing more to that than just sequentially identifying the rows.
Q. Okay. And then there's a page

number.

What is that page number reference to?

A. The page number references the page within the document -- the PDF document that I was provided with those bills.

Q. And is that PDF document on the very far right side of this Exhibit 3 under Bates number?

A. Yes, it is.

Q. Okay. So within, for example, if we're still on row 9, within the Amsler Bates ending in 14106, this is found on page 8?

A. That is correct.

Q. Okay. Then the next column is a Date column; is that correct?

A. Yes, that is indicative of the date of service.

Q. And just take us -- continue to take us across.

A. The next field is indicative of CPT Code and Modifier, which is 62328, which given the first digit of that is, I believe, a surgery code. One unit was billed at both CPT Code and Modifier

and Units all come from the medical bill.

Q. And let me stop you for a minute. In the CPT Code and Modifier column --

A. Uh-huh.

Q. -- is that a CPT code that is found in anyplace within the billing record or in the first place? Is that making sense?

MR. ANTONUCCI: Objection.

THE WITNESS: No.

BY MS. BUTLER:

Q. Okay. Are there sometimes more than one CPT code on a medical bill?

A. On a single claim, there can be more than one CPT code.

Q. And so does this indicate that that CPT code was one of what could be many CPT codes, or is it the first CPT code listed?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know if it's the first one or not. Whether it's first or not doesn't matter. The ordering of CPT codes is not something that has an effect on reimbursement.

BY MS. BUTLER:

Q. So if there is a CPT code on the medical bill and it is irregardless of order, it will be paid?

A. No. There's -- there's a sophisticated adjudication cascade that a payor goes through to determine whether it is appropriate to pay each line of a bill.

Q. Did you do any sort of that analysis in this case?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I did. As indicated in my reports, when reimbursing -- when -- sorry -- when determining the reasonable value of outpatient services, to the extent that a specific code has a status indicator, that indicates it is bundled with other services that are also being reimbursed.

Then I have determined the reasonable value of the other services that are being reimbursed and included within that the procedure code that is being bundled.

BY MS. BUTLER:

Q. Okay. Okay. So there's the CPT Code and Modifier and then the Units.

We're still on line 9 correct? Row 9, correct?

A. Correct.

Q. And then there's a Charges column, correct?

A. That is correct. Yes.

Q. Where did you get the Charges column figure from?

A. From page 8 of that Bates stamp document.

Q. And then the next column is RV.

Is that your reasonable value calculation?

A. That is correct. Yes.

Q. And that calculation was performed pursuant to the methodology set out in your report, correct?

A. That is correct.

Q. Okay. And then explain the next column, which is titled "Lesser of RV and Charges."

A. That column is such that it evaluates the charges and the reasonable value and returns whatever is less, whatever of those two numbers is -- is smaller.

And so in this case, the charges were $315 and the reasonable value 427, and so the lesser of those two numbers are the charges at $315.

Q. And in performing that calculation, am I correct in my understanding that no consideration is given to any amount that was actually paid?

MR. ANTONUCCI: Objection.

THE WITNESS: The analysis that I have done is to determine the reasonable value of past medical services, and that considers the services that were delivered. It does not consider whether payment was made for those services.

BY MS. BUTLER:

Q. Okay. And going to the next column, there are some X's again and the title is "Clinically-Related to Condition"; is that

correct?

A. That is correct.

Q. Tell me what those indicate -- those X's indicate.

A. Those indicate that Dr. Ji or Dr. Hasan have determined that that line was relevant to the condition that this patient may have.

Q. And then there's a column for Unrelated Medical Service.

Do you see that?

A. Yes.

Q. And there is nothing in there, correct?

A. That is correct.

Q. And why is that?

A. Because on this page of what Dr. Ji and Dr. Hasan -- or Dr. Hasan evaluated, all of the lines were clinically related to the condition.

Q. And, again, you did not make those relatedness determinations, correct? You relied on Dr. Ji and Dr. Hasan?

A. Dr. Ji and Dr. Hasan were the

individuals that I understand determined whether a line was clinically related to the condition.

Q. And then going to the next column, it's titled "Related Charges."

Can you please explain that column?

A. The Related Charge column is populated when the line is identified as being clinically related to the condition, and then the charges are the same as what appears to the left of the Charges column.

And similarly, the Lesser of Related RVs/Related Charges is populated when the line is identified as being clinically related to the condition, and that column of Lesser of Related RVs/Related Charges would match the column that says "Lesser of RV and Charges."

Q. So in the Amsler example, this limited Exhibit 3 -- and I understand you have lines and lines of Excel documents.

But on this limited example, the second from the far right Lesser of Related RVs/Related Charges column and then the middle Lesser of RVs/Charges column, those are all the same, correct?

A. They are all the same here for the rows, which were identified by Dr. Ji or Dr. Hasan as being clinically related to the condition.

Q. And so in some reports they are not the same, correct?

A. In some of the reports, they are not the same where Dr. Ji or Dr. Hasan has not identified that that line was clinically related to the condition.

Q. And in those cases then, the second from the right Lesser of Related RVs/Related Charges would be different from the middle column Lesser of RV and Charges, correct?

A. That is correct. It would be different in that it would be 0 if Dr. Ji and Dr. Hasan did not identify that line as being clinically related to the condition.

Q. And am I correct that those are the numbers you then brought into your tables 1 and 2 of your reports?

A. Yes, this information was used in Table 1 and Table 2 of each of the 16 reports that I filed.

Q. Thank you. I just wanted to make

sure we were understanding your work correctly.

Now, you already indicated that you -- one of the disagreements that you have indicated between you and Dr. Basu is with respect to GoodRx and his characterization of GoodRx as a paid program; is that correct?

A. Yes, I disagree with him with respect to it being a paid program. I also disagree with him as to my use of that program.

Q. Can you use GoodRx with Medicare?

A. (Pause). So yes, you can because you don't necessarily need to use your Medicare insurance when filling a prescription.

Q. If you fill a prescription without using your Medicare insurance, then it does not count toward your deductible or your threshold spending correct?

MR. ANTONUCCI: Objection.

THE WITNESS: That's correct.

BY MS. BUTLER:

Q. And the same is true if you use GoodRx and you have private insurance, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: If you use a

discount available through GoodRx and you do not use your insurance, then what you've paid for that prescription would not count towards a deductible for your insurance.

BY MS. BUTLER:

Q. Do you know, for example, if TRICARE allows a person to use GoodRx?

MR. ANTONUCCI: Objection.

THE WITNESS: So let's be clear that any individual can use GoodRx and not use whatever insurance they may or may not have.

BY MS. BUTLER:

Q. What is Express Scripts?

MR. ANTONUCCI: Objection.

THE WITNESS: My understanding of Express Scripts is that it's a pharmacy benefit manager.

BY MS. BUTLER:

Q. Are you familiar with whether TRICARE uses the Express Scripts program?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know

what you mean by the "Express Scripts program." They're a pharmacy benefit manager. They aren't a program.

BY MS. BUTLER:

Q. Does TRICARE use Express Scripts as a PBM?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know what their current contract is for -- for PBM services.

BY MS. BUTLER:

Q. Are you aware of whether they have in the past?

MR. ANTONUCCI: Objection.

THE WITNESS: No.

BY MS. BUTLER:

Q. Is it correct that GoodRx often offers the lowest discounted price for a pharmaceutical product as opposed to the average?

MR. ANTONUCCI: Objection.

THE WITNESS: GoodRx offers multiple discounts. When you look at the results, you see multiple prices. Multiple discounts are available

throughout a range of different pharmacies in that geographic market.

BY MS. BUTLER:

Q. In using GoodRx for your pharmaceutical calculations, you relied on GoodRx only, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I relied upon GoodRx only when using GoodRx to identify the reasonable value of medications, which in terms of the total reasonable values that I've offered, GoodRx was used in less than 0.2 percent of the reasonable values.

BY MS. BUTLER:

Q. In the rest of your reasonable calculation -- reasonable value calculations not having to do with pharmaceutical prescriptions, you used an average, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: So there are analyses -- there are methodologies that involve medications that did not use GoodRx.

So when -- when inpatient services are -- are included in past medical bills, there are medications that are delivered there. There are medications that are delivered in the outpatient setting. And those methodologies don't include GoodRx.

BY MS. BUTLER:

Q. So to the extent you incorporated those methodologies, you did not use GoodRx.

Is that what you're saying?

MR. ANTONUCCI: Objection.

THE WITNESS: That's correct. Because those services are paid using the methodology or -- sorry.

Those services rely upon the methodologies that I've outlined where I look at the cost of rendering the care and then the willing buyer/willing seller rate.

It is just the in-store pharmacy, so retail pharmacy prescriptions, for which I've used the GoodRx methodology and, again, that's

less than .2 percent of the total reasonable values that I've offered that use the GoodRx methodology.

BY MS. BUTLER:

Q. Is it your contention that using the GoodRx methodology in that instance that you just outlined evidences or reflects the willing buyer/willing seller notion, as you've expressed it here today, for the rest of your calculations?

A. Yes, it does. What I have done is, I have looked at within the plaintiff's geographic market what the rates are for each of the medications that are available that are included within the past medical bills, and then I have identified which of the pharmacies in the plaintiff's geographic market would offer the lowest cost for all of the medications as a group.

And so that may mean that one of the medications may have -- may not have the lowest of the available prices, and so that would indicate that a plaintiff would not have to drive around to get different medications at different pharmacies. They would be able to service just a single pharmacy.

Q. Are retail costs for pharmaceuticals readily available?

MR. ANTONUCCI: Objection.

THE WITNESS: Depends what you mean by "retail costs."

BY MS. BUTLER:

Q. What -- what do you consider to be retail costs?

A. Well, it really depends on what -- on how you define it because there are many different types of costs that are available in the healthcare marketplace, and retail is not one that there's clear determination on.

Q. So what type of information is available with respect to the costs for pharmaceuticals?

A. There are average wholesale prices. There are average sales prices. There's WAC.

Q. What is WAC?

A. Wholesale Acquisition Cost.

Q. What else?

A. That's generally it.

Q. Okay. And you didn't use any of that information, correct?

A. I did not because those data sets often involve a number of rebates and such, and those are the identification of costs that are available to providers in the marketplace or PBMs, not to the individual patients or plaintiffs in this matter.

Q. And that in those instances, would the price or the cost to the individual patient likely be higher than what would be reflected as far as the provider or PBM cost?

A. I don't know.

Q. You don't have any understanding that the PBMs or the providers take a percentage before they -- I mean, before the -- so they take a percentage which would be added then to the cost that is passed on to the individual patient?

You don't have any understanding about that?

MR. ANTONUCCI: Objection.

THE WITNESS: But what you're missing is that there are large rebates in the pharmaceutical marketplace that are then paid back to PBMs.

I mean, the Federal Trade

Commission has many studies on this that there's -- there's not good price transparency with respect to a number of -- of data sets in pharmaceutical marketplace.

I don't think you can just necessarily make that determination without doing a study.

BY MS. BUTLER:

Q. And so is that why you just chose to use GoodRx?

A. Well, I didn't just use GoodRx. I selected GoodRx because it is the broadest database of information available on the cost of services -- sorry -- the cost of medications and the discounts that are available to an individual that is operating in the geographic market where the plaintiffs reside.

Q. Does GoodRx generally offer the lowest discounted price as opposed to the average?

MR. ANTONUCCI: Objection.

THE WITNESS: So, look, there are a few things to remember. One, the GoodRx methodology relates to only 0. --

less than 0.2 percent of my reasonable value. So this is a significant amount of focus on what is a very small amount of the reasonable values that I've offered.

What GoodRx does is GoodRx offers an array of discounts that are available to an individual in a given geographic market for that medication. It doesn't just offer the lowest. It offers an array of them.

BY MS. BUTLER:

Q. Do you understand that in the litigation context, damages for medical expenses are meant to restore the injured person to financial position they would have been absent the harm?

MR. ANTONUCCI: Object to foundation and form.

THE WITNESS: No, I don't have an understanding of that. That's asking for a legal determination, and I'm not an attorney.

BY MS. BUTLER:

Q. So do you have any opinion whether in the litigation context compensation should reflect the lost use and purchasing power of money over time when paid today?

MR. ANTONUCCI: Object to form and foundation.

THE WITNESS: I don't have an opinion on that. That's asking for a legal conclusion.

MS. BUTLER: I am going to hand you what has been marked as Exhibit 4 and ask you if you recognize this.

(Document marked for identification as Russo Exhibit 4.)

MS. BUTLER: Oh, can I have one of those back? Sorry. Thank you.

BY MS. BUTLER:

Q. Do you recognize this document?

A. (Reviews document.)

Yes.

Q. Is this the notice of deposition, request for production of documents and subpoena that was issued to you in this case?

A. It appears to be.
Q. And did you review it when it -- at some point before your deposition?
A. Yes, I did.
MS. BUTLER: I'm going to hand you what has been marked as Exhibit 5.
(Document marked for identification as Russo Exhibit 5.)
BY MS. BUTLER:
Q. Do you recognize this document?
A. No.
Q. So you've never seen this document before?
A. No, I have not.
Q. So do you have a general understanding that after the notice of deposition, subpoena and request for documents were issued, that within that Exhibit 4 were some requests for information from you?
A. Yes, I do understand that.
Q. And do you understand that some information was provided in response to that request for information?
MR. ANTONUCCI: Object to

foundation.

THE WITNESS: I don't know if information was provided or not.

BY MS. BUTLER:

Q. So is it correct then that you didn't provide any information to your attorneys in response to the request for production of documents that is Exhibit Number 4?

MR. ANTONUCCI: Object to form and foundation.

THE WITNESS: I did provide information. I don't know if they provided the information to you.

BY MS. BUTLER:

Q. Looking at Exhibit 5, you'll see that it's titled "Responses and Objections to Plaintiffs' Notice of Deposition and Requests For the Production of Documents to Gregory Russo."

Do you see that?

A. Yes, I do.

Q. And do you see it, starting on page 1 there's some general objections, and then if you go to page 2, there start to be numbered requests and then a response? Do you see that?

A. Yes.
Q. Okay. And the first was for your current curriculum vitae and bibliography.
Do you see that?
A. Yes, I do.
Q. And I believe we already have established that the CV, which was Exhibit 1, is that current CV and bibliography; is that correct?
A. Yes, it appears to be.
Q. And then do you see that request number 2 requests -- and I'm going to summarize, but please feel free to read it in its entirety -- billing invoices or records, time sheets, time records, billing records and documents reflecting the time you and/or anyone employed by you and/or on your behalf spent in connection with your work and any aspect of the Camp Lejeune water contamination litigation.
Do you see that request?
A. I do.
Q. Okay. And do you have -- let me ask.
Were you asked for that information?
A. I was sent this subpoena. I was not

personally asked for that, though. That's not information that I have.

Q. Do you understand that information was produced in response to that request?

MR. ANTONUCCI: Objection. Foundation.

THE WITNESS: I do not know what was given or not given to you.

BY MS. BUTLER:

Q. I'm going to turn to request 4, which starts on page 4.

Do you see that all consulting contracts and/or retention letters between you and any person or entity on behalf of the Defendant United States concerning your involvement in any aspect of the Camp Lejeune water contamination litigation was requested?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I see that.

BY MS. BUTLER:

Q. Okay. And I will represent to you that no documents reflecting consulting contracts or retention letters or engagement agreements have been produced to us.

Do you have any understanding of any responsive documents being in existence that have not been produced to us?

A. No, I don't have any understanding that responsive documents exist with respect to that.

Q. Okay. I'm going to ask you to look at page 6, request number 6.

Do you see that that request asks for all documents reflecting all expert or other person -- experts or other persons you've spoken with or reviewed materials reflecting the opinions of with respect to any of the plaintiffs, the issues in this litigation, and/or the opinions you have rendered to the extent are not already reflected in your Materials Considered List?

A. Yes.

Q. Okay. And if you look at the response, the first paragraph, there's some objections asserted, but if you look at the second paragraph, do you see that it says:

"Subject to and without waiving the foregoing objections, the United States refers Plaintiffs to Mr. Russo's Materials Considered

List served on December 22, 2025, which contains information that may be responsive to this Request, and a Supplemental Materials Considered List served on February 24, 2026."

Do you see that?

A. Yes, I do.

Q. Are you aware -- and if you want to take a look at those Materials Considered Lists, I do have them all here and I will be using them as an exhibit.

But are you aware of anything that would be responsive to this request that would not be reflected on your Materials Considered Lists?

A. No, I am not, except for, as I had indicated, I received Dr. Basu's report and Dr. or -- sorry -- and Dr. Marjorie Hackett-Wallace's rebuttal report.

Q. Okay.

A. I don't believe those are on my Materials Considered List, but those are the only documents.

Q. Okay. Going to the next page, request number 7. If you could read that request.

A. (Reviews document.)

Q. Tell me when you've finished.
A. Yes, I have read it.
Q. And if you look down in the response, the response, again, refers to your original Materials Considered List and your Supplemental Materials Considered List.
Are you aware of any responsive documents that would not be reflected on those lists?
A. No. Those lists contain the materials upon which I've relied for the opinions that I'm offering.
Q. And then going to request number 8, if you could read that request, please, and tell me when you're finished.
A. (Reviews document.)
Yes.
Q. Okay. Going to the next page, you'll see that it says -- do you see the paragraph that starts "Subject to and without waiving"?
A. Yes.
Q. And then it says:
"The United States refers Plaintiffs

to the following information: Mr. Russo's Reports dated December 15, 2025, and appendices thereto, his Materials Considered List served on December 22, 25; his Supplemental Materials Considered List served on February 24, 2026; and the documents produced by the United States with the Bates range 1-16."

Do you see that?

A. Yes, I do.

Q. Okay. And I will represent to you that the Bates range CLJA 1-16 that is referred to there, those are those Excels with the formulas in them.

Are you aware of anything responsive to that request that is not referenced in that response we just read?

A. No, I'm not.

Q. Okay. And turning to the next page on page 9, if you'll read request 10, please.

A. (Reviews document.)

Q. Just let me know when you've finished reading the request.

A. I'm done.

Q. Okay. And if you will go down to

the bottom of page 9 where it starts with "Subject to and without waiving."

Do you see that?

A. Yeah.

Q. And then the United States refers us again to the same materials which we just listed, which are your reports and appendices, your Materials Considered Lists, and those Bates range documents that go 1-16.

Are you aware of anything else that would be responsive to that request?

A. No, I'm not.

Q. And then if you will go to the bottom of page 10, if you'll read request number 12, please.

A. (Reviews document.)

Okay.

Q. And if you will look down below that where it says "Subject to and without waiving."

Do you see that?

A. Yes.

Q. And the same materials are referenced, meaning your reports and appendices, and your Materials Considered List and that Bates

range 1-16.

Are you aware of any materials that would be responsive to that request, other than those identified?

A. No, I'm not aware of any other responsive documents.

Q. Thank you.

MR. ANTONUCCI: I will note for the record the Supplemental Materials Considered List, there's a typo there. It says it was served February 24, 2026. It was actually served February 20, 2026. That's my fault and I apologize.

MS. BUTLER: Thank you.

I am going to hand you what has been marked as Exhibit 6.

(Document marked for identification as Russo Exhibit 6.)

MS. BUTLER: Oh, sorry. I gave you all copies. I'm going to give you Exhibit 6 and give you the copies.

And I'm going to go ahead and give you Exhibit 7, which you can place right behind there.

(Document marked for identification as Russo Exhibit 7.)

MS. BUTLER: And 8 which you can place behind 7.

(Document marked for identification as Russo Exhibit 8.)

MS. BUTLER: And 9. (Laugh). He does a lot of work.

(Document marked for identification as Russo Exhibit 9.)

THE WITNESS: Spam e-mail or something.

MS. BUTLER: And 10.

(Document marked for identification as Russo Exhibit 10.)

MS. BUTLER: And 11.

(Document marked for identification as Russo Exhibit 11.)

BY MS. BUTLER:

Q. Okay. This will help us. (Laugh). Okay. Looking first at -- oh, gosh, I didn't label mine.

Exhibit 6 was the first one, right?

A. Yes.

Q. Okay. And I apologize if your Bates numbers are cut off on the bottom, but for purposes of identification, this document is it -- has a cover page that says "Document Produced Natively" and it has at the bottom the CLJA_USA_RUSSO_ a bunch of 0s and it starts with 20.

And then Exhibit 7 has the cover page with Bates number 21, 8 has the cover page with Bates number 23, 9 has the cover page with Bates number 22, 10 has the cover page with Bates number 18, and 11 has the cover page with Bates number 17.

So that way we just we have it.

A. You gave me an extra 23.

Q. Aha. Okay.

A. I have 23 which is --

Q. Okay.

A. -- Exhibit --

MS. BUTLER: Do you need 23?

MR. ANTONUCCI: I have 23.

Thank you.

THE WITNESS: Exhibit 8.

BY MS. BUTLER:

Q. Okay. I think we just have extra copies. I think.

So let's take a look starting with Exhibit 6 then.

A. I have Exhibit 6 through 11, right?

Q. Yes.

A. Okay.

Q. So starting with Exhibit 6, and you can ignore these front pages. That is just something that has to do with the litigation.

But starting with the page behind it, do you recognize this document?

A. I recognize the format of the document in that it is an invoice submitted by BRG. I don't recognize this specific document, though.

Q. Okay. And so turning to the next page of this document -- first of all, let me identify.

Do you see on the -- sorry -- on the first page that it says "Services Rendered Through August 31, 2025."

Do you see that?

A. I do.

Q. Okay. Going to the next page, it identifies three individuals: you, Julian Brock, and I apologize for my pronunciations but Ayako Sekiya. I-y -- sorry. A-y-a-k-o. S-e-k-i-y-a.

Do you see that?

A. Yes.

Q. Okay. And it has Rate, Hours, and Amount.

Do you have any reason to dispute that information?

A. No.

Q. Okay. Do you have any personal knowledge as to whether that's accurate?

A. I --

MR. ANTONUCCI: Objection.

THE WITNESS: I do not. I have not verified these amounts. I've never seen this document.

BY MS. BUTLER:

Q. Do you have any reason to dispute the information on that page?

A. I do not.

Q. Okay. Can you -- I am going to ask you. There are a lot of individuals who assisted

you with your reports.

Would you agree with that?

MR. ANTONUCCI: Objection.

THE WITNESS: There are a number. I don't know what you define as a lot.

BY MS. BUTLER:

Q. If I counted 14 people who assisted you with your reports, would you have any reason to dispute that number?

A. No.

MR. ANTONUCCI: Objection.

BY MS. BUTLER:

Q. Okay. So what I would like to understand as we go through these invoices is kind of hierarchy of the team and what the roles are that these people serve.

A. Okay.

Q. Do you understand what I'm asking?

A. I think I do.

Q. Okay. Well, let me back up.

Did you form the team who helped you prepare these reports for this case?

A. The individuals that worked on this

case worked at my direction, and I identified that they were an individual that's going to assist me in preparing the reports that contain my opinions.

Q. Okay. And so, for example, looking at this -- this page on Exhibit 6, it has three individuals including yourself.

What was Julian Brock's role?

A. He worked at my direction to conduct analyses to determine the reasonable value of past medical services.

Q. Would that include the review of the medical billings?

A. Yes, it did.

Q. And what was the role of Ayako Sekiya?

A. She worked at my direction to analyze the reasonable value of past medical services.

Q. So how was her role different than that of Mr. Brock?

A. They're two different people and so they were doing different tasks different points in time. Sometimes reviewing tasks that the other one had done.

Q. And the next page of this Exhibit 6 contains a Date, a Name, a Description, and Hours.

Do you see that?

A. Yes, I do.

Q. Is that generally how you keep your time at BRG for various jobs that you're working on?

A. Yes, it is.

Q. Okay. So on a daily basis, do you have a timekeeping system that you enter your time into?

A. Yes.

Q. And do you have any reason to think that this information is incorrect that we're looking at on this page?

A. No, I don't.

Q. Okay. And so based on this invoice, it would appear that you started working on your reports for this case on August 19, 2025.

Is that consistent with your recollection?

A. That is consistent with my recollection and my testimony earlier that I started in the summer of 2025.

Q. Okay. And so do you have any recollection of working on the Camp Lejeune litigation prior to this first time entry of August 19, 2025?

A. I may have done some work earlier than that to assist Dr. Miller in preparing his report.

Q. And we went through this earlier, but you're not rendering any opinions with respect to that work; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: By "that work" you mean Dr. Miller's opinions? No, I'm not offering an opinion on Dr. Miller's opinions.

BY MS. BUTLER:

Q. So the work with respect to the opinions you are offering in this case, would it be accurate to say it started on August 19, 2025?

A. Yes, I do believe that it is based on what you have shown me here. I don't recollect it having started earlier, but to the extent that there's a bill with July time, then I would agree that the work started earlier.

Q. And do you review any of these -- I think you've answered this. I apologize. Let me back up and ask this question again.

Am I correct that you do not review these invoices before they are sent to the Department of Justice?

A. That is correct. I do not. I have at times looked at invoices and I sometimes get asked by accounting, but I -- I don't believe that I'm on the critical path for these invoices getting sent to the Department of Justice.

Q. Turning to Exhibit 7. Again, if you'll look at not the cover page but the page behind it.

Do you recognize this as an invoice from BRG with respect to this litigation for Services Rendered Through September 30, 2025?

A. Yes.

Q. Turning to the next page, we have some additional individuals.

Do you see some additional individuals identified there?

A. Yes.

Q. As you did with Mr. Brock and

Ms. Ayako previously, can you explain Ethan Hesse's role in this litigation?

A. I can explain Ethan Hesse as well as Victoria Miller and Noah Spain, which is that all three of them were working at my direction to analyze the reasonable value of past medical services.

Q. And, again, would that include the analysis of the medical bills that are reflected in the report of Marjorie Hackett-Wallace?

A. That would involve the analysis of the reasonable value of the past medical services. I didn't evaluate or analyze, as you say, medical bills. I -- I'm offering an opinion as to the reasonable value of past medical services.

Q. So were these individuals -- Mr. Brock, Mr. Hesse, Ms. Miller, Ms. Sekiya, Mr. Spain -- were they involved in helping you calculate the reasonable values based on the reports of Marjorie Hackett-Wallace and then the reports of Dr. Ji and Dr. Hasan?

A. These individuals were working at my direction to complete the methodology that I had outlined. That methodology incorporated the -- or

used information from Marjorie Hackett-Wallace's reports as well as the reports of Dr. Ji and Dr. Hasan.

Q. I'm going to now look at Exhibit 8. Do you see that this is a BRG invoice for Services Rendered Through October 31, 2025?

A. Yes.

Q. And turning to the next page, do you see that we have some additional new people: Mr. Fazio and Mr. Diamond?

A. I see Ms. Fazio.

Q. Sorry. Ms. Fazio and Mr. Diamond?

A. Yes.

Q. Okay. And were their roles any different than you've described for the other individuals who are working at your direction?

A. No, they were not. The entire team, as you had indicated you counted 14 individuals, were working on my direction to analyze the reasonable value of past medical services.

Q. And so far we've looked at three invoices: Exhibits 6, 7, and 8. Do you have any reason to dispute

the amounts that are indicated on those invoices?

MR. ANTONUCCI: Objection.

THE WITNESS: I do not have reason to dispute the amounts, but I did not and have not independently verified those amounts.

BY MS. BUTLER:

Q. Looking at Exhibit 9, do you see that this is another BRG invoice for time rendered through November 30, 2025?

A. Yes, I do.

Q. Do you see that amount of 173,761.50?

A. Yes, I do.

Q. Let me ask you.

If, for example, one of these prior invoices had not been paid, would that generally be indicated on this front page?

MR. ANTONUCCI: Objection.

THE WITNESS: Generally, yes. As you see here on the second page of Exhibit 9, it says "Other Outstanding Invoices As of Today."

BY MS. BUTLER:

Q. Okay. And so as you noted, it says "Other Outstanding Invoice As of Today" and it shows that there is an invoice in the amount of 58,102.50 that's due.

Do you see that?

A. Yes, I do.

Q. Okay. And is that -- that amount is not included in the current charges of 173,761.50, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: That is correct. It is not included within the amount that's current invoice.

BY MS. BUTLER:

Q. Okay. Going to the next page, do you see that we have some additional new members to your team?

A. Yes, I do.

Q. Okay. There's a Lucas Robertson, Eli Friedman, Genevieve Aziz, and Jessica Serrano.

Do you see those individuals?

A. Yes, I do.

Q. Okay. Did they have any roles that are different than what you've described for the

other teammates we've gone through?

A. No, they did not. They were working at my direction to calculate the reasonable value of past medical services.

Q. And then your reports were produced on December 15, 2025; is that correct?

A. That sounds about right.

I don't remember the exact. I don't remember the date.

Q. I will represent to you for purposes of my next question that your reports are dated December 15, 2025.

Looking at Exhibit 10, do you see that this is an invoice from BRG for Services Rendered Through December 31, 2025? Do you see that?

A. Yes, I do.

Q. With current charges of 177,486.

Do you see that?

A. Yes, I do.

Q. And then there's also the past due amount from the prior invoice that we just looked at.

Do you see that?

A. Yes, I do.
Q. Okay. And, again, the current charges do not include the outstanding invoices, correct?
A. Correct.
Q. Okay. So going to the next page, do you see that we have some additional new members to your team? We have Ms. Moody and Mr. Hassan?
A. Yes.
Q. Were they performing any services other than what has been described with respect to the other teammates?
A. No, they do not. They did not perform services that were unique from the other teammates. Ms. Moody and Mr. Hassan were working at my direction to calculate the reasonable value of past medical services.
Q. Now, with the understanding that your reports are dated December 15, 2025, if you will look back at the individual time entries, do you see that there are continuing to be time entries after December 15, 2025?
A. Yes.
Q. And why is that?

A. We were working to produce the Materials Considered List, which the Materials Considered List was produced on December 22, 2025, and we continue to work to prepare those.

Q. Was there any other work being done other than the preparation of the Materials Considered List?

A. Yes, there was a little work. As you see that Mr. Brock charged .2 hours on December 30th. I don't recollect what he was doing at that point.

Q. Okay. Let's look at Exhibit 11.

Do you see that this is a BRG invoice for Services Rendered Through January 31, 2026?

A. Yes, I do.

Q. And do you see that there are current charges of $9,001.50?

A. Yes, I do.

Q. And do you see that you spent an hour and 10 minutes, Ms. Brock spent 5 hours -- 5.7 hours, Ms. Sekiya spent 6 hours, and Mr. Diamond spent 8.9 hours.

Do you see that?

A. Yes, I do.

Q. Okay. And so since the Materials Considered List had already been produced, what were these individuals doing at this time?

A. At this time, they were likely ensuring that the -- that the materials were all in -- in the order that was necessary to easily review.

I had asked that the files be reordered on our system because we had previously had a single file folder for each of the plaintiffs, and I found that that was challenging.

As I was reviewing materials and preparing for my deposition. I needed a single folder that contained -- contained all of my reports or all of the appendices. So they were working to reorganize things so it expedited my preparation for the deposition.

Q. This -- I will represent to you that this Exhibit 11 is the last invoice we were provided.

I'm assuming there will be another invoice generated when February concludes; is that correct?

A. Yes.

Q. Okay. And would the time reflected on that be similar to what you just noted with respect to this time after the Materials Considered List was produced?

A. I don't know what you mean by "similar."

Q. Organizing the files and helping you get prepared for the deposition?

A. Yes, it would relate to my preparation for the deposition.

I -- I don't recollect when the Appendix Cs with formulas were produced, but that also would be reflected in the time that occurred after December 15th.

Q. All of these individuals that we've looked at who are identified on these invoices, are any of them considered coauthors of your report?

A. No, they are not. The reports contain my opinions. The individuals worked at my direction. I reviewed all of the reports and the language that's contained in the reports to ensure that the opinions that are being offered are my

opinions.

Q. And I believe you've testified to this, but you supervised all of those individuals; is that correct?

A. That is correct. The individuals worked at my direction.

Q. And are there any portions of your written reports that those individuals prepared?

MR. ANTONUCCI: Objection.

THE WITNESS: Those individuals that worked at my direction may have assisted in drafting portions of the report, but the final report was prepared by me in that I reviewed all of the language, edited the language, and ensured that the opinions that are being offered are my opinions.

BY MS. BUTLER:

Q. What did you do to make sure that the reliability and validity of the data that they were involved in and that you used in your analysis was accurate?

MR. ANTONUCCI: Objection.

THE WITNESS: I include

within all of the work that I do a robust quality control process where individuals on the team are reviewing others' work and in some cases independently verifying it.

I was then an extra level of review. I went into all of the analysis files that you see as Appendix C to review them, and also reviewed all of the reports.

MS. BUTLER: You can set those aside. I'm not going to be referring to those anymore.

I'm going to hand you -- and I apologize that it's clipped, but it is all Exhibit 12. I just didn't have access to a stapler.

(Document marked for identification as Russo Exhibit 12.)

BY MS. BUTLER:

Q. For purposes of identification and because I do think these Bates numbers might be cut off on the bottom, which I apologize, what I'm handing you are documents that have been

Bates-labeled as MILLER_USA_ a number of 0s and then it goes 16 through 20, and then 31 through 37, and then 12 through 15, and then 9 through 12, and then 25 through 30, and then 21 through 24.

And then there is a document at the back that does not have a Bates number, and I don't know if I just printed it without the Bates number, and we will identify that by the date.

And I will represent to you that these are invoices that were produced in response to Mr. Miller's deposition subpoena with respect to his reports.

So with that understanding, I would like to take a look at the first page of Exhibit 12.

Does this appear to be a BRG invoice similar to those we looked at with respect to your work?

A. Yes.

Q. And do you see that it says for Services Rendered Through March 31, 2025?

A. Yes.

Q. And if you go to the next page, do you see that rather than having you in the top

position as managing director, it has Henry Miller?

A. Yes.

Q. Is that because he was essentially directing the work for these invoices whereas you were directing the work for the other invoices?

A. No, it's because his name comes first alphabetically.

Q. Okay. So were you and Mr. Miller and Ms. JoAnna Younts equals with respect to what's being done on this invoice?

MR. ANTONUCCI: Objection.

THE WITNESS: I think it's unclear how you're defining equals there. We are all managing directors at Berkeley Research Group. The work that was being done in -- that is reflected in this invoice was to prepare Dr. Miller's opinions, and so the work was being done at his direction.

BY MS. BUTLER:

Q. So were you working under Mr. Miller's direction then for purposes of these invoices?

MR. ANTONUCCI: Objection.

THE WITNESS: That is correct. As I indicated before, when assisting Dr. Miller in preparing his reports, I was working at his direction.

BY MS. BUTLER:

Q. If you look at the next page which has a Bates label 18 on it, do you see that there is a date of March 10, 2025?

A. Yes, I do.

Q. And it has your name next to it?

A. Yes.

Q. And it says "Developed analysis plan."

Do you see that?

A. Yes.

Q. Was that -- were you working at Mr. Miller's direction starting in May or -- sorry -- March 10, 2025?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I was.

BY MS. BUTLER:

Q. Okay. And do you see that the next entry is also "Prepared analysis plan"?

A. Yes.
Q. Okay. So did you have a supervisory role with respect to Mr. Miller's reports?
MR. ANTONUCCI: Objection.
THE WITNESS: I was working at Dr. Miller's direction. I was coordinating some of the work that was occurring.
BY MS. BUTLER:
Q. If you go down then to an entry 3/18/25, it has your name and it says "Analyzed life care plans. Analyzed life care plans. Meeting or call - internal."
Do you see that?
A. Yes, I do.
Q. And so were you analyzing life care plans for purposes of the Camp Lejeune litigation?
MR. ANTONUCCI: Objection.
THE WITNESS: Yes, I was. This, the billings on this matter relate to the Camp Lejeune litigation.
BY MS. BUTLER:
Q. And are you offering any opinions with respect to the life care plans involved in

this Camp Lejeune litigation?

MR. ANTONUCCI: Objection.

THE WITNESS: No, I am not.

BY MS. BUTLER:

Q. And if you continue to look at this invoice, do you see down on 3/28/25 it says "Gregory Russo - Conducted research. Prepared report"?

A. Yes, I do.

Q. Is that referring to Mr. Miller's report?

A. That is correct. I assisted in preparing his report at his direction.

Q. But am I correct that you are not rendering any opinions that are contained in Mr. Miller's report for purposes of this litigation?

MR. ANTONUCCI: Objection.

THE WITNESS: That is correct. Dr. Miller reviewed all final drafts of that report to ensure that the opinions that were contained within the report are his opinions, not my opinions.

BY MS. BUTLER:

Q. And going to the next page, which has the last Bates number of 31, do you see this is a BRG invoice for Services Rendered Through April 30, 2025?

A. I do see that, but I will note I cannot decipher what the Bates number is.

Q. Okay. And I apologize that it's cut off. I will tell you that it is the last two are 31.

Do you see on the next page that you are, again, listed as a managing director with Mr. Miller and Ms. JoAnna Younts?

A. Yes, I do see that.

Q. Does Ms. Younts have any special expertise that differs from either the expertise you've discussed about Mr. Miller or your expertise?

MR. ANTONUCCI: Objection.

THE WITNESS: Ms. Younts, Dr. Miller, and I all have very similar experiences and expertise. We have had different experiences in our careers, but it's largely very similar.

BY MS. BUTLER:

Q. And is it your understanding that Ms. Younts also helped prepare Mr. Miller's reports?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, that is correct.

BY MS. BUTLER:

Q. And do you have any understanding as to whether she intends to testify in this case? Again, referring to JoAnna Younts who is listed on this invoice.

MR. ANTONUCCI: Objection.

THE WITNESS: I am not aware that she intends to testify in this case. My understanding is she was working at Dr. Miller's direction in the preparation of his report, and the opinions that he is offering are his opinions.

BY MS. BUTLER:

Q. Now, were you involved in budgeting for BRG's work in this case?

A. No.

Q. If you would look down on -- we're still -- this is on the time entry for 4/11/25.

It says "Gregory Russo - Budget call."

Do you see that?

A. Yes, I do.

Q. And so did that budget call have nothing to do with BRG's work on this litigation?

A. I don't recollect what that budget call was about.

Q. Okay. Do you have any understanding as to the amount of time you billed for Mr. Miller's reports?

A. No, I don't.

Q. And did you assist in Mr. Miller's deposition preparation for this case?

MR. ANTONUCCI: Objection.

THE WITNESS: No, I did not. Sorry. Let me revise that. I was involved in one meeting that happened a number of months ago. I believe it was last summer.

BY MS. BUTLER:

Q. And that's reflected on that invoice, correct?

A. It would be reflected in the invoices.

Q. Okay.

MR. ANTONUCCI: I'm not sure if you're done with the invoices, but we've been going over an hour now.

MS. BUTLER: Yes, I am done with the invoices, and I don't know what time it is. It is 12:41. Do we want to go off the record for a minute and discuss lunch?

THE VIDEOGRAPHER: The time is 12:41. We are now off the record.

(Whereupon, at 12:41 PM, a luncheon recess was taken.)

AFTERNOON SESSION

(1:42 PM)

GREGORY S. RUSSO

called for continued examination and, having been previously duly sworn, was examined and testified further as follows:

EXAMINATION (CONTINUED).

(Melanie Konstantopoulos no longer present.)

THE VIDEOGRAPHER this is the beginning of media unit number 4 of the video-recorded deposition of Mr. Gregory Russo. The time is 1:42 PM Eastern. We are now back on the record.

Counsel, you may proceed.

MS. BUTLER: Thank you.

BY MS. BUTLER:

Q. Mr. Russo, during the lunch break, did you discuss anything about your deposition or the litigation with anyone?

A. Not in a substantive way.

Q. Okay. In a nonsubstantive way, did you discuss the litigation?

A. Not the litigation, but the

deposition. Gio said, "Are you ready to go back upstairs for the deposition?" I said, "Yes." So there was discussion of the deposition but not in any substantive way.

MS. BUTLER: Okay. Thank you for that.

I am going to hand you what has been marked as Exhibit 13.

(Document marked for identification as Russo Exhibit 13.)

MS. BUTLER: This is titled "Supplemental Materials Considered of Gregory Russo February 20, 2026."

BY MS. BUTLER:

Q. Have you seen this before?

A. Yes, I have.

Q. And we have referred throughout the course of this deposition to your Supplemental Materials Considered List.

Is that -- is this, in fact, that list that we have been referring to?

A. I believe that it is.

Q. Okay. And so is this a full and complete list of the additional materials you've

reviewed after your report was provided and your original Materials Considered List was provided to us?

A. I believe so.

Q. And I believe you've testified that there are no additional materials you've considered since February 20, 2026 that are not identified on this list; is that correct?

A. Not of which I can recollect, as I sit here.

Q. And so if you look at the first -- most of the bullet points on the first page of Exhibit 13, those have to do with Plaintiff Damages Assessment forms.

Do you see that?

A. Yes, I do.

Q. Did you, in fact, review those?

A. Yes, I have reviewed the damage assessment forms.

Q. Are they in any manner relied upon in your report?

A. They are relied upon in that they point to Marjorie Hackett-Wallace's report, which is then something upon which I rely.

Q. And so beyond that reference to Marjorie Hackett-Wallace's report, your opinions in this case are not relying on those damage assessment forms; is that correct?

A. I don't believe so.

Q. And then going to the last two bullets on the first page of Exhibit 13, it says "Rebuttal Expert Opinion Report, Margaret Hackett-Wallace, January 20, 2026" and "Corrected Rebuttal Expert Opinion Report, January 27, 2026."

Is that correct?

A. That is what it says.

Q. Okay. And so when you reviewed those two items, does that change any of your opinions in this case?

A. No, it doesn't change the opinions that I've offered with respect to the reasonable value of past medical services.

Q. And is there anything that you recall reviewing in those reports that you disagree with?

MR. ANTONUCCI: Objection.

THE WITNESS: I believe that Marjorie Hackett-Wallace referenced work

that I had done but attributed it to Dr. Ji or Dr. Hasan. And in reference you asked me about this before you may remember, and I answered in the same way. So I think my testimony now is consistent with what you asked me earlier.

BY MS. BUTLER:

Q. And so as I understand it, other than her perhaps referring to something you had done and attributing it to Dr. Ji or Hasan, there's nothing else that you can recall that you disagreed with in her original report or the two reports identified on your Supplemental Materials Considered List; is that correct?

A. No, that's not correct.

MR. ANTONUCCI: Objection.

BY MS. BUTLER:

Q. Okay.

A. I did disagree with information in her original report. You remember I testified earlier today, she had errors in her initial report, sloppy workmanship. And she went about -- I went about correcting those errors and noting them in my reports.

She subsequently then agreed with the errors that she had -- that I had identified in her work, and she then corrected those errors through the process of submitting her rebuttal report.

Q. Do you remember the dollar value that you and Marjorie Hackett-Wallace disagreed over with respect to what you call sloppy workmanship?

A. I don't. It was small. Probably just as small as like the GoodRx numbers, which you discussed quite at length before.

Q. And is it your recollection that she agreed with all of these alleged errors that you found with her initial reports?

MR. ANTONUCCI: Objection.

THE WITNESS: I recollect her agreement with the places that I had identified the errors.

I don't recollect, as I sit here now, whether she agreed with every single one of them or not.

BY MS. BUTLER:

Q. Would you agree that at this point

with the original Marjorie Hackett-Wallace report and the two reports identified on your Supplemental Materials Considered List that the disagreement with respect to you and Marjorie Hackett-Wallace is fairly small in dollar value?

MR. ANTONUCCI: Objection.

THE WITNESS: So the difference in the charges is small in dollar value.

It's Marjorie Hackett-Wallace does nothing to determine the reasonable value of past medical services, which is what I have done in my report, and so the dollar amount between charges and reasonable value I would say is not small.

BY MS. BUTLER:

Q. But that's not something that Marjorie Hackett-Wallace opined on, the reasonable value, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: She doesn't indicate whether she's considering charges to be reasonable value or not.

BY MS. BUTLER:

Q. Okay. Marjorie Hackett-Wallace did not conduct, for example, a different type of reasonable value analysis to what you conducted; is that correct?

A. That's a question --

MR. ANTONUCCI: Objection.

THE WITNESS: -- for Marjorie Hackett-Wallace.

BY MS. BUTLER:

Q. Okay. So Marjorie Hackett-Wallace presented billed charges and paid charges; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: That's my understanding of what she attempted to do.

As we indicated in her original report, she didn't do that, though, because she made errors.

BY MS. BUTLER:

Q. Okay. But you've admitted that those errors are small in monetary amount, correct?

A. They're still errors.

Q. Okay. With respect to all of the charges that she evaluated, other than the errors that you're noting, do you have a problem with the methodology she used?

MR. ANTONUCCI: Objection.

THE WITNESS: I did not evaluate the methodology that she used to assign or to determine whether past medical bills were at issue in the case.

BY MS. BUTLER:

Q. So you're not expressing an opinion as to the methodology that Marjorie Hackett-Wallace utilized in her report; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I'm not expressing any opinions with respect to a methodology to determine whether the bills that she has identified as being at issue are at issue or not.

To the extent that Marjorie Hackett-Wallace is offering an opinion as to what is the reasonable value of the

services, if it is charges, as she has identified, then I would disagree with that.

BY MS. BUTLER:

Q. But that's the extent of the disagreement you would offer with Marjorie Hackett-Wallace, other than the small number of errors that you have indicated; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: As I sit here today, I believe that is how I would disagree with Marjorie Hackett-Wallace.

BY MS. BUTLER:

Q. Okay. Turning to the next page of Exhibit 13, it says that you reviewed the Rebuttal Expert Report of Chad L. Staller, January 20, 2026, and the Expert Report and Expert Testimony of Peter Rybolt, January 20, 2026.

Did you, in fact, review those reports?

A. I recollect opening them, but I don't recollect the substance of them.

Q. And so am I correct to understand that you will not be rendering opinions with

respect to those reports?
A. I don't believe so.
Q. And then the next bullet is Dr. Basu's report, correct?
A. That is correct.
Q. And the amended appendices; is that correct?
A. Yes.
Q. And there are seven amended appendices, correct?
A. Yes.
MS. BUTLER: And I do have those available if you would like to look at them. You previously indicated you did not need to look at them, but I will hand them to you and I apologize for going out of order, but they are marked as Exhibit 47.
(Document marked for identification as Russo Exhibit 47.)
BY MS. BUTLER:
Q. Do you recall when you reviewed these having any issues with these amended appendices?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. As you asked earlier today and I provided the testimony, I have disagreement with Dr. Basu's opinions with respect to the Sanders Clinic for the Plaintiff Peterson.

And I recollect there being another instance in here where there was an issue that I had with Dr. Basu's appendices, but I don't recollect which one that was.

BY MS. BUTLER:

Q. And I believe we discussed those kind of, I guess, the discrepancies with respect to the Sanders Clinic that was noted in a footnote of Dr. Basu's report, correct?

A. I think we've already discussed it --

Q. Okay.

A. -- but you're asking about it again.

Q. That's what --

A. So please ask away.

Q. I'm asking if that's what you're

referring back to?

A. If what is what I'm referring back to?

Q. So I asked you if you had any issues with Exhibit 47, which are the amended appendices, and you referred to the Sanders Clinic Peterson issue.

And I'm just asking: Are you referring to the same issue we already discussed previously in your deposition?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. So let's take a look at the exhibit.

BY MS. BUTLER:

Q. I believe Dr. Basu's report is Number 2 and I believe that the Peterson clinic issue is on page 8 of Footnote 7.

A. That's right. And this is page 8 of Exhibit 2 is Dr. Basu's indication that he had took -- taken some issue with my identification of charges related to services rendered by the Sanders Clinic, and I disagree with how Dr. Basu has approached identifying those charges.

And as I indicated earlier in my

testimony, I still disagree with Dr. Basu.

Q. With respect to the Sanders Clinic and Mr. Peterson, correct?

A. Yes, that is correct.

Q. Okay. And you're -- we're focusing now on these amended appendices, and as I understand your testimony, that -- that disagreement carries over to the amended appendices.

Is that what you were expressing?

A. Yes.

Q. Okay. And other than that type of disagreement, which we covered previously when we were talking about Mr. Basu's report, is there anything that you disagree with with respect to Exhibit 47, which are the amended appendices A1, A6, A7, A10, A11, A13, and A14?

MR. ANTONUCCI: Objection.

THE WITNESS: As I indicated a moment ago and indicated this morning when you asked the question, I -- Dr. Basu's appendices include many different numbers for many different medical providers.

And I recollect there being another provider in here for which I disagreed with Dr. Basu's numbers. I don't recollect which one that is.

And I think this morning when we spoke about it, I don't recollect it being a large difference.

BY MS. BUTLER:

Q. So would it be correct to say that based on your review of Dr. Basu's report and his amended appendices that any disagreement between the two of you is relatively small in dollar value?

MR. ANTONUCCI: Objection.

BY MS. BUTLER:

Q. As far as -- let me -- let me back up.

As far as we talked about the GoodRx and then these, like, Peterson Sanders Clinic type of disagreements.

A. I think the differences are relatively small. Dr. Basu has taken issue with my reliance on GoodRx, which as I indicated through my testimony earlier accounts for 0.2

percent of the reasonable value that I've identified.

There are a few instances then where Dr. Basu and I don't align on the billed amounts, and I think that those would be small. So I would say that Dr. Basu agrees with my reports that I have offered.

I wouldn't say that I agree with Dr. Basu's reports because I have done nothing to evaluate the inflation that Dr. Basu has applied.

Q. And so with respect to that inflation or present value, whatever terminology you want to use for that calculation, as I understand it, your opinion is not that it's wrong. Just that you didn't analyze it at all, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I did not evaluate Dr. Basu's calculation to determine whether it is appropriate or inappropriate or correct or incorrect.

BY MS. BUTLER:

Q. With respect to the amended appendices in Exhibit 47, is there anything else

that we haven't already discussed that you recall disagreeing with?

MR. ANTONUCCI: Objection.

THE WITNESS: Not as I sit here today.

BY MS. BUTLER:

Q. Going back to Exhibit 13, which is your Supplemental Materials Considered dated February 20, 2026, you also reviewed the Materials Considered List for Expert Anirban Basu, Expert Report of Chad Staller, Expert Rebuttal Report of Marjorie Hackett-Wallace, and the Supplemental Materials Considered List for Expert Report of Marjorie Hackett-Wallace.

Are you based on that review -- or let me ask you.

Did you review those materials?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes.

BY MS. BUTLER:

Q. Okay. Based on that review, is there anything -- any additional opinion you intend to express that we haven't already discussed here today?

A. No.

Q. Okay. And then going to the next bullets, we have 1, 2, 3, 4, 5, 6 bullets indicating various Bates ranges.

Are those additional billing records you reviewed?

A. I believe they are additional billing records.

Q. And were those additional billing records reviewed because they were referred to in one of the other materials you looked at that's indicated on this list?

A. I don't recollect why they were reviewed.

Q. But I believe you've already testified that nothing in this Materials Considered List changes the opinions expressed in your report, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: That is correct. The opinions that I offered in my December 15th report are not affected by these additional billing records. The additional billing records were either

duplicative or not at issue.

BY MS. BUTLER:

Q. Okay. And the last three bullet points are also Bates ranges.

And would that same testimony apply that nothing in those bullet points change the opinions that are expressed in your written reports?

MR. ANTONUCCI: Objection.

THE WITNESS: That is correct.

MS. BUTLER: I'm going to hand you what has been marked as Exhibit 14.

(Document marked for identification as Russo Exhibit 14.)

BY MS. BUTLER:

Q. Do you recognize this document?

A. Yes, I do.

Q. Is this the article we were referring to earlier in your deposition that was identified on your CV?

A. This is an article that we spoke about and that is on my CV.

Q. Okay. And were there bullets -- was

there a PowerPoint -- sorry, not a bullet point -- a PowerPoint presentation also prepared with respect to this article?

MR. ANTONUCCI: Objection.

THE WITNESS: There was a corresponding PowerPoint that was used at some point. I think on a webinar.

BY MS. BUTLER:

Q. And are you one of the presenters on this document?

MR. ANTONUCCI: Objection.

THE WITNESS: I am one of the authors on this document.

BY MS. BUTLER:

Q. And were you also one of the presenters when the PowerPoint was presented?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I believe I was.

BY MS. BUTLER:

Q. In what context was this presented, this Exhibit 14? In what context was it presented with the PowerPoint slides?

MR. ANTONUCCI: Objection.

THE WITNESS: It was a webinar.

BY MS. BUTLER:

Q. Who was -- who sponsored the webinar?

A. I think it was jointly sponsored by BRG and a legal association.

Q. What was that legal association?

A. I don't know. I don't remember.

Q. Do you recall if it was a defense- or plaintiff-oriented organization?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't remember.

BY MS. BUTLER:

Q. And who was the audience for that presentation?

A. Attorneys.

Q. Do you know if it was all defense attorneys, plaintiffs attorneys, or a mixed bag?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know. I don't recollect.

BY MS. BUTLER:

Q. Turning to this article on page 1, the first sentence says:

"Personal injury suits typically include costs for a plaintiff's future medical bills."

Do you see that?

A. Yes.

Q. Can that also be true with respect to plaintiff's past medical bills?

MR. ANTONUCCI: Objection.

THE WITNESS: I have seen personal injury suits include past medical bills as well.

BY MS. BUTLER:

Q. And why are past medical bills, in your experience, addressed in personal injury suits?

A. I don't know why they're addressed.

Q. Going down to the I guess it would be the fourth paragraph. It's the one that starts "However, a study."

Do you see that?

A. Yes, I do.

Q. And there's reference to the

Medicare Payment Advisory Commission, or MedPAC.
Do you see that?
A. Yes.
Q. And what is MedPAC?
A. It is an independent federal agency that advises Congress on healthcare in the Medicare program.
Q. Are there other agencies like that that serve the same purpose as MedPAC?
MR. ANTONUCCI: Objection.
THE WITNESS: Well, your question is confusing because you said other agencies like MedPAC that serve the same purpose.
There are other agencies like MedPAC. They do not, say, serve the exact same purpose as MedPAC, though.
BY MS. BUTLER:
Q. What other agencies are there like MedPAC?
A. There's MACPAC.
Q. What is RAND, R-A-N-D?
A. RAND is an independent not-for-profit think tank that was created shortly

after World War II. The United States Department of Defense had amassed an incredible amount of brain power to succeed in winning World War II. And after the end of World War II, the brain power, the incredibly intelligent individuals were beginning to leave the federal government service.

And as those individuals were going to a number of different organizations, there were a few folks that recognized the benefit -- the societal benefit if an independent organization was created where those individuals could study different aspects of national defense and produce independent studies, and so RAND was created at that point.

Since its founding, it has expanded to study other elements of healthcare -- sorry -- other elements of national policy including healthcare. The Rand Corporation has continued to expand over the years and now runs a graduate program that's a highly respected graduate program, as well as conducting independent studies, as I indicated, national security and healthcare as well as other policy-related concerns.

Q. In the article that is at Exhibit 14, MedPAC is cited for purposes of indicating that a study that was conducted by the Lewin Group for MedPAC found that less than 15 percent of hospitals ensure that their charge masters are updated according to a specific schedule and reflect current costs and market conditions.

And then there are other things noted about that study; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: There are other comments about that study.

BY MS. BUTLER:

Q. Now, does RAND have a similar type of study or a similar type of function as MedPAC to refer to in your article?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't understand your question.

BY MS. BUTLER:

Q. Does RAND conduct similar studies to try to figure out, for example, the -- if you look at the next page of your article, which is page 2,

and there are the average percentage of charges paid to hospitals.

Do you see that?

MR. ANTONUCCI: Objection.

BY MS. BUTLER:

Q. Paid by Medicaid, paid by Medicare, paid by private sector.

Do you see those percentages?

MR. ANTONUCCI: Same objection.

THE WITNESS: Yes, I do see those.

BY MS. BUTLER:

Q. Okay. Does -- does RAND serve a purpose in accumulating similar type of data as is indicated in that chart?

MR. ANTONUCCI: Objection.

THE WITNESS: So I'm a little confused because you started this by referencing MedPAC.

BY MS. BUTLER:

Q. I did. I jumped.

A. Okay.

Q. I'm just asking if RAND provides

this type of information.

MR. ANTONUCCI: Greg, were you finished answering her question?

THE WITNESS: I -- I think I'm confused as to what the question is.

BY MS. BUTLER:

Q. Okay. So in this article, there is discussion -- for example, I'm on page 2 now -- to the left of the chart that I was pointing you to where it talks about some data where U.S. hospitals were paid 26.7 percent of their billed charges by Medicare, 27.2 percent of their billed charges by Medicaid, and 43.4 percent of their charges by private sector payors.

Do you see that?

A. Yes, I do.

Q. Okay. Does MedPAC have any studies that accumulate that type of data?

MR. ANTONUCCI: Objection.

THE WITNESS: They may. I don't know if they do or they don't but...

BY MS. BUTLER:

Q. So you don't rely on MedPAC for that

type of data?

MR. ANTONUCCI: Objection.

THE WITNESS: No, I don't.

And let's be clear. I'm not relying upon this data either.

Charges, as is indicated in this article, are not something that is a useful measure of value. And the analyses -- sorry -- the data points that you're pointing out here are payments as a percent of charges, and so half of that equation is not a reasonable benchmark.

BY MS. BUTLER:

Q. Do you rely on RAND in your expert reports for this case?

A. Yes, I did.

Q. Could you also rely on MedPAC for your expert reports in this case?

MR. ANTONUCCI: Objection.

THE WITNESS: To the extent that it had data that was available and that provided a current understanding of how willing buyer/willing seller rates are set, then, yes.

But typically MedPAC does not analyze that, the willing buyer/willing seller rate, because MedPAC is the Medicare Payment Advisory Commission, which is focused on the Medicare program. The Medicare program isn't a willing buyer/willing seller transaction.

MS. BUTLER: I'm going to move now to your reports. What I'm going to do is to for each report, I'm going to hand you -- I'm going -- I'm trying to do these in alphabetical order.

And I am going to first hand you -- of course, I said that and then this is not in alphabetical order. I apologize.

Let me see how this happened.

Okay. Sorry. These are going to be a little out of order.

Okay. I am going to start with Amsler and since I pre-marked these, I apologize. The report for Ms. Amsler is Exhibit 43.

(Document marked for

identification as Russo Exhibit 43.)

MS. BUTLER: And her materials considered your original materials considered is Exhibit 44.

(Document marked for identification as Russo Exhibit 44.)

BY MS. BUTLER:

Q. Do you recognize Exhibit 43?

A. (Reviews document.)

Yes, I do.

Q. And what is Exhibit 43?

A. It appears to be my report related to the Plaintiff Karen Amsler, A-m-s-l-e-r.

Q. And previously we were discussing the dates of your report.

Do you see that it's dated December 15, 2025?

A. Yes, I do see that.

Q. Okay. Turning to the first page after the Table of Contents, which is page 3, would you agree that, generally speaking, your 16 reports in this case are all organized in the same manner?

A. What do you mean by "organized"?

Q. Well, there's a Table of Contents, correct?

A. Yes, each of the 16 reports that I've offered does include a Table of Contents.

Q. And the Table of Contents goes through the headings: Introduction, Background of the Case, Scope of Report, etc., correct?

A. Yes, there are elements to the Table of Contents for each of the 16 reports.

Q. Would you agree that the elements to the Table of Contents are the same for each of your 16 reports?

MR. ANTONUCCI: Objection.

THE WITNESS: No.

BY MS. BUTLER:

Q. So your Introduction is different for each report?

Other than with respect to the name of the plaintiff and the disease, is your Introduction any different for any 16 of these reports?

MR. ANTONUCCI: Objection.

THE WITNESS: No, it's not.

I thought you were asking

about the Table of Contents. You said was the Table of Contents the same.

BY MS. BUTLER:

Q. I was asking you about the general content of your reports, and you said you didn't understand what I was asking. So I was referring you to the Table of Contents to indicate that what I'm asking is:

Obviously, we have 16 different plaintiffs. They have 16 different diseases and they have different medical billing amounts, right?

MR. ANTONUCCI: Objection.

THE WITNESS: They have different medical billing amounts. They have different medical bills. They have different medical services.

BY MS. BUTLER:

Q. Other than the plaintiff-specific pieces of information, like their name, their illness, and the amounts and the billing record-type information, is your organization generally the same for each of your 16 reports?

MR. ANTONUCCI: Objection.

THE WITNESS: Well, I want to make sure that it's clear that the sections that are listed as 1, 2, 3, 4, 5, 6, 7, 8 at a high level are the same. But within Section 5, I provide the methodologies that I rely upon to analyze that plaintiff's past medical services, and so those methodologies may differ to the extent that there are different services that are included within a specific plaintiff's at-issue past medical bills.

BY MS. BUTLER:

Q. They also might differ because of their location or dates of service, right?

MR. ANTONUCCI: Objection.

THE WITNESS: What might differ?

BY MS. BUTLER:

Q. Those sections that you just referred to.

A. The methodology -- well, the section is included or not depending on whether the service is included or not.

The methodological section is included or not based on I think you said geography or date. That's not what drives the inclusion.

Q. Okay. That -- that was not what I was asking, but we'll get into the detail of your report.

So let's -- let's go to page 3.

This is your Introduction section and this appears -- you have an Introduction section in each of your 16 reports, correct?

A. Yes, I do.

Q. Okay. And the Introduction section introduces you, your job at Berkeley Research Group, and your experience; is that correct?

A. It briefly does.

MR. ANTONUCCI: Objection.

THE WITNESS: It briefly provides that information to the reader.

BY MS. BUTLER:

Q. Okay. Are you aware of any difference in this Introduction section between this in your 16 reports?

MR. ANTONUCCI: Objection.

THE WITNESS: No, I am not aware of any difference.

BY MS. BUTLER:

Q. Okay. Now, the Background of the Case is where you introduce the plaintiff; is that correct?

A. Yes, that is correct.

Q. And in this case, which is Exhibit 43, you're introducing Ms. Amsler, correct?

A. That is correct.

Q. And you're introducing her name and the condition she suffers from; is that correct?

A. That is correct.

MR. ANTONUCCI: Objection.

BY MS. BUTLER:

Q. Okay. And then in each of your reports you state:

"I offer no opinion on whether water at Camp Lejeune may have led to" that plaintiff's "development of any disease."

Is that correct?

A. Yes, that is correct.

Q. And you are still not rendering that

opinion, correct?

A. I am not rendering an opinion as to whether the water at Camp Lejeune may have led to any individual plaintiffs developing a certain disease.

Q. Then Section 3 is the scope of your report; is that correct?

A. That is correct. That is Section 3.

Q. Okay. And with respect to each of your 16 reports in this case, you have three bullet points in the scope of your report; is that correct?

A. Yes, I believe so.

Q. Okay. And with respect to the first bullet point, you indicate that you are reviewing and validating the amounts billed for past medical services for the plaintiff; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I am reviewing and validating the amounts billed for the plaintiff based on the report of the plaintiff's expert Marjorie Hackett-Wallace.

BY MS. BUTLER:

Q. And in each of your reports, you drop a footnote in that sentence and you indicate the expert opinion report you are relying on, and in particular the Bates-labeled appendix that you're relying on that goes with that report; is that correct?

A. Yes, I believe that's correct.

Q. And so in this instance, for example, in this report for Ms. Amsler, you indicate that you review and validate -- that you were asked to review and validate the amounts billed for past medical services claimed by Ms. Amsler in the October 29, 2025 report of Marjorie Hackett-Wallace, and also making reference to her first amended appendix for Ms. Amsler, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I am referencing Marjorie Hackett-Wallace's report. I don't know if that's the first amended appendix or not.

MS. BUTLER: Again, I apologize because I'm going to have to go out of order, but this is gong to be

Exhibit 48 that I will hand to you.

(Document marked for identification as Russo Exhibit 48.)

BY MS. BUTLER:

Q. And I apologize for the small type. This did not get on the big paper. Here's another one.

Do you recognize this document?

A. (Reviews document.)

Yes, I do.

Q. And do you see the Bates numbers at the bottom? They say PLG-EXPERT_HACKETT-WALLACE_ and then a bunch of 0s and it has 60, and then the next page has 61, and the next page has 62?

A. I do, and in my reference I reference to page 63, and I didn't see you gave me 63.

Q. I do not have a copy, but I will represent to you and you can -- you can understand for purposes of this question that 63 is the first amended Materials Considered List, the Excel of Marjorie Hackett-Wallace.

Do you recall getting the Excels, the Excel spreadsheets with Marjorie

Hackett-Wallace's Materials Considered?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't remember if they came in Excel or not.

BY MS. BUTLER:

Q. Okay. So going back to Ms. Amsler's report, the first bullet says that you were asked by the Department of Justice specifically to address the following issues, and number 1 is:

"Review and validate the amounts billed for past medical services claimed by Ms. Amsler in the report of Ms. Amsler's expert Ms. Marjorie Hackett-Wallace."

Correct?

A. Yes, that is correct.

Q. Okay. What did you do to validate the amounts billed?

A. I went to the billing documents, the billing records that were produced and identified for a specific date of service and a specific service what the charges were that were on that bill.

You'd see in Ms. Amsler's case that Marjorie Hackett-Wallace indicates that there were

billed charges of $831,000 -- sorry -- $831,690.04 whereas I found errors in her work here and identified that the charges should be $830,976.93.

Q. And so that difference is less than $900, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: That's correct. Yes. Those are -- Marjorie Hackett-Wallace's errors were less than $900 here.

BY MS. BUTLER:

Q. And when you were previously referring to Marjorie Hackett-Wallace's errors and the allegedly sloppy nature of her work, you were referring to issues like that less than $900 discrepancy that you found with respect to Ms. Amsler?

MR. ANTONUCCI: Objection.

THE WITNESS: That's right. Yeah. I expect that when an expert does their work, they do so without error. That's what I think we owe to the trier of fact.

And Marjorie Hackett-Wallace

when she did her work, she contained errors in her analysis, which she then admitted she had done wrong.

BY MS. BUTLER:

Q. And so in conducting all of your expert work, you have never been found to have included an error in your calculations? Is that what you're testifying to?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't recollect in my work where I have identified -- where another expert has identified an error.

I have in a case or two submitted an amended report after I identified that there was an issue but did so prior to any other expert identifying it.

BY MS. BUTLER:

Q. And, of course, you have at least 13 other people on your team checking and double-checking and triple-checking your work; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I created a team of individuals to ensure that the work we did was accurate and correct. That team included, as you counted, 14 individuals.

BY MS. BUTLER:

Q. Your second bullet point in the Scope of Report states that you were specifically asked to "Determine the reasonable value of past medical services rendered to Ms. Amsler and past medical services included in the report of Marjorie Hackett-Wallace."

Did I read that correctly?

A. Yes.

Q. So with the "and" in the middle there, did you do two things within that bullet point?

MR. ANTONUCCI: Objection.

THE WITNESS: No, I did not.

BY MS. BUTLER:

Q. So what exactly did you do as is described in that bullet?

A. I determined the reasonable value of past medical services that were rendered

Ms. Amsler and past medical services that were included in the report of Marjorie Hackett-Wallace.

Q. So would it be correct to read that that you determined the reasonable value of past medical services rendered Ms. Amsler that were identified in the report of Marjorie Hackett-Wallace?

A. I think that's another way of saying it, yes.

Q. With respect to the third bullet point, it says that you were specifically asked to "Determine the reasonable value of past medical services rendered to Ms. Amsler that are both included in the report of Marjorie Hackett-Wallace and identified as related to Ms. Amsler's condition by Dr. Wang Ji."

Did I read that correctly?

A. Yes.

Q. Okay. And so is that what is reflected then in your second table, your Table 2 of each report?

A. Yes.

Q. Okay.

A. Sorry. It's not in each report, though. Dr. Ji did not review --

Q. Sorry.

A. Sorry. Let me finish my answer.

Q. Yeah.

A. Dr. Ji did not review the past medical services for all of the 16 plaintiffs. They were reviewed by either Dr. Ji or Dr. Hasan, and the work that I did in each of the 16 reports indicates the clinician that reviewed those past medical bills and whether or not they were related to the condition of the plaintiff.

My analysis of past medical -- my analysis of reasonable value with respect to the review by Dr. Ji or Dr. Hasan is included in Table 2 of each of the reports.

Q. With respect to the first bullet point in your scope of work, for each of the plaintiffs, if the number in your Table 1 and the number in Marjorie Hackett-Wallace's report is the same, then you did not invalidate any of the amounts billed for past medical services; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say it differently.

I would say that I looked at the work that Marjorie Hackett-Wallace had done to identify the charges for those past medical services, and I validated that she had done her work for that plaintiff correctly.

We know that doesn't happen, though, for each of the plaintiffs.

BY MS. BUTLER:

Q. Well, so, for example, with respect to Ms. Amsler, if you look at Exhibit 48, Marjorie Hackett-Wallace on her first amended appendix for Karen Amsler identified total charges of 831,690.04, correct?

It's -- it's on the first.

A. Yes, that's correct.

Q. Okay. And if you look in your report for Ms. Amsler, which is Exhibit 43, in your Table 1 you identified billed charges as 830,976.93, correct?

A. Yes, that is correct.

Q. So is it accurate to state that you

validated $830,976.93 of the charges that Marjorie Hackett-Wallace had identified in her report?

MR. ANTONUCCI: Objection.

THE WITNESS:

(Reviews document.)

To some extent, yes, but to some extent, no.

What I did was I went through and for each and every past medical bill that was identified by Marjorie Hackett-Wallace, I identified the charges that were included on the billing document. Then I considered whether that was -- with that matched what Marjorie Hackett-Wallace had.

And so there were some of the bills, for instance, the bill for -- the bill for Sound Physicians, Marjorie Hackett-Wallace indicates that it has charges of $15,543.01 and I identified that it has charges of $14,801.91.

So I don't know if you would consider that Marjorie Hackett-Wallace's entire number was wrong and it should

have just been 14,801.91 or whether I validated $14,801 of what she had previously shown.

BY MS. BUTLER:

Q. Well, you state, don't you, that you reviewed and validated amounts; isn't that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I did and I did so, which is you see the CVS number of $19,063.02 matches all but 10 cents of due Marjorie Hackett-Wallace.

BY MS. BUTLER:

Q. So wait. Let me ask you --

A. Then 6,000 -- sorry. I'm still answering.

Q. -- real quickly on that.

A. I'm still answering.

Q. On that, yeah.

A. I'm still answering.

Q. Okay.

A. The $6,627.63 on the CVS bill is also one that I looked at and validated, and the Georgia Eye Institute of $840 is one that I looked

at and agreed with what Marjorie Hackett-Wallace had identified.

I could continue on for the other providers as well.

Q. That's what I was trying to circumvent to ask.

So if, if, on Table 1 of a plaintiff's report your billed charge is different than what is in Marjorie Hackett-Wallace's original report and appendices, then you validated the amount indicated in your Table 1, correct?

A. Correct.

MR. ANTONUCCI: Objection.

BY MS. BUTLER:

Q. Okay. So, for example, as noted with that CVS charge, you validated $19,063.02 in charges, correct?

A. I found that the past medical bills that Marjorie Hackett-Wallace has included within her analyses had charges of $19,063.02.

Q. And similarly, in your Table 1, for all of the billed charges in that column including the total, those are the amounts that you validated, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Those are the amounts that I went to the past medical bills and identified that those -- those are the amounts that were included within the past medical bills that Marjorie Hackett-Wallace has included within her analyses.

BY MS. BUTLER:

Q. Well, if you won't agree with me that you validated those amounts, then what did you validate in this first bullet point?

MR. ANTONUCCI: Objection.

THE WITNESS: I did validate those amounts.

BY MS. BUTLER:

Q. Okay. That's all I was asking. Thank you.

Now, with respect to the amounts, again, on that Table 1 -- and we're in Ms. Amsler's report and the total -- am I correct that as to those amounts in your table, you are not disputing that the plaintiff incurred those expenses, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I do not have an opinion on whether the plaintiff incurred those expenses, made any payment with respect to those expenses.

I have relied upon Marjorie Hackett-Wallace to identify what are the at-issue past medical bills.

BY MS. BUTLER:

Q. And you reviewed the past medical bills that were identified by Marjorie Hackett-Wallace, correct?

A. That is correct.

Q. And so you validated that those expenses identified on your Table 1 were, in fact, billed to the plaintiff, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I identified that those services included the plaintiff's information. I don't know if they were actually billed and sent to the plaintiff.

BY MS. BUTLER:

Q. Do you have any reason to believe

they weren't?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't have any information on that.

BY MS. BUTLER:

Q. If this total number on your Table 1 for Ms. Amsler, the 830,976.93, were determined to be inaccurate, is it correct that that would not invalidate your methodology, though?

MR. ANTONUCCI: Objection.

THE WITNESS: No, it would not invalidate the methodology.

The methodology, as is described in this report and in all 16 of my reports, is a methodology that is applied to whatever the services are that are being analyzed, and so whether one includes additional services or excludes services that are here included within Table 1, the methodology would still stand.

It's just that the bills that would be analyzed would be greater in number or less in number.

BY MS. BUTLER:

Q. Now, with respect to Ms. Amsler, your Table 1 and your Table 2 are exactly the same; is that correct?

A. Yes, that is correct.

Q. And why are those numbers the same?

A. As is described in the report, the numbers in Table 2 relate to those past medical services that were identified by Ms. Hackett-Wallace and also determined by Dr. Ji to be related to Ms. Amsler's condition.

Q. And there were occasions where those were the same, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I'm sorry. I don't understand the question.

BY MS. BUTLER:

Q. There were occasions where Dr. Ji or Dr. Hasan's analysis aligned with Marjorie Hackett-Wallace's analysis, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know how their analyses aligned.

What I know that at the end

of -- the outcome of them was that they -- Dr. Ji and Dr. Hasan identified that all of the past medical services that Marjorie Hackett-Wallace had identified were considered to be related to the condition.

BY MS. BUTLER:

Q. And in those instances, your Table 1 and Table 2 were the same, correct?

A. I believe so.

Q. With respect to the 16 plaintiffs, was your Scope of Report any different with respect to the three bullet points identified in Ms. Amsler's report?

MR. ANTONUCCI: Objection.

BY MS. BUTLER:

Q. Other than Dr. Hasan being switched for Dr. Ji with respect to certain plaintiffs?

MR. ANTONUCCI: Same objection.

THE WITNESS: The scope of work for all 16 plaintiffs was the same. With the caveat that the work was focused on an individual plaintiff and that I was

relying upon information that either Dr. Ji or Dr. Hasan provided.

BY MS. BUTLER:

Q. Turning to the next page of your report, this is titled Section 4 "Measurement of the Reasonable Value of Health Care Services and Products."

Is this section of your report the same for each plaintiff, other than the section, for example, with Ms. Amsler on page 5 where you talk about specific charges to that plaintiff and the locale that those charges were incurred in?

MR. ANTONUCCI: Objection.

THE WITNESS: I think that your question is slightly incorrect.

On page 5 of my report, I am not indicating that these are charges that were incurred by the plaintiff.

What I'm identifying is that these are charges that are the average charges in the area where Ms. Amsler resides for an inpatient stay treating septicemia or severe sepsis without mechanical ventilation for more than 96

hours.
BY MS. BUTLER:
Q. And so with respect to the Section 4 of your reports for all of the 16 plaintiffs, is that the only paragraph that differs?
MR. ANTONUCCI: Objection.
THE WITNESS: That is the only paragraph that has a substantive difference.
BY MS. BUTLER:
Q. What about a nonsubstantive difference?
MR. ANTONUCCI: Objection.
THE WITNESS: There are other paragraphs with differences.
BY MS. BUTLER:
Q. Which ones in paragraph 4? I mean -- sorry -- Section 4?
A. If you see on page 6 of the Amsler report, it says:
"In this matter, Ms. Amsler would be the willing buyer of services" and the plaintiff name would change in each of the 16 reports and so that would be a nonsubstantive change that you

asked about.

Q. So other than that one nonsubstantive change and then the substantive difference in the paragraph we discussed where South Carolina is referenced, is it correct that the Section 4 of your report for each plaintiff is the same?

MR. ANTONUCCI: Objection.

THE WITNESS: I believe so.

BY MS. BUTLER:

Q. Then going to Section 5, which is titled "Methods for Calculation of Reasonable Values for Past Medical Services."

Do you see that?

A. Yes, I do.

Q. Going to Section 5.1, are there any differences in this Section 5.1 between your 16 reports?

MR. ANTONUCCI: Objection.

THE WITNESS:

(Reviews document.)

Yes, there are.

BY MS. BUTLER:

Q. Okay. Where?

And sorry. I'm just talking about 5.1, which is pages 6, 7, and the -- sorry. Just leading up to the first paragraph of page 7.

A. The report that I have, Section 5.1 goes to page 9.

Q. And you're counting all of the subsections like 5.1.1, right?

A. They are inclusive of Section 5.1, yes.

Q. Okay. If you just take 5.1 up through the top of 7 before you get to 5.1.1, are there any differences in the 16 reports?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't believe that there are.

BY MS. BUTLER:

Q. Okay. Staying on page 6, which is the start of 5.1.

A. And I'm sorry. I need to add to that.

Each of the 16 reports contains the methodological section or sections upon which I rely to calculate the reasonable value of past medical expenses, and not each of the sections

that you see in Ms. Amsler's report are going to be included in each of the 16 reports.

And so to the extent that what we're looking at here at 5.1 appears in the other reports, then it would be the same. I don't recollect if this section is in each of the 16 reports.

Q. Thank you for that clarification.

Turning to page 6, 5.1, you indicate in the second sentence:

"To determine this, I identified the Current Procedural Terminology (CPT) code on each claim within a medical bill."

Do you see that?

A. Yes, I do.

Q. Now, you previously mentioned HCPC codes.

Where are HCPC codes mentioned in this section?

MR. ANTONUCCI: Objection.

THE WITNESS: They are not because CPT codes are related to physician services.

BY MS. BUTLER:

Q. Was there any other part of the HCPC code that you relied on with respect to your reports, other than the part that included the CPT code?

MR. ANTONUCCI: Objection.

THE WITNESS: I believe that there were home health services in one of the plaintiff's past medical bills and I believe that they would have been -- I recollect they may have billed using a HCPC.

Additionally, some of the outpatient hospital services may have -- may have used the HCPCs.

BY MS. BUTLER:

Q. Going to your second paragraph on page 6 under Section 5.1, the second sentence says:

"As is detailed further below, market rates are calculated by applying a two-step process."

When you've referred to "market rates," are you talking about -- what are you referring to there?

A. The willing buyer/willing seller or the reasonable value. All of those are synonymous.

Q. And then you say:

Number "(1) first, I identify what costs a physician or other ancillary clinician would incur when rendering the specific service defined by the CPT code."

Do you see that?

A. Yes, I do.

Q. And is that based on the year the service was received?

MR. ANTONUCCI: Objection.

THE WITNESS: That is based on the date of service that is on the past medical bill, as well as the geographic location of the provider.

BY MS. BUTLER:

Q. And then you state second:

"Then I apply an adjustment factor to the costs to account for the market rate."

Do you see that?

A. Yes, I do.

Q. And, again, is that adjustment

factor based on the date of service?

MR. ANTONUCCI: Objection.

THE WITNESS: That adjustment factor is based on data from the RAND study. The costs in the first step are what is based on the date of service.

BY MS. BUTLER:

Q. Okay.

MR. ANTONUCCI: We're at an hour time.

BY MS. BUTLER:

Q. Okay. You want to take a five-minute break?

A. Probably, yeah.

MR. ANTONUCCI: 10?

MS. BUTLER: I'm -- okay.

THE VIDEOGRAPHER: The time is 2:49. We're now off the record.

(A recess was taken.)

THE VIDEOGRAPHER: This is the beginning of media unit number 5 of the video-recorded deposition of Mr. Gregory Russo. The time is 2:59 PM Eastern. We are now back on the record.

Counsel, you may proceed.

MS. BUTLER: Thank you.

BY MS. BUTLER:

Q. Mr. Russo, before we took a break, we were looking at the report that is marked as Exhibit 43, which is your report for Ms. Amsler.

Do you recall that?

A. Yes, I do.

Q. Okay. And I think we had made it through to Section 5.1 and I was moving to page 7 at the top.

Do you see in the sentence that says:

"In this process, I am not rendering an opinion on the CPT code that should have been included on a claim."

Do you see that?

A. Yes, I do.

Q. And is that statement accurate for all of your 16 reports?

A. Yes, it is.

Q. Okay. And then there's another sentence at the end that says:

"If a physician's or other ancillary

clinician's claim does not have a CPT code, then I did not determine a reasonable value for the service. Instead, I accepted the billed charges as the reasonable value for the service."

Do you see that?

A. Yes, I do.

Q. I believe we've confirmed this before, but is that true for all 16 of the reports?

A. Yes, it is.

Q. Okay. Then we go to Section 5.1.1, correct?

A. Yes.

Q. Okay. And this is your Step 1 how you determined the costs through the CPT codes for Ms. Amsler's claims; is that correct?

A. That is correct. I use this methodology to determine the cost both for Ms. Amsler's physician claims as well as the physician claims that are included in any of the other 15 plaintiffs.

Q. Thank you. That's what I was going to ask.

Is your methodology for determining

the cost the same in each of your 16 reports?

A. The methodology is the same. The specific elements of the calculation differ because there are geographic adjustment factors which depend on where the provider is located. There are relative value units that relate to whatever the specific service is. There -- there may be date of service differences.

So those are differences between each of the calculations, but the methodological approach is the same.

Q. And at the end of that section before you get to 5.1.2, you state:

"Completing these sub-steps allows me to identify the cost incurred by a physician or other ancillary clinician for delivering the services, as defined by CPT codes analyzed by Ms. Hackett-Wallace."

Is that correct? Did I read that correctly?

A. Yes.

Q. Okay. And that applies to each of the 16 reports, correct?

A. It applies to each of the 16 reports

to the extent that the 16 reports each contain physician services in them.

As I indicated, my Section 5 of my report is the methods for calculating the reasonable value of past medical services, and these methodologies that are included therein are specific to that plaintiff.

And so if a plaintiff didn't have physician services, then this section wouldn't be included. To the extent that they had physician services, this section would be included and the methodology would be the same as what's described in Ms. Amsler's report.

Q. Okay. Going to Section 5.1.2, this is titled "Step 2: Adjusting Costs to Market Rates."

Do you see that?

A. Yes, I do.

Q. And, again, are market rates the reasonable value?

A. Yes.

Q. Okay. And you -- this is where there is a reference right at the end of the first paragraph as it is contained on page 8 to RAND

Corporation.

Do you see that?

A. Yes.

Q. And a RAND Report?

A. Yes.

Q. Okay. Are there other sources that you could have used there instead of the RAND Report?

MR. ANTONUCCI: Objection.

THE WITNESS: There may have been. However, the RAND Report is the most comprehensive and most up-to-date data set. It is used by researchers throughout the federal government.

I've seen articles that are published by the American Journal of Medicine. I've seen individuals at Harvard Medical School that have referenced it. So it is well-regarded in the industry as the gold standard.

BY MS. BUTLER:

Q. You then state:

"The RAND Report indicates that, on average, private sector professional fees in South

Carolina are paid" out -- and then you identify a rate.

Did you include South Carolina there because that is the location of Ms. Amsler?

A. No. I included South Carolina because that is the location of some of the providers that rendered services.

As the sentence continues, I also provide that same statistic for Georgia because some of the providers are located in Georgia.

And the methodology that I apply and the appropriate methodology to apply in the healthcare marketplace is to identify a reasonable value for services based on the provider's location, not on the plaintiff's residence.

Q. Then the last sentence of that section underneath your, I guess, visual is:

"The result is the value for which services in the healthcare marketplace would be paid by a willing buyer and accepted by a willing seller."

Is that correct?

A. That is correct.

Q. And is that the result that you are

obtaining for each of the 16 plaintiffs in that section of your report?

A. To the extent that this section is included in each of the 16 plaintiffs, then, yes.

Q. And is the result that you are obtaining a value as of the time that the service was rendered?

A. It is a value as of the date of service that is -- that is present on the medical bill.

Q. Going to Section 5.2, this is titled "Methods Used to Calculate the Reasonable Value of Laboratory Services."

Did I read that correctly?

A. Yes, you did.

Q. And at the end of that paragraph you state:

"Therefore, the reasonable values of laboratory services are calculated at 100 percent of market rates."

Do you see that?

A. Yes, I do.

Q. And is that the same in all of your 16 reports?

A. To the extent that laboratory services are included in all 16 reports, then, yes, it would be the same.

Q. Okay. And the next section is 5.3 "Methods Used to Calculate the Reasonable Value of Medications"; is that correct?

A. Yes.

Q. And we've already gone through and discussed that you utilized GoodRx; is that correct?

A. It is correct that I used GoodRx and it is also correct that we discussed it.

Q. Okay. And do GoodRx rates fluctuate?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, they would fluctuate over time as well as by geography.

BY MS. BUTLER:

Q. Can they fluctuate, say, within the same month?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know the answer to that.

BY MS. BUTLER:

Q. For example, if I go to a pharmacy and I have a prescription, isn't it true that that rate could fluctuate from that time until the time I go to pick it up, say, three months later?

MR. ANTONUCCI: Objection.

BY MS. BUTLER:

Q. That those rates could be different?

A. What rates?

Q. The GoodRx. The amount that GoodRx -- that I can get that prescription drug for through GoodRx.

MR. ANTONUCCI: Objection.

THE WITNESS: You don't get the prescription drugs through GoodRx. GoodRx is not a pharmacy.

BY MS. BUTLER:

Q. Okay. If I go to CVS and I use GoodRx and I obtain it from CVS utilizing GoodRx, isn't it true that those rates can fluctuate even within the same month?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know if they can fluctuate within the same month.

BY MS. BUTLER:

Q. Have you ever used GoodRx?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes.

BY MS. BUTLER:

Q. Going to the next section of your report, it's titled 5.4 "Methods Used to Calculate the Reasonable Value of Physician Administered Drugs."

Do you see that?

A. Yes, I do.

Q. To the extent this section is included in the 16 reports, is the section the same?

A. Yes, it is.

Q. Okay. Going to 5.5, this is titled "Methods Used to Calculate the Reasonable Value of Inpatient Hospital Services in Medical Bills."

Do you see that?

A. Yes, I do.

Q. Okay. And to the extent that applies to the 16 plaintiffs, is that section the same?

A. The methodological approach is the

same. As is noted in Section 5.5 on page 11, there are specific percentages that relate to the Plaintiff Amsler, and so those percentages would differ for the 16 plaintiffs to the extent inpatient services are included.

Q. But the same method -- the same methodology is applied; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, the same methodology is applied.

BY MS. BUTLER:

Q. And that pertains to Section 5.5.1 and 5.5.2; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, it does. As you see, 5.5.2 is a reference back to Section 5.1.

BY MS. BUTLER:

Q. And that's the same in all 16 reports, correct?

A. What's the same in all 16 reports?

Q. That if that 5.5.2 section is included, that it refers back to Section 5.1?

A. I don't know that it always refers

back to Section 5.1. It would always refer back to the methodology section for physicians, but I don't know that that's always Section 5.1.

Q. And turning to 5.6, which is inclusive of my question of 5.6.1 and 5.6.2, are those sections the same for each of the 16 plaintiffs with application to the place that the service was rendered?

MR. ANTONUCCI: Objection.

THE WITNESS: The methodology is the same across the 16 patients to the extent that outpatient hospital services are included for that plaintiff, but the specific percentages differ based on where the plaintiff received services.

BY MS. BUTLER:

Q. And also for 5.7, which is titled "Methods Used to Calculate the Reasonable Value of Home Health Services" -- I think you may have referred to this previously -- but did you refer to specific national base payment rates with respect to the state of residence for that plaintiff?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I believe that I did, but I believe the Plaintiff Amsler is the only patient that has home health services.

BY MS. BUTLER:

Q. Okay. Now, turning to Section 6, which is titled "Reasonable Value For Past Medical Services Identified By Ms. Hackett-Wallace."

Do you see that?

A. Yes, I do.

Q. The first sentence says:

"I reviewed bills from all 14 providers identified by Ms. Hackett-Wallace in Ms. Amsler's damage assessment form."

Do you see that?

A. Yes, I do.

Q. Okay. And I believe we already clarified that there are actually no bills identified by Ms. Hackett-Wallace in the damage assessment form. I think you are referring to the fact that the damage assessment forms refer to Ms. Hackett-Wallace's report.

Is that -- have I stated that accurately?

MR. ANTONUCCI: Objection.
THE WITNESS: Yes, I believe you have.
BY MS. BUTLER:
Q. Okay. So there's not really any information you actually got from the damage assessment form for your reports, correct?
MR. ANTONUCCI: Objection.
BY MS. BUTLER:
Q. Other than the reference to Ms. Wallace's reports?
MR. ANTONUCCI: Same objection.
THE WITNESS: The information from the damage assessment form was that I -- well, I should look at Ms. Hackett Wallace's reports -- I'm sorry -- Ms. Hackett-Wallace's report. She only submitted one report whereas I submitted 16.
BY MS. BUTLER:
Q. And then we go down in that paragraph and you say:
"I have relied on the 1st Amended

Appendix for Karen Amsler produced with Ms. Hackett-Wallace's report to identify providers and allegedly related medical services, but I have conducted my own analysis to determine billed charges and corresponding reasonable values for identified services."

Did I read that correctly?

A. I believe you did.

Q. I believe we've already covered this through the questions we've asked today, but is there anything more to that sentence than what we have already gone through when we went through the bullet points in the scope of your report?

MR. ANTONUCCI: Objection.

THE WITNESS: I believe that we've covered it.

BY MS. BUTLER:

Q. And then I believe we've covered this as well, but Table 1 generally reflects the reasonable values for the past medical services provided to Ms. Amsler as reflected in the charges that you validated from Marjorie Hackett-Wallace's report; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I'm sorry. I need that one again.

BY MS. BUTLER:

Q. Okay. Table -- what does Table 1 -- well, let me back up. Let me rephrase this.

It's my understanding based on the testimony we've already gone through that Table 1 reflects the billed charges that you validated from Marjorie Hackett-Wallace's report and then your reasonable value calculations for those charges; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Table 1 contains the billed charges from the medical bills. In some cases, those match what was in Marjorie Hackett-Wallace's reports.

As we've noted, though, there were errors in what she did and so the billed charges are from the medical bills.

And then I've calculated the reasonable value of the services that are

identified on those medical bills.
BY MS. BUTLER:
Q. And as we've previously looked at and we can look at again because we have Ms. Amsler's first amended -- let me see what -- first amended appendix for Karen Amsler that if the billed charge in your Table 1 is the same as identified in Marjorie Hackett-Wallace's appendix, then you validated her amounts?
MR. ANTONUCCI: Objection.
BY MS. BUTLER:
Q. Is that correct?
MR. ANTONUCCI: Same objection.
THE WITNESS: By "her" are you referencing Ms. Amsler or Ms. --
BY MS. BUTLER:
Q. No. Marjorie Hackett-Wallace.
MR. ANTONUCCI: Objection.
THE WITNESS: Sorry. I said Ms. Amsler and you shook your head yes. So.
BY MS. BUTLER:
Q. I'm referring to -- okay. I want to

make sure we're very clear about this.

The billed charges indicated on Table 1 for each of the plaintiff's report.

A. Yes.

Q. Are you with me?

A. Yes, I see this.

Q. Do those represent the charges identified in Marjorie Hackett-Wallace's report that you validated?

MR. ANTONUCCI: Objection.

THE WITNESS: In some cases, yes, but not always because there are instances where I found that Marjorie Hackett-Wallace had made an error and so I have gone to the source data, the medical record or -- sorry -- the past medical bills to identify what the charges are for each of the bills that Marjorie Hackett-Wallace included within her reports.

And in some cases, I arrive at the same amount of charges that Marjorie Hackett-Wallace had identified. In other cases, I did not.

BY MS. BUTLER:

Q. And so, for example, we looked at this previously, but with respect to the CVS charge, there was a difference in Marjorie Hackett-Wallace's Exhibit -- this is Exhibit 48 -- amount of she had $19,036.12 and you have $19,063.02; is that correct?

A. That's correct. Yes.

Q. And so in that instance where your billed charge amount is different than what Ms. Hackett-Wallace had on her original appendices, the amount in Table 1 is the amount you validated, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: The amount in Table 1 is what I went to the medical bills that Marjorie Hackett-Wallace has identified are at issue and determined what the charges were. So I validated those -- those charges.

BY MS. BUTLER:

Q. Okay. So if your number is different, as it is here in the CVS example, your number is what you validated, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes.

BY MS. BUTLER:

Q. Okay.

A. What I have included in Table 1 is what I have done based on my review of the past medical bills, and to the extent it is different than what Marjorie Hackett-Wallace has, then it is my opinion that she was wrong.

Q. Okay. And so, for example, in the CVS example, your number is actually larger than Ms. Hackett-Wallace's number, correct?

A. My billed charges are higher than what Ms. Hackett-Wallace had identified.

Q. And there is a less than 30 cents discrepancy, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: No.

BY MS. BUTLER:

Q. What is the discrepancy then?

A. Let's be clear. You said 30 cents.

Q. Oh, sorry. $30. I'm sorry. I apologize.

It's less than $30 discrepancy,

correct?

A. That's correct.

Q. Okay. And so for each of your Table 1s in each of the 16 reports, the amounts in the Billed Charges column are the amounts that you do not dispute are represented by the medical bills that you relied on in this case, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't think I understand your question.

BY MS. BUTLER:

Q. For all of your Table 1s in your 16 plaintiff's reports, there is a column called "Billed Charges," correct?

A. Yes, there is.

Q. Okay. And the amounts that you have put in those Billed Charges columns are the amounts that you don't dispute for purposes of this litigation, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Those amounts are included on the medical bills that Marjorie Hackett-Wallace has identified as being at issue.

I have no opinion on whether those bills are or are not at issue.

BY MS. BUTLER:

Q. And those are the amounts from which you calculated your reasonable values that are in the column next door, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: No. So --

BY MS. BUTLER:

Q. Table -- can I just ask you my question because you're not answering my questions.

If you look at Table 1, CVS billed charge 19,063.02, is that not the number that you used to calculate the reasonable value of 18,763.81?

MR. ANTONUCCI: Objection.

THE WITNESS: It's not.

As I -- as we walked through with the methodology section, the methodology is based on the services that are rendered. So on the CPT codes and other service revenue codes. It's not based on the number of billed charges.

BY MS. BUTLER:

Q. Okay.

A. Which is what you indicated in your question.

Q. Is this billed charge number the number that you plugged into your calculation to get your reasonable value?

MR. ANTONUCCI: Objection.

THE WITNESS: No. It was part of the calculation, but the calculation is based on the services and supplies that were rendered.

As we went through in the methodology section, the methodologies are based on the CPT codes and the revenue codes that are included on the bills.

BY MS. BUTLER:

Q. So are you saying this billed charge has nothing to do with your calculation of reasonable value?

MR. ANTONUCCI: Objection.

THE WITNESS: To the extent that I don't calculate a reasonable

value, I accept charges. But to the extent that I do calculate a reasonable value, that reasonable value is based on the services and supplies that are rendered, not based on what the charges are.

As my report indicates on -- in Section 4, it's inappropriate to use charges as a basis for reasonable value.

BY MS. BUTLER:

Q. Okay. So what is the point of putting the billed charges next to the reasonable value in Table 1?

MR. ANTONUCCI: Objection.

THE WITNESS: The point of including it is that Marjorie Hackett-Wallace in her analysis in her report includes charges, and so it is, I think, a helpful thing for the trier of fact to understand the charges that I have included within my analyses.

BY MS. BUTLER:

Q. And included in your analyses, as we've looked at Exhibit -- got to find it -- this

is the big long table that was your appendix. Exhibit 3.

Did we not go through and identify that the charges in the Charges column came from your review of the same charges that constitute that number?

MR. ANTONUCCI: Objection.

THE WITNESS: I'm sorry. I don't understand your question.

BY MS. BUTLER:

Q. What are these charges on Exhibit 3 in the Charges column?

MR. ANTONUCCI: Objection.

THE WITNESS: Those are charges that are present on the past medical bills for the Plaintiff Amsler.

BY MS. BUTLER:

Q. Okay. And so, for example, if this is the Atlantic Radiology Associates and you look at your Table 1 for Ms. Amsler, you have Atlantic Radiology Associates, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I do.

BY MS. BUTLER:

Q. And the numbers, the total matches $1,578.52, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, it does.

BY MS. BUTLER:

Q. And so then you look on Exhibit 3 and you broke down that total, which appears on your Table 1, correct?

A. Yes, it does.

MR. ANTONUCCI: Objection.

BY MS. BUTLER:

Q. So are you telling me that none of this Charges column had anything to do with your reasonable value analysis?

MR. ANTONUCCI: Objection. Asked and answered.

THE WITNESS: I think that you're misunderstanding the methodology.

So the reasonable value that's calculated, for instance, let's take row 9, which is CPT code 62328.

BY MS. BUTLER:

Q. Uh-huh.

A. That methodology is based on the CPT

code of 62328.

Q. Okay.

A. And that's why you see the reasonable value is $427.30.

It is not based -- the reasonable value is not based on what the charges were for that service. The reasonable value is based on what was the service.

The healthcare marketplace is regulated in such a way that providers can charge whatever they want. There's -- there's no requirement on what they charge, and so it would be inappropriate to use the charges as the measure of reasonable value.

Q. Except --

A. And so I have -- so I have relied on the CPT code to derive the reasonable value.

In this case for 62328, the charges were $315.28 and the reasonable value was $427.30. I then identify that when the reasonable value is greater than the charges, I accept the charges, and so here I have accepted the charges of $315.28.

That does not mean that -- that

reasonable -- reasonable value of $427.30 was calculated based off the charges.

Q. I understand. I think we were speaking beyond one another.

So the charges can have an impact on your analysis because of the Lesser of RV and Charges column, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: The charges does have an impact when the charges are less than the reasonable value, then I accept the charges.

BY MS. BUTLER:

Q. And is that -- so, for example, here with respect to Atlantic Radiology, how is that taken into consideration in your reasonable value of 1,079 is that the column Lesser of RV and Charges, which is appearing on Exhibit 3?

A. Yes, that is $1,079.78.

Q. And so it's a combination of whether you determine to take the lesser value or the reasonable value; is that correct?

A. That is correct. Yes.

Q. Okay.

A. You see that for most of the items on Exhibit 3, the reasonable value is higher than the charges, but there is one CPT code --

Q. And that's the one reflected --

A. -- for which --

Q. Sorry.

A. Sorry.

There's one CPT code for which that is not the case, which is 93971 with a 26 modifier and an LT modifier, for which the reasonable value is $38.54, yet the charges were $264.

Q. Going back to Table 1 just to be clear, the Billed Charges column, are those charges that appear to Marjorie Hackett-Wallace's report that you validated, correct?

MR. ANTONUCCI: Objection. Asked and answered.

MS. BUTLER: I'm just trying to make sure because we're getting --

MR. ANTONUCCI: Do you need to take a break, Jenna?

MS. BUTLER: No. I just want to make sure that I'm understanding correctly.

BY MS. BUTLER:

Q. That you took Marjorie Hackett-Wallace's report and she identified certain billing records that she relied on, correct?

MR. ANTONUCCI: Objection. Are you listening to the witness, Jenna?

MS. BUTLER: Yes.

MR. ANTONUCCI: Okay. All right.

MS. BUTLER: But he's not answering my questions directly and --

MR. ANTONUCCI: He's answered your questions every single time.

MS. BUTLER: -- I'm trying to make sure I understand.

MR. ANTONUCCI: You are not listening to him.

MS. BUTLER: Okay. I'm going to ask it another way.

BY MS. BUTLER:

Q. Let's go to Table 2. Explain Table 2 to me.

A. Table 2 is a summary of my analysis of the Plaintiff Amsler's past medical services that Marjorie Hackett-Wallace has determined are at issue and that Dr. Ji has also determined are related to Ms. Amsler's condition.

Q. Now, with respect to this table and any of the services that Dr. Ji agreed were related to Ms. Amsler's condition, did you go back and validate those amounts?

MR. ANTONUCCI: Objection. Asked and answered.

THE WITNESS: I validated them from the medical bills.

BY MS. BUTLER:

Q. Okay. And to the extent you validated those medical bills, those charges appear in the Billed Charges column, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I have reported in the Billed Charges column the billed charges that I have collected from the past medical services that Marjorie Hackett-Wallace has indicated are at issue.

BY MS. BUTLER:

Q. And with respect to Table 2, that Mr. Ji -- sorry -- Dr. Ji agreed were related; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: With respect to Table 2, these are the services that Dr. Ji identified were related to Ms. Amsler's condition.

BY MS. BUTLER:

Q. With respect to any discrepancies between your Table 1 and the appendices of Marjorie Hackett-Wallace, did you do anything to validate the amounts, other than review the billing records?

MR. ANTONUCCI: Objection. Seriously?

THE WITNESS: Other than -- so I went to Marjorie Hackett-Wallace's report. I identified that she was wrong and then I went --

BY MS. BUTLER:

Q. I'm asking how.

A. So Marjorie Hackett-Wallace produced

medical records or -- sorry -- medical bills along with her report, and it was clear that she had made some errors in the work that she did, which she admitted to. And the work that I did relied on the medical bills, not on the amounts that were in Marjorie Hackett-Wallace's report.

I did, though, rely on Marjorie Hackett-Wallace's report with respect to what bills were at issue.

Q. You state on the final paragraph of your report for all 16 plaintiffs that all of your opinions are stated with a reasonable degree of professional certainty.

What does that mean to you?

MR. ANTONUCCI: Objection.

THE WITNESS: That means that I am providing opinions that fit with the industry standard approach in my industry.

BY MS. BUTLER:

Q. And what is your industry?

A. Healthcare finance and healthcare marketplace.

Q. The next exhibit is Exhibit 44.

Did I hand that to you already? I believe I did.

It's your Materials Considered List that goes with the report of Karen Amsler.

Do you recognize that?

A. (Reviews document.)

Yes.

Q. Okay. And with respect to this Materials Considered, if you look at the very end, there are Bates ranges.

Do you see those?

A. Yes, I do.

Q. Do you recall what those were?

MR. ANTONUCCI: Objection.

THE WITNESS: These are the past medical bills.

BY MS. BUTLER:

Q. Okay. That you relied on for your analysis as we have discussed, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I believe these are the past medical bills upon which I have relied for the purposes of my analyses. We've looked at Exhibit 3.

Exhibit 3 has Bates numbers that are included within Exhibit 44.

BY MS. BUTLER:

Q. And so when you have talking -- talk -- sorry.

When you have spoken about what you did to validate the medical billings, those are the records that you're referring to that you reviewed; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. I went to the past medical bills and reviewed those, given the errors that Ms. Hackett-Wallace had.

BY MS. BUTLER:

Q. And with respect to your December 15, 2025 reports, the materials that you used to render the opinions in those reports are all contained within Exhibit 44; is that correct?

A. Yes, I believe they are.

MR. ANTONUCCI: Objection.

BY MS. BUTLER:

Q. Okay. And while we already looked at your supplemental MCL, which was Exhibit 13, I

believe you've already indicated that none of those materials changed the opinions and that all of your opinions are still as set forth in your December 15, 2025 reports; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I believe that's correct.

MS. BUTLER: Okay. We have gone through Ms. Amsler's report in extensive detail, and I have the rest of the plaintiffs' reports and Materials Considered marked.

I am not going to go through all of these in as much detail, but what I would like to do is to understand if your methodology is any different in any of these reports.

And so I am going to read off this initial batch of the reports and I'm going to give them to you, and I want you to take as much time as you need.

But we have Robert Welch's report dated December 15, 2025 as Exhibit 15.

(Document marked for identification as Russo Exhibit 15.)

MS. BUTLER: And your Materials Considered List for Mr. Welch is Exhibit 16.

(Document marked for identification as Russo Exhibit 16.)

MS. BUTLER: And I'll go ahead and hand you that one while I read for the record the rest of them, which is Edward Peterson's report is Exhibit 17.

(Document marked for identification as Russo Exhibit 17.)

MS. BUTLER: And the Materials Considered List is Exhibit 18 for Mr. Peterson.

(Document marked for identification as Russo Exhibit 18.)

MS. BUTLER: The expert report for Richard Sparks is Exhibit 19.

(Document marked for identification as Russo Exhibit 19.)

MS. BUTLER: And the Materials Considered List for Mr. Sparks is

Exhibit 20.

(Document marked for identification as Russo Exhibit 20.)

MS. BUTLER: The expert report for Diane Rothchild is Exhibit 21.

(Document marked for identification as Russo Exhibit 21.)

MS. BUTLER: And the Materials Considered List for Diane Rothchild is Exhibit 22.

(Document marked for identification as Russo Exhibit 22.)

MS. BUTLER: The expert report for David Fancher is Exhibit 23.

(Document marked for identification as Russo Exhibit 23.)

MS. BUTLER: And the Materials Considered List for Mr. Fancher is Exhibit 24.

(Document marked for identification as Russo Exhibit 24.)

MS. BUTLER: The expert report for David Downs is Exhibit 25.

(Document marked for

identification as Russo Exhibit 25.)

MS. BUTLER: And the Materials Considered List for David Downs is Exhibit 26.

(Document marked for identification as Russo Exhibit 26.)

MS. BUTLER: The expert for Allan Howard is Exhibit 27.

(Document marked for identification as Russo Exhibit 27.)

MS. BUTLER: And the Materials Considered List for Mr. Howard is Exhibit 28.

(Document marked for identification as Russo Exhibit 28.)

MS. BUTLER: The expert report for Jacqueline Tukes is Exhibit 29.

(Document marked for identification as Russo Exhibit 29.)

MS. BUTLER: And the Materials Considered List for Ms. Tukes is Exhibit 30.

(Document marked for identification as Russo Exhibit 30.)

MS. BUTLER: The expert report for Ronald Carter is Exhibit 31.

(Document marked for identification as Russo Exhibit 31.)

MS. BUTLER: And the Materials Considered List for Mr. Carter is 32.

(Document marked for identification as Russo Exhibit 32.)

BY MS. BUTLER:

Q. I will give you all of those right now, and my question would be: Is there any difference in methodology to what we have heard and discussed today?

And if you want to go off the record and take some time to review, but I'm guessing you know your reports and it's up to you how much time you want to take to review them.

A. I don't need to go off the record.

Q. Okay.

MR. ANTONUCCI: Sorry. Are you going to be introducing reports for Cagiano --

MS. BUTLER: Yes.

MR. ANTONUCCI: -- Dyer,

Criswell, Keller?

MS. BUTLER: Do you want me to go ahead and do them all? I have them all.

MR. ANTONUCCI: If they're here.

MS. BUTLER: Okay. Where did we -- what's the last one?

MR. ANTONUCCI: Do you intend to do them?

MS. BUTLER: Uh-huh. I have them all.

MR. ANTONUCCI: Okay. Then might as well get it over with.

MS. BUTLER: Yeah. Okay. So --

THE WITNESS: The last exhibit number or the last report.

MR. ANTONUCCI: It was Carter, Exhibit 32.

MS. BUTLER: Okay. Then I have Scott Keller. The expert report for Scott Keller is Exhibit 33.

(Document marked for

identification as Russo Exhibit 33.)

MS. BUTLER: And the Materials Considered List for Mr. Keller is Exhibit 34.

(Document marked for identification as Russo Exhibit 34.)

MS. BUTLER: The expert report for Terry Dyer is 35.

(Document marked for identification as Russo Exhibit 35.)

MS. BUTLER: The Materials Considered List for Ms. Dyer is 36.

(Document marked for identification as Russo Exhibit 36.)

MS. BUTLER: The expert report for Jefferson Criswell is 37.

(Document marked for identification as Russo Exhibit 37.)

MS. BUTLER: And the Materials Considered List is 38.

(Document marked for identification as Russo Exhibit 38.)

MS. BUTLER: The expert report for Mr. Cagiano is 39.

(Document marked for identification as Russo Exhibit 39.)

MS. BUTLER: And the Materials Considered List for Mr. Cagiano is 40.

(Document marked for identification as Russo Exhibit 40.)

MS. BUTLER: The expert report for Mr. Connard, Stephen Connard is Exhibit 41.

(Document marked for identification as Russo Exhibit 41.)

MS. BUTLER: And the Materials Considered List for Mr. Connard is 42.

(Document marked for identification as Russo Exhibit 42.)

MS. BUTLER: And then I believe we have Ms. Amsler, who's 43, and her Materials Considered List was 44.

So then we have Mr. Gleesing. The expert report is Exhibit 45.

(Document marked for identification as Russo Exhibit 45.)

MS. BUTLER: And the Materials Considered List is 46.

(Document marked for identification as Russo Exhibit 46.)

MS. BUTLER: I believe that is all of them.

BY MS. BUTLER:

Q. Here are the rest of them for your purposes.

A. Okay.

Q. So are there any of the reports that we've introduced where the methodology is different than as we have discussed with Ms. Amsler's report?

MR. ANTONUCCI: Objection.

THE WITNESS:

(Reviews document.)

The methodological approach used in all 16 of the reports is the same in that I have relied upon the economic concept of the willing buyer/willing seller.

There are differences in each of the reports. Some of which we have spoken about, which is that there are elements of the methodology that are

specific to the plaintiff and the -- also specific to the provider's location.

Additionally, there are methodologies that we have not discussed because they were not included within Ms. Amsler's past medical bills that have been at issue.

For instance, in Exhibit 17 for the Plaintiff Peterson.

BY MS. BUTLER:

Q. Okay.

A. There are durable medical equipment, past medical supplies. That is a methodology that we previously did not discuss with respect to Ms. Amsler.

The methodological approach is the same as what I have described, which is based on the willing buyer/willing seller concept. However, the methodological approach is specific to durable medical equipment.

Q. And if there are other reports with durable medical equipment, is it the same as what you just discussed with Mr. Peterson?

A. Yes --

MR. ANTONUCCI: Objection.

THE WITNESS: -- it is.

With respect to Exhibit 25 and the Plaintiff Downs, there are past medical services related to anesthesia that has been rendered in an inpatient hospital setting. That is something that we have not discussed with respect to Ms. Amsler.

The methodological approach is the same in that I am using the economic concept of the willing buyer/willing seller. However, the reimbursement for anesthesia services differs in its approach than reimbursing for other physician services, and so my methodology takes into account how the marketplace reimburses anesthesia services and how anesthesia services are paid.

Continuing. Exhibit 29, which is the report for Plaintiff Tukes, also includes anesthesia services, again, which is something we had not previously discussed.

Exhibit 30 for the Plaintiff Carter includes anesthesia services, which we had not previously discussed.

Throughout all of these reports, the methodological approach is still the same and the approach to determining the reasonable value of anesthesia services is consistent throughout all of them.

BY MS. BUTLER:

Q. Can I stop you for a minute?

A. Yeah.

Q. And with respect to all of the reports, are the materials that you considered with respect to your reports fully identified in the Materials Considered List that we've marked as exhibits with respect to each report?

MR. ANTONUCCI: Objection.

THE WITNESS:

(Reviews document.)

Yes, I believe they are.

BY MS. BUTLER:

Q. And keep going. I think you have some other differences you wanted to note.

MR. ANTONUCCI: Objection.

THE WITNESS: With respect to Exhibit 35, Plaintiff Dyer includes an analysis of anesthesia services for which I determined a reasonable value, and we had previously not spoken about anesthesia services.

Plaintiff -- sorry.

Exhibit 39 for Plaintiff Cagiano also includes an analysis of anesthesia services, which we did not previously discuss when we discussed the Plaintiff Amsler.

BY MS. BUTLER:

Q. Is your methodology --

A. And as I -- sorry.

As I sit here today after reviewing these 15 reports, those are the differences that I have identified.

Q. And these anesthesia fees, for example, in Ms. Dyer's report it's under Section 5.6.3, is your methodology the same for each of the plaintiffs who has the anesthesia analysis?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, my analysis of anesthesia services is a consistent methodology for any of the plaintiffs for which I'm analyzing anesthesia services.

BY MS. BUTLER:

Q. So for each of the 16 plaintiffs' reports, is it correct that you identified which categories are applicable and then applied the same methodology to the applicable categories?

MR. ANTONUCCI: Objection.

THE WITNESS: Marjorie Hackett-Wallace identified the services as being at issue, and I analyzed those at-issue services.

BY MS. BUTLER:

Q. And to the extent a plaintiff had that service at issue, your methodology for the plaintiffs was the same; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I applied the same methodological approach for each plaintiff that had a past medical service within one of the categories of medical

services.

BY MS. BUTLER:

Q. And with respect to your expert reports, we have reviewed now all 16 reports, not in detail, but I'm offering you the opportunity if you want to; and the Materials Considered List that was produced with respect to that report, which we also have entered into evidence; and the Supplemental Materials Considered List, which we looked at, which was produced February 20, 2026.

Are all of the opinions and methodologies with respect to your opinions contained within your December 15, 2025 expert reports?

MR. ANTONUCCI: Objection.

THE WITNESS: They are either contained in the December 15, 2025 report or as we've spoken about here today.

MS. BUTLER: Okay. If we could take five minutes?

MR. ANTONUCCI: Sure.

MS. BUTLER: Thank you.

THE VIDEOGRAPHER: The time is 3:51. We're now off the record.

(A recess was taken.)

THE VIDEOGRAPHER: This is the beginning of media unit number 6 of the video-recorded deposition of Mr. Gregory Russo. The time is 4:00 PM Eastern. We are now back on the record.

Counsel, you may proceed.

MS. BUTLER: Thank you.

BY MS. BUTLER:

Q. Mr. Russo, I only have a couple additional questions. You can pick any of your expert reports. Just tell me which one you're looking at, and I have a question for you.

A. Exhibit 21.

Q. Okay.

A. For Plaintiff Rothchild.

Q. Okay. 21 for Rothchild.

If you could go to the scope of your report?

A. Yes.

Q. The scope of your report in each of the 16 reports has three bullet points.

We've gone through that, correct?

A. Yes.

Q. And the first bullet point involves reviewing and validating the amounts billed for past medical services claimed by the plaintiff in the report of the plaintiffs' expert Marjorie Hackett-Wallace, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, it indicates that I review and validate the amounts billed.

BY MS. BUTLER:

Q. Now, you have testified that the column in your table with respect to billed charges has nothing to do with the reasonable value calculation, correct?

MR. ANTONUCCI: Objection.

THE WITNESS: The reasonable value is determined based on the services that are rendered.

The reasonable values that appear in Table 1 may include the billed charges when my calculated reasonable value that would appear in Appendix C is greater than the billed charges.

Or I have been unable to

calculate a reasonable value for the service because I didn't have enough information, like I didn't have the CPT code.

BY MS. BUTLER:

Q. What was the purpose in this bullet point 1 of validating the amounts billed for past medical services for purposes of your opinions in this litigation?

MR. ANTONUCCI: Objection.

THE WITNESS: So the purpose was that in the opinion -- sorry -- in Table 1 where I was unable to identify a reasonable value or my reasonable value was greater than charges, I would accept charges.

And so I needed to ensure that the charges that Marjorie Hackett-Wallace had included were the charges that were on the bills, and what I found is that she was -- she was wrong at times.

BY MS. BUTLER:

Q. And your work with respect to that review and validation bullet point is set forth in

your Appendices C to each of your reports; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I believe that it is.

MS. BUTLER: I have no further questions for you. Thank you.

MR. ANTONUCCI: Okay. Quick redirect.

EXAMINATION

BY MR. ANTONUCCI:

Q. Mr. Russo, thank you for your time today.

Do you have any opinion as to whether the billed charges identified in your reports were ever played -- paid by the plaintiffs?

A. No, I don't have an opinion as to whether the billed charges were paid.

Q. Do you have any opinion as to whether the billed charges identified in your reports were ever actually incurred by any plaintiff in this litigation?

A. No, I don't have an opinion on that.

MR. ANTONUCCI: Okay. That's it for me.

MS. BUTLER: I have no follow-up. Thank you for your time.

THE WITNESS: Thank you.

THE VIDEOGRAPHER: Will there be a read and sign? The witness.

MR. ANTONUCCI: We would like to read and sign, yes.

THE VIDEOGRAPHER: Okay. If there are no more questions, this will conclude today's video-recorded deposition testimony as given to us by Mr. Gregory Russo. The time is 4:04 PM Eastern and we are now off the record.

(Signature not waived, the deposition concluded at 4:04 PM.)

* * *

ERRATA SHEET

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

Page No._____Line No._____Change to:_____

_____

DECLARATION UNDER PENALTY OF PERJURY

I declare under penalty of perjury that I have read the entire transcript of my Deposition taken in the captioned matter or the same has been read to me, and the same is true and accurate, save and except for changes and/or corrections, if any, as indicated by me on the DEPOSITION ERRATA SHEET hereof, with the understanding that I offer these changes as if still under oath.

Signed on the _____ day of _____, 2026.

_____

GREGORY S. RUSSO

CERTIFICATE OF REPORTER

DISTRICT OF COLUMBIA)

I, Denise Dobner Vickery, a Registered Court Reporter and Notary Public of the District of Columbia, do hereby certify that the witness was first duly sworn by me.

I do further certify that the foregoing is a verbatim transcript of the testimony as taken stenographically by me at the time, place and on the date herein set forth, to the best of my ability.

I do further certify that I am neither a relative nor employee nor counsel of any of the parties to this action, and that I am neither a relative nor employee of such counsel, and that I am not financially interested in the outcome of this action.

Denise D. Vickery

DENISE DOBNER VICKERY, CRR,RMR
Notary Public in and for the
District of Columbia

My Commission expires: March 14, 2028

&

& 4:8

0

0 139:15 148:24
0.2 143:13 149:1 204:24
0000000016 6:22
0000000017 6:18
0000000018 6:15
0000000019 5:11
0000000020 6:3
0000000021 6:6
0000000022 6:12
0000000023 6:9
0000000024 7:5
0000000060 10:16
0000000062 10:17
0s 79:3 162:6 181:1 227:13

1

1 5:10 10:8 52:22 78:19,21 124:8,8 139:19 139:22 152:22 153:7 207:3 211:1 222:3 228:9 233:19 234:21 237:7 237:11,21 238:20 239:15 240:6,20 241:3 242:8 249:5 252:14 265:19 266:5,8,14 267:7 268:3 269:12,16 270:5 272:13 274:13 275:20 276:8 279:12 282:12 302:20 303:7,13
1,079 278:17
1,079.78. 278:19
1,578.52 276:2
1-16 158:7,11 159:9 160:1
10 6:2,5,8,11,14 6:17,20,21 36:11,11 83:18 83:21 158:19 159:14 161:13 161:15 162:11 174:13 176:21 183:9,19 236:11 250:15
10,000 36:10,11
100 257:19
108 5:13
10:10 64:1
11 6:17 161:16 161:18 162:12 163:5 176:12 177:20 261:1
1100 2:15 3:15
1101 11:11
11:19 127:7
11:32 127:12
12 6:14,20 159:15 180:16 180:19 181:3,3 181:15
127 3:6
128 5:15
12:41 189:7,11 189:12
13 5:3 6:23 191:8,10 192:13 193:7 199:15 206:7 230:20 285:24
14 7:2 165:8 171:19 208:13 208:15 209:22 214:2 231:4 263:12 308:24
14,801 236:2
14,801.91 236:1
14,801.91. 235:21
14106 132:13
15 7:7,8,12,16 7:20,24 8:5,9 8:13,19,23 9:5 9:9,15,19,23 10:5 21:11 89:21 105:23 115:8 158:2 174:6,12 175:19,22 181:3 214:4 219:17 252:21 285:17 286:4 286:23,24 287:2 298:18 300:13,17
15,543.01 235:20
150 5:17
151 5:20
15207 308:20
15th 129:20,22 178:15 207:22
16 7:9 47:1,3 106:6,8 110:8 112:21 118:14 128:18 139:22 181:2 219:21 220:3,9,12,20 221:9,10,23 223:11,23 225:10 233:7,9 240:14 242:11 242:22 244:4

244:23 245:17 246:12,21 247:2,6 251:20 252:8 253:1,23 253:24 254:1 257:1,4,24 258:2 260:13 260:22 261:4 261:19,21 262:6,11 264:20 271:4 271:12 283:11 287:5,7 294:17 299:7 300:4 301:22
160 6:2
161 6:5,8,11,14 6:17
17 7:11 27:1 42:3 162:13 287:11,13 295:8
173,761.50 172:13 173:8
177,486 174:18
18 7:13 162:12 183:8 287:15 287:18
18,763.81 272:16
180 6:20
19 7:15 79:3 167:19 168:4 168:19 287:20 287:22
19,036.12 269:6
19,063.02 236:11 237:16 269:7 272:14
19,063.02. 237:20
190 5:4
191 6:23
1981 73:5
1:42 190:2,13
1a 10:8
1s 271:4,12
1st 10:13 264:24

2

2 5:13 63:23 108:23 109:1 124:8,10 139:19,22 145:1 152:23 153:11 176:9 202:16,19 207:3 214:24 216:8 222:3 232:21 233:16 241:3,8 242:9 254:15 280:23 280:24 281:1 282:2,7
2,000 53:11
20 5:13 6:24 7:17 30:14 91:14 160:12 162:7 181:2 191:13 192:7 193:9 199:16 199:18 206:9 288:1,3 300:10
200 10:8
20005 2:16 3:16
2003 73:24
2005 74:6,10
2009 78:1
2010 73:21 78:1
2016 11:8
2017 7:4
202.616.8364 3:17
2025 6:2,5,8,11 6:20 7:8,12,16 7:20,24 8:5,9 8:13,19,23 9:5 9:9,15,19,23 10:5,12 19:23 20:3,13 21:12 23:8,18 49:2 105:23 156:1 158:2 163:22 167:19,24 168:4,19 169:17 171:7 172:10 174:6 174:12,15 175:19,22 176:3 181:21 183:9,19 186:4 219:17 226:13 285:17 286:4 286:23 300:13 300:17
2026 1:16 2:8 5:13 6:14,17 6:21,24 156:4 158:5 160:11 160:12 176:15 191:13 192:7 193:9,10 199:17,18 206:9 300:10 307:16
2028 308:24
208 7:2
21 7:19 162:9 181:4 288:5,7 301:14,17
218 9:22
219 10:2
22 7:21 156:1 158:4 162:11 176:3 288:10 288:12
227 10:13
23 7:23 162:10 162:15,17,20 162:21 288:14 288:16
24 8:2 156:4 158:5 160:11

181:4 288:19 288:21
25 8:4 89:21 158:4 181:4 288:23 289:1 296:3
26 8:6 279:9 289:4,6
26.7 216:11
264 279:11
27 1:16 2:8 8:8 11:8 193:10 289:8,10
27.2 216:12
28 8:10 289:13 289:15
28406 3:7
287 7:7,9,11,13 7:15
288 7:17,19,21 7:23 8:2,4
289 8:6,8,10,12 8:15
29 8:12 49:2 73:5 226:13 289:17,19 296:20
290 8:18,20
291 8:22
292 9:2,4,6,8,11
293 9:14,16,18 9:20 10:4
294 10:6
2:49 250:18
2:59 250:23

3

3 5:15 84:15 127:10 128:2,4 130:18 132:8 138:18 207:3 219:20 222:3 223:8 225:6,8 275:2,11 276:6 278:18 279:2 284:24 285:1
3/18/25 184:11
3/28/25 185:6
30 8:15 169:17 172:10 181:4 186:4 270:15 270:21,22,24 289:22,24 297:1
30th 176:10
31 8:18 163:22 171:6 174:15 176:14 181:2 181:21 186:2,9 290:2,4
315 136:6,8
315.28 277:19
315.28. 277:23
32 8:20 290:6,8 291:20
33 8:22 291:23 292:1
34 9:2 292:4,6
35 9:4 292:8,10 298:3
36 9:6 292:12 292:14
37 9:8 181:3 292:16,18
38 9:11 292:20 292:22
38.54 279:11
39 9:14 292:24 293:2 298:9
3:51 300:24

4

4 5:17 150:12 150:15 151:18 152:8 154:10 154:11 190:11 207:3 222:3 243:5 244:3,17 244:18 245:6 274:8
4/11/25 187:24
40 9:16 32:14 293:4,6
41 9:18 293:9 293:11
42 9:20 293:13 293:15
427 136:6
427.30 278:1
427.30. 277:4 277:19
43 9:22 218:23 219:1,8,11 224:9 234:20 251:6 293:17
43.4 216:13
44 10:2 219:4,6 283:24 285:2 285:19 293:18
45 10:4 293:20 293:22
46 10:6 293:24 294:2
47 10:8 200:18 200:20 202:5 203:16 205:24
48 10:13 227:1 227:3 234:13 269:5
4:00 301:5
4:04 305:14,17

5

5 5:20 85:20 88:7 151:6,8 152:15 176:21 207:3 222:4,5 243:10,16 245:11 250:21 254:3
5.1 245:16,17 246:2,4,8,10 247:4,9 248:17 251:10 261:23

5.1. 246:18 261:17 262:1,3
5.1.1 246:7,11 252:11
5.1.2 253:13 254:14
5.2 257:11
5.3 258:4
5.4 260:7
5.5 260:16 261:1
5.5.1 261:12
5.5.2 261:13,16 261:22
5.6 262:4
5.6.1 262:5
5.6.2 262:5
5.6.3 298:22
5.7 176:22 262:17
50 51:15,18
50,000 49:20
500,000 45:12
58,102.50 173:4

6

6 6:2 87:19 155:8,8 160:16 160:18,21 161:23 163:4,5 163:8 166:5 167:1 171:23 176:22 207:3 222:4 244:19 246:2,17 247:9 248:17 263:6 301:3
6,000 236:15
6,627.63 236:22
60 227:13
61 227:14
62 227:14
62328 132:22 276:21 277:1 277:18
63 227:16,17,20

7

7 6:5 89:7,8 90:9 111:10 112:8 156:23 160:23 161:2,4 162:8 169:12 171:23 202:17 222:4 246:2,3 246:11 251:10
75 51:20,23 52:4
78 5:10
7899780 1:23
7:23 1:4 11:15

8

8 6:8 89:21,22 91:14 111:10 130:18 132:13 135:12 157:13 161:3,6 162:9 162:23 171:4 171:23 202:17 202:18 222:4 254:24
8.9 176:23
830,976.93 234:22 235:1 240:7
830,976.93. 229:3
831,000 229:1
831,690.04 229:1 234:16
840 236:24
897 1:4 11:15

9

9 6:11 131:5,9 131:9,12 132:12 135:4,5 158:19 159:1 161:7,10 162:10 172:8 172:22 181:3 246:5 276:21
9,001.50 176:18
900 229:5,10,15
910.794.4829 3:8
93971 279:9
96 243:24
9:05 1:17 2:9 11:9
9:59 63:20

a

a1 203:16
a10 203:17
a11 203:17
a13 203:17
a14 203:17
a6 203:17
a7 203:17
ability 55:11 115:16 116:11 308:11
able 55:1 65:3 65:20 72:4 128:12 145:23
absence 130:14 131:6
absent 149:16
accept 274:1 277:21 278:12 303:15
accepted 252:3 256:20 277:22
access 107:9 180:17
accompanying 66:22 96:15
accomplish 35:4
account 249:21 296:17
accountant 77:9,14,17

accounting 40:20 41:2 169:9
accounts 204:24
accumulate 216:18
accumulating 215:15
accuracy 55:17 56:2,7,9,11
accurate 16:11 29:7 50:6,11 52:10 65:5,9 66:13 80:6 81:2 84:10 116:10 123:24 164:13 168:19 179:22 231:3 234:24 251:19 307:8
accurately 57:18 80:21 263:24
acquisition 146:20
act 15:14,22,24 16:13 17:6
action 69:21 308:14,17
actionable 53:19
actual 43:8 56:11 97:5,7
actually 12:8 27:19 75:14 97:5,23 98:2 129:22 136:12 160:12 239:21 263:18 264:6 270:11 304:22
add 26:22 246:19
added 113:23 114:7 147:15
additional 21:13,15,18 37:16,19,23 38:2,5,9,11,19 111:5 117:22 118:17 120:1 169:20,21 171:10 173:16 175:7 191:24 192:6 206:22 207:5,7,9,23,24 240:18 301:11
additionally 248:12 295:3
address 228:9
addressed 44:4 211:16,18
adjudication 134:6
adjusted 125:8
adjusting 254:15
adjustment 249:20,24 250:3 253:4
administered 260:8
administrative 74:22 75:8 76:9,12 83:11
admitted 116:17 197:22 230:3 283:4
advises 212:6
advisory 212:1 218:4
affected 207:22
afternoon 5:4 190:1
age 40:15
agencies 212:8 212:13,15,19
agency 212:5
ago 36:11,11 188:18 203:20
agree 51:14,17 51:20 52:3 55:21 60:10 103:9,11 112:19 119:18 120:5 122:15 128:14,18 165:2 168:23 195:24 205:8 219:21 220:10 238:10
agreed 50:21 52:6,17 56:5 102:9 195:1,14 195:21 237:1 281:7 282:3
agreeing 113:13
agreement 39:2 39:19 44:9 195:18
agreements 22:14,19,23,23 154:23
agrees 102:11 205:6
aha 162:16
ahead 160:22 287:8 291:3
air 18:9
align 205:4
aligned 241:19 241:23
allan 8:9,11 289:8
alleged 32:1,2 69:12 105:15 195:14
allegedly 229:14 265:3
allows 141:8 253:14
alphabetical 218:12,15

alphabetically 182:8
amassed 213:2
amend 37:6 38:17
amended 10:8 10:13 109:19 200:6,9,23 202:5 203:6,8 203:16 204:11 205:23 226:15 226:21 227:21 230:15 234:14 264:24 267:5,6
american 87:21 122:10 255:16
amount 52:22 97:5,8,23 98:2 136:11 149:2,3 164:8 172:12 173:3,7,13 174:22 188:9 196:14 197:23 213:2 237:11 259:10 268:22 269:6,10,12,12 269:15
amounts 10:9 50:6 58:3,7 97:12,13 164:17 172:1,4 172:6 205:4 221:11,15,21 225:16,20 226:11 228:10 228:17 233:22 236:6 237:23 238:3,5,11,15 238:19,22 267:9 271:4,5 271:16,18,21 272:4 281:9 282:14 283:5 302:2,9 303:7
amsler 5:16 9:23 10:3,14 128:11 129:13 131:4 132:12 138:17 218:21 218:22 219:13 224:9 226:9,13 226:16 228:12 229:17 231:10 232:1,6,14 234:13,15,20 240:7 241:2 243:10,21 244:19,21 251:6 256:4 261:3 263:3 265:1,21 267:6 267:16,21 275:16,20 284:4 293:17 295:15 296:9 298:13
amsler's 228:6 228:12,23 232:16 238:21 241:11 242:14 247:1 252:16 252:19 254:13 263:14 267:5 281:2,5,8 282:9 286:9 294:12 295:6
analyses 10:10 41:21 50:13 66:19 76:14 143:22 166:9 217:9 237:20 238:8 241:23 274:21,23 284:24
analysis 34:8 55:4,10 59:16 60:6 65:15 66:14 89:1 97:12,15 108:3 123:22 134:9 136:14 170:9 170:11 179:22 180:7 183:13 183:24 197:4 230:2 233:13 233:14 241:19 241:20 265:4 274:17 276:14 278:6 281:1 284:19 298:4 298:10,24 299:2
analytics 56:22 57:1 79:18 80:5,8,9
analyze 57:10 59:21 65:11 87:2,4 130:24 166:17 170:6 170:13 171:20 205:15 218:2 222:7
analyzed 65:19 65:22 81:4 82:24 119:10 184:11,12 240:17,23 253:17 299:14
analyzing 28:7 57:12 87:1 184:16 299:5
ancillary 249:6 251:24 253:16
andrew 68:21 68:22
anesthesia 296:5,14,18,19 296:22 297:2,8 298:4,7,11,20 298:23 299:3,5
anirban 5:14 115:20 206:10
anirban's 115:14
answer 14:11 14:18 42:3

43:21 60:23
93:7 99:5,7
110:4 121:7,14
233:4 258:24
answered 15:5
169:2 194:4
276:16 279:17
280:14 281:11
answering
15:10 216:3
236:16,18,20
272:11 280:13
anti 31:7
antonucci 3:14
5:5 12:3,4
15:15 17:17
18:5,17 19:2
19:14 20:22
21:5,17 23:12
23:19 25:7,12
25:17 26:12,18
26:21 27:6
28:19 29:11
30:18 31:13,22
32:18,24 33:10
33:18 34:2,18
34:24 35:9
36:5,13,19
37:1,7,10,24
38:21 39:3,11
40:11,21 42:1
42:8,23 43:10
43:19 44:5,15
45:4,14,22
46:6,12 48:9
49:3,14 50:7
51:2,16,22
52:7 53:1,12
53:20 54:7,22
55:8,19 56:14
58:5,17 59:5,8
59:17,24 60:8
60:15,20 61:4
61:12 62:12
63:1,12,15
64:4 65:7 66:9
66:17 67:2,7
67:16 68:2,8
68:23 71:9
72:1,11,14
73:3,8 76:22
77:10,15 79:14
81:5,22 82:15
83:7 84:8
85:11 86:5,9
87:6,12 88:1
88:20 90:16
91:5 92:2 93:5
93:19 94:4,24
95:14 97:10
98:3,10 99:2,9
99:16 100:4,19
101:15,23
102:16 103:2
103:17 104:1,8
104:16 105:8
106:22 107:18
108:18 109:17
110:19 112:3
112:16 113:9
114:9,18 115:4
115:18,23
116:13 117:3,9
117:18 118:10
118:22 119:8
119:14,20
120:7,20,23
121:20,24
122:20 123:2
123:11 125:17
126:3,13,24
129:8,18,23
130:4 133:9,19
134:11 136:13
140:18,23
141:9,16,23
142:7,14,20
143:7,20
144:12 146:3
147:19 148:21
149:18 150:5
151:24 152:9
154:5,18 160:8
162:21 164:15
165:3,12
168:11 172:2
172:19 173:10
179:9,23
182:12 183:1
183:20 184:4
184:18 185:2
185:18 186:18
187:4,12
188:14 189:2
193:22 194:16
195:16 196:6
196:21 197:7
197:14 198:6
198:16 199:9
201:1 202:11
203:18 204:14
205:17 206:3
206:18 207:19
208:9 209:4,11
209:17,24
210:12,21
211:10 212:10
214:11,18
215:4,9,17
216:2,19 217:2
217:19 220:13
220:22 221:13
221:24 222:16
223:17,24
224:15 225:18
226:17 228:2
229:6,18 230:9
230:24 231:18
233:24 235:3
236:8 237:13
238:1,13 239:1
239:17 240:2
240:10 241:14
241:21 242:15
242:19 243:13
244:6,13 245:8

245:19 246:13
247:20 248:5
249:13 250:2,9
250:15 255:9
258:15,22
259:6,13,22
260:3 261:8,14
262:9,24 264:1
264:8,12
265:14,24
266:13 267:10
267:13,19
268:10 269:14
270:1,17 271:8
271:20 272:7
272:17 273:8
273:22 274:14
275:7,13,22
276:3,10,15
278:8 279:16
279:20 280:6
280:10,14,18
281:10,18
282:5,16
283:15 284:14
284:20 285:10
285:21 286:5
290:20,24
291:5,9,13,19
294:13 296:1
297:18 298:1
299:1,11,20
300:15,21
302:6,15
303:10 304:3,8
304:11 305:1,8

anymore
180:13

anyplace 133:7

apologize 77:8
160:13 162:1
164:3 169:2
180:15,23
186:7 200:16
218:16,22
226:23 227:5
270:23

appear 167:18
181:16 279:14
281:17 302:20
302:22

appearances
3:1 4:1

appearing
278:18

appears 79:9
138:9 151:1
153:9 219:12
223:10 247:4
276:7

appendices
52:23 66:3,22
96:15 108:9
109:20 158:2
159:7,23
177:16 200:6
200:10,24
201:11 202:5
203:6,9,16,22
204:11 205:24
237:10 269:12
282:12 304:1

appendix 5:16
10:8,13 53:6
105:23 128:10
129:13 130:1
178:13 180:8
226:4,15,21
234:14 265:1
267:6,9 275:1
302:22

applicable
299:9,10

application
262:7

applied 35:10
35:17,18 36:4
36:23 113:6
205:10 240:16
261:7,10 299:9
299:21

applies 102:13
253:22,24
260:22

apply 65:1
94:20 95:24
114:16 208:5
249:20 256:11
256:12

applying 35:22
248:20

appreciate 80:3

approach
86:11 92:4
103:5 253:11
260:24 283:18
294:16 295:16
295:19 296:10
296:15 297:5,6
299:22

approached
202:23

appropriate
86:23 95:2,17
97:19 101:10
102:20 103:5
103:12 112:24
123:7,16 134:8
205:20 256:12

appropriately
122:17

april 6:20
186:4

area 31:18
122:13 243:21

areas 31:12,16
107:16 109:15
110:6 120:12

arlington 73:10

army 18:8

array 149:7,11

arrive 268:21

article 87:20,24
88:3 100:10
208:19,22

209:3 211:1 214:1,17,24 216:7 217:7
articles 79:12 255:15
articulated 98:15
articulating 101:4
articulation 98:18
arts 74:4
aside 180:12
asked 15:5 18:24 19:4 20:5 21:15 34:20,22 37:3 39:13 48:7 65:1,10,17 77:7 94:17,18 95:5,6,20,22,24 98:20 99:21 105:23 123:15 153:23 154:1 169:9 177:9 194:3,6 201:3 202:4 203:21 226:11 228:7 231:9 232:12 245:1 265:10 276:16 279:17 281:11
asking 17:16 18:22 26:23 33:16 80:4 100:23 116:15 149:21 150:8 165:19 201:21 201:24 202:8 215:24 220:24 221:4,6,8 223:6 238:17 282:23
asks 155:9
aspect 42:20 108:16 153:17 154:16
aspects 108:16 109:10 213:12
asserted 155:20
assessment 192:14,19 193:4 263:14 263:20,21 264:7,15
assign 198:9
assist 92:23 166:2 168:6 188:12
assisted 41:19 43:11 81:15,16 81:17,18 82:22 93:1 164:24 165:8 179:12 185:12
assisting 43:5 43:15 75:6 78:9 183:4
associate 74:21 75:5,11
associates 5:16 275:19,21
association 122:10 210:7,8
assume 14:2 27:22 53:16
assumed 57:17
assuming 119:6 177:22
assumption 53:22
assumptions 48:17
atlantic 5:15 275:19,20 278:15
attached 5:8 130:1
attempted 197:16
attempts 88:15
attorney 11:23 16:14 64:13 77:21 99:4,8 101:17 105:14 116:20 127:18 149:23
attorneys 15:21 61:22 88:10 99:18,21 104:11 105:18 152:6 210:18 210:20,20
attributed 194:1
attributing 194:10
attribution 108:2
audience 210:16
august 7:4 163:22 167:19 168:4,19
authored 85:17
authors 209:13
available 38:19 80:15 106:14 123:19 141:1 142:24 145:13 145:20 146:2 146:11,15 147:4 148:14 148:16 149:8 200:13 217:21
average 120:17 121:2 142:19 143:19 146:17 146:18 148:20 215:1 243:20 255:24
avoid 128:21
awards 59:4
aware 15:8 17:7 30:16,19 39:9,22 41:7,9

46:8 53:8
71:18 105:21
106:1,5 142:12
156:7,11 157:7
158:14 159:10
160:2,5 187:13
223:21 224:2
ayako 164:3
166:14 170:1
aziz 173:20

b

b 68:22
bachelor 74:4
back 18:13
20:12 24:11
49:11 54:20
64:2 75:10,20
90:11 108:8
115:14 127:13
147:23 150:17
165:21 169:3
175:20 181:6
190:14 191:1
202:1,2 204:16
206:7 228:6
250:24 261:17
261:23 262:1,1
266:5 279:12
281:8 301:6
background
56:21,23 76:20
79:18 80:5
85:8 115:15
220:6 224:4
bag 210:20
barton 4:7
base 262:21
based 10:10
16:13 27:11
38:1,15 54:6
54:13 61:9,13
87:16,22 88:11
88:12,13,14,15
95:8 96:5,7
97:15 101:9
102:4 122:5
125:12,15,23
126:2,5,6,11,16
167:17 168:20
170:19 204:10
206:15,21
223:2 225:21
249:11,14
250:1,4,6
256:14 262:14
266:7 270:6
272:21,24
273:11,15
274:3,5 276:24
277:5,6,7
278:2 295:17
302:17
bases 117:6
basis 30:13
167:9 274:9
basu 5:14
62:17 97:19
102:10 103:9
103:11 107:15
107:24 108:4
110:23 111:7
112:19,20
113:11 115:22
119:4 140:4
202:22 203:1
204:22 205:4,6
205:10 206:10
basu's 98:19
102:17 106:18
108:7,16,22
109:19 111:10
111:22 112:9
113:4,7 116:2
117:14 118:14
156:15 200:4
201:5,10,17
202:15,19
203:14,22
204:3,10 205:9
205:19
batch 286:19
bates 79:2
129:9,14,16
132:8,12
135:12 158:7
158:11 159:8
159:24 162:1,9
162:10,11,11
162:12 180:22
181:1,6,7
183:8 186:2,6
207:4 208:4
226:4 227:11
284:10 285:1
bearing 88:17
bears 79:2
beginning
63:23 127:10
190:11 213:6
250:21 301:3
behalf 12:12
13:11 153:16
154:14
believe 16:5
19:6,22 23:1
23:13 24:5
42:13,16 43:2
53:2 69:14
70:1,2,2,10,13
71:10 72:16
76:24 88:2,3
89:23 99:10
106:16 129:21
129:24 132:23
153:6 156:19
168:20 169:9
179:2 188:19
191:22 192:4,5
193:5,23
199:11 200:2
201:14 202:15
202:16 207:7
207:15 209:18
225:13 226:7
239:24 242:10

245:9 246:14 248:6,9 252:7 263:1,2,17 264:2 265:8,9 265:15,18 284:2,21 285:20 286:1,6 293:17 294:3 297:21 304:4
ben 12:11
benchmark 217:12
benefit 141:19 142:2 213:9,10
benefits 59:4 85:10
benjamin 4:7
berkeley 19:19 22:1,2,4,7,10 22:15,20 23:9 23:16 24:9,18 38:24 79:5 182:16 223:14
best 13:23 19:24 308:11
beyond 15:21 33:8 193:1 278:4
bibliography 153:3,8
big 227:6 275:1
bill 96:21 97:2 114:17 125:3 133:1,13 134:3 134:8 168:23 228:22 235:9 235:17,18 236:22 247:13 249:16 257:10
billable 83:8,14
billed 10:9 44:12 45:2,8 45:12 50:11 132:24 188:9 197:12 205:4 216:11,12 225:16,21 226:12 228:11 228:17 229:1 233:22 234:21 237:8,22 239:16,21 248:10 252:3 265:4 266:9,15 266:21 267:7 268:2 269:10 270:13 271:5 271:14,17 272:13,24 273:5,19 274:12 279:13 281:17,20,20 302:2,9,12,20 302:23 303:7 304:15,19,21
billing 10:15 49:12,17,22 50:6 51:10 52:4 55:18 56:11 57:13 59:22 61:2,10 133:7 153:13 153:14 207:5,8 207:9,23,24 221:11,15,21 228:18,19 235:12 280:4 282:15
billings 53:17 55:5 166:12 184:20 285:7
bills 21:21,21 32:4 50:12 53:23 56:17 57:18 58:3 61:14 97:1 107:22 108:3 110:9 113:16 113:18 132:6 144:3 145:14 170:9,14 198:10,20 211:5,9,13,15 221:16 222:12 233:11 235:17 237:18 238:4,6 239:8,11 240:22 248:8 260:18 263:12 263:18 266:16 266:22 267:1 268:17,18 269:17 270:7 271:7,22 272:2 273:17 275:16 281:13,16 283:1,5,9 284:16,22 285:12 295:6 303:20
birth 73:2
bit 17:12 31:20 69:9 86:1 96:9
bladder 49:21 49:22
bloodless 75:9 76:10
bloomberg 74:9
born 73:4
bottom 87:20 159:1,14 162:2 162:5 180:23 227:12
brain 213:3,4
branch 18:2,7
break 14:17,18 14:24 15:4 63:18 64:11,17 114:21,24 126:22 127:4 127:17 129:14 190:18 250:13 251:4 279:21
brg 6:2,5,8,11 6:14,17,20

24:14,17 25:1 27:21 29:4 39:5 44:13,18 45:2,8,17,18 46:2 62:1 71:6 73:10,12,20 78:3 79:4 163:15 167:6 169:16 171:5 172:9 174:14 176:13 181:16 186:3 210:7
brg's 44:9 187:21 188:5
brief 71:11
briefly 25:23 223:16,18
bring 80:16,24 95:12
bringing 95:18
broad 120:1
broader 124:7
broadest 122:8 148:13
brock 164:2 166:20 169:24 170:17 176:9 176:21
brock's 166:7
brod 68:22
broke 276:7
brother 17:15
brought 32:16 33:24 35:7 139:19
budget 188:1,4 188:6
budgeting 187:20
bullet 81:14 82:9,21 83:6 192:12 200:3 208:3,6 209:1 225:11,15 228:7 231:7,16 231:22 232:11 233:17 238:12 242:13 265:13 301:22 302:1 303:6,24
bullets 193:7 207:3,3 208:24
bunch 79:3 162:6 227:13
bundled 134:18 134:24
butler 3:5 5:3 11:24 12:1 13:3,7,9 15:20 17:21 18:6,20 19:11,16 21:1 21:8,23 23:15 24:1 25:9,14 26:1,15 27:2,8 29:3,17 31:9 31:17 32:8,21 33:6,13,22 34:14,21 35:5 35:16 36:9,16 36:21 37:2,8 37:20 38:13,23 39:8,20 40:18 40:24 42:4,11 43:1,17,22 44:7,16 45:6 45:16 46:1,9 46:14 48:16 49:9,18 50:15 51:8,19 52:2 52:12 53:7,15 54:2,16 55:3 55:15 56:8,20 58:12,24 59:6 59:14,20 60:4 60:12,18,24 61:8,16 62:20 63:8,17 64:9 64:10 65:13 66:12,23 67:4 67:9,21 68:5 68:14 69:2 71:15 72:8,12 72:20 73:6,11 77:6,13,18 78:17,22 79:16 81:9 82:6,20 83:19 85:2,14 86:6,21 87:9 87:18 88:5 89:3 91:1,10 92:11 93:8,21 94:10 95:10,21 97:21 98:7,23 99:6,12 100:1 100:8,22 101:2 101:18 102:12 102:23 103:8 103:22 104:6 104:12,17 105:20 106:24 108:6,21 109:2 109:21,24 111:8 112:6 113:1 114:2,20 114:22 115:3,5 115:21 116:7 116:21 117:5 117:12,24 118:19 119:1 119:11,17 120:3,16,21 121:4,21 122:14,23 123:6,23 125:24 126:9 126:21 127:2 127:15,16,24 128:5 129:11 129:21,24 130:5,6 133:11 134:1 135:1 136:21 140:20 141:6,14,20 142:4,11,16 143:3,15 144:8 145:4 146:6

148:9 149:12
149:24 150:10
150:16,18
151:5,9 152:4
152:14 154:9
154:20 160:14
160:19 161:3,7
161:13,16,19
162:20,24
164:19 165:7
165:13 168:16
172:7,24
173:14 179:18
180:11,20
182:21 183:6
183:22 184:9
184:22 185:4
185:24 186:24
187:7,19
188:20 189:5
190:16,17
191:5,11,14
194:7,17
195:23 196:17
197:1,10,21
198:11 199:4
199:13 200:12
200:21 201:13
202:14 204:8
204:15 205:22
206:6,20 208:2
208:12,16
209:8,14,20
210:3,15,24
211:14 212:18
214:14,21
215:5,13,21
216:6,23
217:13 218:8
219:2,7 220:15
221:3,18
222:13,19
223:20 224:3
224:16 225:24
226:22 227:4
228:5 229:11
230:4,19 231:6
231:20 234:11
236:4,13
237:14 238:9
238:16 239:9
239:23 240:5
241:1,17 242:7
242:16 243:3
244:2,10,16
245:10,23
246:16 247:24
248:15 249:18
250:7,11,16
251:2,3 255:21
258:19 259:1,7
259:17 260:1,5
261:11,18
262:16 263:5
264:4,9,21
265:17 266:3
267:2,11,17,23
269:1,21 270:3
270:19 271:11
272:3,9 273:1
273:18 274:10
274:22 275:10
275:17,24
276:5,11,22
278:13 279:18
279:22 280:1,9
280:12,16,20
280:22 281:14
282:1,10,22
283:20 284:17
285:3,15,22
286:8 287:3,8
287:14,19,23
288:4,8,13,17
288:22 289:2,7
289:11,16,20
290:1,5,9,23
291:2,7,11,15
291:21 292:2,7
292:11,15,19
292:23 293:3,7
293:12,16,23
294:3,5 295:10
297:10,22
298:14 299:6
299:16 300:2
300:19,22
301:8,9 302:10
303:5,22 304:6
305:3
buyer 86:19
88:24 101:11
102:8,18 103:4
103:12 125:11
144:19 145:8
217:23 218:2,7
244:22 249:1
256:20 294:19
295:18 296:12

c

c 5:16 11:1 53:6
105:23 128:10
129:13 130:1
180:8 302:22
304:1
cagiano 9:15
9:17 290:22
292:24 293:4
298:10
calculate 16:20
20:5,13 97:3
98:14,20
170:19 174:3
175:16 246:23
257:12 258:5
260:7,17
262:18 272:15
273:24 274:2
303:1
calculated 32:6
33:4,15 54:5,8
61:1,6 65:16
97:7 105:16
248:20 257:19
266:23 272:5

276:20 278:2
302:21
calculating
29:19 33:7
34:15 83:16
87:10 90:14
254:4
calculation
30:5 31:21
33:17 34:6
35:12 48:2,6,7
48:13 64:18
82:22 88:18
90:19 93:24
94:20,21 95:18
97:9 98:8
105:2 112:2,15
125:20 126:4,6
126:19 135:16
135:18 136:9
143:17 205:13
205:19 245:12
253:3 273:6,10
273:10,20
302:14
calculations
30:16 31:5
32:16 70:18
94:2 95:13
96:3 99:1,14
100:17 105:5
112:14 126:11
130:22 143:5
143:17 145:9
230:7 253:10
266:11
california
84:16
call 24:14
71:11,19,23
72:3 184:13
188:1,4,7
195:8
called 12:22
190:4 271:13
calls 15:17 99:4
camp 1:7 11:13
15:14,22,23
16:2,12 17:6
19:13 26:5,10
153:17 154:16
168:2 184:17
184:21 185:1
224:20 225:3
cancer 49:21
49:22
cantor 24:6,7
25:6 27:4,6,23
27:23 67:11
captioned
307:6
care 28:7 47:6
47:7,18,24
48:1 49:22
57:21,24 59:22
60:3 70:12,13
70:16,21,24
71:3 74:21
75:5,7,11,13,14
75:15 76:1,2,4
82:9 83:2
88:12,13,14
90:6,15,20
102:4,14,14
144:18 184:12
184:12,16,24
243:6
career 30:14
84:13
careers 186:22
caring 75:16
carolina 1:2
11:17 89:5,11
89:14 90:4,14
245:5 256:1,3
256:5
carries 203:8
carter 8:19,21
290:2,6 291:19
297:2
cascade 134:6
case 11:14,15
14:23 28:18
39:18,23 41:15
41:18 42:6
47:12 48:18,22
49:1,13 53:19
55:17 57:8,9
58:21 59:16,23
60:14 61:20
64:19 65:2,20
66:8,11,15,20
67:13,20,24
68:1 69:14,16
69:24 70:7,11
71:6,7 76:21
77:5 83:20
88:18 89:9,11
90:9 91:13,15
91:19 94:18
95:12 96:4,10
98:9 100:3
105:19 114:6
117:15 134:10
136:5 150:24
165:23 166:1
167:19 168:18
187:9,14,21
188:13 193:3
193:15 198:10
217:15,18
219:22 220:7
224:5,8 225:10
228:23 230:14
271:7 277:18
279:9
cases 1:10
30:21,21 32:12
32:14,15,22
33:2,14 34:4
48:2 53:13
70:15,20 82:24
89:14 90:1,3
90:12 91:7,11
91:21 94:6,17
99:15 104:20

104:22 116:24 139:10 180:4 266:16 268:11 268:21,24
cat 75:19
categories 299:9,10,24
caveat 242:23
cells 129:17
center 74:20 75:9 76:10,13 76:15
centers 84:21
cents 236:11 270:15,21
certain 55:2 67:18 75:17 121:18 225:4 242:18 280:4
certainty 283:13
certificate 308:1
certified 2:20
certify 308:5,7 308:12
chad 199:16 206:11
chains 82:10
challenged 117:1,15
challenging 117:7 177:12
change 21:20 193:14,16 208:6 244:23 244:24 245:3 306:3,5,7,9,11 306:13,15,17 306:19,21,23
changed 20:9 286:2
changes 207:17 307:9,12
characterizati... 107:4,15 108:13 140:5
charge 86:15 96:21 138:6 214:5 237:8,16 267:7 269:4,10 272:14 273:5 273:19 277:10 277:12
charged 176:9
charges 49:21 50:11 51:10 52:4 97:2 101:6,9 102:5 135:7,10,24 136:2,5,7 138:4,9,10,12 138:15,16,22 138:23 139:12 139:13 173:8 174:18 175:3 176:18 196:8 196:14,24 197:12,12 198:3 199:1 202:21,23 215:1 216:12 216:13,14 217:6,11 228:21 229:1,3 234:5,15,21 235:1,11,20,21 237:17,20,22 243:11,12,17 243:20,21 252:3 265:5,21 266:9,12,15,21 268:2,7,18,22 269:19,20 270:13 271:5 271:14,17 272:24 274:1,5 274:9,12,18,20 275:4,4,5,11,12 275:15 276:13 277:6,13,18,21 277:21,22 278:2,5,7,9,10 278:12,18 279:3,11,13,14 281:16,17,20 281:21 302:13 302:21,23 303:15,16,18 303:19 304:15 304:19,21
chart 215:16 216:9
check 51:5
checking 230:21,22,22
chose 148:10
circumstances 15:9
circumvent 237:6
cited 214:2
civil 3:12
claim 17:6 133:14 247:13 251:16 252:1
claimed 226:12 228:11 302:3
claims 252:16 252:19,20
clarification 80:3 247:8
clarified 263:18
clarify 64:16 79:20
clarity 120:1
clear 67:18 83:9 93:17 94:5 98:13,17 111:18 141:11 146:13 217:4 222:2 268:1 270:21 279:13 283:2

client 39:7 99:4 99:8
clients 48:15 78:9,16 80:17 93:1
clinic 111:14 201:6,16 202:6 202:16,22 203:2 204:19
clinical 72:24 75:15
clinically 136:24 137:19 138:2,8,13 139:3,8,17
clinician 54:24 55:10 57:23 73:1 75:24 233:10 249:6 253:16
clinician's 252:1
clipped 180:15
clja 5:11 6:3,6 6:9,12,15,18 7:5 79:3 158:11 162:6
cmo 27:1 42:3
cms 124:11
coauthors 178:18
code 96:21,23 124:24 125:1,4 125:6 132:22 132:23,24 133:3,6,13,15 133:17,18 134:2,16,23 135:3 247:12 248:2,4 249:8 251:15 252:1 276:21 277:1 277:17 279:3,8 303:4
codes 124:2,5,7 124:7,8,9,9,10 124:10,10,12 124:17,20,23 133:17,23 247:17,18,22 252:15 253:17 272:22,23 273:15,16
coding 56:16 124:6
colleague 19:7 40:6 64:6
colleagues 23:21 24:2 27:21
collected 281:21
columbia 2:22 308:2,5,22
column 132:15 132:16 133:3 135:7,10,14,23 136:1,22 137:9 138:3,5,6,10,14 138:15,22,23 139:12 237:22 271:5,13 272:6 275:4,12 276:13 278:7 278:17 279:13 281:17,20 302:12
columns 271:17
combination 278:20
come 133:1
comes 182:7
coming 114:18 115:8
comments 108:1 214:13
commercial 16:6,8 120:18 121:2
commission 148:1 212:1 218:4 308:24
common 124:6
communicati... 15:18 99:4,8
compensated 35:14
compensation 32:3 150:2
complement 40:8
complete 52:10 170:23 191:24
completely 57:19 78:5
completing 253:14
complex 34:7 80:17
comprehensive 255:12
concentrated 119:19,23 120:6,10,19 121:19
concentration 57:1 120:15 121:11 122:9 122:11
concept 36:17 86:18 101:11 102:8 103:1,4 103:13,16,20 294:19 295:18 296:12
concerned 30:10 107:3
concerning 117:17 154:15
concerns 213:24
conclude 305:12
concluded 305:17

concludes 177:23
conclusion 150:9
condition 54:15 55:2,14 72:19 136:24 137:7 137:20 138:2,8 138:14 139:3,9 139:17 224:13 232:17 233:12 241:11 242:6 281:5,8 282:9
conditions 54:1 214:8
conduct 166:8 197:3 214:22
conducted 66:19 89:2 185:7 197:4 214:3 265:4
conducting 76:14 213:21 230:5
confirm 108:9
confirmed 252:7
confused 215:19 216:5
confusing 212:12
congress 212:6
congressiona... 125:7
connard 9:19 9:21 293:8,8 293:13
connection 153:16
consider 19:8 65:10 85:1 97:12 136:19 146:7 235:23
consideration 136:11 278:16
considered 6:23 7:9,13,17 7:21 8:2,6,10 8:15,20 9:2,6 9:11,16,20 10:2,6 62:9 96:18 155:16 155:24 156:3,8 156:13,20 157:5,6 158:3 158:5 159:8,24 160:10 176:2,3 176:7 177:3 178:5,18 191:12,19 192:2,7 194:14 196:3 206:8,10 206:13 207:17 219:3,4 227:21 228:1 235:13 242:5 284:3,9 286:12 287:4 287:15,24 288:9,18 289:3 289:12,21 290:6 292:3,12 292:20 293:4 293:13,18,24 297:14,16 300:6,9
considering 196:23
considers 136:17
consistent 167:20,22 194:5 297:8 299:3
constitute 275:5
consultant 74:12,13,16
consulting 36:1 78:2,11,14 154:12,22
contacted 39:17
contain 157:10 166:3 178:21 254:1
contained 66:21 71:23 72:10 96:14 106:10 177:15 177:15 178:23 185:15,22 230:1 254:24 285:19 300:13 300:17
contains 156:1 167:2 246:21 266:15
contamination 153:18 154:16
contend 63:10
content 221:5
contention 145:5
contents 15:17 219:20 220:1,4 220:5,9,11 221:1,2,7
context 30:15 31:6,11 32:5 33:12 35:20 40:10 86:13 87:8 92:13,19 100:18 101:7 101:20 103:23 103:24 105:7 105:12 121:18 149:14 150:2 209:21,22
contexts 31:6 92:17
continue 38:9 108:9 131:12 132:19 176:4 185:5 237:3
continued 4:1 190:4,7 213:18

continues 256:8
continuing 175:21 296:20
contract 23:3 39:19 142:9
contracting 39:2
contracts 22:19 154:13,22
contribute 77:2
control 180:2
conversation 25:22 61:21,22 64:22
conversations 26:24 27:11 62:1,5 64:12 64:14 127:18
conversion 125:7,21
convert 124:18 124:20
converted 125:6
coordinating 41:19 43:3,12 84:21 184:7
coordination 43:5
copays 58:15 58:19
copies 160:20 160:21 163:2
copy 100:20,22 108:22 109:14 109:18 227:18
corporation 213:18 255:1
corps 19:1
correct 13:17 13:18 14:8 20:15,16 21:3 22:3 23:4,5 25:2,3 27:5 29:5,6 34:20 36:10,18 37:6 37:23 38:17,20 38:22 39:10,23 40:20 41:11 42:7,10,14,15 42:18,19 43:4 46:18,21 47:1 47:2,4,12,21,22 48:22 49:2 50:3 52:6 54:21,24 55:16 56:22 57:5,8 57:15,16,22 58:4,16 59:2,7 60:7 61:3 65:15,21,22 66:4 68:17,18 70:6 72:13,22 72:23 73:13,21 73:22,24 74:1 74:7,8 76:3 77:9,20 78:11 78:12 79:6,7 79:19 80:4 82:14 85:4,5 85:10,13,18,19 93:18,20 95:23 95:24 96:6,18 96:19,21,22 102:15 103:10 106:11,12,18 110:13,21 111:24 112:10 112:15,18 113:4,5,8 114:8 116:23 118:3,9,21 119:7,13 121:5 122:3 130:23 131:7,8,18,19 132:14,16 135:4,5,6,8,9 135:17,20,21 136:10 137:1,2 137:14,15,22 138:24 139:5 139:13,14,18 140:6,17,19,22 142:17 143:6 143:19 144:13 146:24 152:5 153:8 168:10 169:4,7 173:9 173:12 174:6 175:4,5 177:24 179:4,5 183:3 185:12,14,20 187:6 188:22 192:8 193:4,11 194:14,15 196:20 197:5 197:13,24 198:15 199:8 199:23 200:4,5 200:7,10 201:17 203:3,4 204:9 205:16 205:21 207:18 207:21 208:11 214:10 220:2,7 223:11,15 224:6,7,10,11 224:13,14,22 224:23 225:1,7 225:8,12,17 226:6,7,16 228:14,15 229:5,7 230:23 231:3 232:4 233:23 234:16 234:18,22,23 236:7 237:11 237:12,17,24 238:21,24 239:12,13,16 240:8 241:4,5 241:13,20 242:9 245:5 252:12,16,17 253:19,23

256:22,23 258:6,10,11,12 261:7,13,20 264:7 265:23 266:12 267:12 269:7,8,13,24 270:12,16 271:1,2,7,14,19 272:6 275:21 276:2,8 278:7 278:22,23 279:15 280:5 281:17 282:4 284:19 285:9 285:19 286:4,7 299:8,19 301:23 302:5 302:14 304:2
corrected 193:9 195:3
correcting 194:23
correction 113:6
corrections 56:3,6 84:17 307:9
correctly 29:21 140:1 231:13 232:18 234:8 253:20 257:14 265:7 279:24
corresponding 209:6 265:5
cost 44:9 59:15 59:19 125:9,22 144:18 145:17 146:20 147:8 147:10,15 148:14,15 252:18 253:1 253:15
costs 146:1,5,8 146:11,15 147:3 211:4 214:7 249:6,21 250:5 252:15 254:15
counsel 11:21 13:1 16:16 39:17 62:2 64:3 66:8 127:14 190:15 251:1 301:7 308:13,15
count 140:16 141:4
counted 165:8 171:19 231:4
counting 246:6
county 91:18
couple 301:10
course 20:10 84:13 191:18 218:14 230:20
court 1:1 11:16 12:18 13:20 14:13 24:22 90:4 91:18 308:4
courts 89:5 90:14
cover 79:2 162:4,8,9,10,11 162:12 169:13
covered 203:13 265:9,16,18
cpa 77:8,12,14
cpt 96:20,23 124:2,7,9 132:21,24 133:3,6,13,15 133:17,17,18 133:23 134:2 135:2 247:12 247:22 248:3 249:8 251:15 252:1,15 253:17 272:22 273:15 276:21 276:24 277:17 279:3,8 303:3
created 212:24 213:11,13 231:1
credible 97:20
criswell 9:10,13 291:1 292:16
critical 44:20 169:10
cross 91:20
crr 1:24 308:21
cs 178:13
current 16:17 20:13 32:17 34:1 35:8,15 46:24 79:8,9 94:3,20 95:13 96:23 124:9 142:9 153:3,8 173:8,13 174:18 175:2 176:18 214:7 217:22 247:12
currently 17:9 78:9
curriculum 5:10 79:5 153:3
cut 162:2 180:23 186:7
cv 1:4 11:15 57:2 74:19 79:8,9 80:1 85:3,8 87:19 88:7 89:24 91:16 153:7,8 208:21,23
cvs 236:10,22 237:16 259:18 259:19 269:3 269:23 270:11 272:13

d

d 11:1 68:22 212:22
daily 30:13 167:9
damage 105:2 192:18 193:3 263:14,19,21 264:6,15
damages 98:8 98:14,18 105:15,15 149:14 192:14
data 55:18 56:11,12,22 57:1,13 80:11 80:16 81:3,7 82:24 87:16 123:17 125:12 147:1 148:4 179:20 215:15 216:10,18 217:1,5,9,21 250:4 255:13 268:15
database 148:14
date 11:7 45:2 45:8,12 49:5 73:2 95:8 96:5 96:7 125:15,18 125:23 126:2,7 126:12,17,20 132:16,17 167:2 174:9 181:8 183:9 223:3 228:20 249:15 250:1,6 253:8 255:12 257:8 308:10
dated 49:1 158:2 174:11 175:19 206:8 219:16 286:23
dates 219:15 222:15
david 7:24 8:3 8:5,7 288:14 288:23 289:3
day 20:13 30:6 307:15
days 128:22,22
dc 2:16 3:16 11:12 73:19
deal 34:10
dealt 35:21
december 6:11 7:8,12,16,20,24 8:5,9,13,19,23 9:5,9,15,19,23 10:5 21:11,11 49:8 105:23 129:20,22 156:1 158:2,4 174:6,12,15 175:19,22 176:3,10 178:15 207:22 219:17 285:17 286:4,23 300:13,17
decipher 186:6
declaration 307:1
declare 307:4
deductible 140:16 141:4
defaulted 97:2
defendant 91:22 154:14
defendants 91:23 92:9
defense 69:20 92:1 210:10,19 213:2,12
define 60:17,19 122:22,24 146:10 165:5
defined 20:9 124:11 125:12 249:8 253:17
defining 182:14
definition 88:15
degree 74:3 283:12
degrees 116:4,9
delivered 136:18 144:4,5
delivering 253:16
denise 1:24 2:19 308:3,21
department 2:14 3:11 4:6 4:10 61:23 62:2 69:6,11 69:20 76:15 84:16 169:6,11 213:1 228:8
depend 95:3,19 253:5
dependent 126:19
depending 222:23
depends 36:7 146:4,9
deponent 11:19
deposed 13:17 70:4
deposition 1:13 2:11 5:7,17,22 11:10,12 13:9 13:10 15:2 32:13 63:24 64:13 104:22 127:11,21 150:22 151:3 151:16 152:17 177:14,18 178:9,11 181:11 188:13 190:12,19 191:1,2,3,18

202:10 208:20 250:22 301:4 305:13,17 307:6,10
depositions 14:22
derive 277:17
describe 80:21
described 26:3 171:16 173:24 175:11 231:22 240:14 241:7 254:12 295:17
describes 79:17 112:24
description 167:2
detail 17:16 21:10 57:3 89:20 223:6 286:10,14 300:5
detailed 248:19
details 23:23 26:4 44:23
determination 90:21 116:16 146:13 148:7 149:22
determinations 54:6,19 72:22 72:24 137:22
determine 35:2 55:11 65:11 70:22 82:24 86:19 134:7 136:15 166:9 196:11 198:9 198:19 205:20 231:9 232:13 247:11 252:2 252:18 265:4 278:21
determined 72:18 91:7 125:15 134:20 137:6 138:1 231:23 232:5 240:7 241:10 252:15 269:18 281:3,4 298:5 302:17
determining 86:22 103:5,13 123:8 134:14 252:24 297:7
developed 183:13
developing 225:4
development 224:21
diamond 171:11,13 176:23
diane 7:20,22 288:5,9
differ 222:9,14 222:18 253:3 261:4 262:14
difference 53:9 93:10 196:8 204:7 223:22 224:2 229:4 244:9,12 245:4 269:4 290:12
differences 204:21 244:15 245:17 246:12 253:8,9 294:21 297:24 298:18
different 29:24 30:21 34:11 139:12,15 143:1 145:22 145:22 146:11 166:19,21,22 166:22 171:16 173:24 186:22 197:3 203:23 203:23 213:8 213:12 220:16 220:20 221:9 221:10,11,15 221:16,17 222:10 237:8 242:12 259:8 269:10,23 270:7 286:16 294:11
differential 107:24
differently 234:2
differs 186:15 244:5 296:14
digit 132:23
directed 114:13
directing 182:5 182:6
direction 25:4 41:20 42:17,22 166:1,8,16 170:5,23 171:17,20 174:3 175:16 178:22 179:6 179:11 182:20 182:23 183:5 183:18 184:6 185:13 187:16
directly 280:13
director 24:8 182:1 186:11
directors 182:15
disability 59:3 85:9
disagree 106:20 107:1 108:10 118:12 118:18 140:7,9 193:21 194:19 199:2,12

202:22 203:1 203:15
disagreed 108:4,17 109:11 194:12 195:7 204:3
disagreeing 62:22 107:17 126:10,15 206:2
disagreement 30:22 107:2,14 107:20 109:16 110:6,24 111:2 118:21,24 196:4 199:6 201:4 203:8,13 204:11
disagreements 110:10,14 117:16,20,23 118:9 119:4,5 140:3 204:20
discount 34:10 107:5,7,11,12 107:16 108:13 141:1
discounted 142:18 148:20
discounting 35:13
discounts 107:10,10 142:22,24
148:16 149:7
discrepancies 111:6,21 201:15 282:11
discrepancy 52:21 111:11 112:8,12 229:16 270:16 270:20,24
discuss 100:16 189:9 190:19 190:23 295:14 298:12
discussed 25:23 67:10 68:15 93:23 119:3 186:16 195:12 201:14,18 202:9 206:1,24 245:4 258:9,12 284:19 290:13 294:11 295:4 295:23 296:8 296:24 297:3 298:12
discussing 64:20 67:14 219:14
discussion 26:3 191:3 216:8
disease 220:19 224:21 225:5
diseases 221:10
dispute 164:9 164:20 165:10 171:24 172:4 271:6,18
disputes 92:20
disputing 238:23
distinguish 19:18
district 1:1,2 2:22 11:16,17 308:2,5,22
division 1:3 3:12 11:7,18
divulge 15:19
divulging 16:16
dobner 1:24 2:20 308:3,21
doctors 75:6,17 75:22
document 1:9 78:20,23,24 108:24 128:3 129:10 132:5,5 132:7 135:13 150:14,19,20 151:7,10,12 156:24 157:16 158:20 159:16 160:17 161:1,5 161:9,14,17 162:3,4 163:12 163:14,15,18 164:18 180:18
181:5 191:9 200:19 208:14 208:17 209:10 209:13 218:24 219:5,9 227:2 227:8,9 235:5 235:13 245:21 284:6 287:1,6 287:12,17,21 288:2,6,11,15 288:20,24 289:5,9,14,18 289:23 290:3,7 291:24 292:5,9 292:13,17,21 293:1,5,10,14 293:21 294:1 294:15 297:20
documents 5:19,23 62:23 106:15 128:19 138:19 150:23 151:17 152:8 152:18 153:14 154:22 155:2,5 155:10 156:21 157:8 158:6 159:9 160:6 180:24 228:18
doing 14:11 23:24 25:16,20 26:10 41:20 47:21 76:11 83:12 95:4

131:14 148:8 166:22 176:11 177:4
doj 45:21 46:4
dollar 195:6 196:5,9,14 204:12
dollars 10:12 32:17 35:15 94:3 95:13,19
door 272:6
double 230:22
downs 8:5,7 288:23 289:3 296:4
dr 6:21 28:2,4,6 28:17 29:4,9 29:13 39:21 40:5,19 41:8 41:14,18,21 42:7,12,17 43:3 54:5,5,13 54:14,17,18 55:7 62:4,17 63:6,7 67:10 68:11,12 71:11 71:12,20 72:6 72:6,10,10 85:17 97:19 98:19 102:10 102:17 103:9 103:11 106:18 107:15,24 108:4,7,16,22 109:19 110:23 111:7,7,10,22 112:9,19,20 113:4,7,11 115:14,20,22 116:2 117:14 118:14 119:4 137:5,6,17,18 137:18,23,23 137:24,24 139:2,2,7,7,15 139:16 140:4 156:15,16,16 168:6,13,14 170:21,21 171:2,3 182:19 183:4 184:6 185:20 186:20 187:16 194:2,2 194:10 200:4 201:5,10,17 202:15,19,22 203:1,22 204:3 204:10,22 205:4,6,9,10,19 232:17 233:2,6 233:8,8,15,15 241:10,18,19 242:2,2,17,18 243:2,2 281:4 281:7 282:3,8
drafting 46:11 179:12
drafts 185:21
drive 3:6 145:21
drives 223:3
drop 226:2
drug 259:11
drugs 259:15 260:9
dubravka 24:4 26:17,20 67:11 68:17
due 173:4 174:21 236:12
duly 12:23 190:5 308:6
duplication 51:1
duplicative 21:21 208:1
durable 295:12 295:20,22
duties 75:3
dyer 9:5,7 290:24 292:8 292:12 298:3
dyer's 298:21

e

e 11:1,1 13:16 13:16 161:11 164:4 219:13
earlier 123:15 167:23 168:5,8 168:22,24 194:6,21 201:3 202:24 204:24 208:20
easier 14:13
easily 177:7
eastern 1:2,17 2:9 11:9,17 64:1 127:12 190:13 250:23 301:5 305:15
economic 86:18 294:18 296:11
economics 40:20 41:2
economist 32:23 41:5
edgar 7:12,14
edited 179:15
education 115:16
edward 287:11
effect 64:24 133:24
effectiveness 59:15,19,21 60:3,14,17,19
either 35:6 54:4 55:6 67:23 84:7 96:17 186:15 207:24 217:5 233:8 243:1 300:16
elements 120:9 126:18 213:16

213:17 220:8 220:10 253:3 294:24
eli 173:20
emergency 75:6,11
employed 153:15
employee 308:13,15
engagement 22:14,15,23 39:1,6,10,14 154:23
engagements 81:1,3
engaging 23:3
ensure 43:12 50:9 75:18 178:23 185:21 214:5 231:2 303:17
ensured 179:16
ensuring 76:14 177:6
enter 39:6 167:10
entered 300:8
entire 171:18 235:24 307:5
entirety 153:12
entities 84:12 84:24
entity 78:6 154:14
entries 175:20 175:22
entry 168:3 183:24 184:10 187:24
environmental 3:13
equals 182:10 182:14
equation 217:12
equipment 295:12,20,22
errata 306:1 307:11
error 50:23 51:1,12 52:21 229:21 230:7 230:13 268:14
errors 50:24 52:19 194:21 194:23 195:2,3 195:14,19 197:20,23 198:1,3 199:8 229:2,9,13 230:2 266:20 283:3 285:13
esq 3:5,14 4:5,7 4:9
essentially 182:4
established 153:7
ethan 170:1,3
evaluate 60:13 170:13 198:8 205:10,19
evaluated 116:2 137:18 198:3
evaluates 136:2
event 114:6
evidence 300:8
evidences 145:7
exact 174:8 212:17
exactly 80:8 88:21 231:21 241:3
examination 5:2 12:22 13:5 190:4,7 304:10
examinations 75:18
examined 12:23 190:5
example 18:15 22:13 23:3 47:5 112:8 113:4 114:5 132:11 138:17 138:20 141:7 166:4 172:16 197:3 214:23 216:8 226:9 234:12 237:15 243:10 259:2 269:2,23 270:10,11 275:18 278:14 298:21
examples 85:6
excel 105:24 106:3,7,8,15 128:7,19 130:3 138:19 227:21 227:24 228:4
excels 128:23 158:12 227:23
except 156:14 277:15 307:9
excluded 91:2 131:2
excludes 240:18
excuse 26:22
exhibit 5:10,13 5:15,17,20 6:2 6:5,8,11,14,17 6:20,23 7:2,7,9 7:11,13,15,17 7:19,21,23 8:2 8:4,6,8,10,12 8:15,18,20,22 9:2,4,6,8,11,14 9:16,18,20,22 10:2,4,6,8,13 78:19,21

108:23 109:1
127:3 128:2,4
130:18 132:8
138:18 150:12
150:15 151:6,8
151:18 152:8
152:15 153:7
156:10 160:16
160:18,21,23
161:2,6,10,15
161:18,23
162:8,19,23
163:4,5,8
166:5 167:1
169:12 171:4
172:8,22
174:13 176:12
177:20 180:16
180:19 181:15
191:8,10
192:13 193:7
199:15 200:18
200:20 202:5
202:13,19
203:16 205:24
206:7 208:13
208:15 209:22
214:2 218:23
219:1,4,6,8,11
224:9 227:1,3
234:13,20
251:6 269:5,5
274:24 275:2
275:11 276:6
278:18 279:2
283:24,24
284:24 285:1,2
285:19,24
286:24 287:2,5
287:7,11,13,15
287:18,20,22
288:1,3,5,7,10
288:12,14,16
288:19,21,23
289:1,4,6,8,10
289:13,15,17
289:19,22,24
290:2,4,8
291:18,20,23
292:1,4,6,10,14
292:18,22
293:2,6,9,11,15
293:20,22
294:2 295:8
296:3,20 297:1
298:3,9 301:14
exhibits 5:7
109:23 171:23
297:17
exist 155:5
existence 155:2
existing 39:9
exists 39:15
expand 20:20
31:19 213:19
expanded
18:19 19:5
213:15
expanding 21:3
21:7
expect 229:20
expected 52:9
expedited
177:17
expenses 16:21
20:6,14 29:20
34:16 35:8
56:13 58:14,23
59:2 63:14
70:8,10 103:1
149:14 238:24
239:4,5,15
246:24
experience
31:20 40:14
70:16 76:19
77:1 81:11
85:9 211:16
223:15
experiences
186:21,22
expert 1:13
2:11 5:13 7:7
7:11,15,19,23
8:4,8,12,18,22
9:4,8,14,18,22
10:4,11,16
17:1 67:12,19
69:23 92:5
99:20 100:2
116:17 117:1
155:10 193:8
193:10 199:16
199:17,17
206:10,10,11
206:13 217:14
217:18 225:22
226:3 227:12
228:12 229:20
230:6,12,17
287:19 288:4
288:13,22
289:7,16 290:1
291:22 292:7
292:15,23
293:7,20 300:3
300:13 301:12
302:4
expertise 44:1
186:15,15,17
186:21
experts 26:24
67:23 71:7,16
117:2,8 155:11
expires 308:24
explain 17:12
129:2 135:22
138:5 170:1,3
280:24
explained
82:14
express 94:2
117:13 119:5
141:15,18,22
142:1,5 206:23

expressed 28:17 43:24 145:8 207:17 208:7
expressing 33:9 44:3 198:12,18 203:10
extensive 286:10
extent 15:16 26:7,23 37:15 38:8 56:6 88:22 96:24 99:3 113:17,21 114:10,13 117:22 134:16 144:9 155:15 168:22 198:22 199:5 217:20 222:9 235:6,7 247:3 254:1,10 257:3 258:1 260:12,21 261:4 262:12 270:7 273:23 274:2 281:15 299:17
extra 162:15 163:1 180:6
eye 236:24

f

f 3:5
facilities 82:11
fact 91:9 105:19 113:3 191:20 192:17 199:19 229:23 239:15 263:21 274:20
factor 125:7,21 249:20 250:1,4
factors 253:4
fair 14:5,14,20 80:7,23 82:17
fairly 196:5
fall 49:7
familiar 16:2 67:13,22 68:4 68:6,11,13 141:21
family 17:5,9 18:15,23 19:4
fancher 7:24 8:3 288:14,18
far 110:11 116:9 119:3 130:8 132:8 138:21 147:10 171:22 204:16 204:18
father 17:14,18 17:19 18:8,9
fault 160:13
fazio 171:11,12 171:13
february 1:16 2:8 6:17,21,24 11:8 156:4 158:5 160:11 160:12 177:23 191:13 192:7 206:9 300:10
fed 112:13
federal 84:14 147:24 212:5 213:6 255:14
feel 33:20 153:12
fees 255:24 298:20
felt 35:3
field 132:21
figure 135:11 214:23
file 131:13 177:11
filed 17:5 37:18 139:23
files 106:7,8 128:8 177:9 178:8 180:8
fill 140:14
filling 140:13
final 179:13 185:20 283:10
finance 56:24 283:22
financial 76:14 149:16
financially 308:16
find 50:16 51:12 96:20 113:3 117:22 129:14 274:24
finder 113:3
fine 15:5 63:17 114:20
finish 233:4
finished 157:1 157:15 158:22 216:3
firm 78:2 83:12
first 19:20 20:3 23:6 68:21 80:13 81:15 83:10 94:6 124:5 129:2 130:7,18 132:23 133:8 133:18,21,22 153:2 155:19 161:21,23 163:18,21 168:3 181:14 182:8 192:11 192:12 193:7 211:2 218:13 219:19 225:14 226:15,20 227:20 228:7 233:17 234:14 234:17 238:12

246:3 249:5 250:5 254:23 263:11 267:5,6 302:1 308:6
fit 99:23 283:17
five 250:13 300:20
fluctuate 258:14,17,20 259:4,20,24
focus 80:22,24 120:4 149:3
focused 218:5 242:23
focuses 80:14
focusing 203:5
folder 131:14 177:11,15
folks 213:9
follow 305:4
following 158:1 228:9
follows 12:24 190:6
footnote 111:10 112:8 201:16 202:17 226:2
force 18:9
foregoing 155:23 308:8
forget 68:21
form 113:10 149:19 150:5 152:9 165:22 263:14,20 264:7,15
format 163:13
forms 192:14 192:19 193:4 263:21
formula 112:15 113:7
formulas 96:12 105:24 106:4 106:11,13 129:19 158:12 178:13
forth 113:8 119:7 286:3 303:24 308:10
found 50:13,22 132:13 133:6 177:12 195:15 214:4 229:2,16 230:6 237:18 268:13 303:20
foundation 103:18 104:9 113:10 149:19 150:6 152:1,10 154:6
founding 213:15
four 89:24 90:2 91:13
fourth 211:20
framework 124:1
fraud 57:4,14 92:24
free 153:12
friday 1:16 2:8 11:8
friedman 173:20
friend 19:8
friends 17:4,8 18:16,19,23 19:5
front 6:22 63:3 118:7 163:9 172:18
frontier 84:20
full 13:12 191:23
fully 297:15
function 214:16
further 190:6 248:19 304:6 308:7,12
future 34:5 35:14 46:20 47:6,18 48:1 69:14 70:10,22 83:1 87:21 90:24 102:13 102:22 211:4

g

g 11:1
gain 72:2
gained 71:22 76:19
general 27:12 39:16 123:24 151:15 152:22 221:4
generally 50:24 79:17 80:5 92:12 112:18 120:18 146:22 148:19 167:5 172:17,20 219:21 221:23 265:19
generated 177:23
genevieve 173:20
geographic 120:12 125:8 125:22 143:2 145:11,16 148:17 149:9 249:17 253:4
geographically 125:8
geographies 122:7
geography 125:10 223:3 258:18
georgia 236:24 256:9,10

getting 19:20 44:21 114:3 127:2 169:11 227:23 279:19
gio 191:1
giovanni 3:14 12:3 15:3
giovanni.ant... 3:18
gist 86:7 87:24
give 110:1 131:13 160:20 160:21,23 286:20 290:10
given 40:15 66:7 132:22 136:11 149:8 154:8,8 285:13 305:13
glad 15:2 109:5
gleesing 10:5,7 293:19
go 30:12 49:11 54:20 75:10 81:14 89:19 108:8 109:3 129:2 152:23 158:24 159:9 159:13 160:22 165:15 181:23 184:10 189:8 191:1 223:8 226:23 252:11 259:2,5,18 264:22 275:3 280:23 281:8 286:13 287:8 290:14,18 291:3 301:18
goes 82:9 134:7 181:2 220:5 226:5 246:5 284:4
going 13:20 14:2 18:13 19:18 26:21 42:2 43:20 46:18 63:20 78:17 80:12 81:10,10 82:7 85:15 108:21 109:8,22 115:1 115:6,14 126:21 127:24 128:22 130:7 130:18 136:22 138:3 150:10 151:5 153:11 154:10 155:7 156:22 157:13 157:18 160:15 160:20,22 164:1,23 166:2 171:4 173:15 175:6 180:12 180:14 186:1 189:4 191:7 193:6 200:17 206:7 207:2 208:12 211:19 213:7 218:8,9 218:10,11,13 218:18,20 226:23 228:6 245:11,16 247:1 248:16 252:22 254:14 257:11 260:6 260:16 279:12 280:20 286:13 286:18,20 290:21 297:23
gold 255:20
golkow 11:6
gong 226:24
good 11:24 13:8,14 15:1 81:24 88:8 107:10 114:23 115:12 148:2
goodrx 107:3,6 107:7,15 108:12 118:2 140:5,5,10,22 141:1,8,11 142:17,21 143:4,5,9,9,13 143:24 144:7 144:10,24 145:3,6 148:11 148:12,13,19 148:24 149:6,6 195:11 204:18 204:23 258:9 258:11,13 259:10,11,12 259:15,16,19 259:19 260:2
gosh 161:21
government 28:8 84:14 213:6 255:14
graduate 74:14 74:24 75:2 213:19,20
graduated 73:23 74:6,10
grandfather 18:10
great 14:11
greater 97:6,13 97:24 240:23 277:21 302:23 303:15
greg 5:10 216:2
gregory 1:14 2:12 5:2,19,24 6:24 7:7,10,11 7:14,15,18,19 7:22,23 8:3,4,7 8:8,11,12,16,18 8:21,22 9:3,4,7 9:8,12,14,17,18 9:21,22 10:3,4 10:7 11:20 12:21 13:15

63:24 127:11 152:18 185:7 188:1 190:3,12 191:13 250:22 301:4 305:14 307:19
group 3:3 12:2 12:13 19:19 22:1,2,5,7,20 23:10,17 24:9 24:18 39:1 79:5 83:20 145:17 182:16 214:4 223:15
group's 22:11 22:15
groupings 82:14
guess 43:8 201:15 211:19 256:17
guessing 290:15
guidance 98:13

h

hackett 10:16 17:2 48:21 49:6,11,20 50:2,10,20 51:11 52:5 53:10,24 54:4 54:11,18 55:6 55:23 56:4,10 62:15,24 63:10 66:4 98:17 111:23 114:11 130:13,16,21 131:11 156:17 170:10,20 171:1 192:23 193:2,9,24 195:7 196:1,5 196:10,19 197:2,9,11 198:14,23 199:7,12 206:12,14 225:23 226:14 226:19 227:12 227:22 228:1 228:13,24 229:9,13,24 231:12 232:3,8 232:15 233:20 234:4,14 235:2 235:11,15,19 235:23 236:12 237:1,9,19 238:7 239:7,12 241:10,20 242:4 253:18 263:8,13,19,22 264:16,18 265:2,22 266:10,18 267:8,18 268:8 268:14,19,23 269:5,11,17 270:8,12,14 271:23 274:17 279:14 280:3 281:3,23 282:13,19,24 283:6,8 285:14 299:13 302:5 303:18
half 82:2,3,13 82:13,18,19 217:11
hand 78:18 108:23 127:24 150:11 151:5 160:15 180:14 191:7 200:16 208:12 218:11 218:13 227:1 284:1 287:9
handing 75:21 180:24
happen 234:9
happened 88:23 188:18 218:17
harm 149:17
harnessing 80:15
harvard 255:18
hasan 54:14,18 55:7 63:7 68:12 71:12,20 72:6 137:6,18 137:18,23,24 139:2,7,16 170:21 171:3 194:2,10 233:8 233:15 242:2 242:17 243:2
hasan's 54:5 72:10 241:19
hassan 175:8 175:15
hcpc 124:5,8,8 124:12,24 125:1,4,6 247:16,18 248:1,11
hcpcs 248:14
head 267:21
headings 220:6
health 41:12 74:6,9 79:18 80:5,8,9 81:15 81:17,18,21 82:3 84:20,22 99:19 121:16 122:11 243:6 248:7 262:19 263:4
healthcare 30:7 30:7,9 46:20 47:6 56:23 74:16 77:3 78:9,16 80:10 82:23 83:17 84:17 86:13

87:21 97:6,24 119:18,22,23 120:6,9 122:18 123:5,9 124:6 146:12 212:6 213:16,18,23 256:13,19 277:9 283:22 283:22
heard 11:15 26:6 290:12
hearing 28:1
heathcock 3:21 11:5
held 2:12 11:10 74:15 79:10,12 79:21
help 161:20
helped 165:22 187:2
helpful 274:19
helping 43:3 170:18 178:8
henry 28:2,4,17 29:1 39:21 40:5,12 43:24 44:4 62:4 67:10 182:1
hereof 307:11
herfindahl 120:13
hesse 170:3,17
hesse's 170:2
hhi 120:13 121:5,6,9
hierarchy 165:16
high 79:22,23 120:14,14 222:4
higher 147:9 270:13 279:2
highly 119:19 119:23 120:6 120:10,18 121:19 213:20
hire 92:6
hirschman 120:13
history 90:1 92:8,8
hold 41:1,4 114:1,15
holds 40:19,23
home 248:7 262:19 263:3
honestly 15:11
hopefully 128:17
hoping 128:24
hopkins 74:5,9
hospital 82:10 91:20 114:6 248:13 260:18 262:12 296:7
hospitalization 114:12
hospitals 82:11 214:5 215:2 216:11
hour 14:24 63:16 114:19 115:9 176:21 189:4 250:10
hours 83:9 164:7 167:2 176:9,21,22,22 176:23 244:1
howard 8:9,11 289:8,12
huh 14:12,12 133:5 276:23 291:11
hundreds 32:12

i

idea 100:2 104:13
identification 17:1 78:21 107:22 109:1 113:16 128:4 147:3 150:15 151:8 160:18 161:2,6,10,15 161:18 162:3 180:19,21 191:10 200:20 202:20 208:15 219:1,6 227:3
287:2,7,13,18 287:22 288:3,7 288:12,16,21 289:1,6,10,15 289:19,24 290:4,8 292:1 292:6,10,14,18 292:22 293:2,6 293:11,15,22 294:2
identified 16:21,23 20:7 49:20 50:10 51:11 52:5,18 52:20,24 53:3 53:4,24 54:10 54:14 72:4 89:7 90:4,12 125:5 126:6 138:7,13 139:2 139:8 145:15 160:4 166:1 169:22 178:17 192:8 194:13 195:2,19 196:2 198:20 199:2 205:2 208:21 228:19 229:3 230:12,13,16 232:7,16 234:15,21 235:2,10,11,20 237:2 238:4 239:11,15,18

241:9 242:2,5 242:13 247:11 263:8,13,19 265:6 267:1,8 268:8,23 269:18 270:14 271:23 280:3 282:8,20 297:15 298:19 299:8,13 304:15,21
identifies 114:11 116:5 125:1 164:2
identify 11:22 12:9 28:8 72:17 87:15 89:17 97:17 101:6 139:16 143:10 163:19 181:8 234:5 239:7 249:5 253:15 256:1 256:13 265:2 268:17 275:3 277:20 303:13
identifying 124:1,13 131:22 202:23 230:18 243:19
ignore 163:9
ii 213:1,3,4
illinois 91:17
illness 53:19 221:21
impact 38:12 111:24 112:1 112:14 278:5 278:10
important 87:2 130:13,14 131:7
inaccurate 55:23 240:8
inappropriate 86:14 87:4,15 94:2,20 95:2 95:12,17 101:8 102:6 205:21 274:8 277:13
include 59:3,12 109:19 114:14 144:7 166:11 170:8 175:3 179:24 203:22 211:4,12 220:4 256:3 302:20
included 18:21 47:7 50:12 56:17 83:1 84:14 85:6 89:1 90:18 113:19,20,22 130:12,15,21 131:10 134:22 144:2 145:13 173:8,12
222:11,23,24 223:2 230:7 231:4,11 232:2 232:15 233:15 235:12 237:19 238:5,7 239:19 240:19 247:2 248:3 251:16 252:20 254:6 254:10,11 256:5 257:4 258:2 260:13 261:5,23 262:13 268:19 270:5 271:22 273:16 274:21 274:23 285:2 295:5 303:19
includes 56:24 87:3 89:24 240:18 274:18 296:22 297:2 298:3,10
including 166:6 213:17 237:22 274:16
inclusion 223:4
inclusive 123:20 246:8 262:5
incorporated 144:9 170:24
incorrect 108:2 167:14 205:21
243:15
incredible 213:2
incredibly 213:5
incur 249:7
incurred 31:3 55:13 238:23 239:4 243:12 243:18 253:15 304:22
independent 15:23 92:5 99:19 116:19 212:5,23 213:10,13,21
independently 116:3 172:5 180:4
index 5:1 120:13 125:9 125:22
indicate 133:16 137:3,4,5 145:20 196:23 221:7 225:15 226:2,10 247:9
indicated 20:4 23:6 26:14 27:18 46:22 55:22 74:19 88:7 102:19 106:17 108:5 116:6,8 118:7

123:14 134:13
140:2,4 156:15
171:19 172:1
172:18 183:3
197:18 199:8
200:14 202:24
203:19,20
204:23 207:12
213:22 215:16
217:6 237:11
254:3 268:2
273:3 281:23
286:1 307:10
indicates
130:15 131:9
134:17 228:24
233:10 235:19
255:23 274:7
302:8
indicating
207:4 214:3
243:17
indication
202:19
indicative
120:14 132:17
132:21
indicator
134:17
individual
29:10 31:3
33:3,15,24
141:11 147:5,8
147:16 148:16
149:8 166:2
175:20 225:4
242:24
individuals
24:14 25:1
30:8 67:12,15
69:1,4 107:8,9
138:1 164:2,24
165:24 166:6
169:20,22
170:16,22
171:17,19
173:21 177:4
178:16,21
179:3,5,8,11
180:2 213:5,7
213:11 231:2,5
255:17
industry 74:16
102:9 255:20
283:18,19,21
inflated 125:9
inflation 35:11
35:18,18,22
36:3,23 96:1
205:10,12
inform 105:18
information
37:16,19,23
38:2,6 39:13
55:24 61:2,10
70:18,19,21
71:22 72:3,9
80:15 107:8
123:19 139:21
146:14,24
148:14 151:19
151:22,23
152:3,6,12,13
153:23 154:2,3
156:2 158:1
164:10,21
167:14 171:1
194:19 216:1
221:20,22
223:19 239:20
240:4 243:1
264:6,14 303:3
informative
125:19
informed 80:11
initial 19:4
52:16 55:24
56:1 194:21
195:15 286:19
injured 149:15
injuries 31:3,19
32:1,2 49:13
83:17
injury 7:3
69:12 82:24
85:22 92:15
100:13 101:8
101:12 102:3
104:5 211:3,12
211:16
inmates 84:18
inpatient
124:16 144:1
243:22 260:18
261:5 296:6
insights 80:17
instance 102:10
120:11 121:15
145:6 201:9
226:8 235:17
269:9 276:20
295:8
instances 50:19
50:22 105:4
147:7 205:3
242:8 268:13
institute 236:24
instruct 42:2
43:20
insurance 84:7
120:12 121:16
122:3,5,12
140:13,15,22
141:2,5,12
insurer 81:16
81:17
insurers 81:18
81:19,21 82:3
82:19 85:1
intelligent
213:5
intend 28:16,20
28:24 29:14
37:5,13,22
38:4,17 206:23

291:9
intends 187:9 187:14
interested 308:16
intern 74:22 75:8 76:9,12
internal 83:23 92:23 93:2 184:13
international 120:2
internet 16:9
introduce 224:5
introduced 294:10
introduces 223:14
introducing 224:9,12 290:21
introduction 220:6,16,20 223:9,10,13,22
invalidate 233:21 240:9 240:12
investigations 57:5 83:24 92:24,24 93:2
invoice 6:2,5,8 6:11,14,17 44:20 163:14 167:17 169:15 171:6 172:9 173:2,3,13 174:14,22 176:14 177:20 177:23 181:16 182:11,18 185:6 186:3 187:11 188:22
invoices 6:20 44:17,21 111:16 153:13 165:15 169:5,8 169:10 171:23 172:1,17,23 175:3 178:17 181:10 182:5,6 182:24 188:24 189:3,6
involve 30:21 70:7 81:7 90:14 143:23 147:2 170:11
involved 19:21 20:3 22:10 23:7,10,17 24:10 31:10 46:10 57:4 61:24 62:4 67:12 69:12 70:12 71:6 90:21 91:20 93:23 170:18 179:21 184:24 187:20 188:17
involvement 22:24 23:18 24:13 43:9 154:15
involves 111:13 302:1
involving 22:19 70:9 104:14
irregardless 134:3
irrelevant 91:9
issue 35:2 54:1 72:19 113:17 114:12 115:15 116:10 118:2,2 198:10,21,21 201:10 202:7,9 202:17,20 204:22 208:1 222:12 230:16 239:8 269:18 271:24 272:2 281:4,24 283:9 295:7 299:14 299:15,18
issued 150:24 151:17
issues 80:18 155:14 200:23 202:4 228:9 229:15
items 193:14 279:1

j

jacqueline 8:14 8:17 289:17
january 5:13 6:14 176:14 193:9,10 199:16,18
jefferson 9:10 9:13 292:16
jenna 3:5 12:1 13:9 63:16 100:21 109:17 279:21 280:8
jersey 74:20 75:4 76:20
jessica 173:20
jfb 3:9
ji 54:5,13,17 55:7 63:6 68:11 71:11,20 72:6,10 137:5 137:17,23,24 139:2,7,15 170:21 171:2 194:2,10 232:17 233:2,6 233:8,15 241:10,18 242:2,18 243:2 281:4,7 282:3 282:3,8
joanna 182:10 186:12 187:10

job 1:23 14:11 57:7 75:3 223:14
jobs 79:23 167:6
johns 74:5,9
join 107:7,12
joined 64:5 107:11
joining 12:8
jointly 210:6
joseph 4:9 10:5 10:7 12:14
journal 255:16
judge 91:7 116:18
julian 164:2 166:7
july 168:23
jumped 215:22
justice 2:14 3:11 4:6,10 15:14,22,24 16:13 17:6 61:23 62:2 69:7,12,20 169:6,11 228:8

k

k 164:4,4
karen 9:23 10:3 10:13 219:13 234:15 265:1 267:6 284:4
keep 115:1,6 131:16 167:5 297:23
keeping 15:1
keller 8:23 9:3 291:1,22,23 292:3
kept 66:24 67:6
kickback 31:7
kind 82:9 121:13 128:6 129:1 165:15 201:15
know 15:2,3,13 17:5 18:2 19:9 19:12 21:10,12 21:24 23:9,16 24:12 25:8,10 33:3 35:21 36:24 38:24 40:22,23 44:12 45:17 46:17 51:6 59:18 67:5 68:24 87:22 93:9,11 93:12 95:1 98:4 99:17 100:5 103:19 110:14 115:7 121:1 128:6 131:20 133:20 141:7,24 142:8 147:11 152:2 152:12 154:7 158:21 165:5 178:6 181:7 189:6 210:9,19 210:22 211:18 216:21 226:20 234:9 235:22 239:20 241:22 241:24 258:23 259:23 261:24 262:3 290:16
knowledge 164:13
konstantopou... 4:5 64:6 190:8

l

l 2:15 3:15 11:11 199:16 219:13
label 161:22 183:8
labeled 181:1 226:4
laboratory 257:13,19 258:1
language 178:23 179:15 179:15
large 80:16 81:15,16,20 107:24 128:7,8 147:21 204:7
largely 84:6,10 186:23
larger 82:13 270:11
laugh 161:7,20
law 17:19 18:9
lawyer 77:19
leadership 3:3 12:2,13
leading 246:3
leave 213:6
lecg 77:24 78:7
lectures 79:11
led 224:20 225:3
left 130:8,19 138:9 216:9
legal 77:20,22 77:23 116:15 149:22 150:9 210:7,8
lejeune 1:7 11:13 15:14,22 15:24 16:3,12 17:6 19:13 26:5,10 153:17 154:16 168:2 184:17,21 185:1 224:20 225:3
length 195:12
lesser 135:23 136:7 138:11 138:14,16,21

138:23 139:11 139:13 278:6 278:17,21
letter 39:6,14
letters 154:13 154:23
level 122:4,13 124:8,8,8,10 180:6 222:4
lewin 214:4
life 28:7 47:6,7 70:12,13,16,21 70:24 71:3 83:2 102:3 184:12,12,16 184:24
likely 36:12 147:9 177:5
likewise 68:19
limit 18:11
limited 54:12 59:1 138:18,20
line 129:2 130:12 131:5,9 131:10,12 134:8 135:4 137:6 138:2,7 138:12 139:8 139:16 306:3,5 306:7,9,11,13 306:15,17,19 306:21,23
lines 28:11,15 54:3 86:22 130:18 137:19 138:19,19
list 54:12 62:9 96:18 155:16 156:1,4,20 157:5,6 158:3 158:5 159:24 160:10 176:2,3 176:7 177:3 178:5 191:19 191:21,24 192:2,8 194:14 196:3 206:10 206:13 207:12 207:17 227:21 284:3 287:4,15 287:24 288:9 288:18 289:3 289:12,21 290:6 292:3,12 292:20 293:4 293:13,18,24 297:16 300:6,9
listed 79:13 89:23 133:18 159:6 186:11 187:10 222:3
listening 280:7 280:19
lists 62:9 156:8 156:13 157:9 157:10 159:8
litigation 1:7 3:13 11:14 16:3,18 19:21 20:2,9,10 22:8 25:11,24 26:10 27:11,20 30:15 31:11,19 32:10 34:17 35:6,7 35:23 36:2 44:10,13,18 45:3,9,13,18,20 46:5,20 47:8 47:21 64:12 81:11 92:13,18 99:1,23 100:18 103:16,20,24 104:14,24 105:6,12 106:14 116:24 149:14 150:2 153:18 154:17 155:14 163:10 168:3 169:16 170:2 184:17 184:21 185:1 185:17 188:5 190:20,23,24 271:19 303:9 304:23
litigators 87:22
little 17:12,16 31:20 69:9 86:1 96:9 176:8 215:18 218:19
live 73:7,9
locale 243:12
located 19:13 253:5 256:10
location 222:15 249:17 256:4,6 256:15 295:2
logs 67:1
long 15:4 115:11 275:1
longer 190:9
look 46:15 57:3 65:2 66:6 81:24 86:17,23 86:24 92:7 102:7 108:8 109:4 111:10 120:11 124:16 128:13 130:17 142:22 144:18 148:22 155:7 155:18,20 156:8 157:3 159:18 163:3 169:13 171:4 175:20 176:12 181:14 183:7 185:5 187:23 192:11 200:13 200:15 202:13 214:23 234:13 234:19 264:16 267:4 272:13 275:19 276:6

284:9
looked 57:2 96:12 118:21 145:11 169:8 171:22 174:22 178:17 181:17 207:11 234:3 236:23,24 267:3 269:2 274:24 284:24 285:23 300:10
looking 128:7 131:21 152:15 161:21 166:4 167:15 172:8 174:13 247:4 251:5 301:13
looks 85:16 122:11 128:14
losses 94:1,9,14 94:22
lost 150:3
lot 14:12,23 24:23 81:3,7 161:8 164:24 165:6
lots 36:7 128:18
lowest 142:18 145:17,19 148:20 149:10
lt 279:10
lucas 173:19
lunch 189:9 190:18
luncheon 189:13
luxenberg 4:8

m

m 219:13
macpac 212:21
made 38:19 50:22 51:6,7 52:18,20 56:2 101:3,21 106:14 113:6 136:19 197:20 239:4 251:9 268:14 283:3
mail 161:11
make 37:4 38:14 53:21 109:13,15 111:17 129:1,3 137:21 139:24 148:7 179:19 222:2 268:1 279:19,23 280:17
makes 82:12
making 21:4 72:22,23 93:23 133:8 226:14
manager 141:19 142:3
managers 76:16
managing 24:8 182:1,15 186:11
mandated 125:7
manner 77:3 92:3 129:5 192:20 219:23
march 181:21 183:9,19 308:24
margaret 193:8
marine 18:24
marines 18:15 19:9,10
marjorie 17:2 48:21 49:5,10 49:19 50:2,9 50:20 51:11 52:5 53:9,24 54:4,11,18 55:6,22 56:4 56:10 62:15,23 66:3 98:17 111:23 114:11 130:12,16,21 131:10 156:16 170:10,20 171:1 192:23 193:2,24 195:7 196:1,4,10,19 197:2,8,11 198:13,22 199:6,12 206:12,14 225:22 226:14 226:19 227:22 227:24 228:13 228:24 229:8 229:13,24 231:12 232:2,7 232:15 233:20 234:4,13 235:1 235:10,14,18 235:23 236:12 237:1,9,19 238:6 239:6,11 241:19 242:4 265:22 266:10 266:17 267:8 267:18 268:8 268:13,19,22 269:4,17 270:8 271:23 274:16 279:14 280:2 281:3,22 282:13,19,24 283:6,7 299:12 302:4 303:18
mark 9:15,17 108:22 127:3
marked 78:18 78:20 108:24 128:2,3 150:11 150:14 151:6,7 160:16,17

161:1,5,9,14,17
180:18 191:8,9
200:17,19
208:13,14
218:21,24
219:5 227:2
251:5 286:12
287:1,6,12,17
287:21 288:2,6
288:11,15,20
288:24 289:5,9
289:14,18,23
290:3,7 291:24
292:5,9,13,17
292:21 293:1,5
293:10,14,21
294:1 297:16
market 30:1
119:19,22,24
120:2,4,6,10,18
121:3,13 122:9
122:19 123:9
143:2 145:12
145:16 148:17
149:9 214:7
248:20,22
249:21 254:15
254:19 257:20
marketplace
30:7 77:3
80:10 87:2,3
88:23 123:5,20
146:12 147:4
147:22 148:5
256:13,19
277:9 283:23
296:17
markets 30:10
121:18
mary 73:24
master 10:14
master's 41:12
74:6
masters 214:6
match 138:15
266:17
matched
235:14
matches 236:11
276:1
materials 6:23
7:9,13,17,21
8:2,6,10,15,20
9:2,6,11,16,20
10:2,6 21:13
21:16,19 38:9
38:11,15,19
53:5 61:20
62:7,8 66:1
96:16,18
155:12,16,24
156:3,8,13,20
157:5,6,11
158:3,4 159:6
159:8,22,24
160:2,9 176:2
176:2,6 177:2
177:6,13 178:4
191:12,19,24
192:2,6 194:13
196:3 206:8,9
206:13,17
207:11,16
219:2,3 227:21
228:1 284:3,9
285:17 286:2
286:11 287:4
287:14,23
288:8,17 289:2
289:11,20
290:5 292:2,11
292:19 293:3
293:12,18,23
297:14,16
300:6,9
matter 11:13
16:4 22:11,16
22:20,24 23:4
23:7,10,22
24:5,13 25:1
27:21 28:1,5
28:21,23 61:15
67:1 69:12
71:24 133:22
147:6 184:20
244:21 307:6
matters 31:15
31:24 36:1
40:2 48:15
69:10
mba 41:8,10
mcl 285:24
mean 18:10
45:21 49:16
51:3 59:19
60:2 93:11,12
98:5 103:20
121:2 130:20
142:1 145:18
146:5 147:14
147:24 168:13
178:6 219:24
244:18 277:24
283:14
meaning 66:7
93:17 159:23
means 60:5
283:16
meant 149:15
measure 101:6
101:13,20
102:6 217:8
277:13
measurement
101:9 243:5
measures 101:4
measuring 7:2
85:21 86:12
100:12
mechanical
243:24
media 63:23
127:10 190:11
250:21 301:3

medicaid 215:6 216:13
medical 7:2 10:9,14 16:20 20:6,14 29:19 32:3,4 34:5,6 34:16 35:7 46:23 47:15,18 47:24 48:1 49:12,17 50:6 53:17 54:10 55:1,5,12,18 56:11,16,17,18 57:11,12,18,21 57:24 58:3,11 58:22 59:2,12 59:22,22 60:3 61:2,7,10,14 63:14 69:14 70:8,10,23 74:20 85:21 90:6,15,20 93:24 94:8,9 94:14,16,21,22 95:7 96:2,4 97:1 98:21 99:14 100:12 101:7,13 102:14,14,20 103:1,6,14 104:14,21 105:6 107:22 108:3 110:8 113:16,18 114:17 122:10 125:3 126:7 133:1,13 134:3 136:16 137:10 144:3 145:14 149:14 166:10 166:12,17 170:6,9,12,13 170:15 171:21 174:4 175:17 193:18 196:12 198:10 203:24 211:4,9,13,15 221:11,15,16 221:17 222:8 222:12 225:16 226:12 228:11 231:10,11,24 232:1,6,13 233:7,11,13,22 234:6 235:9 237:18 238:3,6 239:8,10 241:8 242:3 245:13 246:24 247:13 248:8 249:16 254:5 255:18 257:9 260:18 263:7 265:3,20 266:16,21 267:1 268:16 268:17 269:16 270:7 271:6,22 275:16 281:2 281:13,16,22 283:1,1,5 284:16,22 285:7,12 295:6 295:12,13,20 295:22 296:5 299:23,24 302:3 303:8
medicare 124:19,21 140:10,12,15 212:1,7 215:6 216:12 218:4,5 218:6
medication 149:9
medications 143:11,23 144:3,5 145:13 145:17,19,22 148:15 258:6
medicine 255:17
medpac 212:1 212:4,9,13,16 212:17,20 214:2,4,16 215:20 216:17 216:24 217:17 218:1,3
meeting 184:13 188:17
meetings 62:1,5
melanie 4:5 64:6 190:8
members 17:5 17:9 45:17 173:16 175:7
memorized 128:20
mention 121:6
mentioned 27:22 29:18 39:21 59:13 64:21 66:2,5 74:11 75:12 76:5 117:16 247:16,18
merit 2:21
met 13:8
method 261:6
methodologi... 223:1 246:22 253:10 260:24 294:16 295:16 295:19 296:10 297:5 299:22
methodologies 143:22 144:7 144:10,17 222:6,9 254:6 273:14 295:4 300:12
methodology 96:10,11 97:17 112:1,2,21 113:12,13,15

113:19,20,24 114:8,15,16 135:19 144:15 144:24 145:3,6 148:24 170:23 170:24 198:5,8 198:13,19 222:22 240:9 240:12,13,15 240:20 252:18 252:24 253:2 254:12 256:11 256:12 261:7 261:10 262:2 262:10 272:20 272:21 273:14 276:18,24 286:16 290:12 294:10,24 295:13 296:16 298:15,22 299:4,10,18
methods 245:12 254:4 257:12 258:5 260:7,17 262:18
metropolitan 122:13
mhw 10:11
middle 13:15 138:22 139:12 231:15
military 17:10 17:19,20,24 18:3,24
miller 6:21,22 28:2,4,6,17 29:1,4,13 39:22 40:5,19 41:8,14,21 42:12 43:3,24 44:4 62:4 67:10 85:16,17 100:10 168:6 170:4,17 181:1 182:2,9 183:4 185:20 186:12 186:16,20
miller's 29:9 41:18 42:7,17 168:13,14 181:11 182:19 182:23 183:18 184:3,6 185:10 185:16 187:2 187:16 188:10 188:12
mind 16:7
mine 40:6 161:22
minute 109:4 133:2 189:8 250:13 297:11
minutes 115:8 176:21 300:20
mischaracteri... 63:5,11
mischaracteri... 102:1
miscoding 57:14
missed 49:12 55:6
missing 147:21
misunderstan... 276:18
mixed 210:20
modifier 132:22,24 133:3 135:3 279:9,10
moment 203:20
monetary 197:23
money 36:18 150:3
month 258:21 259:21,24
monthly 46:3
months 188:18 259:5
moody 175:8 175:15
morning 11:24 13:8,14 203:20 204:5
move 218:8
moving 251:10
mri 75:20
multi 86:24
multipart 80:16
multiple 123:21,21 142:22,23,24

n

n 11:1 13:16 212:22
name 11:5 13:12,14,15 68:22 91:19 167:2 182:7 183:11 184:11 220:18 221:20 224:12 244:23
national 84:20 213:12,17,22 262:21
natively 5:12 6:4,7,10,13,16 6:19 7:6 162:5
nature 229:14
navigant 78:10 78:13
navigating 87:21
nc 3:7
necessarily 36:15 55:21 140:12 148:7

necessary 177:7
need 14:17 35:1 38:10 46:16 65:9 72:4 100:20 101:13 110:3 131:13 140:12 162:20 200:15 246:19 266:2 279:20 286:21 290:18
needed 70:3 72:9,17 177:14 303:17
needing 34:10
needs 81:4 124:16
neither 93:14 98:18 308:13 308:15
net 33:5,8,15 34:7 35:12
never 32:19 151:12 164:18 230:6
new 84:19 171:10 173:16 175:7
noah 170:4
nominal 93:3 93:12
non 116:20
nonretained 71:8
nonsubstantive 190:22 244:11 244:24 245:3
north 1:2 11:17 89:4,11,14 90:4,13
northwest 11:11
notary 2:21 308:4,21
note 79:1 117:23 118:13 130:14 160:8 186:5 297:24
noted 52:21 110:11 112:9 117:20 118:2 131:6 173:1 178:3 201:16 214:10 237:15 261:1 266:19
notes 67:1,6
notice 2:19 5:17,21 150:22 151:16 152:17
noticing 11:23
noting 194:24 198:4
notion 145:8
november 6:8 73:5 172:10
number 5:9 6:1 7:1 8:1 9:1 10:1 11:14 30:20 31:6 50:18 53:10,10 63:23 73:14 84:23 89:8,21 89:21 90:9 91:14 113:4 118:13,17 126:1 127:10 128:2 130:8 132:1,2,4,9 147:2 148:3 152:8 153:11 155:8 156:23 157:13 159:14 162:9,10,11,12 162:13 165:5 165:10 181:1,6 181:8 186:2,6 188:18 190:11 199:7 202:16 213:8 228:9 233:19,20 235:24 236:10 240:6,24,24 249:5 250:21 269:22,24 270:11,12 272:14,24 273:5,6 275:6 291:18 301:3
numbered 152:23
numbers 54:4,5 79:2 89:18 105:2 110:7,11 110:15,24 111:21,22,22 111:23,23,24 112:9,9,13 118:13 136:4,7 139:19 162:2 180:22 195:11 203:23 204:3 227:11 241:6,8 276:1 285:1
nurses 75:7,22
nursing 82:10
nw 2:15 3:15

o

o 11:1 68:22 164:4
oath 14:8 307:13
object 149:18 150:5 151:24 152:9
objection 15:15 17:17 18:5,17 19:2,14 20:22 21:5,17 23:12 23:19 25:7,12 25:17 26:12,18 26:22 28:19 29:11 30:18 31:13,22 32:18 32:24 33:10,18 34:2,18,24

35:9 36:5,13
36:19 37:1,7
37:11,24 38:21
39:3,11 40:11
40:21 42:1,8
42:23 43:10,19
44:5,15 45:4
45:14,22 46:6
46:12 48:9
49:3,14 50:7
51:2,16,22
52:7 53:1,12
53:20 54:7,22
55:8,19 56:14
58:5,17 59:5,9
59:17,24 60:8
60:15,20 61:4
61:12 62:12
63:1,12 65:7
66:9,17 67:2,7
67:16 68:2,8
68:23 71:9
72:1,11,15
73:3,8 76:22
77:10,15 79:14
81:5,22 82:15
83:7 84:8
85:11 86:5,9
87:6,13 88:1
88:20 90:16
91:5 92:2 93:5
93:19 94:4,24
95:14 97:10
98:3,11 99:2,9
99:16 100:4,19
101:15,23
102:16 103:2
103:17 104:2,8
104:16 105:8
106:22 107:18
108:18 110:19
112:3,16 113:9
114:9 115:18
115:24 116:13
117:3,9,18
118:10,22
119:8,14,20
120:7,20,24
121:20 122:1
122:20 123:2
123:11 125:17
126:3,13 133:9
133:19 134:11
136:13 140:18
140:23 141:9
141:16,23
142:7,14,20
143:7,20
144:12 146:3
147:19 148:21
154:5,18
164:15 165:3
165:12 168:11
172:2,19
173:10 179:9
179:23 182:12
183:1,20 184:4
184:18 185:2
185:18 186:18
187:4,12
188:14 193:22
194:16 195:16
196:6,21 197:7
197:14 198:6
198:16 199:9
201:1 202:11
203:18 204:14
205:17 206:3
206:18 207:19
208:9 209:4,11
209:17,24
210:12,21
211:10 212:10
214:11,18
215:4,10,17
216:19 217:2
217:19 220:13
220:22 221:13
221:24 222:16
223:17,24
224:15 225:18
226:17 228:2
229:6,18 230:9
230:24 231:18
233:24 235:3
236:8 237:13
238:1,13 239:1
239:17 240:2
240:10 241:14
241:21 242:15
242:20 243:13
244:6,13 245:8
245:19 246:13
247:20 248:5
249:13 250:2
255:9 258:15
258:22 259:6
259:13,22
260:3 261:8,14
262:9,24 264:1
264:8,13
265:14,24
266:13 267:10
267:14,19
268:10 269:14
270:1,17 271:8
271:20 272:7
272:17 273:8
273:22 274:14
275:7,13,22
276:3,10,15
278:8 279:16
280:6 281:10
281:18 282:5
282:16 283:15
284:14,20
285:10,21
286:5 294:13
296:1 297:18
298:1 299:1,11
299:20 300:15
302:6,15
303:10 304:3
objections 5:21
152:16,22
155:20,23

obtain 259:19
obtaining 257:1,6
obviously 221:9
occasions 47:16 53:9 241:12,18
occurred 178:14
occurring 184:8
october 6:5 49:2 171:6 226:13
odd 128:6
offer 28:16,21 28:24 47:11,13 48:15 145:16 148:19 149:10 199:6 224:19 307:12
offered 29:1 31:14,23 32:12 32:13 35:24 47:10,16,23 82:1,2,4,18 91:8 94:6,15 99:24 117:7 118:15 143:12 145:2 149:5 178:24 179:17 193:17 205:7 207:21 220:4
offering 32:2 38:12 56:7,15 57:20 58:2,7,9 58:19,20 66:20 67:24 95:16 98:13 119:24 157:12 168:14 168:18 170:14 184:23 187:18 198:23 300:5
offers 142:18 142:21 149:7 149:11
office 73:16,19 84:21
offices 2:12 73:12,14
offsets 44:4
oh 90:9 131:14 150:16 160:19 161:21 270:22
okay 13:19 14:7,10,16 15:6,8,13 16:11,11 17:4 17:8,14 19:17 20:1,17 21:9 22:6,10 23:2 23:16 24:16,20 24:22 25:5,10 26:16 27:2,9 28:14 29:23 33:23 38:24 40:1 41:1,4,10 42:20 46:2,15 48:4 50:1 52:3 53:8,16 57:7 63:17 65:24 66:24 68:19 70:7 71:5,19 73:2,23 76:11 79:10,24 80:2 88:6 93:17,22 94:11,13 96:16 100:9 103:23 106:3,8,20 108:12 109:8 110:12 111:15 114:3 115:6,13 117:6 118:6,20 121:17 123:7 124:4 127:5,23 128:16 129:23 130:5,17 131:1 131:16,24 132:11,15 133:12 135:2,2 135:22 136:22 146:23 153:2 153:21 154:21 155:7,18 156:18,22 157:18 158:10 158:18,24 159:17 161:20 161:21 162:1 162:16,18 163:1,7,17 164:1,7,12,23 165:14,18,21 166:4 167:9,17 168:1 171:15 173:1,7,15,19 173:23 175:2,6 176:12 177:2 178:2 182:9 183:23 184:2 186:7 188:8 189:1 190:22 191:5,23 193:13 194:18 197:2,11,22 198:2 199:14 201:20 203:5 203:12 206:21 207:2 208:3,24 215:14,23 216:7,17 218:18,20 219:19 223:5 223:13,21 224:4,17 225:9 225:14 228:6 228:16 232:20 232:24 234:19 236:21 237:15 238:17 245:24 246:10,17 250:8,12,16 251:9,22 252:11,14 253:22 254:14

254:22 255:6 258:4,13 259:18 260:16 260:21 263:6 263:17 264:5 266:4 267:24 269:22 270:4 270:10 271:3 271:16 273:2 274:11 275:18 277:2 278:24 280:10,20 281:15 284:8 284:18 285:23 286:8 290:19 291:7,13,15,21 294:8 295:11 300:19 301:15 301:17 304:8 305:1,10
old 90:2 91:13
older 90:2 91:13
once 124:22 125:4
ones 90:8,13 244:17
opening 199:21
operate 76:17
operates 77:4
operating 30:9 76:16 78:6 148:17
opine 33:21 55:1
opined 56:2 196:19
opinion 53:23 56:7,16 58:7 58:10,14 94:15 94:19 95:16 97:22 99:20,22 99:24 102:18 102:24 117:14 119:12,16 150:1,8 168:14 170:14 193:8 193:10 198:12 198:23 205:14 206:22 224:19 225:1,2 226:3 239:3 251:15 270:9 272:1 303:12 304:14 304:18,20,24
opinions 21:20 28:17,21 29:1 29:2,8,9,15 33:9 38:12 43:24 44:3 47:5,12,14,17 47:23 55:17 57:20,24 58:2 58:19,20 59:1 59:10 66:15,20 76:21 91:8 100:3 104:20 105:1 115:17 116:11,24 117:7,13 118:1 119:6 155:12 155:14 157:11 166:3 168:9,13 168:15,18 178:21,24 179:1,16,17 182:19 184:23 185:15,22,23 185:23 187:17 187:18 193:2 193:15,16 198:18 199:24 201:5 207:17 207:21 208:7 283:12,17 285:18 286:2,3 300:11,12 303:8
opportunity 112:20 300:5
opposed 142:19 148:20
opposing 117:1
option 107:6
order 134:3 177:7 200:17 218:12,15,19 226:24
ordered 75:17
ordering 133:23
organization 210:11 213:10 221:22
organizations 82:5 213:8
organized 219:22,24
organizing 178:8
oriented 210:11
original 52:22 157:5 192:2 194:12,20 196:1 197:19 219:3 237:10 269:11
outcome 242:1 308:17
outlined 112:22 113:14 144:17 145:7 170:24
outpatient 124:13 134:15 144:6 248:13 262:12
outside 35:7 105:3
outstanding 172:22 173:2 175:3
overall 77:2 83:6

oversight 43:7
owe 229:22
own 66:7 265:4

p

p 11:1
pa 3:4
packet 53:4
page 5:2,9 6:1 6:22 7:1 8:1 9:1 10:1 79:2,4 84:15 85:20 87:19 88:7 89:7,21,22 91:14 111:10 128:23 131:24 132:2,4,4,13 135:12 137:17 152:22,23 154:11 155:8 156:22 157:18 158:18,19 159:1,14 162:4 162:9,9,10,11 162:12 163:11 163:18,21 164:1,21 166:5 167:1,15 169:13,13,19 171:9 172:18 172:21 173:15 175:6 181:14 181:23 183:7 186:1,10 192:12 193:7 199:14 202:17 202:18 211:1 214:24,24 216:8 219:19 219:20 223:8 227:14,14,16 243:4,10,16 244:19 246:3,5 246:17 247:9 248:17 251:10 254:24 261:1 306:3,5,7,9,11 306:13,15,17 306:19,21,23
pages 163:9 246:2
paid 36:10,11 58:3,8 97:5,8 97:12,13,23 98:2 107:4,11 107:16 108:13 134:4 136:12 140:6,8 141:3 144:14 147:23 150:4 172:17 197:12 215:2,6 215:6,7 216:11 256:1,20 296:19 304:16 304:19
paper 86:2,8,11 100:16,21,23 101:4,5 227:6
paragraph 80:13 155:19 155:21 157:20 211:20 244:5,8 244:17 245:4 246:3 248:16 254:24 257:16 264:23 283:10
paragraphs 244:15
part 32:1 76:1 76:2,4 81:20 91:3 129:12 248:1,3 273:9
particular 22:7 42:20 73:16 226:4
parties 308:14
party 92:6
passed 147:16
past 10:9,14 16:20 20:6,14 29:19 32:3,4 34:4,16 35:7 44:19 46:23 47:14 51:24 54:9 55:12 56:18 57:10,18 58:11,22 59:2 59:11 61:6 63:14 70:8,9 83:2 89:24 90:6,15,20,23 93:24 94:8,9 94:14,16,21,22 95:7 96:1,4 97:1,6,23 98:21 99:14 101:13 102:14 102:20 103:1,6 103:13 104:14 104:21 105:5 107:22 108:2 110:8 113:16 113:18 125:3 126:7 136:16 142:13 144:2 145:14 166:9 166:17 170:6 170:12,15 171:21 174:4 174:21 175:17 193:18 196:12 198:9 211:9,12 211:15 222:7 222:12 225:16 226:12 228:11 231:9,10,24 232:1,5,13 233:6,10,13,22 234:6 235:9 237:18 238:3,6 239:8,10 241:8 242:3 245:13 246:23 248:8 249:16 254:5 263:7 265:20 268:16 270:6

275:15 281:2 281:22 284:16 284:22 285:12 295:6,13 296:4 299:23 302:3 303:7
path 44:20 169:10
patient 49:21 74:21 75:5,11 75:19 137:7 147:8,16 263:3
patients 75:7 75:17,23 147:5 262:11
patricia 68:20
pause 140:11
pay 107:7,9 134:8
payment 136:19 212:1 218:4 239:4 262:21
payments 59:3 124:19,21 217:10
payor 88:14 122:16 123:10 134:6
payors 30:23 84:11 92:20 123:21 216:14
pbm 142:6,10 147:10
pbms 147:4,13 147:23
pdf 132:5,7
penalty 307:1,4
pending 14:19 69:17
people 165:8,17 166:21 171:10 230:21
perceived 108:1
percent 51:15 51:18,21,24 52:4 83:18,21 143:13 145:1 149:1 205:1 214:5 216:11 216:12,13 217:11 257:19
percentage 51:10 83:5 147:13,15 215:1
percentages 215:8 261:2,3 262:14
perform 59:15 175:14
performed 66:14 135:18
performing 75:23 136:9 175:10
perjury 307:1,5
person 33:17 141:8 149:15 154:14 155:11
personal 7:3 66:24 82:24 83:17 85:22 92:14 100:13 101:8,12 102:3 104:5 164:12 211:3,12,16
personally 68:4 154:1
persons 71:5 155:11
pertaining 49:13
pertains 64:19 261:12
peter 199:18
peterson 7:12 7:14 107:21 108:8,15 110:13,21,22 111:9,12 112:10 118:2 118:20,24 201:7 202:6,16 203:3 204:19 287:16 295:9 295:23
peterson's 287:11
ph.d. 5:14
pharmaceutical 142:19 143:5 143:18 147:22 148:4
pharmaceutic... 146:1,16
pharmacies 143:2 145:15 145:22
pharmacy 141:19 142:2 144:22,22 145:24 259:2 259:16
phd 40:19,23 41:1
phrase 123:4
physician 247:23 249:6 252:19,20 253:15 254:2,9 254:10 260:8 296:16
physician's 251:24
physicians 235:18 262:2
pick 259:5 301:11
piece 32:10
pieces 221:20
place 133:8 160:23 161:4

262:7 308:10
places 52:18 116:5,9 195:18
plaintiff 10:11 32:2 91:22 107:21 108:15 110:22 128:10 131:3 145:21 192:13 201:6 210:11 219:13 220:19 221:19 224:5 225:17 225:21 233:12 234:8 238:23 239:3,16,22 242:24 243:9 243:11,18 244:22 245:6 254:7,8 261:3 262:13,15,23 263:2 275:16 281:2 295:1,9 296:4,21 297:1 298:3,8,9,13 299:17,23 301:16 302:3 304:23
plaintiff's 53:18 145:11 145:16 211:4,9 222:7,12 224:20 225:22 237:8 239:20 248:8 256:15 268:3 271:13
plaintiffs 3:3 4:8 5:17,21 12:2,12 13:11 16:22,24 20:7 37:17 38:8 47:1,3 92:10 106:9 110:8 111:5 128:18 147:5 148:18 152:17 155:13 155:24 157:24 177:12 210:20 221:10 225:4 233:7,19 234:10 242:11 242:18,22 244:4 252:21 257:1,4 260:22 261:4 262:7 283:11 286:11 298:23 299:4,7 299:19 302:4 304:17
plan 29:9 42:6 47:7 71:1 83:2 117:13 183:14 183:24
planner 47:7 70:12,14,17,21 71:4
planners 102:4
planning 47:11 47:13
plans 28:7 184:12,12,17 184:24
played 304:16
please 11:22 12:9,19 13:12 14:10 15:18 46:16 86:4 109:3,16 138:5 153:12 157:14 158:19 159:15 201:23
plg 10:16 227:12
plugged 273:6
pm 189:12 190:2,13 250:23 301:5 305:14,17
pocket 58:14
point 14:23 16:6 25:23 32:11 51:24 82:21 83:6 87:17 123:17 126:23 151:3 176:11 192:23 195:24 209:1,7 213:14 225:15 231:7,17 232:12 233:18 238:12 274:11 274:15 302:1 303:7,24
pointing 216:9 217:10
points 81:15 82:9 88:9 118:12 166:22 192:12 208:4,6 217:9 225:11 242:13 265:13 301:22
policy 213:17 213:23
populated 138:7,12
portion 128:10
portions 119:22 179:7 179:12
position 43:23 52:13,15,15 74:15 76:18 94:1 95:11 121:17 149:16 182:1
positions 76:19 79:11,12,21
potential 31:2 31:19
power 150:3 213:3,5
powerpoint 209:1,2,6,16,23
practice 92:4 125:9,22

pre 218:21
predecessor 78:3
premiums 58:15,19
preparation 66:1 176:6 177:18 178:11 187:16 188:13
prepare 61:17 165:23 176:4 182:18 187:2
prepared 27:16 28:11,13 33:20 68:16,20 69:4 70:24 100:10 106:10 178:9 179:8,14 183:24 185:7 209:2
preparing 166:3 168:6 177:14 183:4 185:13
prescription 140:13,14 141:3 259:3,11 259:15
prescriptions 143:18 144:23
present 4:3 33:5,8,15 34:7 34:15 35:8,12 48:2 64:18 65:1,16 74:14 95:19 97:1,3 101:19 102:4 105:19 113:12 190:9 205:12 257:9 275:15
presentation 88:4,9 209:2 210:17
presented 75:8 79:11 100:9 104:19 105:16 197:12 209:16 209:21,22
presenters 209:9,16
presenting 88:10
prevent 15:9
previous 79:21
previously 18:22 27:18 39:21 170:1 177:10 190:5 200:14 202:10 203:13 219:14 229:12 236:3 247:16 262:20 267:3 269:3 295:14 296:23 297:3 298:6,12
price 142:18 147:8 148:2,20
prices 122:16 122:22 123:1 142:23 145:20 146:17,18
primarily 80:14
primary 80:22
print 128:8
printed 128:8 128:23 129:15 181:7
prior 23:10,17 168:3 172:16 174:22 230:17
private 122:16 123:10 140:22 215:7 216:14 255:24
privileged 15:18
probably 32:12 129:16 195:10 250:14
problem 198:4
procedural 96:23 124:9 247:12
procedure 124:6,20 134:23
procedures 75:23
proceed 13:2 64:3 127:14 190:15 251:1 301:7
process 180:2 195:4 248:21 251:14
produce 38:9 176:1 213:12
produced 5:12 6:4,7,10,13,16 6:19 7:6 21:10 38:4 105:22 130:1 154:4,24 155:3 158:6 162:4 174:5 176:3 177:3 178:5,13 181:10 228:19 265:1 282:24 300:7,10
product 142:19
production 5:18,23 129:19 129:20 150:23 152:7,18
products 243:7
professional 40:4 81:11 124:14 255:24 283:13
professionally 68:6,10,12
profit 212:24
program 107:5 107:7,11,13,16

108:13 140:6,8 140:9 141:22 142:2,3 212:7 213:20,21 218:5,6
projection 46:4
projections 45:19
pronunciations 164:3
protected 27:1 42:3
provide 28:9 29:14 41:23 42:6 46:22 76:20,24 95:6 99:20,21 152:6 152:11 222:6 256:9
provided 37:16 39:22 45:19,20 47:2 48:13,17 53:5 55:23 56:18 57:22 61:3,10,14 62:16,18 70:21 72:6,7 104:22 122:18 123:9 125:2 131:3 132:6 151:22 152:3,13 177:21 192:1,2 201:3 217:22 243:2 265:21
provider 82:4 84:7 86:24 87:5 123:16 125:3 147:10 204:2 249:17 253:5
provider's 256:14 295:2
providers 30:24 57:17 82:10,11,18 84:11 85:1 86:24 87:3 92:21 123:21 147:4,13 203:24 237:4 256:7,10 263:13 265:2 277:10
provides 107:8 215:24 223:19
providing 46:2 47:5 67:12,19 283:17
public 2:21 74:9 308:4,21
publication 101:1
publications 85:15,17 100:11
published 79:12 255:16
purchasing 150:3
purpose 99:1 100:24 101:5 104:7,13 212:9 212:14,17 215:15 303:6 303:11
purposes 24:16 53:16 86:15 99:23 125:19 130:24 162:3 174:10 180:21 182:23 184:17 185:16 214:2 227:20 271:18 284:23 294:7 303:8
pursuant 2:19 135:19
put 18:10 271:17
putting 83:12 274:12

q

qualifications 33:4 116:2 119:5,6,10,16
quality 180:2
quarterly 46:3
question 14:1,2 14:4,19 15:4 15:17 19:4,18 20:5 45:24 60:7,17,22 69:13 82:8 90:10 99:3,18 101:17 104:11 105:13 112:5 116:18 121:10 121:14 169:3 174:11 197:6 203:21 212:12 214:20 216:3,5 227:20 241:16 243:15 262:5 271:10 272:11 273:4 275:9 290:11 301:13
questions 15:10 265:10 272:12 280:13,15 301:11 304:7 305:11
quick 114:24 304:8
quickly 64:4 236:17
quite 124:3 195:12

r

r 11:1 13:16 68:22 212:22 219:13
racine 3:6

radiological 75:18
radiology 5:15 275:19,21 278:15
rand 212:22,23 213:13,18 214:15,22 215:14,24 217:14 250:4 254:24 255:4,7 255:11,23
range 143:1 158:7,11 159:8 160:1
ranges 207:4 208:4 284:10
rate 35:11,18 35:19,22 36:3 125:11,14 144:20 164:7 218:3 249:21 256:2 259:4
rates 36:23 145:12 217:23 248:20,23 254:16,19 257:20 258:13 259:8,9,20 262:21
rather 181:24
read 90:11 108:7 128:7 153:12 156:23 157:2,14 158:16,19 159:14 231:13 232:4,18 253:19 257:14 265:7 286:18 287:9 305:7,9 307:5,7
reader 223:19
readily 146:2
reading 158:22
ready 127:3 191:1
real 93:3,12 236:17
really 26:6 146:9 264:5
realtime 2:20
reason 48:8 164:9,20 165:9 167:13 171:24 172:4 239:24
reasonable 10:10 16:20 20:6,14 29:19 29:24 30:4,11 30:16 31:4,21 32:6,16 46:19 46:23 47:14,17 47:24 52:9 54:6,9 57:10 58:10,22 59:11 61:1,6 63:13 69:13 70:8,22 82:23 83:1,16 86:12,20,23 87:1,10,15 88:18 90:5,15 90:19,22 92:14 92:18 93:24 94:7,16,21 95:7,18 96:1,3 97:3,7,8,14,18 97:24 98:1,21 99:13 100:17 103:6,13 104:21 105:5 122:17 123:8 134:15,21 135:15 136:2,6 136:16 143:10 143:12,14,16 143:17 145:2 149:1,4 166:9 166:17 170:6 170:12,15,19 171:21 174:3 175:16 193:17 196:11,15,19 196:24 197:4 198:24 205:1 217:12 231:9 231:23 232:5 232:13 233:14 243:6 245:12 246:23 249:2 252:2,4 254:5 254:20 256:13 257:12,18 258:5 260:8,17 262:18 263:7 265:5,20 266:11,24 272:5,15 273:7 273:21,24 274:2,3,9,12 276:14,19 277:4,5,7,14,17 277:19,20 278:1,1,11,16 278:22 279:2 279:10 283:12 297:7 298:5 302:13,16,19 302:21 303:1 303:14,14
reasonableness 57:21
reasons 36:7,22 117:14
rebates 147:2 147:21
rebuttal 50:21 52:17 56:5 62:13,14,22 66:2 106:18 156:17 193:8 193:10 195:4 199:15 206:11
recall 19:20 26:2 27:24 33:24 62:21

64:20,21 67:14 69:3 91:15 100:14 106:21 107:17 108:15 109:10 193:20 194:11 200:22 206:1 210:10 227:23 251:7 284:13
receive 106:3
received 105:22 106:6 156:15 249:12 262:15
recess 63:21 127:8 189:13 250:19 301:1
recognize 78:23 150:12 150:19 151:10 163:12,13,15 169:15 208:17 219:8 227:8 284:5
recognized 213:9
recollect 35:20 35:22,24 44:22 48:19 49:5 50:18 63:3 69:5 70:9 71:12 86:10 90:18,23 98:16 102:21 107:19 107:23 110:9 111:3 117:11 118:4 168:21 176:10 178:12 188:6 192:9 195:17,20 199:21,22 201:8,11 204:1 204:4,6 207:13 210:23 230:11 247:6 248:10
recollection 19:24 64:23 88:8 118:8,16 167:21,23 168:2 195:13
record 11:4 13:13 63:20 64:2,5 79:1 109:4,18 127:7 127:13 133:7 160:9 189:8,11 190:14 221:22 250:18,24 268:16 287:10 290:14,18 300:24 301:6 305:15
recorded 1:13 2:11 63:24 127:11 190:12 250:22 301:4 305:12
records 67:1 153:13,14,14 207:5,8,10,23 207:24 228:19 280:4 282:15 283:1 285:8
redirect 304:9
refer 46:16 48:24 214:17 262:1,20 263:21
reference 87:20 121:8 132:2 193:1 194:2 211:24 226:15 227:15,16 254:23 261:17 264:10
referenced 108:14 158:15 159:23 193:24 245:5 255:19
references 132:4
referencing 26:5 215:20 226:19 267:16
referred 62:8 110:18,21 121:5 158:11 191:17 202:6 207:10 222:21 248:22 262:20
referring 16:24 24:2,17 63:9 99:8 110:12 111:11 121:14 180:12 185:10 187:10 191:21 194:9 202:1,2 202:9 208:20 221:6 229:13 229:15 248:24 263:20 267:24 285:8
refers 155:23 157:4,24 159:5 261:23,24
reflect 150:3 214:7
reflected 66:15 85:3 147:9 155:16 156:13 157:8 170:9 178:2,14 182:18 188:21 188:23 232:21 265:21 279:4
reflecting 153:14 154:22 155:10,12
reflects 145:7 265:19 266:9
refresh 118:8
regarded 255:19

regarding 57:21 58:3,14
registered 2:21 308:4
regularly 93:15 93:18
regulated 122:4 277:10
rehab 70:17
rehabilitation 71:2
reimburse 88:15
reimbursed 30:23 134:19 134:22
reimbursement 28:8 87:23 88:12 92:21 133:24 296:13
reimburses 296:18
reimbursing 134:13 296:15
relate 31:15 54:1 59:11 178:10 184:20 241:8 253:6 261:2
related 22:14 49:22 53:18 54:14 55:13 56:18 62:23 66:10 136:24 137:19 138:2,4 138:6,8,11,12 138:13,14,15 138:21,22 139:3,8,11,11 139:17 202:21 213:23 219:12 232:16 233:11 241:11 242:5 247:22 265:3 281:5,8 282:3 282:8 296:5
relatedness 54:19 137:22
relates 1:9 31:2 55:2 94:7 148:24
relating 31:7 67:1
relationship 40:5
relative 125:5 125:20 253:6 308:13,15
relatively 204:12,22
relevance 72:24
relevant 21:22 49:12,16 55:5 72:19 137:7
reliability 179:20
reliable 112:24
reliance 204:23
relied 43:24 61:21 137:22 143:5,8 157:11 192:20,22 239:6 248:2 264:24 271:7 277:16 280:4 283:4 284:18 284:23 294:18
rely 86:14 96:16 101:10 123:9,17,18 144:16 192:24 216:24 217:14 217:17 222:6 246:23 283:7
relying 54:17 77:1 122:15 123:15 193:3 217:5 226:3,5 243:1
remainder 104:24
remember 26:4 26:5,8,9 29:21 44:23 69:16 91:19 148:23 174:8,9 194:4 194:20 195:6 210:9,14 228:4
remind 13:19
render 69:23 115:17 116:11 285:18
rendered 32:5 58:1 76:1 95:9 96:5,8 97:16 101:14 115:17 116:12,23 124:15 125:2 125:10,16 155:15 163:21 169:17 171:6 172:9 174:15 176:14 181:21 186:3 202:21 231:10,24 232:6,14 256:7 257:7 262:8 272:22 273:12 274:5 296:6 302:18
rendering 55:17 58:13 75:7,13,14,15 84:18 144:18 168:9 185:15 199:24 224:24 225:2 249:7 251:14
reordered 177:10
reorganize 177:17

rephrase 14:3
20:18 266:5
report 5:13 7:7
7:11,15,19,23
8:4,8,12,18,22
9:4,8,14,18,22
10:4 17:1
21:11 28:11
29:10,16 32:13
38:3,17 42:21
47:8 49:20
52:11,23 53:6
53:17 56:1,5
62:14,17,23
63:3 66:8,16
69:23 70:2
71:1,2 91:3
96:17 98:17,19
105:22 106:10
106:18,21
107:17 108:7
108:16,22
109:10,14,19
111:11 112:23
113:7,7 114:14
115:14 117:17
118:6,14
125:13 131:3
135:20 156:15
156:17 168:7
170:10 178:19
179:13,13
185:8,11,13,16
185:21,23
187:17 192:1
192:21,23
193:2,8,10
194:12,20,22
195:5 196:1,13
197:19 198:14
199:16,17
200:4 201:17
202:15 203:14
204:10 206:11
206:11,13
207:18,22
218:10,22
219:12,15
220:7,17 223:7
225:7,11,22
226:3,5,9,13,20
228:7,12
230:15 231:8
231:11 232:2,7
232:15,22
233:1,20
234:20 235:2
237:8,10
238:21 240:14
241:7 242:12
242:14 243:5,8
243:16 244:20
245:6 246:4
247:1 251:5,6
254:4,13 255:4
255:8,11,23
257:2 260:7
263:22 264:18
264:19 265:2
265:13,23
266:10 268:3,8
274:7,18
279:15 280:3
282:20 283:2,6
283:8,11 284:4
286:9,23
287:11,19
288:4,13,22
289:16 290:1
291:18,22
292:7,15,23
293:7,20
294:12 296:21
297:17 298:21
300:7,17
301:19,21
302:4
reported 1:24
281:19
reporter 2:20
2:21 12:19
13:20 14:13
24:23 308:1,4
reports 10:11
27:15 28:13
29:16 37:6,13
37:18 38:4,10
39:22 41:15,18
41:24 42:7,13
45:8,13 46:16
47:3,10 48:21
48:24 49:1,6,8
49:11 50:3,21
52:16,17 54:19
56:1 61:19
62:14,16,18
66:3,16,21
67:24 68:11,16
68:20 69:4
71:23 72:7,10
96:13,15 108:8
112:21 117:1
118:14 130:2
134:13 139:4,6
139:20,22
158:1 159:7,23
165:1,9,23
166:3 167:19
170:20,21
171:2,2 174:5
174:11 175:19
177:16 178:20
178:22,23
179:8 180:10
181:12 183:5
184:3 187:3
188:10 193:20
194:13,24
195:15 196:2
199:20 200:1
205:6,9 208:8
217:15,18
218:9 219:22
220:3,9,12,21
221:5,23
223:11,23

224:18 225:10
226:1 233:9,16
240:15 244:4
244:23 245:18
246:12,21
247:2,5,7
248:3 251:20
252:9 253:1,23
253:24 254:1
257:24 258:2
260:13 261:20
261:21 264:7
264:11,17
266:18 268:20
271:4,13
285:17,18
286:4,11,17,19
290:16,21
294:9,17,22
295:21 297:5
297:14,15
298:18 299:8
300:4,4,14
301:12,22
304:1,16,22
represent
122:17 128:9
129:12 130:10
130:11 154:21
158:10 174:10
177:19 181:9
227:19 268:7
represented
271:6
representing
3:3
represents 83:6
129:3
request 5:18,22
150:23 151:17
151:23 152:7
153:10,19
154:4,10 155:8
155:9 156:3,12
156:23,23
157:13,14
158:15,19,22
159:11,14
160:3
requested
154:17
requests
151:18 152:17
152:24 153:11
require 98:13
requirement
107:12 277:12
requires 39:1
113:15
requisite 76:20
research 19:19
22:1,2,4,7,11
22:15,20 23:9
23:17 24:9,18
39:1 79:5
80:10 182:16
185:7 223:14
researchers
30:8 255:13
reserve 37:14
38:7 117:21
reserving 38:18
reside 148:18
residence
256:15 262:22
resides 243:22
respect 22:23
24:12 25:11
27:9 29:8
31:18 41:17,21
42:7 44:21
45:20 46:4
47:1,5,17,24
58:21 64:18
66:14 92:21
104:20 107:20
108:14 111:9
111:12,20
112:10,13
115:16 117:14
117:16 118:1
127:20 140:4,8
146:15 148:3
155:5,13 168:9
168:17 169:16
175:11 178:4
181:11,17
182:10 184:3
184:24 193:17
195:8 196:4
198:2,18 200:1
201:5,15 203:2
203:15 205:11
205:23 209:3
211:8 220:18
225:9,14
229:16 232:11
233:14,17
234:12 238:19
239:5 241:2
242:11,13,18
244:3 248:2
262:22 269:3
278:15 281:6
282:2,6,11
283:8 284:8
285:16 295:14
296:3,8 297:13
297:15,17
298:2 300:3,7
300:12 302:12
303:23
respected
213:20
response
123:14 151:22
152:7,24 154:4
155:19 157:4,4
158:16 181:10
responses 5:20
152:16
responsibility
30:9
responsive
155:2,5 156:2

156:12 157:7 158:14 159:11 160:3,6
rest 143:16 145:9 286:10 287:10 294:6
restate 90:10
restore 149:15
result 71:23 125:14 126:11 126:16 256:18 256:24 257:5
results 80:16 142:23
resumé 79:13 79:17 80:12 91:11
retail 144:22 146:1,5,8,12
retained 16:3 22:8 26:24 27:4,7 71:8
retention 22:11 22:18,19,22 154:13,23
returns 136:3
revenue 124:17 272:23 273:16
review 44:17 44:22 112:21 151:2 166:11 169:1,4 177:8 180:7,9 192:17 199:19 204:10 206:15,17,21 226:10,11 228:10 233:2,6 233:15 270:6 275:5 282:14 290:15,17 302:8 303:24
reviewed 21:12 21:16,19 27:15 38:3,16 44:19 48:21 49:10 50:2 53:18 55:18 56:12 61:19 62:22 66:1 68:1,11 68:16,20 106:18 155:12 178:22 179:14 180:9 185:20 192:1,18 193:13 199:15 200:22 206:9 207:6,10,14 233:8,10 236:6 239:10 263:12 285:9,12 300:4
reviewing 106:21 166:23 177:13 180:3 193:20 225:15 225:20 298:17 302:2
reviews 78:24 150:20 156:24 157:16 158:20 159:16 219:9 227:9 235:5 245:21 284:6 294:15 297:20
revise 188:16
richard 7:16,18 287:20
right 13:8 37:15 38:8,18 117:21 121:12 132:8 138:21 139:11 160:24 161:23 163:5 174:7 202:18 221:12 222:15 229:19 246:7 254:23 280:11 290:10
rmr 1:24 308:21
road 57:3
robert 7:8,10 286:22
robertson 173:19
robin 24:6,7 25:5 27:22 67:11
robust 180:1
role 16:18,19 20:2,5,8,12,17 20:20 21:3,7 25:11 27:10,14 41:17 43:8,16 43:18 44:9 48:5 76:6,8 78:7,8,13,15 166:7,14,19 170:2 184:3
roles 165:16 171:15 173:23
ronald 8:19,21 290:2
room 75:6,11 75:19,21
rothchild 7:20 7:22 288:5,9 301:16,17
roughly 65:9
row 131:9,17 131:19,21 132:12 135:4 276:21
rows 131:23 139:2
runs 213:19
rural 84:20
russo 1:14 2:12 5:2,7,10,11,19 5:24 6:3,6,9,12 6:15,18,24 7:5 7:7,10,11,14,15 7:18,19,22,23 8:3,4,7,8,11,12 8:16,18,21,22 9:3,4,7,8,12,14 9:17,18,21,22

10:3,4,7 11:20 12:21 13:15 64:1,11 78:21 79:3 80:14 100:23 109:1 127:12,17 128:4 150:15 151:8 152:18 160:18 161:2,6 161:10,15,18 162:6 180:19 185:7 188:1 190:3,13,18 191:10,13 200:20 208:15 219:1,6 227:3 250:23 251:4 287:2,7,13,18 287:22 288:3,7 288:12,16,21 289:1,6,10,15 289:19,24 290:4,8 292:1 292:6,10,14,18 292:22 293:2,6 293:11,15,22 294:2 301:5,10 304:12 305:14 307:19
russo's 155:24 158:1
rv 135:14,23 138:16 139:13 278:6,17
rvs 138:12,15 138:22,23 139:11
ryan 3:21 11:5
rybolt 199:18

s

s 1:14 2:12 5:2 11:1 12:21 13:16 164:4 190:3 219:13 307:19
sale 122:5
sales 146:18
sanders 111:13 201:6,16 202:6 202:22 203:2 204:19
sat 104:23
save 24:22 307:8
saying 102:1,2 102:21 104:18 104:19 105:7,9 110:13,16 121:23 144:11 232:9 273:19
says 79:4 82:21 97:19 138:16 155:21 157:19 157:23 159:19 160:11 162:4 163:21 172:22 173:1 181:20 183:13 184:11 185:6 188:1 193:7,12 199:15 211:2 228:7 232:12 244:20 248:18 251:13,23 263:11
scan 75:19
schedule 214:7
school 74:9,11 74:14,24 75:2 79:22,23 255:18
science 41:13 74:7
scope 25:19 29:10,15 33:8 34:13,16 40:16 46:22 47:10,20 48:12 57:9 66:15 220:7 225:6,11 231:8 233:18 242:12 242:21 265:13 301:18,21
scott 8:23 9:3 291:22,23
scripts 141:15 141:18,22 142:1,5
search 16:9
second 79:4 138:21 139:10 155:20 172:21 231:7 232:21 247:10 248:16 248:17 249:19
section 81:12 83:23 222:5,22 223:1,9,11,13 223:22 225:6,8 243:5,8,9 244:3,18 245:6 245:11,16,17 246:4,8,22 247:6,19 248:17 251:10 252:11 253:12 254:3,9,11,14 256:17 257:2,3 257:11 258:4 260:6,12,13,22 261:1,12,17,22 261:23 262:1,2 262:3 263:6 272:20 273:14 274:8 298:22
sections 222:3 222:20 246:22 246:24 262:6
sector 215:7 216:14 255:24
security 213:22
see 16:8 49:11 55:4 65:3 80:19 81:11 83:3 84:1,4,15

85:23 89:9
98:19 99:22
100:10 130:8
137:11 142:23
152:15,19,21
152:24 153:4
153:10,19
154:12,19
155:9,21 156:5
157:19,19
158:8 159:3,20
163:20,23
164:5 167:3
169:21 171:5
171:10,12
172:8,12,21
173:5,16,21
174:13,15,19
174:24 175:7
175:21 176:9
176:13,17,20
176:24 180:8
181:20,24
183:8,15,23
184:14 185:6
186:2,5,10,13
188:2 192:15
211:6,22 212:2
215:3,8,11
216:15 218:17
219:16,18
227:11,16
228:23 236:10
244:19 245:14
247:1,14 249:9
249:22 251:12
251:17 252:5
254:17 255:2
257:21 260:10
260:19 261:16
263:9,15 267:5
268:6 277:3
279:1 284:11
seeing 69:3
98:16
seeking 32:3
seeks 92:6
seemed 51:4
seen 16:5 22:18
23:2 44:22
98:15 151:12
164:18 191:15
211:11 255:15
255:17
sekiya 164:4
166:15 170:17
176:22
selected 148:13
seller 86:19
88:24 101:11
102:8,19 103:4
103:12 125:11
144:19 145:8
217:23 218:3,7
249:1 256:21
294:20 295:18
296:13
sense 82:12
133:8
sent 153:24
169:5,11
239:21
sentence 211:2
226:2 247:10
248:17 251:12
251:23 256:8
256:16 263:11
265:11
separate 22:22
78:4,5 109:22
sepsis 243:23
september 6:2
169:17
septicemia
243:23
sequentially
131:22
seriously
282:17
serrano 173:20
serve 92:5
165:17 212:9
212:13,16
215:14
served 17:9,15
17:19,20 18:3
18:10,16,23
19:8,10 74:21
156:1,4 158:3
158:5 160:11
160:12
service 17:23
55:2 72:18
96:5,7,8 97:4
121:3 125:1,10
125:16,19,23
126:2,8,12,17
126:20 132:18
137:10 145:23
213:6 222:15
222:24 228:20
228:21 249:7
249:12,15
250:1,6 252:3
252:4 253:7,8
257:6,9 262:8
272:23 277:7,8
299:18,23
303:2
services 7:3
28:7,9 30:11
30:23 32:4,7
34:5,6,11
35:14 46:23
47:15 54:10,13
55:12 56:19
57:11 58:11
59:12 61:7
69:15 70:23
73:1 82:23
83:1,2,17
85:21 87:3
90:22 92:22
94:8,16,23
95:8 96:2,4

97:6,16,18,24 98:22 99:14 100:12 101:7 101:13 102:20 103:7,14 104:15,21 105:6 122:18 123:8 124:1,13 124:14,15 126:7 134:15 134:18,21 136:17,17,20 142:10 144:2 144:14,16 148:15 163:21 166:10,18 169:17 170:7 170:12,15 171:6,21 174:4 174:14 175:10 175:14,17 176:14 181:21 186:3 193:18 196:12 199:1 202:21 221:17 222:8,10 225:17 226:12 228:11 231:10 231:11,24 232:1,6,14 233:7,22 234:6 239:19 240:16 240:18,19 241:9 242:3 243:6 244:22 245:13 247:23 248:7,13 253:17 254:2,5 254:9,11 256:7 256:14,19 257:13,19 258:2 260:18 261:5 262:12 262:15,19 263:4,8 265:3 265:6,20 266:24 272:21 273:11 274:4 281:2,7,22 282:7 296:5,14 296:16,18,19 296:22 297:2,8 298:4,7,11 299:3,5,13,15 300:1 302:3,17 303:8

serving 17:10 17:15

session 5:4 190:1

set 96:12 113:7 119:7 135:19 180:11 217:24 255:13 286:3 303:24 308:10

sets 40:13,16 80:16 147:1 148:4

setting 124:16 144:6 296:7

settled 70:2

seven 200:9

several 50:19 81:17 89:16

severe 243:23

severin 13:15

sheet 128:7 306:1 307:11

sheets 153:13

shook 267:21

shore 74:20 75:4 76:20

shortly 212:24

shown 168:21 236:3

shows 85:8 173:3

side 83:13 84:7 84:7 132:8

sign 22:13 305:7,9

signature 305:16 308:20

signed 307:15

significant 56:24 111:2 149:2

silver 91:20

similar 40:13 40:15,16 118:20,23 178:3,7 181:17 186:20,23 214:15,16,22 215:15

similarly 138:11 237:21

single 123:17 133:14 145:23 177:11,14 195:22 280:15

sit 107:2 108:19 109:9 110:5,9 111:4 117:11,19 118:5 192:10 195:20 199:10 206:4 298:17

sitting 38:16 131:20

situation 36:8 65:3 108:14

situations 48:12

skill 40:13,16

skilled 82:10

slides 209:23

slightly 243:15

sloppy 51:4 194:22 195:8 229:14

small 53:14 149:3 195:10 195:11 196:5,8 196:16 197:23 199:7 204:12

204:22 205:5 227:5
smaller 122:6 136:4
smith 3:4
societal 213:10
solely 29:15
somebody 114:5
sophisticated 134:6
sorry 20:18,23 28:22 56:1 76:6 79:20 85:16 90:9 94:11 106:8 109:17 112:4 115:19,22 129:8 134:14 144:15 148:15 150:17 156:16 160:19 163:20 164:4 171:13 183:19 188:16 209:1 213:16 217:9 218:18 229:1 233:1,3 233:4 236:15 241:15 244:18 246:1,2,19 264:17 266:1 267:20 268:16 270:22,22 275:8 279:6,7 282:3 283:1 285:5 290:20 298:8,16 303:12
sort 32:14 83:15 134:9
sound 235:18
sounds 115:12 174:7
source 268:15
sources 28:8 255:6
south 245:5 255:24 256:3,5
southern 1:3 11:18
spain 170:4,18
spam 161:11
sparks 7:16,18 287:20,24
speak 13:21,22 29:12,13
speaking 219:21 278:4
special 186:14
specialist 70:17
specific 46:15 55:13 76:24 88:9 105:3,10 118:11 130:12 134:16 163:15 214:6 221:19 222:11 228:20 228:20 243:11 249:7 253:3,7 254:7 261:2 262:14,21 295:1,2,19
specifically 39:14 228:8 231:8 232:12
speculating 52:1
spending 140:17
spent 153:16 176:20,21,22 176:23
spite 37:22
spoke 71:13 204:6 208:22
spoken 26:19 71:7,16 155:11 285:6 294:23 298:6 300:18
sponsored 210:4,6
spouse 19:7,12
spread 73:14
spreadsheet 5:15
spreadsheets 227:24
staff 43:12,14
staller 199:16 206:11
stamp 135:12
stand 240:21
standard 255:20 283:18
standpoint 80:11
stands 96:23 110:4
stapler 180:17
start 82:8 124:1 152:23 218:20 246:18
started 13:9 27:19 167:18 167:24 168:19 168:22,24 215:19
starting 11:22 130:7 131:5 152:21 163:3,8 163:11 183:18
starts 79:4 154:11 157:20 159:1 162:6 211:20
state 13:12 16:12 29:7 84:19 91:17 122:4,6 224:18 234:24 236:5 249:19 253:13 255:22 257:17 262:22 283:10
stated 263:23 283:12

statement 251:19
states 1:1 5:20 11:16 12:4,15 30:10 64:7 73:13 80:12 120:4,6 122:4 154:15 155:23 157:24 158:6 159:5 213:1 231:8
statistic 256:9
statistical 122:13
status 134:17
statute 31:7
stay 29:9 243:22
staying 246:17
stays 114:8
stenographic... 308:9
step 248:20 250:5 252:14 254:15
stephen 9:19,21 293:8
steps 253:14
stop 133:2 297:11
store 144:21
straight 131:16
strategic 84:3
street 2:15 3:15 11:11
stricken 91:4
studies 148:1 213:13,22 214:22 216:17
study 35:2 80:9 122:8 148:8 211:21 213:11 213:16 214:3 214:10,13,16 250:5
sub 253:14
subject 28:21 28:22 155:22 157:20 159:1 159:19
submits 44:18
submitted 49:6 49:8 50:20 57:17 61:20 62:16,19 86:16 163:14 230:15 264:19,19
submitting 195:4
subpoena 150:23 151:17 153:24 181:11
subsections 246:7
subsequent 130:3
subsequently 50:20 195:1
substance 41:23 199:22
substantive 43:9,16,18 64:14 190:21 191:4 244:8 245:3
succeed 213:3
suffers 224:13
suits 7:3 85:22 100:13 101:8 101:12 102:3 104:5 211:3,12 211:17
summarize 153:11
summarized 112:22
summary 10:15 281:1
summer 19:22 19:23 20:3,12 23:7,18 167:24 188:19
super 15:1
supervised 179:3
supervisory 43:8 184:2
supplement 37:5
supplemental 6:23 156:3 157:6 158:4 160:9 191:12 191:18 194:13 196:3 206:8,12 285:24 300:9
supplied 62:7
supplies 75:22 273:11 274:4 295:13
supply 96:8 125:1
support 81:12 84:3
supporting 75:9 76:13 78:16
sure 21:4 37:4 38:14 94:12 109:13,15 111:17 114:20 115:10 129:1,4 129:6 140:1 179:19 189:2 222:2 268:1 279:19,23 280:17 300:21
surgery 75:9 76:10 132:23
surprised 45:11
swear 12:19

switched 242:17
sworn 12:23 190:5 308:6
synonymous 30:3 249:3
system 90:5 124:6 167:10 177:10

t

table 10:8 52:22 139:22 139:22 219:20 220:1,4,5,8,11 221:1,2,7 232:21,21 233:16,19 234:21 237:7 237:11,21 238:20,22 239:15 240:6 240:20 241:3,3 241:8 242:8,9 265:19 266:4,5 266:8,14 267:7 268:3 269:12 269:16 270:5 271:4,12 272:10,13 274:13 275:1 275:20 276:8 279:12 280:23 280:24 281:1,6 282:2,7,12 302:12,20 303:13
tables 37:6 139:19
tabs 128:19
take 14:17,18 14:24 60:5 65:2 70:18 109:4,16 114:24 115:15 116:10 126:22 127:4 132:19 132:19 147:13 147:14 156:8 163:3 181:14 202:13 246:10 250:12 276:20 278:21 279:21 286:21 290:15 290:17 300:20
taken 11:12 14:23 48:5 63:21 127:8 189:13 202:20 204:22 250:19 278:16 301:1 307:6 308:9
takes 296:17
talk 26:16 243:11 285:5
talked 204:18
talking 65:24 88:11 203:14 246:1 248:23 285:4
talks 86:11 216:10
tank 212:24
tasks 43:13 166:22,23
teaching 79:11
team 25:3,6 30:12 41:20 42:13 43:3,6 45:18 61:21 62:2 67:5 76:2 76:4 165:16,22 171:18 173:17 175:8 180:3 230:21 231:2,4
teammates 174:1 175:12 175:15
telephone 71:11
television 16:6
tell 14:3 69:9 74:18 86:1 89:18 124:4 137:3 157:1,14 186:8 301:12
telling 276:12
term 29:23 60:11
terminology 96:24 124:10 205:12 247:12
terms 35:13 82:17 93:15,15 93:18 143:11
terry 9:5,7 292:8
testified 12:23 37:22 42:5 89:4,12,15 90:13 92:9,10 92:18 179:2 190:5 192:5 194:20 207:16 302:11
testify 21:15 70:5 187:9,14
testifying 31:11 46:19 90:5 92:13 101:22 230:8
testimony 13:21 31:15,24 32:14 35:23 42:6 67:12,19 67:24 82:1,2,4 82:17 90:1 91:3 92:7 93:22 94:7 104:23,23 167:23 194:5 199:17 201:4 203:1,7 204:24 208:5 266:8 305:13 308:9

thank 12:5,16 13:3,24 14:16 17:22 64:8,9 64:15 80:2 109:7 127:15 127:23 129:7 139:24 150:17 160:7,14 162:22 190:16 191:5 238:18 247:8 251:2 252:22 300:22 301:8 304:7,12 305:4,5
thanks 17:22
thereto 158:2
thing 24:21 40:7 274:19
things 57:14 58:15 59:3,13 84:24 148:23 177:17 214:9 231:16
think 15:4 30:2 37:3,21 39:16 52:8,14 63:4 65:8 66:2 68:15 71:13 80:7,23 81:24 82:16 84:9 101:24 102:5 105:13 107:4 107:24 110:23 111:1 112:5 116:14,18 119:21 120:8 122:9,12 148:6 163:1,2 165:20 167:13 169:2 180:22 182:13 194:5 201:18 204:5,21 205:5 209:7 210:6 212:24 216:4 223:2 229:22 232:9 243:14 251:9 262:19 263:20 271:9 274:19 276:17 278:3 297:23
third 87:19 232:11
thought 18:21 220:24
three 67:14 164:2 166:5 170:5 171:22 208:3 225:10 242:13 259:5 301:22
threshold 140:16
time 11:8,21 12:7,10,18 14:19 15:1,4 23:11 24:23 36:18 37:12,21 46:24 63:19 64:1 74:14 109:4,16 110:2 110:5 114:23 115:7 127:6,12 130:2 150:4 153:13,13,15 166:23 167:6 167:10 168:3 168:23 172:9 175:20,21 177:4,5 178:2 178:4,14 187:24 188:9 189:7,10 190:13 250:10 250:17,23 257:6 258:17 259:4,4 280:15 286:21 290:15 290:16 300:23 301:5 304:12 305:4,14 308:10
timekeeping 167:10
times 32:9 35:11 43:15 50:19 63:4 169:8 303:21
title 136:23
titled 85:20 87:20 100:11 135:23 138:4 152:16 191:11 243:5 245:12 254:15 257:11 260:7,16 262:17 263:7
today 13:10 15:9 24:16 36:12 38:16,20 61:18 66:2 107:2 108:20 109:9 110:9 111:4 117:20 118:5 131:20 145:9 150:4 172:23 173:2 194:21 199:11 201:3 206:5,24 265:10 290:13 298:17 300:18 304:13
today's 11:7,19 305:12
together 40:10 85:18
told 15:22 16:14,17 45:11
tomorrow 114:6
took 54:3 202:20 251:4 280:2
top 16:7 79:4 181:24 246:11 251:11

tort 3:13
tosic 24:5 26:17 27:3,9,22 67:11 68:17
total 52:22 143:11 145:1 234:15 237:23 238:21 240:6 276:1,7
totals 10:14 131:3
touched 64:17
toward 140:16
towards 141:4
track 15:1
trade 147:24
training 76:21 77:20,22,23 85:9 115:16
transaction 218:7
transactional 122:16,22,24
transactions 88:22
transcript 5:8 307:5 308:8
transcription 51:1
transparency 148:3
treating 243:22
trial 32:13 37:9 104:23 113:3
tricare 141:7 141:22 142:5
tricia 68:21
trier 91:9 105:19 229:22 274:19
triple 230:22
true 120:17 140:21 211:8 252:8 259:3,20 307:8
truthfully 15:11
try 13:21,22 114:6 214:23
trying 18:12,14 40:9 48:8 101:19 110:17 112:7 113:2 119:2 218:11 237:5 279:18 280:16
tukes 8:14,17 289:17,21 296:21
turn 154:10
turner 4:9 12:14,14
turning 158:18 163:17 169:12 169:19 171:9 199:14 211:1 219:19 243:4 247:9 262:4 263:6
two 40:7 71:14 79:22 91:7 118:4,17 136:3 136:7 166:21 186:8 193:6,14 194:12 196:2 204:12 230:14 231:16 248:20
type 46:3 48:1 58:13 82:13 146:14 197:3 203:12 204:19 214:15,16 215:15 216:1 216:18 217:1 221:22 227:5
types 34:11 146:11
typically 14:22 14:24 39:6 91:24 211:3 218:1
typo 160:10

u

u.s. 2:14 3:11 4:6,10 73:15 120:9,22 122:18 216:10
uh 14:12,12 133:5 276:23 291:11
ultimate 126:1
ultimately 125:15
unable 302:24 303:13
unclear 182:14
under 14:8 17:6 100:11 132:8 182:22 248:17 298:21 307:1,4,12
undergraduate 74:2 75:1
underlying 112:1
underneath 256:17
understand 14:2,4,7 18:12 18:14 20:1,17 21:14 22:2,6 23:23 24:17,24 25:15 28:10 31:1,4 33:24 36:17 38:14 40:9 45:24 48:8 49:16 56:21 60:2,6 60:10,22 67:23 98:24 106:6 110:17 112:5 129:1 138:1,18 149:13 151:20 151:21 154:3

165:15,19 194:8 199:23 203:7 205:14 214:20 221:6 227:19 241:16 271:10 274:20 275:9 278:3 280:17 286:15
understanding 15:10,23 16:12 16:17,19 20:19 21:2,7 24:4 25:19 27:3,10 27:12,13,20 28:3,6,12 37:17 39:5 43:13 44:8 45:1,7 48:20 50:1 51:9 77:2 83:10 100:6,24 101:20 103:15 104:4 105:1,4 105:11,14,17 121:22 129:4 136:10 140:1 141:18 147:12 147:17 149:21 151:16 155:1,4 175:18 181:13 187:1,8,15 188:8 197:16 217:22 266:7 279:23 307:11
understood 23:20 25:21
unique 175:14
unit 63:23 125:21 127:10 132:24 190:11 250:21 301:3
united 1:1 5:20 11:16 12:4,15 30:10 64:7 73:12 120:4,5 122:3 154:15 155:23 157:24 158:6 159:5 213:1
units 125:5 133:1 135:3 253:6
university 74:20
unrelated 137:10
unstructured 80:17
upbilling 57:13
upcoding 57:13
update 37:5,15 37:22 38:17 46:3
updated 38:10 66:3 214:6
updates 45:19
updating 37:13 38:5
upstairs 191:2
usa 5:11 6:3,6,9 6:12,15,18,22 7:5 11:14 79:3 162:6 181:1
usdoj.gov 3:18
use 29:23 31:20 70:20 86:14 93:15,18 99:22 100:17 101:3 103:12 107:3 109:22 140:9 140:10,12,21 140:24 141:2,8 141:11,12 142:5 143:23 144:10 145:3 146:23 148:11 148:12 150:3 205:13 252:17 259:18 274:8 277:13
used 30:17,20 31:2,5 96:12 96:21 97:17 98:1,6 99:15 100:3 103:16 104:4,14 105:2 105:6,11 123:4 124:5 139:21 143:13,19 144:23 171:1 179:21 198:5,8 209:6 248:14 255:7,13 257:12 258:5 258:11 260:2,7 260:17 262:18 272:15 285:18 294:17
useful 77:5 124:12,13 217:8
uses 141:22
using 60:11 97:2 101:6 102:18 103:3 125:6,8 140:15 143:4,9 144:14 145:5 156:9 248:10 296:11
usually 39:1
utilized 30:5,6 97:8 106:13 198:14 258:9
utilizing 102:24 259:19

v

v 13:16
vague 118:15
validate 54:20 226:10,11 228:10,16 238:12,14 281:9 282:14 285:7 302:8

validated 50:5 56:12 234:7 235:1 236:2,6 236:23 237:10 237:16,24 238:11 239:14 265:22 266:9 267:9 268:9 269:13,19,24 279:15 281:12 281:16
validating 225:16,20 302:2 303:7
validation 303:24
validity 112:14 179:20
value 7:2 10:10 16:20 20:6,14 29:19,24 30:1 30:4,11,16 31:5,21 32:6 32:16 33:5,8 33:16 34:1,7 34:15 35:8,13 36:18 46:23 47:14,24 48:2 54:6,9 57:10 58:10,22 59:11 61:1,6 63:14 64:18 65:1,17 69:13 70:22 82:23 83:1,16 85:21 86:12,15 86:20,23 87:1 87:11,16,22 88:11,12,13,14 88:16,18 90:6 90:15,19,22 92:14,18 93:3 93:4,12,13,24 94:7,16,20,21 95:7,18 96:1,4 97:4,7,8,14,18 98:1,1,21 99:13 100:12 100:17 101:7,9 101:13 102:4,6 103:6,13 104:21 105:5 122:18 123:8 125:5,21 134:15,21 135:15 136:2,6 136:16 143:10 143:17 149:2 166:9,17 170:6 170:12,15 171:21 174:3 175:16 193:18 195:6 196:5,9 196:12,15,20 196:24 197:4 198:24 204:13 205:1,12 217:8 231:9,23 232:5 232:13 233:14 243:6 246:23 249:2 252:2,4 253:6 254:5,20 256:14,18 257:6,8,12 258:5 260:8,17 262:18 263:7 266:11,24 272:15 273:7 273:21 274:1,3 274:3,9,13 276:14,19 277:4,6,7,14,17 277:19,20 278:1,11,16,21 278:22 279:2 279:10 297:7 298:5 302:14 302:17,22 303:1,14,14
values 34:1 46:19 47:17 70:8 126:5 143:12,14 145:2 149:4 170:19 245:13 257:18 265:5 265:20 272:5 302:19
vanslyke 4:7 12:11,11
various 167:6 207:4
ventilation 243:24
verbally 14:11
verbatim 308:8
verified 164:17 172:5
verify 116:3 128:12
verifying 180:4
veritext 11:7
versus 11:14 33:17 52:22 56:10 93:3 113:4,5
veteran 59:3 85:9
vickery 1:24 2:20 308:3,21
victoria 170:4
video 1:13 2:11 63:24 127:11 190:12 250:22 301:4 305:12
videographer 3:21 11:3,6 12:5,16 13:1 63:19,22 64:8 127:6,9 189:10 190:10 250:17 250:20 300:23 301:2 305:6,10
virginia 73:10
visual 256:17

vitae 5:10 79:5 153:3
vocational 70:17 71:1,1

w

wac 146:18,19
wait 236:14
waived 305:16
waiving 155:22 157:21 159:2 159:19
walked 272:19
wallace 10:16 17:2 48:21 49:6 50:10,20 51:11 52:5 53:24 54:11,18 55:6,23 56:4 62:15,24 63:10 66:4 114:11 170:10,20 193:9,24 195:7 196:1,5,10,19 197:2,9,11 198:14,23 199:7,12 206:12,14 225:23 226:14 227:12,22 228:13,24 229:24 231:12 232:3,8,15 234:4,14 235:2 235:11,15,19 236:12 237:1 237:19 238:7 239:7,12 241:10 242:4 253:18 263:8 263:13,19 267:18 268:14 268:19,23 269:11,17 270:8,14 271:23 274:17 281:3,23 282:13,24 285:14 299:13 302:5 303:18
wallace's 49:11 49:20 50:2 53:10 54:4 56:10 98:17 111:23 130:13 130:16,21 131:11 156:17 171:1 192:23 193:2 226:19 228:1 229:9,13 233:20 235:23 237:9 241:20 263:22 264:11 264:17,18 265:2,22 266:10,18 267:8 268:8 269:5 270:12 279:14 280:3 282:19 283:6,8
wang 232:17
want 15:3 96:9 109:3,13 115:2 126:22 156:7 189:7 205:13 222:1 250:12 267:24 277:11 279:22 286:20 290:14,17 291:2 300:6
wanted 41:22 64:16 76:17 111:17 139:24 297:24
war 213:1,3,4
ward 3:4
wardandsmit... 3:9
washington 2:16 3:16 11:11 73:19
water 1:7 11:13 16:3 153:17 154:16 224:19 225:3
way 60:13 81:24 99:22 102:6 115:11 162:14 190:21 190:22 191:4 194:4 232:9 277:10 280:21
we've 14:23 27:22 67:10 109:11 117:16 119:3 171:22 174:1 178:16 189:4 201:18 252:7 258:8 265:9,10,16,18 266:8,19 267:3 274:24 284:24 294:10 297:16 300:18 301:23
wealth 80:15
webinar 209:7 210:2,5
weitz 4:8
welch 7:8,10 287:4
welch's 286:22
went 50:8 74:5 74:8 125:5 168:8 180:7 194:22,23 228:18 235:8 238:3 265:12 269:16 273:13 282:19,21 285:11
white 86:2,7,11
wholesale 146:17,20
william 73:24
willing 86:18 86:19 88:24,24

101:10,11
102:8,8,18,18
103:4,4,12,12
125:11,11
144:19,19
145:7,8 217:23
217:23 218:2,2
218:6,7 244:22
249:1,1 256:20
256:20 294:19
294:19 295:18
295:18 296:12
296:12
wilmington 3:7
winning 213:3
witness 12:19
17:18 18:18
19:3,15 20:23
21:6,18 23:13
23:20 25:8,13
25:18 26:13,19
28:20 29:12
30:19 31:14,23
32:19 33:1,11
33:19 34:3,19
35:1,10 36:6
36:14,20 37:12
38:1,22 39:4
39:12 40:12,22
42:9,24 43:11
44:6 45:5,15
45:23 46:7,13
48:10 49:4,15
50:8 51:3,17
51:23 52:8
53:2,13,21
54:8,23 55:9
55:20 56:15
58:6,18 59:10
59:18 60:1,9
60:16,21 61:5
61:13 62:13
63:2,13 65:8
66:10,18 67:3
67:8,17 68:3,9
68:24 71:10
72:2,16 73:4,9
76:23 77:11,16
79:15 81:6,23
82:16 83:8
84:9 85:12
86:10 87:7,14
88:2,21 90:17
91:3,6 92:3
93:6,20 94:5
95:1,15 97:11
98:4,12 99:10
99:17 100:5
101:16,24
102:17 103:3
103:19 104:3
104:10 105:9
106:23 107:19
108:19 110:20
112:4,17
113:11 114:10
115:19 116:1
116:14 117:4
117:10,19
118:11,23
119:9,15,21
120:8 121:1
122:2,21 123:3
123:12 125:18
126:4,14 127:5
133:10,20
134:12 136:14
140:19,24
141:10,17,24
142:8,15,21
143:8,21
144:13 146:4
147:20 148:22
149:20 150:7
152:2,11 154:7
154:19 161:11
162:23 164:16
165:4 168:12
172:3,20
173:11 179:10
179:24 182:13
183:2,21 184:5
184:19 185:3
185:19 186:19
187:5,13
188:15 193:23
195:17 196:7
196:22 197:8
197:15 198:7
198:17 199:10
201:2 202:12
203:19 205:18
206:4,19
207:20 208:10
209:5,12,18
210:1,13,22
211:11 212:11
214:12,19
215:11,18
216:4,20 217:3
217:20 220:14
220:23 221:14
222:1,17
223:18 224:1
225:19 226:18
228:3 229:7,19
230:10 231:1
231:19 234:1
235:4 236:9
238:2,14 239:2
239:18 240:3
240:11 241:15
241:22 242:21
243:14 244:7
244:14 245:9
245:20 246:14
247:21 248:6
249:14 250:3
255:10 258:16
258:23 259:14
259:23 260:4
261:9,15
262:10 263:1
264:2,14
265:15 266:1
266:14 267:15

267:20 268:11
269:15 270:2
270:18 271:9
271:21 272:8
272:18 273:9
273:23 274:15
275:8,14,23
276:4,17 278:9
280:8 281:12
281:19 282:6
282:18 283:16
284:15,21
285:11 286:6
291:17 294:14
296:2 297:19
298:2 299:2,12
299:21 300:16
302:7,16
303:11 304:4
305:5,7 308:6
women's 84:20
84:22
word 26:6
work 22:2,4
24:24 27:19
39:2,15 40:10
40:17 41:14
44:9,13 46:4
46:22 48:18
51:4 56:10
57:9 63:5,9
72:5,7 73:7,10
73:16 81:1,3
81:20,24 83:6
83:11,14,15
85:6 91:24
105:18 129:4
130:13,16,24
131:11 140:1
153:16 161:8
168:5,10,12,17
168:24 176:4,5
176:8 180:1,3
181:18 182:5,6
182:16,19
184:7 187:21
188:5 193:24
195:3 229:2,14
229:21 230:1,6
230:11,22
231:3 233:9,18
234:4,7 242:22
242:23 283:3,4
303:23
worked 25:4
40:1 69:6,10
69:11 73:20
74:13,19 75:6
77:24 78:10
79:22,22 84:12
84:16,18,19
116:10 165:24
166:1,8,16
178:21 179:6
179:11
working 23:22
24:5 25:2
27:21 28:1,4
39:18 42:12,14
42:17,21 45:18
69:19 91:21,23
167:6,18 168:2
170:5,22
171:17,20
174:2 175:15
176:1 177:17
182:22 183:5
183:17 184:5
187:15
workmanship
194:22 195:9
works 116:5
world 213:1,3,4
worth 36:12
49:20
writing 101:5
written 76:7
179:8 208:7
wrong 52:16
124:4 205:15
230:3 235:24
270:9 282:20
303:21

x

x 130:15,19
131:6,10
x's 130:8,10,11
136:23 137:4

y

y 164:4,4,4
yeah 51:18
52:8 131:15
159:4 229:20
233:5 236:19
250:14 291:15
297:12
year 83:9,15
114:7 249:11
years 30:14
36:11,11 40:14
40:17 85:7
89:24 90:2
91:13 213:19
york 84:19
younts 68:21
182:10 186:12
186:14,19
187:2,10

z

zoom 4:8,10
12:8

Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate. The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

DISCLAIMER: THE FOREGOING FEDERAL PROCEDURE RULES ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY. THE ABOVE RULES ARE CURRENT AS OF APRIL 1, 2019. PLEASE REFER TO THE APPLICABLE FEDERAL RULES OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.

VERITEXT LEGAL SOLUTIONS

COMPANY CERTIFICATE AND DISCLOSURE STATEMENT

Veritext Legal Solutions represents that the foregoing transcript is a true, correct and complete transcript of the colloquies, questions and answers as submitted by the court reporter. Veritext Legal Solutions further represents that the attached exhibits, if any, are true, correct and complete documents as submitted by the court reporter and/or attorneys in relation to this deposition and that the documents were processed in accordance with our litigation support and production standards.

Veritext Legal Solutions is committed to maintaining the confidentiality of client and witness information, in accordance with the regulations promulgated under the Health Insurance Portability and Accountability Act (HIPAA), as amended with respect to protected health information and the Gramm-Leach-Bliley Act, as amended, with respect to Personally Identifiable Information (PII). Physical transcripts and exhibits are managed under strict facility and personnel access controls. Electronic files of documents are stored in encrypted form and are transmitted in an encrypted

fashion to authenticated parties who are permitted to access the material. Our data is hosted in a Tier 4 SSAE 16 certified facility.

Veritext Legal Solutions complies with all federal and State regulations with respect to the provision of court reporting services, and maintains its neutrality and independence regardless of relationship or the financial outcome of any litigation. Veritext requires adherence to the foregoing professional and ethical standards from all of its subcontractors in their independent contractor agreements.

Inquiries about Veritext Legal Solutions' confidentiality and security policies and practices should be directed to Veritext's Client Services Associates indicated on the cover of this document or at www.veritext.com.

Exhibit 784

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF NORTH CAROLINA

- - - - -

IN RE: NO. 7:23-CV-00897

CAMP LEJEUNE WATER
LITIGATION

This Document Relates To:
ALL Cases

- - - - -

Wednesday, February 25, 2026

- - - - -

Remote Videotaped Deposition of HEIDI SCHWARZ, MD, FAAN, conducted at the location of the witness in Canandaigua, New York, commencing at 9:00 a.m., by and before Robin L. Clark, Registered Professional Reporter and Notary Public in and for the Commonwealth of Pennsylvania and State of New Jersey.

- - - - -

REMOTE APPEARANCES:

BELL LEGAL GROUP
BY: LESLIE LaMACCHIA, ESQ.
J. EDWARD BELL III, ESQ.
219 Ridge Street
Georgetown, South Carolina 29440
919-277-9299
llamacchia@belllegalgroup.com
jeb@belllegalgroup.com
For the Plaintiffs

U.S. DEPARTMENT OF JUSTICE
BY: CINDY M. HURT, ESQ.
JOSEPH B. TURNER, ESQ.
ELIZABETH K. PLATT, ESQ.
HANLEY W. GIBBONS, ESQ.
950 Pennsylvania Avenue NW
Washington, D.C. 20530
202-514-2000
cindy.m.hurt@usdoj.gov
joseph.b.turner@usdoj.gov
elizabeth.k.platt@usdoj.gov
hanley.w.gibbons@usdoj.gov
For the Defendant

- - - - -

I N D E X

WITNESS		PAGE
HEIDI SCHWARZ, M.D.		
BY MS. HURT:		7
BY MS. LaMACCHIA:		56

E X H I B I T S

NUMBER	DESCRIPTION	MARKED
Schwarz Exhibit 1	Medical Record from University of Colorado Healthcare System Bates 00682__SPARKS__0000006849 to 6855	13
Exhibit 2	Subpoena	15
Exhibit 3	Notice of Deposition of and Request for Production	16
Exhibit 4	Plaintiff's Objections and Responses to Defendant's Notice of Deposition	17
Exhibit 5	Plaintiffs' First Amended Designation and Disclosure of Phase III Damages and Offsets Rebuttal Expert Witnesses	19
Exhibit 6	Schwarz Expert Report dated 2/5/25	21
Exhibit 7	Schwarz Damages Report dated 1/9/26	25
Exhibit 8	Materials Considered List for Dr. Heidi Schwarz's reports on Plaintiffs Robert Welch and Richard Sparks	27

Exhibit 9	Supplemental Materials Considered List	29
Exhibit 10	Second Supplemental Materials Considered List	30
Exhibit 11	Marjorie Hackett-Wallace Expert Report dated January 20, 2026	32
Exhibit 12	Itemization of Charges for UCHealth Bates 00682__SPARKS__0000006663 to 6664	46
Exhibit 13	UCHealth Record dated 4/6/2018 Bates 000682__SPARKS__0000003960 to 3965	53

DEPOSITION SUPPORT INDEX

- - - - -

Direction to Witness Not to Answer

Page Line

NONE

Request for Production of Documents

Page Line

NONE

Question Marked

Page Line

NONE

THE VIDEOGRAPHER: We are now on the record. My name is Julie Robinson. I'm a videographer for Golkow Litigation Services. Today's date is February 25, 2026, and the time is 9:00 a.m. Eastern Time.

This remote video deposition is being held in the matter of Camp Lejuene Water Litigation. The witness is Heidi Schwarz, MD, FAAN.

All parties to this deposition are appearing remotely and have agreed to the witness being sworn in remotely. Due to the nature of remote reporting, please pause briefly before speaking to ensure all parties are heard completely.

Will counsel please identify themselves and state whom they represent, after which the court reporter, Robin Clark, will swear

in the witness.

MS. LaMACCHIA: Leslie LaMacchia, Bell Legal Group for the PLG.

MR. TELAN: Pat Telan, also from Bell Legal Group for PLG.

MS. HURT: Cindy Hurt for the United States.

MS. PLATT: Elizabeth Platt for the United States.

MR. GIBBONS: Hanley Gibbons for the United States.

MR. TURNER: Joseph Turner for the United States.

- - - - -

HEIDI SCHWARZ, MD, FAAN, having been duly sworn, was examined and testified as follows:

- - - - -

BY MS. HURT:

Q. Good morning, Dr. Schwarz.

A. Good morning.

Q. We're going to go through

this whole spiel again like we did the last time where I go through and explain what's going to happen today and then I'll start asking some questions.

So can you please state your full name for the record?

A. Heidi B. Schwarz. That's my full name.

Q. And what is your current address?

A. Are you referring to where I'm sitting now or my home address or --

Q. Where you reside?

A. Where I reside, I reside at 20 Ellen Polimeni Boulevard, Apartment 431, in Canandaigua, New York.

Q. And you just took an oath and you understand you're obligated to tell the truth, correct?

A. I do.

Q. A court reporter is taking down everything we say, just like last time, it's important that you answer every question verbally. For example, you must

say "yes" or "no" rather than nodding or shaking your head. Do you understand?

A. I understand.

Q. Please talk at a reasonable pace like the pace we are speaking now so the reporter can record everything.

We should also try not to interrupt one another, otherwise, the reporter will not be able to record us accurately. Please wait until I have finished my question before you start to answer and I will not interrupt you while you are speaking. Because we are doing this over video conference, there will be some lag, but let's give the best that we can to make sure that we can wait for each other to begin speaking.

Once the deposition is complete, you'll be given an opportunity to read a transcript of your testimony to make any corrections. You will then be asked to sign it.

I ask that if you don't have any -- I'm sorry, I ask if you do not

understand a question, please let me know and I will try to clarify. If you do not ask for clarification, I will assume that you understood the question; is that fair?

A. That is fair.

Q. Okay. During the deposition, you may hear other attorneys say, "objection." Unless your attorney instructs you not to answer the question, please answer the question after the objection has been made. Is there any reason why you are unable to give your most truthful and accurate testimony today?

A. No.

Q. Is there any reason your memory might be impaired today?

A. No.

Q. Are you currently taking any medication that might impair you?

A. No.

Q. Of course, you can ask for breaks at any time, please just let me finish my question -- please just answer the question before we take a break.

So similar to last time, I want to start off, because -- I want to start off with abbreviations because we're dealing with some chemicals of concern. I don't think that most of these will come up in today's deposition, but I just want to make sure, like, if I use one of these terms, we're on the same page by using an abbreviation.

So for trichloroethylene, that's TCE, correct?

A. Correct.

Q. And tetrachloroethylene, that's TCE or PERC, correct?

A. Correct.

Q. And Parkinson's disease is -- can be abbreviated as PD, correct?

A. Correct.

Q. Do you have any materials in front of you today?

A. I have the letter that I sent and I have the medical record that, I believe, is in question today.

Q. Do you have the Bates number

of that medical record?
A. I do not.
Q. Okay. I'm going to ask for you to send that document to your counsel so that they can send it to me.
A. I'll do that.
Q. We can take a break while we -- while we do that. It is something you have electronic, right?
A. Correct. Okay. I'm just doing that right now. And what you would like sent is the medical record and the letter or just the medical record?
Q. It's okay if you have your letter, just the medical record. I want to make sure we're talking about the same document.
A. Gotcha.
Q. And you will -- I'm sorry?
THE VIDEOGRAPHER: Do you want to go off the record?
MS. HURT: Yes, please.
THE VIDEOGRAPHER: Off the record. The time is 9:06 a.m.

- - - - -

(A recess was taken at this time.)

- - - - -

THE VIDEOGRAPHER: We're back on the record. The time is 9:10 a.m.

BY MS. HURT:

Q. I'm going to share my screen and this will be Exhibit 1.

- - - - -

(Medical Record from University of Colorado Healthcare System Bates 00682__SPARKS__0000006849 to 6855 marked Schwarz Exhibit 1 for identification.)

- - - - -

BY MS. HURT:

Q. Dr. Schwarz, can you see the screen?

A. Yes, I can.

Q. And this is the document that you just provided to your counsel, correct?

A. Correct.

Q. And let the record reflect that it is a medical record from the University of Colorado Healthcare System. It's Bates-stamped 000682__SPARKS__0000006850.

MS. LaMACCHIA: No, that is not correct, Counsel, it starts with 49.

BY MS. HURT:

Q. This isn't the -- oh, that's -- correct, that was, yes, it starts with 49. Five zero is the second page. I'm going to stop sharing now.

Did you do anything to prepare for today's deposition, Dr. Schwarz?

A. Well, I sent a letter in January regarding this matter and I had a previous conversation with Ms. LaMacchia earlier this week.

Q. And by brief, how long was it?

A. Fifteen minutes.

Q. Okay. And was anyone else

present during that meeting?

A. No.

Q. I'm going to share my screen again. This will be Exhibit 2. This is the subpoena that was sent to Dr. Schwarz on February 17, it's dated February 17, 2026.

Dr. Schwarz, do you recognize this document?

A. Yes, I do.

- - - - -

(Subpoena marked Schwarz Exhibit 2 for identification.)

- - - - -

BY MS. HURT:

Q. And you saw this document before today, correct?

A. I have.

Q. Now, I'm going to add what is going to be Exhibit 3. This is the Notice of Deposition of and Request for Production for Dr. Schwarz. It is dated February 17, 2026.

Dr. Schwarz, have you seen

this document before today?
A. Yes, I have.
- - - - -
(Notice of Deposition of and Request for Production marked Schwarz Exhibit 3 for identification.)
- - - - -
BY MS. HURT:
Q. And I'm going to scroll down and there is a section called Attachment A. Have you seen this part of the document before today?
A. Yes, I have.
Q. Attachment A is the documents that are being requested by the United States. Do you have any responsive materials to Attachment A?
A. No.
Q. I'm going to turn -- I'm going to now open what is going to be Exhibit 4. Exhibit 4 is Plaintiff's Objections and Responses to Defendant's Notice of Deposition and Request for

Production. It is dated February 20, 2026. Dr. Schwarz, and if you need me to, I can scroll down so you can look at the document, but have you seen this document before today?

A. Yes, I have.

- - - - -

(Plaintiff's Objections and Responses to Defendant's Notice of Deposition marked Schwarz Exhibit 4 for identification.)

- - - - -

BY MS. HURT:

Q. Turning to page 7, and I'm going to read this number seven, the response -- the question and the response. The request was for, "All bills, invoices, or other documents reflecting compensation paid to you related to the CLJA litigation." And then the response was previously, "PLG produced these as CL__PLG-EXPERT__SCHWARZ underscore, there's a series of zeros and then one through four.

Dr. Schwarz, the invoices that were produced to the United States, we've received two to date. One is dated February 26, 2025, and it was for the amount of $30,387.50 for Mr. Sparks. And then a second invoice on June 8, 2025, for 4,550 for Mr. Sparks' case.

Have you billed for any other additional time and sent invoices for this case?

A. I will have to check.

Q. The last time would have been a little bit before your deposition.

A. There was a bill on July 10, which would have been after the deposition.

Q. Okay.

A. And that was actually to be delivered to the DOJ.

Q. And we're in the process of paying that.

A. I would like to inform you that it has been paid.

Q. Okay.

A. And then there is also from

July 10, which was after the deposition on July 1st, there was a bill for $4,225 related to preparation for the deposition.

Q. Okay. Are there any other invoices?

A. Those are the only three invoices.

Q. Okay. I'm going to request that counsel, not right now, but according to the ESI protocol to produce the July 10, 2025, invoice for $4,225.

I'm going to open what is going to be Exhibit number 5. This document is, "Plaintiffs' First Amended Designation and Disclosure of Phase III Damages and Offsets Rebuttal Expert Witnesses." It is dated February 5, 2026.

Dr. Schwarz, and I can scroll, if you need me to, have you seen this document before today?

A. No, I have not.

- - - - -

(Plaintiffs' First Amended Designation and Disclosure of

Phase III Damages and Offsets Rebuttal Expert Witnesses marked Schwarz Exhibit 5 for identification.)

- - - - -

BY MS. HURT:

Q. So I'm going to scroll back up top. If you want to take a moment to read this first paragraph, and then I'll scroll down to the section that's pertinent to you.

A. I've read the first paragraph.

Q. Okay. So now on page 5, and it says, "Parkinson's Disease," at the top. Can you take a moment to read this?

A. I have read that page.

Q. So I just want to draw your attention to, we're going to go down a little bit further to page 6. And it says, I'll highlight the text and I'll read it. "With respect to Drs. Longo, Schwarz, and Barbano, the expert's qualifications, opinions, fee schedule, and a list of all

other cases in which, during the previous four years, the witness testified as an expert, as required by Federal Rules of Civil Procedure, 26(a)(2)(B), was previously set forth in their expert reports produced February 7, 2025. Any facts and data considered by the above-named experts not already produced in this action and/or not readily available to the public has already been produced pursuant to the stipulated Order Regarding Expert Discovery, Case Management Order number 17. Docket entry 305."

Did I read that correctly, Dr. Schwarz?

A. Yes.

Q. So I want to turn down to what's going to be -- it's going to be your first report, it's going to be Exhibit number 6. Can you see the screen?

A. Yes, I can.

- - - - -

(Schwarz Expert Report dated 2/5/25 marked Schwarz Exhibit 6

for identification.)

- - - - -

BY MS. HURT:

Q. I can make it bigger.

A. It's a little cutoff.

Q. Yeah, there we go. Dr. Schwarz, do you, I can scroll if you need me to, but this is your report for Mr. Richard Sparks in this matter. It is dated February 5, 2025, and you can see here that it's for Mr. Richard Sparks.

It says, "My qualifications are set forth more fully in my CV, attached to Appendix 1. I am being compensated $650 per hour for my time and services rendered."

Is that still your bill rate, Dr. Schwarz, $650 per hour?

A. Yes, it is.

Q. Have you offered any additional testimony since July 1st, 2025, the date of your last deposition in this case?

A. No, I have not.

Q. And your CV is at the end of your specific causation report. It's a very long CV. Okay. Dr. Schwarz, you can take a moment to look at it if you need to, but do you know if you have any additional updates to your r?sum? since this was provided to the United States on February 5, 2025?

A. No, I do not.

Q. Okay. You are a neurologist, correct?

A. Yes.

Q. And you hold yourself out to be an expert in Parkinson's disease, correct?

A. Yes.

Q. And what is the basis of your expertise in Parkinson's disease?

MS. LaMACCHIA: Object to form.

THE WITNESS: In addition to completing a neurology residency, I did a fellowship in movement disorders and then for the last

30-plus years, I've treated patients with Parkinson's disease.

BY MS. HURT:

Q. And you're not an economist, correct?

A. I am not an economist.

Q. And you are not a cardiologist, correct?

A. I'm not a cardiologist.

Q. Were you provided with any documents when you were preparing your report?

MS. LaMACCHIA: Objection, form.

BY MS. HURT:

Q. I can rephrase that. That wasn't -- that was poorly phrased.

Did counsel provide you any documents for your damages correspondence?

A. Are you referring to the correspondence of January 2026?

Q. Yes. I can introduce that as an exhibit. All right. Let the record reflect that Exhibit 7 is dated January 9,

2025, and it is signed by Dr. Heidi Schwarz. This is the report you prepared for the damages Phase IV, correct?

A. Correct. My apologies, it should be 2026.

- - - - -

(Schwarz Damages Report dated 1/9/26 marked Schwarz Exhibit 7 for identification.)

- - - - -

BY MS. HURT:

Q. Okay. That was going to be my next -- that was going to be one of the questions I had later.

Do you -- for the purposes of today's deposition, is it fine if I refer to this as your report from January 9, 2026?

A. That would be most appropriate.

Q. Okay. Thanks. I always do that too at the beginning of the year, you put the wrong year.

So were you provided any

documents in connection with preparing this report?

A. The only document I was provided was the one that's already been entered into evidence, which was the Bates file previously referred to.

Q. Okay. And that would be Exhibit 1. How did you determine which documents to look at to prepare this report?

A. I read Exhibit 1.

Q. Okay. Did you look at any other medical records --

A. I did not.

Q. -- to prepare --

A. I'm sorry.

Q. That's okay. I'm going to introduce what's going to be Exhibit 8. Exhibit 8 is the, "Materials Considered List for Dr. Heidi Schwarz's reports on Plaintiffs Robert Welch and Richard Sparks."

This is the first materials considered list that was provided to the

United States. It says at the beginning of the document, "Plaintiffs hereby identify the facts, data, and publications considered by Heidi Schwarz in forming her opinions set forth in her reports concerning Plaintiffs Robert Welch and Richard Sparks served on February 7, 2025. (the Reports)."

Dr. Schwarz, have you seen this materials considered list before?

A. I'm not sure. I think I saw it prior to the deposition.

- - - - -

(Materials Considered List for Dr. Heidi Schwarz's reports on Plaintiffs Robert Welch and Richard Sparks marked Schwarz Exhibit 8 for identification.)

- - - - -

BY MS. HURT:

Q. When you say, "prior to the deposition," you mean the one that was in July?

A. The July 2025 deposition,

correct.

Q. I'm just scrolling down to where we get to the section that's related to Mr. Sparks. It says, "Schwarz in forming her opinions related to Richard Sparks," and has a colon and it lists several publications. And then under 78, number 78, it says, "Bates Numbered Medical Records."

Dr. Schwarz, are these all of the medical records that you reviewed for Mr. Sparks' case in this matter?

A. I'm not sure.

Q. That's understandable, it's a series of Bates numbers. I am going to introduce what's going to be Exhibit 9. Just so we have an accurate reflection of your materials considered list, this Exhibit 9 is a supplemental materials considered list for Dr. Schwarz, February 7, 2025 report.

And then Exhibit 10 is a --

MS. LaMACCHIA: Counsel, do you -- Counsel, do you intend on

dropping all of these exhibits into the chat as if we were in an in-person deposition?

MS. HURT: Yes, I do, and we can take a break and I can do that.

MS. LaMACCHIA: Go ahead and do that, please --

MS. HURT: Okay.

MS. LaMACCHIA: -- because if you refer to additional exhibits, the witness has the opportunity to review what exhibit you're referring to.

MS. HURT: Okay. We can take a break.

MS. LaMACCHIA: Thanks.

THE VIDEOGRAPHER: Off the record. The time is 9:33 a.m.

- - - - -

(Supplemental Materials Considered List marked Schwarz Exhibit 9 for identification.)

- - - - -

(A recess was taken at this time.)

- - - - -

THE VIDEOGRAPHER: We're back on the record. The time is 9:40 a.m.

BY MS. HURT:

Q. Exhibit 10 is Dr. Schwarz's second supplemental materials considered list. It is in relation to Dr. Schwarz's February 7, 2025, report.

Dr. Schwarz, these are all of your materials considered lists in this case, correct?

A. To the best of my knowledge.

- - - - -

(Second Supplemental Materials Considered List marked Schwarz Exhibit 10 for identification.)

- - - - -

BY MS. HURT:

Q. And to the best of your knowledge, are these all of the materials that you have considered?

A. For my expert witness

statement, yes.

Q. When you say, "expert witness statement," what do you mean?

A. The statement that was submitted, I believe, in February 2025.

Q. Okay. So you mean your specific causation report --

A. Right.

Q. -- for Mr. Sparks? And earlier, you just said that the only additional material that you've reviewed before preparing your January -- January 9, 2026, report was the document that you put in the chat -- in the chat box, which is Exhibit 1 and Bates number ending in 49, correct?

MS. LaMACCHIA: Objection to form.

THE WITNESS: Correct.

BY MS. HURT:

Q. Without discussing any specific details of your conversation, have you spoken with any other experts in the damages and offset phases of this

litigation?

A. I have not.

Q. What about Marjorie Hackett-Wallace?

A. I do not know who that is.

Q. I'm going to introduce what's going to be Exhibit 11.

Dr. Schwarz, have you -- what I've introduced as Exhibit 11 is the rebuttal expert opinion report of Marjorie Hackett-Wallace dated January 20, 2026, and I can scroll down if you would like, but have you seen this report before?

A. No, I have not.

- - - - -

(Marjorie Hackett-Wallace Expert Report dated January 20, 2026 marked Schwarz Exhibit 11 for identification.)

- - - - -

BY MS. HURT:

Q. Okay. Do you know who Dr. Syed Hasan is?

A. No, I do not.

Q. He is, just for your awareness, he is one of the United States experts in the Phase IV damages. So you haven't reviewed this report that he submitted, correct?

A. No, I have not.

Q. Okay. I'm going to introduce what is going to be Exhibit 12. Actually -- scratch that.

Were you aware that Marjorie Hackett-Wallace relied upon the January 9, 2026, report that you prepared?

A. No.

Q. Did you know that you were disclosed as an expert in the damages and offset phase of the litigation?

MS. LaMACCHIA: Objection, form.

THE WITNESS: I am not aware.

BY MS. HURT:

Q. When were you approached by counsel to work on the damages phase?

MS. LaMACCHIA: Objection, form.

THE WITNESS: I'm not sure I understand the question.

BY MS. HURT:

Q. Let me rephrase it. When were you approached by counsel to work on your January 9, 2025, report?

MS. LaMACCHIA: Objection, form. Counsel, you indicated earlier that you were going to refer to that exhibit as January of 2026, not January of 2025.

BY MS. HURT:

Q. That's correct. That is my mistake. Let me repeat that. When were you approached, Dr. Schwarz, by counsel, in relation to your January 9, 2026, report?

A. I don't recall the exact date.

Q. Do you remember what month?

A. I am not sure whether it was late December or early January.

Q. Okay. And what was the scope of your assignment?

A. My understanding was to

review the -- the evidence in the first submitted document today and form an opinion as to whether or not the test requested was related to his Parkinson's disease.

Q. Do you believe there would have been any other medical records that would have been helpful for you to review when preparing your January 9, 2026, report?

MS. LaMACCHIA: Objection, form.

THE WITNESS: I don't believe so.

BY MS. HURT:

Q. What about any additional medical records?

A. I did not feel the need for further records.

Q. Did you evaluate the relatedness of any of Mr. Sparks other medical visits to Parkinson's disease?

A. No.

Q. And why not?

A. I was asked to specifically review this document.

Q. Okay. I'm going to go back to your report. I'm going to show you on the screen, Exhibit 7, your January 9, 2026, report. Did anyone assist you in writing this?

A. No.

Q. We are here to talk about this report, but just so the record is straight, you previously prepared another report on Mr. Sparks in the specific caution phase of the litigation, correct?

A. If you're referring to the longer document from February 2025, yes, I did.

Q. Yes. Thank you. Did these two reports contain all of the opinions that you have formed to date in this case regarding Mr. Sparks?

A. Yes.

Q. Are you planning to form any additional opinions regarding Mr. Sparks?

A. I can't answer that. I'm not

very good at predicting the future.

Q. Understood. What opinion did you reach in your January 9, 2026, report?

A. I was asked to review the first piece of evidence submitted and opine about whether this was related to his Parkinson's disease and after reviewing the document, I felt that the MRI scan of his brain was directly related to his diagnosis of Parkinson's disease.

Q. And what about that record led you to that conclusion?

A. Because the indication for the MRI scan from Dr. Leehey was Parkinson's disease and because I have evaluated the patient in the past and I know he has Parkinson's disease, so I felt that this was directly related to his Parkinson's disease.

Q. It says in the last sentence, "Therefore, in short, to a reasonable degree of medical acceptor, this April 6, 2018, visit, test and results are directly related to his symptoms of PD."

Did I read that correctly?
A. Yes, you did.
Q. What does to a reasonable degree of medical certainty mean?
A. It means that I have a greater than 50 percent belief that this is directly related to his Parkinson's disease.
Q. And why did you use a reasonable degree of medical certainty in your report?
MS. LaMACCHIA: Objection, form.
THE WITNESS: That's the legalese that you guys like.
BY MS. HURT:
Q. When you say, "you guys," who are you referring to?
A. Lawyers.
Q. Lawyers, any specific lawyers?
MS. LaMACCHIA: Objection, form.
THE WITNESS: No, it's just --

no, all lawyers in medical cases like reasonable degree of medical certainty.

BY MS. HURT:

Q. And have you used this standard before in expert reports?

A. Yes.

Q. And what was the context of the other reports in which you used this standard?

MS. LaMACCHIA: Objection to form.

THE WITNESS: I, honestly, I honestly can't remember all the times I've used that.

BY MS. HURT:

Q. So you've used it several times?

A. Yes.

Q. Why did you choose not to use at least as likely as not in this report?

MS. LaMACCHIA: Objection, form.

THE WITNESS: Because I think

that in this situation, the indication for the MRI scan was clearly much more than 50 percent related to his diagnosis of Parkinson's disease.

BY MS. HURT:

Q. And how would you say a reasonable degree of medical certainty is different from at least as likely as not?

MS. LaMACCHIA: Objection, form.

THE WITNESS: My understanding is as likely as not means that there's clinical equipoise, meaning it's a 50/50 chance that it's related, whereas a reasonable degree of medical certainty means it's more than 50 percent.

BY MS. HURT:

Q. Okay. Why did you choose not to use more likely than not as the standard for this report?

A. Because I felt that this scan and report were clearly much more than

50 percent related to his diagnosis of Parkinson's disease.

Q. And in your opinion how is a reasonable degree of medical certainty different from more likely than not?

MS. LaMACCHIA: Objection, form.

THE WITNESS: I believe I just answered that.

BY MS. HURT:

Q. The previous question was at least as likely as not. And then I asked you why you used this -- why you didn't you use more likely than not. This question I'm asking how is reasonable degree of medical certainty different from more likely than not?

MS. LaMACCHIA: Objection to form.

THE WITNESS: I don't think I have an answer for that.

BY MS. HURT:

Q. Okay. And why don't you have an answer to that?

MS. LaMACCHIA: Objection to form.

THE WITNESS: I guess I'm not really sure what you're asking for. I would say that I feel without any qualms or uncertainty that this was clearly related to his diagnosis of Parkinson's disease.

BY MS. HURT:

Q. And with more likely than not, is that a lower standard than reasonable degree of medical certainty, in your opinion?

MS. LaMACCHIA: Objection.

THE WITNESS: I would have to defer to legal advice on that.

BY MS. HURT:

Q. Okay. At the beginning of your January 9, 2026, report, it says, "The attached medical record is for a head MRI with report included."

This attachment, is that Exhibit 1, the document you provided ending in 6849?

A. Yes.
Q. I'm going to go back to Exhibit 1.
Actually, can we take a break for just a couple of minutes while I grab Exhibit 1?
THE VIDEOGRAPHER: Off the record. The time is 9:58 a.m.
- - - - -
(A recess was taken at this time.)
- - - - -
THE VIDEOGRAPHER: We're back on the record. The time is 10:02 a.m.
BY MS. HURT:
Q. Dr. Schwarz, can you see Exhibit 1 on your screen?
A. Yes, I can.
Q. And this is the MRI that's the focus of your January 2026 report, correct?
A. Correct.
Q. I scrolled down to Bates number ending in 6852 of the document. And

I'm looking at the -- where it says, "Imaging Results." Do you see where I'm looking, Dr. Schwarz?

A. Yes, I do.

Q. And on the right side, it says resulted by Nyberg, Eric M, MD, correct?

A. Correct.

Q. And it says it was performed on April 6, 2018, at 9:16 to April 6, 2018, 9:40 a.m., correct?

A. Correct.

Q. And Dr. Leehey referred Mr. Sparks for this MRI, correct?

A. Correct.

Q. And Dr. Leehey is one of the neurologists treating Mr. Sparks for Parkinson's disease, correct?

A. Correct. She was the head of the department -- or the division of movement disorders.

Q. I'm going to scroll down and now I'm on page Bates number ending in 6853. It says, "Patient Questionnaire

Submission, Questionnaire," and then the first question is, "Do you have or have you ever had a pacemaker, pacing wires, implanted cardioverter defibrillator, Life Vest, or artificial heart valve?"

Did I read that correctly?

A. Yes.

Q. Is this what you meant by the pre-procedural checklist mentioning a heart valve replacement in your report?

A. Correct.

Q. And your opinion is that this is a standard pre-procedure checklist for MRIs, correct?

A. Correct.

Q. And this MRI is related to Mr. Sparks' Parkinson's disease, correct?

A. Correct.

Q. I'm going to introduce, I believe this is Exhibit 12. Actually, let's take -- I'm just going to put the stuff in the chat box, so if I can have, like, another, like, five-minute break and then I'll put the documents in the chat

box.

THE VIDEOGRAPHER: Off the record. The time is 10:06 a.m.

- - - - -

(A recess was taken at this time.)

- - - - -

THE VIDEOGRAPHER: We're back on the record. The time is 10:09 a.m.

BY MS. HURT:

Q. I just put in the chat box, which is going to be Exhibit number 12. And I'm going to share it. Let me know when you can see the screen.

A. I can see it.

- - - - -

(Itemization of Charges for UCHealth Bates 00682__SPARKS__0000006663 to 6664 marked Schwarz Exhibit 12 for identification.)

- - - - -

BY MS. HURT:

Q. Okay. Exhibit 12 is going to

be a list of charges from UCHealth. It says the admission date is April 6, 2018 and the discharge date is April 6, 2018. And the Bates number, the first Bates number is 000682__SPARKS__6663.

Dr. Schwarz, have you seen this document before?

A. No, I have not.

Q. And let's just go through the charges at the top. There are a series of charges, five charges at the top, and these are all dated April 6, 2018, correct?

A. Correct.

Q. And the first listed is heart muscle image SPECT multiple.

Do you know if this stands for myocardial perfusion imaging --

MS. LaMACCHIA: I'm going to object --

MS. HURT: -- SPECT scan?

MS. LaMACCHIA: I'm going to object to this line of questioning, Dr. Schwarz is sitting here for a deposition based on an opinion she

rendered solely for the April 6, 2018 medical visit. You are now showing her an itemization of charges. This Bates number was not within her MCL that was marked as Exhibit 8. She's never seen this document. She's not here testifying about charges, itemization, so I'm going to object to this entire line of questioning.

MS. HURT: Are you going to end the dep -- are you going to instruct her not to answer?

MS. LaMACCHIA: I am going to instruct her not to answer any questions about the itemization of charges. She's never seen this document before. She's -- she's a neurologist here giving an opinion as to the relatedness of the April 6, 2018, medical visit as to Parkinson's disease. She just testified she's never seen this document before. It is not

contained within any of her Bates ranges in her MCL.

MS. HURT: So is it your position that Marjorie Hackett-Wallace is not challenging Dr. Hasan on the four charges that are highlighted in yellow?

MS. LaMACCHIA: It is not what we're here about. It is exactly not what we're here about. You are here to get an opinion from Dr. Schwarz as to her opinion and her conclusion as to the relatedness of the visit as it relates to Parkinson's on April 6th of 2018 and that is it.

MS. HURT: And so your position is that these charges are not related to the Parkinson's, but you're not --

MS. LaMACCHIA: It has nothing to do with the charges, Ms. Hurt, nothing to do with the charges. Dr. Schwarz is not here to opine on

charges. You can ask these questions to Marjorie Hackett-Wallace in her deposition.

MS. HURT: So you would not allow her to answer the question of whether or not a myocardial perfusion imaging is related to Parkinson's disease?

MS. LaMACCHIA: You can ask her that question, but you cannot ask her about itemization, CPT codes, charges, you can't ask her questions about this document.

BY MS. HURT:

Q. That's fine. I don't need to ask her questions about the specific charges.

Dr. Schwarz, I'm going to stop sharing my screen.

In your opinion, is a nuclear stress test related to Parkinson's disease?

A. Generally not.

Q. It's usually a nuclear stress test is designed to assess blood flow to

the heart muscle and evaluate its pumping function, correct?

A. I believe so, I'm not a cardiologist.

Q. And nuclear medicine imaging tests typically uses Tech Tc-99m sestamibi, correct?

A. I have no idea.

Q. Okay. But your overall position is that a stress test is typically not related to Parkinson's disease, correct?

A. Correct.

Q. Okay. I'm going to take a five-minute break and --

MS. LaMACCHIA: Counsel, Counsel, I'm sorry, this is -- this is the sixth break that we've taken and we have been on record for less than an hour. I mean, it seems like there's a lot of unpreparedness for this deposition today.

MS. HURT: I mean, this is my

deposition. We can go off the record and just talk about this, but I can use my time as I see fit.

THE VIDEOGRAPHER: Do we want to go off the record?

MS. HURT: Yes.

THE VIDEOGRAPHER: Off the record. The time is 10:15 a.m.

- - - - -

(A recess was taken at this time.)

- - - - -

THE VIDEOGRAPHER: We're back on the record. The time is 10:21 a.m.

BY MS. HURT:

Q. I'm entering into the chat box which is going to be Exhibit number 13. Exhibit 13 is a medical record from UCHealth. It is dated 4/6/2018. The Bates number is 000682__SPARKS__0000003960.

Dr. Schwarz, I can give you a moment to look at this document. When you are ready for me to scroll down, just let me know.

A. I'm ready to scroll down.

- - - - -

(UCHealth Record dated 4/6/2018 Bates 000682__SPARKS__0000003960 to 3965 marked Schwarz Exhibit 13 for identification.)

- - - - -

BY MS. HURT:

Q. Okay.

A. And I'm ready to scroll down. And I'm ready to scroll down.

Q. I'm sorry, if I scrolled too far, let me know.

A. You can scroll down further. And you can scroll down further. And you can scroll down further. And you can scroll down further.

Q. I think that's the extent -- that's the extent of what I wanted you to look at.

Dr. Schwarz, have you seen this document before today?

A. No, I have not.

Q. Based on your assessment of the document, is this related to Mr. Sparks' Parkinson's disease?

MS. LaMACCHIA: Objection, form.

THE WITNESS: I wasn't asked to review this document to render an opinion.

BY MS. HURT:

Q. Do you have an opinion on whether or not this is related to Mr. Sparks' Parkinson's disease?

MS. LaMACCHIA: Objection, form.

THE WITNESS: As I stated previously, the MRI scan of the head was related to his Parkinson's disease.

BY MS. HURT:

Q. Wouldn't that mean that this charge is not?

MS. LaMACCHIA: Objection, form.

THE WITNESS: I'm not here to

opine about charges.
BY MS. HURT:
Q. I'm sorry, let me rephrase that. Is it your opinion that this visit was not related to his Parkinson's disease?
MS. LaMACCHIA: Objection, form.
THE WITNESS: I believe the head MRI scan was directly related to his Parkinson's disease. It was part of this visit.
BY MS. HURT:
Q. Okay. Looking back here, I want to point you to the timestamp. It says, April 6, 2018, at 4:15 p.m., correct?
A. Correct.
Q. And when we were looking at the MRI earlier, that was in the morning on 4/6/2018, correct?
A. Correct.
Q. So this would have been several hours after the morning visit, correct?
A. Correct.

Q. Okay. And this procedure note is written by a Mr. Eric Nyberg, MD -- I'm sorry, I went down too far to the MRI, let me pull up. I'm sorry, this is where I was trying to get, it says the authorizing provider is Huong Lam, MD, correct?

A. Correctly.

Q. And that is not Dr. Leehey, correct?

A. Correct.

MS. HURT: Okay. I have no further questions.

MS. LaMACCHIA: Can you take down that exhibit, Cindy?

MS. HURT: Yes, I will.

BY MS. LaMACCHIA:

Q. Dr. Schwarz, you've never seen Exhibit 13 prior to today, right?

A. Correct.

Q. And you weren't asked to give a causation opinion in your January 2026 report, right?

MS. HURT: Objection to form.

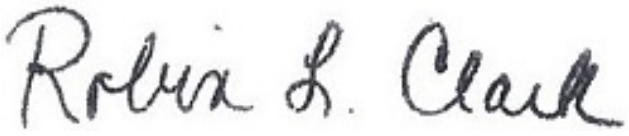
THE WITNESS: Could you

restate what -- the question?
BY MS. LaMACCHIA:
Q. Sure. Sure. You weren't asked to give any type of causation opinion in rendering any kind of opinion in your January 2026 report, right?
A. Correct.
MS. HURT: Objection to form.
BY MS. LaMACCHIA:
Q. Okay. Your conclusion, your conclusion in your January 2026 report regarding the relatedness of the medical record of 4/6/18 to Parkinson's was based on accepted scientific principles, your experience, and evidence, right?
MS. HURT: Objection to form.
THE WITNESS: Correct.
I'm sorry.
BY MS. LaMACCHIA:
Q. It's okay. And you were asked some questions about reasonable degree of medical certainty, at least as likely as not, more likely than not. Do you remember that line of questioning?

A. I do.
Q. Okay. And do you remember that you were asked those type of questions at length in your prior deposition given and you gave opinions on those, right?
A. I do remember and I did give opinions.
Q. Okay. And you're not -- I have no further questions. Thank you.
MS. HURT: I think that ends the deposition.
THE WITNESS: Okay.
THE VIDEOGRAPHER: All right. That concludes the deposition. The time is 10:28 a.m.
- - - - -
(Whereupon, the deposition was concluded at 10:28 a.m.)
- - - - -

C E R T I F I C A T I O N

I HEREBY CERTIFY that the proceedings and evidence are contained fully and accurately in the stenographic notes taken by me upon the foregoing matter on February 25, 2026, and that this is a correct transcript of same.



_____

Robin L. Clark

Registered Professional Reporter

(The foregoing certification of this transcript does not apply to any reproduction of the same by any means unless under the direct control and/or supervision of the certifying reporter.)

INSTRUCTIONS TO WITNESS

Please read your deposition over carefully and make any necessary corrections. You should state the reason in the appropriate space on the errata sheet for any corrections that are made.

After doing so, please sign the errata sheet and date it.

You are signing same subject to the changes you have noted on the errata sheet, which will be attached to your deposition.

It is imperative that you return the original errata sheet to the deposing attorney within thirty (30) days of receipt of the deposition transcript by you. If you fail to do so, the deposition transcript may be deemed to be accurate and may be used in court.

- - - - -

E R R A T A

- - - - -

PAGE	LINE	CHANGE
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____

ACKNOWLEDGMENT OF DEPONENT

I, HEIDI SCHWARZ, MD, do hereby certify that I have read the foregoing pages and that the same is a correct transcription of the answers given by me to the questions therein propounded, except for the corrections or changes in form or substance, if any, noted in the attached Errata Sheet.

DATE SIGNATURE

Subscribed and sworn to before me this

day of ,

2026.

My commission expires:

Notary Public

0

0000003960 4:10 52:20 53:5
0000006663 4:7 46:19
0000006849 3:10 13:14
0000006850 14:5
000682 4:10 14:5 47:5 52:20 53:5
00682 3:10 4:7 13:14 46:19
00897 1:4

1

1 3:9 13:9,15 22:14 26:8,11 31:15 42:23 43:3,6,17
1/9/26 3:21 25:8
10 4:3 18:14 19:1,10 28:22 30:6,17
10:02 43:14
10:06 46:3
10:09 46:9
10:15 52:8
10:21 52:14
10:28 58:15,18
11 4:4 32:7,9,18
12 4:6 33:8 45:20 46:12,20 46:24
13 3:9 4:9 52:17 52:18 53:6 56:18
15 3:12
16 3:13
17 3:14 15:6,6 15:22 21:13
19 3:16
1st 19:2 22:21

2

2 3:12 15:4,13 21:4
2/5/25 3:20 21:24
20 4:5 8:15 17:1 32:11,17
2018 37:23 44:10,10 47:2,3 47:12 48:2,21 49:15 55:15
202-514-2000 2:12
2025 18:4,6 19:11 21:6 22:10,21 23:8 25:1 27:7,24 28:21 30:9 31:5 34:6,11 36:15
2026 1:11 4:5 6:5 15:7,23 17:1 19:17 24:21 25:5,18 31:13 32:11,18 33:12 34:11,16 35:9 36:6 37:3 42:19 43:20 56:21 57:6,11 59:7 62:14
20530 2:11
21 3:19
219 2:4
25 1:11 3:21 6:5 59:7
26 18:4 21:4
27 3:22
29 4:1
29440 2:4

3

3 3:13 15:20 16:6
30 4:3 24:1 60:15
30,387.50 18:5
305 21:13
32 4:4
3965 4:10 53:6

4

4 3:14 16:22,22 17:11
4,225 19:2,11
4,550 18:7
4/6/18 57:13
4/6/2018 4:9 52:19 53:4 55:19
431 8:15
46 4:6
49 14:8,12 31:15
4:15 55:15

5

5 3:16 19:13,17 20:3,14 22:10 23:8
50 38:6 40:3,18 41:1
50/50 40:15
53 4:9
56 3:4

6

6 3:19 20:20 21:20,24 37:22 44:10,10 47:2,3 47:12 48:1,21 55:15
650 22:14,18
6663 47:5
6664 4:8 46:19
6849 42:24
6852 43:24
6853 44:24
6855 3:11 13:14
6th 49:15

7

7 3:3,21 17:14 21:6 24:24 25:9 27:7 28:21 30:9 36:5

78 28:7,8
7:23 1:4

8

8 3:22 18:6 26:18,19 27:18 48:6

9

9 4:1 24:24 25:17 28:16,19 29:22 31:12 33:11 34:6,16 35:9 36:5 37:3 42:19
908 59:13
919-277-9299 2:5
950 2:11
99m 51:6
9:06 12:24
9:10 13:6
9:16 44:10
9:33 29:18
9:40 30:4 44:11
9:58 43:8

a

a.m. 1:17 6:6 12:24 13:6 29:18 30:4 43:8 43:14 44:11 46:3,9 52:8,14 58:15,18
abbreviated 11:17
abbreviation 11:9
abbreviations 11:3
able 9:9
above 21:8
accepted 57:14
acceptor 37:22
accurate 10:13 28:17 60:17
accurately 9:10 59:5
acknowledg... 62:1
action 21:9
actually 18:17 33:9 43:4 45:20
add 15:19
addition 23:21
additional 18:9 22:21 23:5 29:10 31:11 35:16 36:23
address 8:10,12
admission 47:2
advice 42:16
agreed 6:15
ahead 29:6
allow 50:5
amended 3:16 19:14,23
amount 18:5
answer 5:4 8:23 9:12 10:9 10:10,23 36:24 41:21,24 48:13 48:15 50:5
answered 41:9
answers 62:5
apartment 8:15
apologies 25:4
appearances 2:1
appearing 6:14
appendix 22:14
apply 59:22
approached 33:21 34:5,15
appropriate 25:20 60:5
april 37:22 44:10,10 47:2,3 47:12 48:1,21 49:15 55:15
artificial 45:5
asked 9:21 36:1 37:4 41:12 54:6 56:20 57:4,21 58:3
asking 8:4 41:15 42:4
assess 50:24
assessment 54:1
assignment 34:23
assist 36:6
assume 10:3
attached 22:13 42:20 60:12 62:8
attachment 16:11,15,18 42:22
attention 20:19
attorney 10:8 60:14
attorneys 10:7
authorizing 56:5
available 21:9
avenue 2:11
aware 33:10,19
awareness 33:2

b

b 2:9 3:6 8:7 21:4
back 13:4 20:7 30:2 36:3 43:2 43:12 46:7 52:12 55:13
barbano 20:23
based 47:24 54:1 57:13
basis 23:17
bates 3:10 4:7,9 11:24 13:13 14:4 26:5 28:8 28:15 31:15 43:23 44:23 46:18 47:4,4

48:4 49:1 52:19 53:4
beginning 25:22 27:1 42:18
belief 38:6
believe 11:23 31:5 35:6,13 41:8 45:20 51:3 55:8
bell 2:2,3 7:3,6
belllegalgrou... 2:5,6
best 9:15 30:13 30:21
bigger 22:4
bill 18:14 19:2 22:17
billed 18:8
bills 17:17
bit 18:13 20:20
blood 50:24
boulevard 8:15
box 31:14 45:22 46:1,11 52:17
brain 37:9
break 10:24 12:7 29:5,15 43:4 45:23 51:15,18
breaks 10:22
brief 14:21
briefly 6:18

c

c 59:1,1
called 16:11
camp 1:5 6:10
canandaigua 1:16 8:16
cardiologist 24:8,9 51:4
cardioverter 45:4
carefully 60:3
carolina 1:1 2:4
case 18:7,10 21:12 22:23 28:12 30:12 36:19
cases 1:8 21:1 39:1
causation 23:2 31:7 56:21 57:4
caution 36:13
certainty 38:4 38:10 39:3 40:8 40:17 41:4,16 42:12 57:22
certification 59:21
certify 59:4 62:3
certifying 59:24
challenging 49:5
chance 40:15
change 61:4
changes 60:11 62:7
charge 54:21
charges 4:6 46:17 47:1,10 47:11,11 48:4,8 48:17 49:6,18 49:22,23 50:1 50:12,17 55:1
chat 29:2 31:14 31:14 45:22,24 46:11 52:16
check 18:11
checklist 45:9 45:13
chemicals 11:4
choose 39:20 40:20
cindy 2:9 7:7 56:14
cindy.m.hurt 2:12
civil 21:4
cl 17:22
clarification 10:3
clarify 10:2
clark 1:17 6:24 59:15
clearly 40:3,24 42:7
clinical 40:14
clja 17:19
codes 50:12
colon 28:6
colorado 3:9 13:12 14:3
come 11:5
commencing 1:16
commission 62:16
commonwealth 1:19
compensated 22:14
compensation 17:18
complete 9:19
completely 6:20
completing 23:22
concern 11:4
concerning 27:6
concluded 58:18
concludes 58:14
conclusion 37:12 49:13 57:10,11
conducted 1:15

conference 9:14
connection 26:1
considered 3:22 4:2,3 21:7 26:19,24 27:4 27:10,14 28:18 28:20 29:21 30:7,11,16,23
contain 36:18
contained 49:1 59:5
context 39:8
control 59:23
conversation 14:19 31:22
correct 8:19 11:11,12,14,15 11:17,18 12:10 13:23,24 14:7 14:11 15:17 23:11,15 24:5,8 25:3,4 28:1 30:12 31:16,19 33:5 34:13 36:13 43:21,22 44:7,8,11,12,14 44:15,18,19 45:11,14,15,17 45:18 47:12,13 51:2,7,12,13 55:15,16,19,20 55:23,24 56:6,9 56:10,19 57:7 57:17 59:8 62:4
corrections 9:21 60:4,6 62:7
correctly 21:14 38:1 45:6 56:7
correspondence 24:19,21
counsel 6:21 12:4 13:23 14:7 19:9 24:18 28:23,24 33:22 34:5,8,15 51:16 51:17
couple 43:5
course 10:21
court 1:1 6:23 8:21 60:18
cpt 50:11
current 8:9
currently 10:18
cutoff 22:5
cv 1:4 22:13 23:1,3

d

d 3:1
d.c. 2:11
damages 3:17 3:21 19:16 20:1 24:19 25:3,7 31:24 33:3,15 33:22
data 21:7 27:3
date 6:5 18:3 22:22 34:18 36:19 47:2,3 60:9 62:11
dated 3:19,21 4:5,9 15:6,22 17:1 18:3 19:17 21:23 22:10 24:24 25:8 32:11,17 47:12 52:19 53:3
day 62:13
days 60:15
dealing 11:4
december 34:21
deemed 60:17
defendant 2:14
defendant's 3:15 16:23 17:9
defer 42:16
defibrillator 45:4
degree 37:22 38:4,10 39:2 40:8,17 41:4,15 42:12 57:22
delivered 18:18
dep 48:12
department 2:8 44:20
deponent 62:1
deposing 60:14
deposition 1:14 3:13,15 5:1 6:8 6:14 9:18 10:6 11:6 14:15 15:21 16:4,24 17:10 18:13,15 19:1,3 22:22 25:16 27:12,22 27:24 29:3 47:24 50:3 51:22 52:1 58:4 58:11,14,17 60:3,12,15,17
description 3:7
designation 3:17 19:15,24
designed 50:24
details 31:22
determine 26:8
diagnosis 37:9 40:4 41:1 42:7
different 40:9 41:5,16
direct 59:23
direction 5:4
directly 37:9,18 37:23 38:7 55:9
discharge 47:3
disclosed 33:15
disclosure 3:17 19:15,24
discovery 21:12

discussing 31:21
disease 11:16 20:15 23:14,18 24:2 35:5,22 37:7,10,15,17 37:19 38:8 40:5 41:2 42:8 44:18 45:17 48:22 50:8,21 51:11 54:3,12,18 55:5 55:10
disorders 23:24 44:21
district 1:1,1
division 44:20
docket 21:13
document 1:7 12:4,17 13:22 15:9,16 16:1,12 17:4,4 19:14,20 26:3 27:2 31:13 35:2 36:2,15 37:8 42:23 43:24 47:7 48:7 48:18,24 50:13 52:22 53:23 54:2,7
documents 5:7 16:15 17:18 24:11,19 26:1,9 45:24
doing 9:13 12:11 60:8
doj 18:18
dr 3:23 7:22 13:19 14:15 15:5,8,22,24 17:2 18:1 19:18 21:15 22:6,18 23:3 25:1 26:20 27:9,15 28:10 28:20 30:6,8,10 32:8,23 34:15 37:14 43:16 44:3,13,16 47:6 47:23 49:6,11 49:24 50:18 52:21 53:22 56:8,17
draw 20:18
dropping 29:1
drs 20:22
due 6:16
duly 7:17

e

e 3:1,6 59:1 61:2
earlier 14:20 31:10 34:9 55:18
early 34:21
eastern 1:1 6:6
economist 24:4 24:6
edward 2:3
electronic 12:9
elizabeth 2:10 7:9
elizabeth.k.pl... 2:13
ellen 8:15
ends 58:10
ensure 6:19
entered 26:5
entering 52:16
entire 48:10
entry 21:13
equipoise 40:14
eric 44:6 56:2
errata 60:6,8 60:11,14 62:9
esi 19:10
esq 2:3,3,9,9,10 2:10
evaluate 35:20 51:1
evaluated 37:16
evidence 26:5 35:1 37:5 57:15 59:5
exact 34:17
exactly 49:9
examined 7:18
example 8:24
except 62:6
exhibit 3:9,12 3:13,14,16,19 3:21,22 4:1,3,4 4:6,9 13:9,15 15:4,13,20 16:6 16:22,22 17:11 19:13 20:3 21:19,24 24:23 24:24 25:9 26:8 26:11,18,19 27:18 28:16,19 28:22 29:12,22 30:6,17 31:15 32:7,9,18 33:8 34:10 36:5 42:23 43:3,6,17 45:20 46:12,20 46:24 48:6 52:17,18 53:6 56:14,18
exhibits 29:1,10
experience 57:15
expert 3:18,19 4:5 17:22 19:16 20:2 21:3,5,12 21:23 23:14 30:24 31:2 32:10,17 33:15 39:6
expert's 20:23
expertise 23:18
experts 21:8 31:23 33:3
expires 62:16
explain 8:2
extent 53:19,20

f

f 59:1
faan 1:15 6:12 7:16
facts 21:7 27:3
fail 60:16
fair 10:4,5
far 53:14 56:3
february 1:11 6:5 15:6,6,22 17:1 18:4 19:17 21:6 22:10 23:8 27:7 28:21 30:9 31:5 36:15 59:7
federal 21:3
fee 20:24
feel 35:18 42:5
fellowship 23:23
felt 37:8,17 40:23
fifteen 14:23
file 26:6
fine 25:16 50:15
finish 10:23
finished 9:11
first 3:16 19:14 19:23 20:9,12 21:19 26:23 35:1 37:5 45:2 47:4,14
fit 52:3
five 14:12 45:23 47:11 51:15
flow 50:24
focus 43:20
follows 7:19
foregoing 59:6 59:21 62:3
form 23:20 24:14 31:18 33:18,24 34:8 35:2,12 36:22 38:13,23 39:12 39:23 40:11 41:7,19 42:2 54:5,14,23 55:7 56:23 57:8,16 62:7
formed 36:19
forming 27:4 28:5
forth 21:5 22:13 27:5
four 17:24 21:2 49:6
front 11:20
full 8:6,8
fully 22:13 59:5
function 51:2
further 20:20 35:19 53:15,16 53:17,18 56:12 58:9
future 37:1

g

generally 50:22
georgetown 2:4
gibbons 2:10 7:11,11
give 9:15 10:12 52:21 56:20 57:4 58:6
given 9:19 58:4 62:5
giving 48:19
go 7:24 8:2 12:21 20:19 22:6 29:6 36:3 43:2 47:9 52:1 52:5
going 7:24 8:3 12:3 13:8 14:13 15:3,19,20 16:10,20,21,21 17:15 19:8,12 19:13 20:7,19 21:18,18,19 25:12,13 26:17 26:18 28:15,16 32:6,7 33:7,8 34:9 36:3,4 43:2 44:22 45:19,21 46:12 46:13,24 47:18 47:21 48:9,11 48:12,14 50:18 51:14 52:17
golkow 6:4
good 7:22,23 37:1
gotcha 12:18
grab 43:5
greater 38:6
group 2:2 7:3,6
guess 42:3
guys 38:15,17

h

h 3:6
hackett 4:4 32:4,11,16 33:11 49:5 50:3
hanley 2:10 7:11
hanley.w.gib... 2:14
happen 8:3
hasan 32:23 49:6
head 9:2 42:20 44:19 54:17 55:9
healthcare 3:10 13:12 14:3
hear 10:7
heard 6:20
heart 45:5,9 47:14 51:1
heidi 1:14 3:3 3:23 6:11 7:16 8:7 25:1 26:20 27:4,15 62:2

held 6:9
helpful 35:8
highlight 20:21
highlighted 49:7
hold 23:13
home 8:12
honestly 39:13 39:14
hour 22:15,18 51:20
hours 55:22
huong 56:6
hurt 2:9 3:3 7:7 7:7,21 12:22 13:7,18 14:9 15:15 16:9 17:13 20:6 22:3 24:3,15 25:11 27:20 29:4,8,14 30:5,20 31:20 32:21 33:20 34:3,12 35:15 38:16 39:4,16 40:6,19 41:10 41:22 42:9,17 43:15 46:10,23 47:20 48:11 49:3,17,22 50:4 50:14 51:24 52:6,15 53:9 54:9,19 55:2,12 56:11,15,23 57:8,16 58:10

i

idea 51:8
identification 13:16 15:13 16:7 17:11 20:4 22:1 25:9 27:18 29:22 30:18 32:19 46:21 53:7
identify 6:21 27:2
iii 2:3 3:17 19:15 20:1
image 47:15
imaging 44:2 47:17 50:7 51:5
impair 10:19
impaired 10:16
imperative 60:13
implanted 45:4
important 8:23
included 42:21
index 5:1
indicated 34:8
indication 37:13 40:2
inform 18:21
instruct 48:13 48:15
instructions 60:1
instructs 10:9
intend 28:24
interrupt 9:8 9:12
introduce 24:22 26:18 28:16 32:6 33:7 45:19
introduced 32:9
invoice 18:6 19:11
invoices 17:17 18:1,9 19:5,7
itemization 4:6 46:17 48:3,9,16 50:11
iv 25:3 33:3

j

j 2:3
january 4:5 14:18 24:21,24 25:17 31:12,12 32:11,17 33:11 34:6,10,11,16 34:21 35:9 36:5 37:3 42:19 43:20 56:21 57:6,11
jeb 2:6
jersey 1:20
joseph 2:9 7:13
joseph.b.turner 2:13
julie 6:2
july 18:14 19:1 19:2,10 22:21 27:23,24
june 18:6
justice 2:8

k

k 2:10
kind 57:5
know 10:1 23:5 32:5,22 33:14 37:17 46:13 47:16 52:24 53:14
knowledge 30:13,22

l

l 1:17 59:15
lag 9:15
lam 56:6
lamacchia 2:3 3:4 7:2,3 14:6 14:19 23:19 24:13 28:23 29:6,9,16 31:17 33:17,23 34:7 35:11 38:12,22 39:11,22 40:10 41:6,18 42:1,14 47:18,21 48:14 49:8,21 50:9 51:16 54:4,13 54:22 55:6

56:13,16 57:2,9 57:19
late 34:21
lawyers 38:19 38:20,21 39:1
led 37:12
leehey 37:14 44:13,16 56:8
legal 2:2 7:3,6 42:16
legalese 38:15
lejeune 1:5
lejuene 6:10
length 58:4
leslie 2:3 7:2
letter 11:21 12:13,15 14:17
life 45:4
likely 39:21 40:9,13,21 41:5 41:12,14,17 42:10 57:23,23
line 5:5,8,11 47:22 48:10 57:24 61:4
list 3:22 4:2,3 20:24 26:20,24 27:10,14 28:18 28:20 29:21 30:8,16 47:1
listed 47:14
lists 28:6 30:11
litigation 1:6 6:4,10 17:20 32:1 33:16 36:13
little 18:13 20:20 22:5
llamacchia 2:5
location 1:15
long 14:21 23:3
longer 36:15
longo 20:22
look 17:3 23:4 26:9,12 52:22 53:21
looking 44:1,3 55:13,17
lot 51:21
lower 42:11

m

m 2:9 44:6
m.d. 3:3
made 10:11 60:7
make 9:16,20 11:7 12:16 22:4 60:4
management 21:12
marjorie 4:4 32:3,10,16 33:10 49:4 50:2
marked 3:7 5:10 13:15 15:12 16:5 17:10 20:2 21:24 25:8 27:17 29:21 30:16 32:18 46:20 48:5 53:6
material 31:11
materials 3:22 4:1,3 11:19 16:18 26:19,23 27:10,14 28:18 28:19 29:20 30:7,11,16,22
matter 6:9 14:18 22:9 28:12 59:7
mcl 48:5 49:2
md 1:15 6:11 7:16 44:6 56:2 56:6 62:2
mean 27:22 31:3,6 38:4 51:20,24 54:20
meaning 40:14
means 38:5 40:13,17 59:23
meant 45:8
medical 3:9 11:22 12:1,12 12:13,15 13:11 14:2 26:13 28:8 28:11 35:7,17 35:22 37:22 38:4,10 39:1,2 40:8,17 41:4,16 42:12,20 48:2 48:21 52:18 57:12,22
medication 10:19
medicine 51:5
meeting 15:1
memory 10:16
mentioning 45:9
minute 45:23 51:15
minutes 14:23 43:5
mistake 34:14
moment 20:8 20:16 23:4 52:22
month 34:19
morning 7:22 7:23 55:18,22
movement 23:23 44:21
mri 37:8,14 40:2 42:20 43:19 44:14 45:16 54:16 55:9,18 56:3
mris 45:14
multiple 47:15
muscle 47:15 51:1
myocardial 47:17 50:6

n

n 3:1 59:1
name 6:2 8:6,8
named 21:8
nature 6:17
necessary 60:4
need 17:2 19:19 22:7 23:4 35:18 50:15
neurologist 23:10 48:19
neurologists 44:17
neurology 23:22
never 48:6,17 48:23 56:17
new 1:16,19 8:16
nodding 9:1
north 1:1
notary 1:18 62:20
note 56:2
noted 60:11 62:8
notes 59:6
notice 3:13,15 15:20 16:4,24 17:9
nuclear 50:20 50:23 51:5
number 3:7 11:24 17:15 19:13 21:13,20 28:8 31:15 43:24 44:23 46:12 47:4,5 48:4 52:17,20
numbered 28:8
numbers 28:15
nw 2:11
nyberg 44:6 56:2

o

o 59:1
oath 8:17
object 23:19 47:19,22 48:9
objection 10:8 10:11 24:13 31:17 33:17,23 34:7 35:11 38:12,22 39:11 39:22 40:10 41:6,18 42:1,14 54:4,13,22 55:6 56:23 57:8,16
objections 3:14 16:23 17:8
obligated 8:18
offered 22:20
offset 31:24 33:16
offsets 3:18 19:16 20:1
oh 14:10
okay 10:6 12:3 12:10,14 14:24 18:16,23 19:4,8 20:14 23:3,10 25:12,21 26:7 26:12,17 29:8 29:14 31:6 32:22 33:7 34:22 36:3 40:20 41:23 42:18 46:24 51:9,14 53:10 55:13 56:1,11 57:10,20 58:2,8 58:12
once 9:18
open 16:21 19:12
opine 37:5 49:24 55:1
opinion 32:10 35:3 37:2 41:3 42:13 45:12 47:24 48:19 49:11,12 50:20 54:8,10 55:4 56:21 57:4,5
opinions 20:24 27:5 28:5 36:18 36:23 58:5,7
opportunity 9:19 29:11
order 21:11,12
original 60:14
overall 51:9

p

p.m. 55:15
pace 9:5,5
pacemaker 45:3
pacing 45:3
page 3:2 5:5,8 5:11 11:8 14:12 17:14 20:14,17 20:20 44:23 61:4
pages 62:3
paid 17:19 18:22
paragraph 20:9 20:13
parkinson's 11:16 20:15 23:14,18 24:2 35:4,22 37:7,10 37:15,17,19 38:7 40:5 41:2 42:8 44:18 45:17 48:22 49:15,19 50:8 50:21 51:11 54:3,12,17 55:5 55:10 57:13
part 16:12 55:11
parties 6:13,19

past 37:16
pat 7:5
patient 37:16 44:24
patients 24:2
pause 6:18
paying 18:20
pd 11:17 37:24
pennsylvania 1:19 2:11
perc 11:14
percent 38:6 40:3,18 41:1
performed 44:9
perfusion 47:17 50:7
person 29:3
pertinent 20:10
phase 3:17 19:15 20:1 25:3 33:3,16,22 36:13
phases 31:24
phrased 24:17
piece 37:5
plaintiff's 3:14 16:22 17:8
plaintiffs 2:6 3:16,23 19:14 19:23 26:21 27:2,6,16
planning 36:22
platt 2:10 7:9,9
please 6:18,21 8:5 9:4,10 10:1 10:10,22,23 12:22 29:7 60:3 60:8
plg 7:4,6 17:21 17:22
plus 24:1
point 55:14
polimeni 8:15
poorly 24:17
position 49:4 49:18 51:10
pre 45:9,13
predicting 37:1
preparation 19:3
prepare 14:15 26:9,15
prepared 25:2 33:12 36:11
preparing 24:11 26:1 31:12 35:9
present 15:1
previous 14:19 21:1 41:11
previously 17:21 21:5 26:6 36:11 54:16
principles 57:14
prior 27:12,21 56:18 58:4
procedural 45:9
procedure 21:4 45:13 56:1
proceedings 59:4
process 18:19
produce 19:10
produced 17:21 18:2 21:6,8,10
production 3:13 5:7 15:21 16:5 17:1
professional 1:18 59:15
propounded 62:6
protocol 19:10
provide 24:18
provided 13:23 23:7 24:10 25:24 26:4,24 42:23
provider 56:6
public 1:18 21:10 62:20
publications 27:3 28:7
pull 56:4
pumping 51:1
purposes 25:15
pursuant 21:11
put 25:23 31:13 45:21,24 46:11

q

qualifications 20:23 22:12
qualms 42:6
question 5:10 8:24 9:11 10:1 10:4,9,10,23,24 11:23 17:16 34:2 41:11,14 45:2 50:5,10 57:1
questioning 47:22 48:10 57:24
questionnaire 44:24 45:1
questions 8:4 25:14 48:16 50:2,13,16 56:12 57:21 58:3,9 62:6

r

r 23:6 59:1 61:2 61:2
ranges 49:2
rate 22:17
rather 9:1
reach 37:3
read 9:20 17:15 20:9,12,16,17 20:21 21:14 26:11 38:1 45:6 60:3 62:3

readily 21:9
ready 52:23 53:1,11,12
really 42:4
reason 10:12,15 60:5
reasonable 9:4 37:21 38:3,10 39:2 40:8,16 41:4,15 42:12 57:21
rebuttal 3:18 19:16 20:2 32:10
recall 34:17
receipt 60:15
received 18:3
recess 13:2 29:24 43:10 46:5 52:10
recognize 15:8
record 3:9 4:9 6:2 8:6 9:6,9 11:22 12:1,12 12:13,15,21,24 13:5,11 14:1,2 24:23 29:18 30:3 36:10 37:11 42:20 43:8,13 46:3,8 51:19 52:2,5,8 52:13,18 53:3 57:13
records 26:13 28:9,11 35:7,17 35:19
refer 25:16 29:10 34:10
referred 26:6 44:13
referring 8:11 24:20 29:13 36:14 38:18
reflect 14:1 24:24
reflecting 17:18
reflection 28:17
regarding 14:18 21:11 36:20,23 57:12
registered 1:17 59:15
related 17:19 19:3 28:3,5 35:4 37:6,9,18 37:24 38:7 40:4 40:16 41:1 42:7 45:16 49:19 50:7,21 51:11 54:2,11,17 55:5 55:9
relatedness 35:21 48:20 49:13 57:12
relates 1:7 49:14
relation 30:8 34:16
relied 33:11
remember 34:19 39:14 57:24 58:2,6
remote 1:14 2:1 6:8,17
remotely 6:14 6:16
render 54:7
rendered 22:16 48:1
rendering 57:5
repeat 34:14
rephrase 24:16 34:4 55:3
replacement 45:10
report 3:19,21 4:5 21:19,23 22:8 23:2 24:12 25:2,7,17 26:2 26:10 28:21 30:9 31:7,13 32:10,13,17 33:4,12 34:6,16 35:10 36:4,6,10 36:12 37:3 38:11 39:21 40:22,24 42:19 42:21 43:20 45:10 56:22 57:6,11
reporter 1:18 6:24 8:21 9:6,9 59:15,24
reporting 6:17
reports 3:23 21:6 26:20 27:5 27:8,15 36:18 39:6,9
represent 6:23
reproduction 59:22
request 3:13 5:7 15:21 16:5 16:24 17:17 19:8
requested 16:16 35:4
required 21:3
reside 8:13,14 8:14
residency 23:22
respect 20:22
response 17:16 17:16,20
responses 3:15 16:23 17:9
responsive 16:17
restate 57:1
resulted 44:6
results 37:23 44:2
return 60:13

review 29:12 35:1,8 36:2 37:4 54:7
reviewed 28:11 31:11 33:4
reviewing 37:7
richard 3:24 22:9,11 26:21 27:7,17 28:5
ridge 2:4
right 12:9,11 19:9 24:23 31:8 44:5 56:18,22 57:6,15 58:5,13
robert 3:24 26:21 27:6,16
robin 1:17 6:24 59:15
robinson 6:3
rules 21:3

s

s 3:6
saw 15:16 27:11
says 20:15,20 22:12 27:1 28:4 28:8 37:20 42:19 44:1,6,9 44:24 47:2 55:15 56:5
scan 37:8,14 40:2,23 47:20 54:16 55:9
schedule 20:24
schwarz 1:15 3:3,8,19,21 6:11 7:16,22 8:7 13:15,19 14:16 15:5,8,12 15:22,24 16:6 17:2,10,22 18:1 19:18 20:3,22 21:15,23,24 22:7,18 23:3 25:2,7,8 27:4,9 27:17 28:4,10 28:20 29:21 30:10,17 32:8 32:18 34:15 43:16 44:3 46:20 47:6,23 49:12,24 50:18 52:21 53:6,22 56:17 62:2
schwarz's 3:23 26:20 27:15 30:6,8
scientific 57:14
scope 34:22
scratch 33:9
screen 13:8,20 15:3 21:20 36:5 43:17 46:14 50:19
scroll 16:10 17:3 19:19 20:7 20:10 22:7 32:12 44:22 52:23 53:1,11 53:12,15,16,17 53:18
scrolled 43:23 53:13
scrolling 28:2
second 4:3 14:12 18:6 30:7 30:15
section 16:11 20:10 28:3
see 13:19 21:20 22:10 43:16 44:2 46:14,15 52:3
seems 51:20
seen 15:24 16:12 17:4 19:19 27:9 32:13 47:6 48:6 48:17,23 53:22 56:18
send 12:4,5
sent 11:21 12:12 14:17 15:5 18:9
sentence 37:20
series 17:23 28:15 47:10
served 27:7
services 6:4 22:15
sestamibi 51:6
set 21:5 22:13 27:5
seven 17:15
several 28:7 39:17 55:22
shaking 9:2
share 13:8 15:3 46:13
sharing 14:13 50:19
sheet 60:6,9,11 60:14 62:9
short 37:21
show 36:4
showing 48:3
side 44:5
sign 9:22 60:8
signature 59:13 62:11
signed 25:1
signing 60:10
similar 11:1
sitting 8:12 47:23
situation 40:1
sixth 51:18
solely 48:1
sorry 9:24 12:19 26:16 51:17 53:13 55:3 56:3,4 57:18

south 2:4
space 60:6
sparks 3:10,24 4:7,10 13:14 14:5 18:5,7 22:9,11 26:22 27:7,17 28:4,6 28:12 31:9 35:21 36:12,20 36:23 44:14,17 45:17 46:19 47:5 52:20 53:5 54:3,12
speaking 6:19 9:5,13,17
specific 23:2 31:7,22 36:12 38:20 50:16
specifically 36:1
spect 47:15,20
spiel 8:1
spoken 31:23
stamped 14:4
standard 39:6 39:10 40:21 42:11 45:13
stands 47:16
start 8:3 9:11 11:2,3
starts 14:7,11
state 1:19 6:22 8:5 60:5
stated 54:15
statement 31:1 31:3,4
states 1:1 7:8 7:10,12,14 16:17 18:2 23:7 27:1 33:2
stenographic 59:6
stipulated 21:11
stop 14:13 50:19
straight 36:11
street 2:4
stress 50:21,23 51:10
stuff 45:22
subject 60:10
submission 45:1
submitted 31:5 33:5 35:2 37:5
subpoena 3:12 15:5,12
subscribed 62:12
substance 62:8
sum 23:6
supervision 59:24
supplemental 4:1,3 28:19 29:20 30:7,15
support 5:1
sure 9:16 11:7 12:16 27:11 28:13 34:1,20 42:4 57:3,3
swear 6:24
sworn 6:16 7:17 62:12
syed 32:23
symptoms 37:24
system 3:10 13:13 14:3

t

t 3:6 59:1,1 61:2
take 10:24 12:7 20:8,16 23:4 29:5,14 43:4 45:21 51:14 56:13
taken 13:2 29:24 43:10 46:5 51:18 52:10 59:6
talk 9:4 36:9 52:2
talking 12:16
tc 51:6
tce 11:11,14
tech 51:6
telan 7:5,5
tell 8:18
terms 11:8
test 35:3 37:23 50:21,24 51:10
testified 7:18 21:2 48:23
testifying 48:8
testimony 9:20 10:13 22:21
tests 51:6
tetrachloroet... 11:13
text 20:21
thank 36:17 58:9
thanks 25:21 29:16
think 11:5 27:11 39:24 41:20 53:19 58:10
thirty 60:15
three 19:6
time 6:6,7 8:2 8:23 10:22 11:1 12:24 13:2,5 18:9,12 22:15 29:18,24 30:3 43:8,10,13 46:3 46:5,8 52:3,8 52:10,13 58:15
times 39:15,18
timestamp 55:14

today 8:3 10:13 10:16 11:20,23 15:17 16:1,13 17:5 19:20 35:2 51:23 53:23 56:18
today's 6:5 11:6 14:15 25:16
took 8:17
top 20:8,15 47:10,11
transcript 9:20 59:8,22 60:16 60:17
transcription 62:5
treated 24:1
treating 44:17
trichloroethyl... 11:10
truth 8:19
truthful 10:13
try 9:7 10:2
trying 56:5
turn 16:20 21:17
turner 2:9 7:13 7:13
turning 17:14
two 18:3 36:18
type 57:4 58:3
typically 51:6 51:10

u

u.s. 2:8
uchealth 4:7,9 46:18 47:1 52:19 53:3
unable 10:12
uncertainty 42:6
under 28:7 59:23
underscore 17:22
understand 8:18 9:2,3 10:1 34:2
understandable 28:14
understanding 34:24 40:12
understood 10:4 37:2
united 1:1 7:8 7:10,12,14 16:16 18:2 23:7 27:1 33:2
university 3:9 13:12 14:3
unpreparedness 51:22
updates 23:6
usdoj.gov 2:12 2:13,13,14
use 11:7 38:9 39:20 40:21 41:14 52:3
used 39:5,9,15 39:17 41:13 60:18
uses 51:6
using 11:8
usually 50:23

v

valve 45:5,10
verbally 8:24
vest 45:5
video 6:8 9:14
videographer 6:1,3 12:20,23 13:4 29:17 30:2 43:7,12 46:2,7 52:4,7,12 58:13
videotaped 1:14
visit 37:23 48:2 48:21 49:14 55:4,11,22
visits 35:22

w

w 2:10
wait 9:10,16
wallace 4:4 32:4,11,16 33:11 49:5 50:3
want 11:2,2,6 12:15,20 20:8 20:18 21:17 52:4 55:14
wanted 53:20
washington 2:11
water 1:5 6:10
we've 18:3 51:18
wednesday 1:11
week 14:20
welch 3:24 26:21 27:6,16
went 56:3
wires 45:3
witness 1:16 3:2 5:4 6:11,15 7:1 21:2 23:21 29:11 30:24 31:2,19 33:19 34:1 35:13 38:14,24 39:13 39:24 40:12 41:8,20 42:3,15 54:6,15,24 55:8 56:24 57:17 58:12 60:1
witnesses 3:18 19:17 20:2
work 33:22 34:5
writing 36:7
written 56:2
wrong 25:23

x
x 3:1,6
y
yeah 22:6 **year** 25:22,23 **years** 21:2 24:1 **yellow** 49:7 **york** 1:16 8:16
z
zero 14:12 **zeros** 17:23

Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate. The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

DISCLAIMER: THE FOREGOING FEDERAL PROCEDURE RULES ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY. THE ABOVE RULES ARE CURRENT AS OF APRIL 1, 2019. PLEASE REFER TO THE APPLICABLE FEDERAL RULES OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.

VERITEXT LEGAL SOLUTIONS

COMPANY CERTIFICATE AND DISCLOSURE STATEMENT

Veritext Legal Solutions represents that the foregoing transcript is a true, correct and complete transcript of the colloquies, questions and answers as submitted by the court reporter. Veritext Legal Solutions further represents that the attached exhibits, if any, are true, correct and complete documents as submitted by the court reporter and/or attorneys in relation to this deposition and that the documents were processed in accordance with our litigation support and production standards.

Veritext Legal Solutions is committed to maintaining the confidentiality of client and witness information, in accordance with the regulations promulgated under the Health Insurance Portability and Accountability Act (HIPAA), as amended with respect to protected health information and the Gramm-Leach-Bliley Act, as amended, with respect to Personally Identifiable Information (PII). Physical transcripts and exhibits are managed under strict facility and personnel access controls. Electronic files of documents are stored in encrypted form and are transmitted in an encrypted

fashion to authenticated parties who are permitted to access the material. Our data is hosted in a Tier 4 SSAE 16 certified facility.

Veritext Legal Solutions complies with all federal and State regulations with respect to the provision of court reporting services, and maintains its neutrality and independence regardless of relationship or the financial outcome of any litigation. Veritext requires adherence to the foregoing professional and ethical standards from all of its subcontractors in their independent contractor agreements.

Inquiries about Veritext Legal Solutions' confidentiality and security policies and practices should be directed to Veritext's Client Services Associates indicated on the cover of this document or at www.veritext.com.

Exhibit 785

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF NORTH CAROLINA

Case No. 7:34-CV-00897

IN RE:)
CAMP LEJEUNE WATER LITIGATION)
_____)

V I D E O D E P O S I T I O N
o f
MICHAEL SHAHNASARIAN, Ph.D.,
taken on behalf of Plaintiffs

DATE: February 17, 2026

TIME: 9:19 a.m. to 5:25 p.m.

PLACE: Veritext
201 East Kennedy Boulevard
Suite 712
Tampa, Florida 33602

BEFORE: Dawn A. Hillier, RMR, CRR
Stenographic Reporter
Notary Public - State of
Florida, at Large

JOB NO: 7859186

APPEARANCES:

ON BEHALF OF THE PLAINTIFFS:

JOHN F. ROMANO, ESQUIRE
ROMANO LAW GROUP
2701 Okeechobee Blvd
West Palm Beach, Florida 33409-4053
561-533-6700
john@romanolawgroup.com

- and -

WHITNEY WALLACE, ESQUIRE (via Zoom)
WALLACE & GRAHAM
525 N. Main Street
Salisbury, North Carolina 28144
704-633-5244, ext. 199
wwallace@wallacegraham.com

- and -

LESLIE LAMACCHIA, ESQUIRE (via Zoom)
BELL LEGAL GROUP
751 Corporate Center Drive, Suite 300
Raleigh, North Carolina 27607
843-848-5939
llamacchia@belllegalgroup.com

- and -

JT MALONE, ESQUIRE (via Zoom)
DAVIS, BETHUNE & JONES
1100 Main St., Suite 2930
Kansas City, Missouri 64105
816-421-1600
info@dbjlaw.net

APPEARANCES: (continued)

ON BEHALF OF THE DEFENDANTS:

MARCUS TUBIN, ESQUIRE
JOSHUA G. CARPENITO, ESQUIRE
JOEY TURNER, ESQUIRE (via Zoom)
U.S. DEPARTMENT OF JUSTICE
Civil Division, Environmental Torts Litigation
1100 L Street, N.W.
Washington, D.C. 20005
202-616-8367
marcus.tubin@usdoj.gov

ALSO PRESENT:

Jeff Fleming, videographer

INDEX PAGE

WITNESS - MICHAEL SHAHNASARIAN, Ph.D. 7
EXAMINATION BY MR. ROMANO 8
CERTIFICATE OF OATH 224
REPORTER'S CERTIFICATE 225

EXHIBITS

Exhibit 1 Michael Shahnasarian, Ph.D. Curriculum Vitae 19
Exhibit 2 Plaintiffs' Notice of Deposition and Request for Production of Documents, Michael Shahnasarian, Ph.D. 41
Exhibit 3 Rehabilitation Evaluation of Gary Layne McElhiney Sr. 44
Exhibit 4` Rehabilitation Evaluation of Frank Wayne Mousser 78
Exhibit 5 Rehabilitation Evaluation of Edgar Allen Peterson, IV 97
Exhibit 6 Office of the Attorney General letter, dated June 26, 1991, Bates 01576_PETERSON_0000000624 115
Exhibit 7 The Hardison Law Firm letter, dated April 21, 2004, Bates 01576_PETERSON_0000002616 - 2617 117
Exhibit 8 Rehabilitation Evaluation of Diane Lynn Rothchild 125
Exhibit 9 Rehabilitation Evaluation of Richard Douglas Sparks 149
Exhibit 10 TSA Medical & Psychological Guidelines 158
Exhibit 11 Rehabilitation Evaluation of Jaqueline Yvonne Tukes 169

Exhibit 12	Rehabilitation Evaluation of Robert Eugene Welch	172
Exhibit 13	Amendment of Solicitation/Modification of Contract	178
Exhibit 14	US Department of Justice, Attachment to Statement of Work	193
Exhibit 15	Contract-related documents between government and CCA including different modifications of the contracts at different times	201
Exhibit 16	Invoices	202

REPORTER'S KEY TO PUNCTUATION:

-- At end of question or answer references interruption.

... References a trail-off by the speaker. No testimony omitted.

"Uh-huh" "Um-hum" References affirmative sound.

"Huh-uh" "Um-um" References negative sound.

CERTIFIED STENOGRAPHER'S NOTE: All quotations from exhibits are reflected in the manner in which they were read into the record and do not necessarily denote an exact quote from the document.

VIDEOGRAPHER: We are now on the record. My name is Jeff Flemming. I'm a videographer for Golkow, a Veritext division.

Today's date is Tuesday, February 17th, 2026. The time is 9:19 a.m.

This video deposition is being held in Tampa, Florida, in the Camp Lejeune Water Litigation case.

The deponent is Dr. Michael Shahnasarian.

Counsel, please state your appearances for the record, after which the court reporter, Dawn Hillier, will swear in the witness.

MR. ROMANO: John Romano of Romano Law Group on behalf of the plaintiffs.

MR. TUBIN: Marcus Tubin of the Department of Justice for the United States.

MR. CARPENITO: Good morning. Joshua Carpenito on behalf of the United States.

MS. LaMACCHIA: And by Zoom, Leslie LaMacchia, Bell Legal Group on behalf of the plaintiffs.

MR. MALONE: And by Zoom, JT Malone, Davis, Bethune & Jones, also on behalf of plaintiffs.

MICHAEL SHAHNASARIAN, Ph.D.,

was called as a witness and, having first been duly sworn, was examined and testified as follows:

THE WITNESS: I do.

CERTIFIED STENOGRAPHER: Thank you.

EXAMINATION

BY MR. ROMANO:

Q Please tell us your full name.

A Michael Shahnasarian.

Q In the field of rehabilitation and life care planning -- true? -- you do not make medical diagnoses?

A That's correct. I am -- I do make psychological diagnoses at times, but not medical diagnoses.

Q True, that in your capacity as a rehabilitation specialist and life care planner, you do not render a medical prognosis?

A That's correct, sir.

Q Do you prescribe medications?

A No.

Q Do you, in your work in any capacity whatsoever, render medical care?

A I make referrals to patients for evaluations but I do not personally provide medical treatment.

Q Okay. And you do not render any medical advice to patients or clients; correct?
A Did you say requests?
Q You do not render any medical advice to individuals who come to you for rehabilitation counseling or where you can --
A Not --
Q -- put together a life care plan?
A Not in terms of treatment, but I will make referrals to specialists for evaluations.
Q All right. What I'm getting to is this: You don't give the actual medical advice to a given patient. True?
A Other than I recommend you see a specialist. But in terms of actually -- an intervention, that would be true, apart from an evaluation, recommending, you know, an evaluation.
Q In this case involving Camp Lejeune and the cases we're here on today, some different individual Marines or their family members or an individual who was on the base at that time, do you expect to provide any type of rehabilitative services or counseling services to any of these folks?
A No, sir.

Q When you created and developed the life care plans in each of these cases, did you consider the effect of tariffs on the life care plan recommendations you were making?

A Can you define what you mean by "tariffs"?

Q Well, what do you -- in your capacity with your degrees, your education, the work that you do, what is your understanding of what a tariff is in the sense of a tariff announced by the President of the United States? What is a tariff?

A I don't have an understanding of that as it pertains to life care planning. Perhaps that would be -- fall into the bailiwick of an economist.

Q All right. When you create and develop a life care plan in this instance, as to any of these life care plans, did you give any consideration at all to the effect of tariffs on such things as costs of medications or costs of medical equipment?

A No, I did not. That perhaps would be something that would fall under the purview of an economist, but traditionally, no, that does not fall under the purview of a life care planner.

Q Have you -- as a part of your work, when you make recommendations for a life care plan, do you consider the cost of such things as medications

a person will need in the future months and years?
A Yes.
Q Do you consider, similarly, the costs that a given patient or individual will need in the future with respect to medical equipment or devices?
A Yes, sir.
Q Do you consider the cost in the future for such things as a medical procedure like surgery, including something like a deep-brain stimulation surgery?
A Yes.
Q All right. When you consider those costs in these seven Camp Lejeune cases you have assessed and that we're here on today, did you consider at all the subject of the effect tariffs have or would have on those costs?
MR. TUBIN: Objection, form.
THE WITNESS: I considered the present value in the geography in which each of the seven plaintiffs reside. And I defer to an economist if there's an increase in the future for that. That's the manner in which I consider these costs, sir.
BY MR. ROMANO:
Q All right. Was it necessary for you, in

creating and developing the life care plans, to assess the effect of tariffs on future costs as to medical care, medical services, medical equipment?

A No. If that is applicable, it would fall under the purview of an economist who does consider factors such as life expectancy, growth, inflation, and computes future costs and reduces it to present value. That is something that is not under my scope of expertise.

Q In considering how future medical-related costs will get paid for once recommended in a life care plan, did you factor into any of these life care plans payments in the future by Medicare?

A No. There's no collateral source offset that was factored into my analysis.

Q Not in any of these cases?

A That's correct.

Q All right. Similar question. As you were creating and developing the life care plans, did you consider any future payments which may be made through Tricare?

A No.

Q Did you consider, when you created and developed these life care plans, payments from any source whatsoever, whether it be a government

source, an insurance source, private pay, any source at all?

A No. I am aware that some of the plaintiffs are receiving services and equipment in some cases through the Veterans Administration but I did not consider those or any other offset.

Q All right. Let's take an example of a given medication that would be recommended in the life care plan. For purposes of my question, it doesn't matter what the medication is.

When a medication is recommended in the life care plan, and you set forth a cost for that medication, what are the steps you go through in order to determine that cost?

A If you look at the life care plans, you'll see that the costing sources are all identified in the footnotes. So for a medication, you'll see there are pharmacies that are identified that provide the cost of the medication in the locale in which the plaintiff resides. There are pharmacies like CVS, Walgreens, Good Drugs.

It's all documented in the life care plans.

Q All right. So if we look in any one of these life care plans and want to know the source

information for your determination of a cost for a medication, that information will be right in the life care plan?

A Yes, sir.

Q All right. As a part of your work in these cases, did you ever speak to any one of the treating physicians?

A No. That would not be proper. I don't have access to them since I'm retained by defense counsel.

Q Did you, at any time, ask for permission or consent to communicate directly with any of the treaters?

A I don't recall. I may have.

Q If you may have done that, where would we find that information so that we know whether you did or you did not?

A Possibly in notes that I kept during consultations with defense counsel. Possibly a formal request in a letter.

Q All right. As you sit here right now, do you remember ever doing that; in other words, requesting authority or a consent to speak or communicate with one of the treating doctors?

MR. TUBIN: Objection.

To the extent that calls for conversations with counsel, do not answer the question.

THE WITNESS: I've been instructed not to answer the question.

BY MR. ROMANO:

Q Would it have helped you in any way in assessing these cases, in order to formulate your opinions, to have obtained consent to speak to any of the treaters and to have done that?

A It's possible; however, I feel I had very good input vis-a-vis tens of thousands of medical records that I reviewed, including medical records from the treaters, and also the consultations that I had with the defense expert specialists, and also the life care plans. So I had an opportunity to review that life care plan that's retained by plaintiff counsel, prepared.

Q In each of the instances of these seven cases we're here on today, were you able to communicate directly with physicians which were hired by the defense?

A Yes.

Q I don't want to go through all of them so I'll ask a more general question. But what are the steps you went through in order to commence those

communications, first of all?

MR. TUBIN: Objection, CMO 17.

If you can answer the question without disclosing communications between you and other experts, then that's okay. But to the extent it calls for communications between you and the expert, that material is not discoverable under CMO 17 and should not be answered.

THE WITNESS: You used the word "commence," which to me means to begin?

BY MR. ROMANO:

Q Yes.

A So I -- I became familiar with records of the different plaintiffs. The records would include when they were diagnosed with different conditions, what treatment was rendered. There was testimony from their treating doctors and healthcare providers.

After I became familiar with the records, I requested opportunities to speak with the defense-retained specialists. That's what I did to commence the communications.

Q All right. And then in each given case, were you able to speak with the defense-retained specialists?

A Yes.
Q We have reviewed your reports and I know you have a lot of information in the reports about those. Other than the reports that you rendered where you discuss your communications with those physicians or specialists, are there any other documents that you have prepared that contain information about those communications?
A I have notes that I took contemporaneous with my communications. And also after the life care plans were prepared, I transmitted them to the contributors, asked them to review and then to respond if there were any changes or amendments that they wished to make.
Q Okay. I don't know if we can lump them all together. But when you did speak with the defense-retained physicians or specialists, were those all via Zoom call or phone call?
A Zoom.
Q Zoom. Did you meet with any of them in person?
A No.
Q And when you had the Zoom calls with the physicians, was it you, one-on-one, or was somebody else, without identifying that person, present?

A Others were present.
Q All right. As to any of the individual plaintiffs whose cases you have assessed, did you observe any of the plaintiffs in person engaged in activities within their own homes?
A Can you be more specific?
Q Yes.
First, did you visit any plaintiff -- any plaintiff's home to where you were able to observe his or her activities in the home?
A No.
Q All right. Did you observe any of the plaintiffs in his or her activities in the home by video?
A Yes.
Q All right. Was it each of them or certain ones?
A Well, I -- Ms. Tukes I did not examine at all. That was a paper review and consultation with doctors. The others were all by Zoom.
Q All right. Meaning when you conducted the interview --
A The interview, yes.
Q -- of the individuals?
Let me go to -- I think it's over here.

I've got a lot of boxes.

Let's just go off the record for a minute --

CERTIFIED STENOGRAPHER: Okay.

MR. ROMANO: -- so I can find this.

VIDEOGRAPHER: Off record, 9:36 a.m.

(Off the record.)

VIDEOGRAPHER: On record, 9:39 a.m.

(Exhibit 1 was marked.)

MR. ROMANO: I have handed the witness a copy of what we've identified as Exhibit 1 to the deposition.

BY MR. ROMANO:

Q Would you identify this for us, please?

A Yes, sir. This appears to be my curriculum vitae.

Q Who prepared this curriculum vitae?

A My office.

Q Is it a CV that you, yourself, have read and approved?

A Yes.

Q Is it accurate?

A I haven't looked at everything, but it appears to be accurate, sir.

Q Well, have you, at any time, when you've

looked over your CV, found anything that is in any way an error or that needs to be changed out?

A Not to my knowledge, just, you know, perusing it quickly.

MR. ROMANO: All right. Let's go to Exhibit 2.

You know, I'm going to go into the billing records. I think I'll come back to that in light of what you all produced this morning --

MR. TUBIN: Okay.

MR. ROMANO: -- so that I can look at all of it together. And then we'll come back to billing and invoices after I've seen the documents that you just produced.

BY MR. ROMANO:

Q What do you see as your role in this case?

A I was asked to provide an opinion on damages that are being claimed by the seven plaintiffs, damages specifically in areas related to vocational rehabilitation and life care planning.

Q Was your role, in terms of rehabilitation and creating or developing the life care plan, ever changed from the time you started working on this case?

A I don't believe so, sir.

Q All right. And when you hold yourself out to the public or to courts as an expert, what is -- or what are your fields of expertise?

A I am trained as a rehabilitation psychologist with subspecialties in vocational rehabilitation and life care planning.

Q And when you use that phrase or those words "rehabilitation, vocational" or "vocational rehabilitation," explain to us what that area is. What it is that you do in vocational rehabilitation?

A Vocational rehabilitation is a subspecialty of rehabilitation that has to do with one's work capacity. Everybody is different in terms of their education, work experience, transferable skills, disabling problems that may or may not affect their ability to work.

In vocational rehabilitation, we consider all of those factors. We also consider, in the case where there's a question of someone's earning capacity, their demonstrated earning capacity, their demonstrated earnings after an incident in question. Vocational rehabilitation considers all those factors.

In some cases, we consider things like someone's capacity for retraining, if they're unable

to resume their prior work. In some cases, we consider factors such as accommodations, reengineering the workplace. So those are the main types of activities involved.

There's different protocols that we use to obtain information, including standardized testing. In this situation, that was not a factor. But we do administer IQ tests, aptitude batteries, personality measures, occupational interest inventories, sometimes to gather information about a vocational profile when it's relevant.

But generally speaking, vocational rehabilitation has to do with assessing ability to work and earn wages and facilitating ability to work and earn wages when people have had a disruption to their career.

Q In your work, do you actually conduct rehabilitation counseling aside from your expert witness work?

A Yes.

Q What else do you do, aside from your -- in a professional sense, what else do you do aside from your expert witness, consulting, testifying, and assessing cases?

A I have a practice in Tampa that I founded

in 1986 called Career Consultants of America, Inc. It's grown over the years. We currently have 20 employees. I manage the day-to-day operations, and I also train and supervise other people to do career counseling, vocational counseling, life care planning.

I have interns, I have residents, I have staff who -- and the interns and residents rotate in and out.

Q All right.

A I have one that's coming on in summer of 2026.

Q Is CCA a company -- a Florida company?

A Yes.

Q How many employees does CCA have right now?

A Twenty.

Q If you were to approximate the percentage of your personal work which is done in activities as an expert, either in consulting, being hired on cases, assessing cases, depositions, trials, and related matters, what percentage of your work is in that area as compared to the percentage of your work in actually conducting vocational rehabilitation and counseling work?

A Expert witness work consumes approximately 60 to 70 percent of my professional time.
Q All right.
A And there are other activities I do beyond what I described to you.
Q Regarding CCA as a company, what percentage of the business of the company is expert-witness related as opposed to non-expert-witness related?
A I don't know specifically but definitely over half is expert-witness related.
Q All right.
A I have two other people who are doing expert witness work in the practice. One you'll meet tomorrow, Ms. Navarro.
Q Okay. In addition to Ms. Navarro, who is that other person?
A Marianne Abadir.
Q Abadir?
A Yes.
Q Is Marianne -- what is Marianne Abadir's specialty?
A She is -- she has a license as a mental health counselor. She just became certified as a life care planner. But mental health counselor I

would say is more of her specialty.

Q All right. As to the individuals who worked on these cases with you, other than yourself and Ms. Navarro, who else within your company worked on these cases?

A I don't know if I can tell you all of the people who did it but I had support staff who worked on the cases. They were doing thing -- a lot of -- there was a lot of logistics, especially with a case with this many records. So I had at least two or three support staff who were involved in logistics and also a lot of clerical work, a lot of typing was done.

I had at least two other staff who were involved in, let's say, reviewing records, assembling records, putting them in chronological order for me. So probable five, at least, other staff. Six, maybe.

Q In the instances of these seven individuals, as to those who were active or reserved duty Marines, were you able to review the -- what is called the SRB, or the Service Record Book of any of them?

A I reviewed a lot of military records. I don't know all the different acronyms.

Q All right. You reviewed what was supplied to you; correct?
A I did.
Q And then you have noted that in your report?
A Yes.
Q Okay. If we look at your report, does that include everything you reviewed as a part of your assessment as an expert witness in each of the seven cases?
A I should.
Q Well, "it should" is different from "it does."
A To the best of my knowledge, it does.
Q Okay.
A We don't live in a perfect world, but to the best of my knowledge, it does.
Q I'm going to walk you through, in a little while, each of those cases. And I promise you, I'll try do it in the most efficient way that I think we can do it because it's a number of cases.
But walk us through, briefly, when you're hired on one of the Camp Lejeune cases, what are the steps you personally take in terms of starting off your work, conducting the analysis, reviewing

records, arriving at your opinions? Give us a brief overview of that.

And keep out of that any conversations you had with any government lawyers.

A Yes, sir.

You want to talk -- me to speak specifically to this Camp Lejeune litigation or generally as an expert witness?

Q Well, if your work, generally, as an expert is similar to the way in which you approached each of the Camp Lejeune cases, then that will suffice, yes.

A Yes, sir.

Upon an engagement as an expert witness, I request records. And the records are in different areas. Some records are employment records which would include someone's personnel file from different places that they worked with. And that would be very comprehensive. It would include job responsibilities, job descriptions, performance reviews, attendance records, and of course payroll records. I also request tax returns, when there's an earning capacity claim.

Other categories would include pleadings, which would include a copy of the complaint, answers

to interrogatories. In this case, there were some specialized types of information of that sort; deposition testimony of the plaintiff. And then of course, treating doctors and others who have knowledge of a person's diagnosis, prognosis, treatment.

Treatment records, of course, are important to me as well so I'm interested in any operative reports, diagnostic reports such as CTs, MRIs, x-rays. And of course, assessments, I'm interested in that as well.

So at the onset of the case, I'm interested in reviewing records so I can become familiar with the case. And then as I learn more about the nuances of the case, I'll learn more about different records, and I'll ask opportunities to review those as well.

Some of the records also, I should mention, would predate an issue in dispute and some would postdate an issue in dispute. So I gather records, become familiar with the case, and then I request an opportunity to do an examination.

In this case, I was limited by the Court to a four-hour examination. Typically, my examinations will include a clinical interview and

administration of standardized tests, depending on, again, with case-specific factors. In this case I -- in these cases I did not have an opportunity to administer any standardized tests because of the Court-imposed limitations.

So the process would be, become familiar with the records so that I know the history and I can ask pertinent, on-point questions during the clinical interview, then I conduct the clinical interview. In these cases, again, the time allotted to me was four hours; so they were three and a half hours to four hours in these cases.

After the clinical interview, I correlate information from the records with information from the interview, clinically correlate the data; and that would include things like onset dates, types of complaints, treatment that was rendered, functional capacities of an individual, as documented in records, and then, again, clinically correlating that with self-report.

Then after that, I conduct any additional research that may be necessary, including consulting with specialists, as I did in this case. I had an opportunity to consult with different specialists, again, case-specific. And then distilling that

information to address the referral questions. The referral questions are in two areas; the vocational is one area, and then the life care plan is another area.

During the consultations with the specialists, I first inquire of -- about their assessment of the plaintiff, based on their examination, based on their review of the records in terms of things, again, like onset dates, symptoms, how profound the symptoms may have been at different times. And then I elicit from them their recommendations for the various conditions of the -- and, again, all case-specific because everyone's case is different.

And we also review at that time the life care plan produced by the plaintiff-retained life care planner.

I obtain the protocols. And then the next step is to cost the interventions, again, applying this -- the standard of practice in life care planning, which has different requirements, including the types of information that is relied on and the different sources that are used.

All of that information is synthesized into a life care plan. It's transmitted to each of

the contributors. They're asked to review it, and then to respond back with agreement or any disagreement they may have.

Q All right. You mentioned the standard of practice for life care planners; correct?

A Yes.

Q What is that?

A The governing body of the certification for life care planners is the International Association of Life Care Planners, IALCP, and they publish standards of practice.

Q All right. Are you a member of that organization?

A Yes.

Q When did you become a member of that organization, roughly?

A '80s or '90s.

Q And the -- is that the governing body that issues the standards by which life care planners are required to handle the assessment of cases in order to render a life care plan?

A Yes.

Q All right. In your work, do you find yourself retained by both the plaintiff's side of personal injury cases and the defense side of

personal injury cases?
A Yes, sir.
Q In the last ten years, what is your best estimate as to how you would divide that by a percentage in terms of percentage of times you're hired by the plaintiff, percentage of your work where you're hired by the defense?
A Very even.
Q All right.
A More or less, half and half.
Q All right. When you are hired by the defense, such as in this case, and you go through the approach to conducting your expert work, do you do that work exactly the same as the way you would do that work if you had been hired on the plaintiff's side?
A No.
Q All right. What --
A Not exactly the same. The main difference is, I don't have access to the plaintiff or any healthcare providers that the plaintiff is treating with.
Q All right. Let me back up so that I can ask a full question on that.
When you are hired by the defense in a

personal injury case, such as this case, what is the difference between the way you approach assessing and arriving at your opinions as compared to when you were hired by the plaintiff?

A I just explained, the main difference is I don't have access to consult with any healthcare providers treating the plaintiff. So I cannot consult with those individuals. I have to read their records, deposition testimony, but I don't have an opportunity to actually interactively consult with them.

Q All right.

A Also, when I'm retained by plaintiff counsel, I have -- I publish my life care plan first, not the defense.

Q All right. Are there any other differences that you can tell us about as between the times when you were hired on the defense side as compared to the plaintiff's side other than what you've explained --

A Yes. Another one I can think of is, a good example is this case where there was a limitation placed on my scope of my examination. When I'm retained by plaintiff counsel, there's not any limitation placed on the scope of my

examination.

Q Okay. And by "examination," are you talking about an in-person interview or --

A Interview and testing --

Q Okay.

A -- and time limitation, whatever the Court may impose. There's sometimes limitations such as a certain test I can't administer because someone else administered it.

Q Setting aside any communications you've had with government counsel and setting aside the interviews you have had with the plaintiffs in these cases and with specialists hired by the defense, have there been any other people outside of your firm that you have interviewed in order to arrive at your opinions in these cases?

A Not that I can think of, sir.

Q You have not been called upon to try to render any kind of opinions regarding causation; correct?

A You're right.

Q Before being hired by the government in this case, had you ever been hired by the federal government to work in the area of rehabilitation or life care planning before?

A Yes. I've been retained by them. I've also been on the opposing side of the United States government.

Q Sticking just for a moment to the previous occasions when you've been hired by the government in your specialty, approximately how many times has that happened, or approximately how many cases?

A I couldn't give you a precise, but I'll give you my best estimate, 10 to 20 --

Q All right.

A -- over the course of my 43-year career. That might be high.

Q All right. As to the lawyers who are currently working for the Department of Justice and who are on this case, have you worked with them on any previous cases?

A No.

Q In assessing these seven cases, and as it relates to any claims relating to either wage claims or earning capacity claims, was it important for you to assess the daily work activities each of those plaintiffs was involved in on a day-to-day basis when he or she was working?

A Yes.

Q All right. Why is that important?

A For several reasons. I wanted to understand what was required exertionally and non-exertionally, as well as the cognitive complexity of the different types of work they were performing and difficulties that they may have had, and then, of course, evaluating whether or not those difficulties may have been able to be mitigated through a vocational rehabilitation intervention.

Q What is your office address?

A 11019 North Dale Mabry Highway, Tampa, Florida 33618.

Q How long has that location been your firm's office, primary office?

A Since approximately 1997.

Q Does CCA have any branch offices?

A No.

Q In the work that you do through CCA, does CCA conduct marketing activities?

A No.

Q Do you have a website?

A Yes.

Q And do you personally review the website from time to time?

A Yes.

Q Is there anything currently on that

website you object to?

A No.

Q Do you have someone in charge of creating and maintaining your website?

A Creating. There's really rarely maintain -- maintenance. If we get a new employee, you know, or someone leaves, we might put their picture of a new person. There's not much maintenance.

Q And is it maintained in-house, or do you have an outside service that does that?

A Outside.

Q I see in your CV, you have written two books; right?

A Thirteen.

Q Thirteen books.

All right. As to the books that you have written, I'm sure you consider them personally to be authoritative works?

A I'd like to think so.

Q Okay. Aside from the books that you have written, first in the field of rehabilitation, are there any publications which are books which you personally consider to be authoritative reference tools?

A I believe I would consider The Valuation of Monetary Damages in Injury Cases to fall under the category that you're describing; Assessment of Earning Capacity would be another one. That's been published in four editions.

Q Right. Those are your books?

A Yes.

Q Okay. In addition to your books, are there any books by other authors which you consider in the field of rehabilitation to be authoritative books and reference tools?

A Yes.

Q What are those?

A One that comes to mind is Foundations of Forensic Vocational Rehabilitation.

Q All right. Any others?

A There are a few others. I couldn't tell you the exact titles as we sit here. But I can tell you one author is Strausner, S-t-r-a-u-s-n-e-r. He's at the University of Wisconsin, I believe.

Q And the book of which you are thinking that was authored by Strausner, what is the subject of that book?

A It has vocational rehabilitation in the title, but I couldn't tell you the exact title as we

sit here.

Q All right. Switching to life care planning and setting aside your books for the moment, are there any books from other authors which you consider to be authoritative, including as reference tools in the field of life care planning?

A Yes.

Q What are those?

A Roger Weed has written several editions of a book. I don't recall exactly the name. I believe it has the word "handbook," something like handbook to life care planning, co-authored by Debbie Berens, B-e-r-e-n-s.

Q Okay. Any others?

A There are several others. Again, I couldn't give you the titles. But the last book I wrote in 2022, published by the American Bar Association, has a good reference list in it. I reference those books because I did have respect for the contents of them.

Q As you sit here today, can you give us an approximate number of how many times you have had your deposition taken?

A Over a thousand.

Q And as to testifying in jury trials,

approximately how many times has that occurred?

A Again, I -- giving you my best estimate, maybe 500 to a thousand, maybe more, maybe less. A lot.

Q And have you also testified, over the years, in hearings and arbitration proceedings?

A Yes.

Q All right. All right. Going to the report you rendered in each case -- and we'll mark them in a little bit -- and by the way, I should have gone through this before, but during the deposition, if there's anything that you want to look at in the way of a document, we will take the time to do what we can to pull up that document so that you can refer to it. Whatever it is, if that's what you want to do, we'll do it.

A Thank you.

Q If at any time you want to take a break, you tell us, we'll take a break. I don't care what the reason is. Even if you want to talk to the government lawyers, we'll take a break if you want to take a break; okay?

A Yes, sir.

MR. TUBIN: We're getting close to an hour or so, I think, so we should take a short

break.

MR. ROMANO: Yeah. Let me just finish my little instructional spiel first.

MR. TUBIN: Go for it.

BY MR. ROMANO:

Q If -- I know that you know this, but if I ask you a question and you don't understand, will you please just tell me you don't understand it?

A I will.

Q Okay. And if there's something where you just don't know the answer to it, will you just please tell me you don't know?

A Yes, sir.

MR. ROMANO: All right. We'll do that. About ten minutes good?

THE WITNESS: Yes.

MR. ROMANO: It is 10:09, so how about 10:20?

THE WITNESS: Thank you.

MR. TUBIN: Perfect.

VIDEOGRAPHER: Off record, 10:10 a.m.

(A brief recess is had from 10:10 a.m. to 10:23 a.m.)

VIDEOGRAPHER: On record, 10:23 a.m.

(Exhibit 2 was marked.)

BY MR. ROMANO:

Q I have handed you what we have marked as Exhibit 2 to the deposition. And can you identify this as a copy of the notice of the deposition and a request for production of documents?

MR. ROMANO: Did I give you the right one? I may have not. I might have given you the -- oh, I see what they did. They put them together. Let me get those back. Probably easier to do it that way.

That's 2. And I'll hand copies to defense counsel.

THE WITNESS: Thank you.

BY MR. ROMANO:

Q I've handed you what we've marked as Exhibit 2. And does this appear to be a copy of the Plaintiffs' Notice of Deposition and Request for Production of Documents regarding this case and your deposition? Is that what it is?

A It appears to be that, sir.

Q All right. Have you seen this before today?

A I think I have.

Q All right. If you go to the -- several pages over, you will see the actual request for

production. Have you seen that?
A Yes.
Q All right. As to the items requested, did you produce all of those items to government counsel?
And just for the record, I'm referring to the request for production that would be on page three, four, five, and six.
A I believe so, yes, sir.
Q All right. Are there any recent -- let's say within the last two weeks -- items that you produced to the government, or had everything been produced well before ten days ago?
A To the best of my knowledge, before ten days ago.
Q All right.
A I have a records custodian who handles this, and any documents that are requested, we provide.
Q All right. I'll come back to that later because there were some documents that were produced either last night or early this morning. I'm going to look at those during the lunch break. And then in combination with this and the new documents, I'll have some questions; okay?

MR. ROMANO: Now, let's mark as exhibit number -- are we at 3?

CERTIFIED STENOGRAPHER: Yes, sir.

MR. ROMANO: 3. This will be the report on Gary McElhiney.

If you would mark that as Number 3.

(Exhibit 3 was marked.)

BY MR. ROMANO:

Q If you would look at that for a moment, Doctor, just to make sure we're looking at the same thing before I start my questions.

All set?

A Yes.

Q All right. Please tell us what it is that you are looking at referencing Exhibit 3.

A This is Exhibit 3, and it appears to be a copy of my rehabilitation evaluation report along with my life care plan for Mr. McElhiney. Also attached is my curriculum vitae. There's also a confirmation form by Dr. Young. I discussed this with you earlier.

There is my testimony list --

Q All right.

A -- as well.

Q And this is your report on Gary Layne

McElhiney, Sr. dated May 8th, 2025; correct?
A Yes.
Q As to Gary Layne McElhiney Sr., did you render any addendum report or any supplemental report?
A None other than what's contained herein.
Q All right. Is this report on Gary McElhiney formatted in a way similar to the way you formatted the reports on the other six Camp Lejeune cases that you assessed?
A Yes.
Q All right. And I'm going to go through this first report in a little more detail than the others to make certain that we cover not only the formatting but the details of the report. But that will save us time on down the line; okay?
A Yes, sir.
Q All right. Going to page two, and I'll just refer to it as "the McElhiney report," that first section at the top of page two is entitled Examiner Backgrounds/Qualifications; right?
A Yes.
Q Where it says Certified Life Care Planner, you're a certified life care planner?
A Yes.

Q What does it take for a person to become a certified life care planner?

A I don't know what the criteria are at this time. But when I became a certified life care planner, to the best of my recollection -- again, this was in the -- sometime in the '90s, early '90s when the credential first came out, there were different components.

One was a scholastic component where you have had to had some courses at the master's and Ph.D. level such as medical aspects of rehabilitation, psychosocial aspects of rehabilitation, standardized testing measurements, and so forth. I don't recall exactly what there were, but there was a scholastic component.

There was a clinical component where you have had to be practicing under someone who was supervised for a certain -- a specified period of time.

Q Practicing what?

A Rehabilitation counseling.

And there were two -- at that point, there were two work samples that were blind peer reviewed of life care plans. And then there was an examination. And there may have been some other

criteria. Obviously, letters of reference, things like that.

Q All right. It states you were a "psychometric evaluator." What is that?

A That is another certification that is governed by the American Board of Vocational Experts. It has to do with being qualified to administer different types of standardized tests.

Q What does "psychometric" mean?

A Psycho is mental, metric is measure; so it's mental measurement.

Q And it states, "I specialize in career guidance, vocational rehabilitation, human resources counseling, and life care planning."

Correct?

A Yes.

Q If you come down to the next section, it is entitled Methodologies; right?

A Yes.

Q All right. A general question as to this report and all of the other reports. Is this report created using any type of a software template?

A I do have a template that I use for my reports.

Q And the purpose of the template, what is

it? In other words, why is it that you use a template in order to create your reports?

A To provide structure and to provide information in an organized way.

Q All right. And that is why when we look at each of these reports, they are structured in a very similar way; right?

A Yes.

Q In many of the sections of the reports -- we can look at one report on one case, then look at another report on another case, and the wording will be identical. Is that due to the templating, or is there some level of cutting and pasting which takes place?

A I don't know that I would agree with you in terms of identical. So, for example, there may be -- and I'm thinking this -- or speaking, my clinical impressions, I may have said, you know, this person's, you know, memory is good, concentration is fair. There might be some identical language by that, but, no, it's not a cut-and-paste. It's not templated. It's all clinical impressions as they're generated.

Q All right. Well, take this section that we're discussing, Examiner

Backgrounds/Qualifications. That section is identical in each of the reports; right?

A All seven of them would have the same because it's my qualifications.

Q Okay. So if it's more generic information, we would likely see that templated?

A Yes. That would be true.

Q But if it's your --

A Well, let me -- I'm sorry.

When you say "templated," I'm not sure how you're using that word, but --

Q And here's how I'm using it. In other words, if I look at each of the seven reports, under this section, Examiner Backgrounds/Qualifications, that wording is going to be identical in each one because you're following the template language; right?

A It's identical in each one. I would agree with that. I wouldn't say templated language. It's who I am so it's not going to change from one report to another. It's the same --

Q If we use that word, "it will not change" --

A Yes.

Q -- "from one report to another."

A It should be identical.
Q All right. When we go to this next section, Methodologies, is that laid out word for word the same in each of the seven reports?
A Yes.
Q All right.
A It should be.
Q Let's go to Methodologies. When you use that word "Methodologies" in the context of your work as an expert witness, how do you define "methodology"?
A Methodologies are procedures that are applied to conduct an analysis.
Q Okay. And do you lay out, in this section, on pages two, three, and four your methodology?
A Yes.
Q In your work as an expert, have there been any occasions where your testimony or your proposed testimony has been challenged with the filing of what are called either Daubert motions or Frye motions or similar types of motions?
A Yes.
Q Has your testimony at any time ever been limited or restricted or stricken by any court for

any reason?

A To my knowledge, never stricken. There have been cases when there's been limitations on my testimony. And they're typical -- they're typically for procedural reasons or a judge's decision that some information might be overly prejudicial such as a criminal history, drug abuse history, things of that nature, that should not be admitted because they would be overly prejudicial.

So, yes, I've had limitations of that type. And in this case, too, limitation on the time I was permitted to examine the plaintiffs.

Q All right. Let me back up and I'm just going to go through it briefly step by step as to Daubert or Frye challenges in Florida or a similar challenge in another jurisdiction which might be under some other case law or statute.

Under those circumstances, has your testimony ever been limited or restricted based upon your not being qualified in any given area?

A Not to my knowledge.

Q All right.

A There was a ruling, I recall, in the First District of Florida, 25 years ago, maybe, had to do with -- I was not to give any standard-of-practice

testimony. And I viewed that more as a cautionary ruling rather than, you know, instructive otherwise because I had no intention of offering any standard-of-practice testimony on medical matters.

Q All right. Would that be a limitation that you were not to comment on any physicians alluding up to the standard of care in terms of medical treatment?

A I -- I interpreted it as a cautionary ruling by the judge.

Q All right. All right.

Moving away from qualifications and to methodology. Have there been any motions challenging your testimony or your ability to testify where the attack was against your methodology?

A Yes.

Q All right. How many times has that occurred? Multiple?

A More than three, four, five times. I mean, I don't know all the times that it is attacked because I'm not always brought into the conversation, but to my knowledge, at least five, maybe five, up to five.

Q All right. Have there been any occasions

where a judge has issued an order or a ruling limiting or restricting your testimony in any way based on an attack having to do with methodology?

A Not to my knowledge.

Q All right. Under Methodology, you refer to -- and I'm right around the middle of the page. You say "For cases involving claims of loss of earning capacity, the RAPEL and Earning Capacity Assessment Theory methodologies were used to formulate our opinions."

That is what it says?

A Yes.

Q All right. And then you lay out here -- am I pronouncing that correctly, RAPEL?

A Yes.

Q All right. And as we look through this section on page two, and then three, and four, does this provide us with your information as to the methodologies you applied to make your assessments in each of these seven cases?

A Yes, sir.

Q All right.

A Now, some of the cases did not have a wage loss claim so methodology would not necessarily be applicable. But the overall analysis in terms of

the damages claim, yes.

Q All right. As to page four where you have these pyramids, and it says Phases of Assessment, and Assessment Processes, then Analytical Processes, tell us briefly what this focus is on, why it's in your report.

A It's in the report because it's a methodology that was applied. This is a -- I actually have a model of it in my office. It's a three-sided triangle, which is called a tetrahedron. And if you saw the model, you would see it is color coded. And the base of each of the sides of the tetrahedron identifies different activities that are undertaken at that juncture.

And the analytical process proceeds from the base to the pinnacle of the tetrahedron which has to do with the evaluation.

So the areas below the pinnacle are identifying different steps, different processes, different type of information that's considered in rendering an opinion of loss of earning capacity. This is from a peer-reviewed methodology I reviewed based on about 25 years of research.

Q And when you say it was "peer reviewed," who peer reviewed it?

A Many people. Individuals who are well known, including Roger Weed who was the -- he developed the RAPEL model that you started off this discussion with. There have been lawyers who peer reviewed it. It was peer reviewed in the Journal of -- well, Rehabilitation Professional.

Q Was it peer reviewed by any person or group of persons where that peer review itself was then published?

A Yes.

Q Where was it published?

A In Rehabilitation Professional.

Q Is that a magazine?

A It's a periodical. Professional periodical --

Q What you'd call a journal?

A -- of the International Association of Rehabilitation Professionals.

It's in my -- well, you'll see there's many citations to it in my CV.

Q All right. As you move to page five, we then come to the section entitled Overview.

You see that?

A Yes.

Q Again, the format of this report, as we

work through it, it is similar to each of the other reports in terms of format?

A Yes.

Q All right. In that first paragraph, you say "He initially reported his Parkinson's disease began in February 2016."

Do you see that?

A Yes.

Q Do you know, in the case of Mr. McElhiney, if he reports that his Parkinson's disease began in February of 2016, specifically what is meant by that as to whether or not it was a time of a diagnosis or whether a time of first seeing signs and symptoms?

A Are you asking me when the diagnosis was actually rendered?

Q No. No. What I'm asking is, when you see this statement "He initially reported his Parkinson's disease began in February 2016."

When you put that statement in your report, do you know, is that the time of diagnosis or was that the time when he began to experience his first signs and symptoms of the Parkinson's disease?

A My understanding from this record is that this is his self-report of when his Parkinson's disease began.

Q All right. Do you know, in looking at your report and in evaluating these records, the time he first began to experience any signs or symptoms which were related in any way to Parkinson's disease?

A I think that question is better posed to a medical doctor. I'm not giving any medical opinions.

Q If you look at that next paragraph, beginning "According to Mr. McElhiney's March 2024 deposition."

Do you see that?

A Yes.

Q You then have information in here regarding where he was stationed, when he was stationed, how long he was stationed, what jobs he held, and the work that he was in. That is important as a part of your assessment; correct?

A Yes. It provides contextual information.

Q Okay. And, Dr. Shahnasarian, you will see that as we go through the report, I may pick out a sentence in an area or a paragraph and you may think or feel I'm taking something out of context. If I do that, will you please tell me? And then we'll read whatever it is you want to read and then we'll

discuss that; okay?

A I'll do the best I can.

Q Okay. We then come on page six to this section, Records Reviewed. Tell us what is in this section.

I know some of these may seem self-explanatory, but tell us anyways so that there's no mistake.

A Well, I tried to give you an overview earlier when you asked me about the methodology that I applied. You'll see a variety of documents. There are some complaint-specific documents that are listed. There are depositions by different individuals that are listed including their relationship to the plaintiff and the date.

There are many medical records that are listed. I would say the majority of these are medical records and assessments. There are reports by plaintiff-retained experts. There are many military records, Social Security records, earning records.

Generally, those are the type of records contained in this directory.

Q All right. When we look at the "Records Reviewed" section in any one of these reports, does

that provide us with a complete list of all of the records you reviewed and assessed in a given particular case?

A Yes. I believe so, sir.

Q Then we come over on page nine to this section Background Information.

What is this section meant to show or lay out in each of these reports?

A There's some demographic information. There's information about the problems the plaintiff is presenting. There's information about the type of treatment, including procedures and medications prescribed, as well as conservative treatment. There's information about the plaintiff's doctors, at least at the time that the report was published, education information, and some work history information.

Q And then, as you go down near the bottom of page nine in the case of Mr. McElhiney, it has Presenting Problems; right?

A Yes.

Q And what do you set forth as to his presenting problems?

A Musculoskeletal issues since the early 1980s; and cranial nerve damage since 1991; pain in

both knees; right leg pain; numbness in left leg; left knee lateral meniscus tear; right knee medial meniscus injury; lumbar radiculopathy; chronic lumbar sciatica; fifth cranial nerve paralysis.

And other health issues: Tremors in head, face, right arm, hand, left hand, right leg; speech production difficulties; trouble with swallowing; hypotension with syncopal episodes; frequent urination; constipation; erectile dysfunction; right foot drop, began using orthotic device in 2023; neuropathy in hands and feet.

Q In your capacity as a specialist in rehabilitation -- by the way, is that how you phrase it? You are a specialist in rehabilitation? Or would you phrase it some other way?

A That's fine.

Q Okay. All right. In your capacity as a specialist in rehabilitation, when you placed the word in here "tremors," what is a tremor?

A It is an involuntary movement, sometimes medically referred to as dyskinesia.

Q And in this instance, he's presenting to you with tremors in his head and his face and his right arm and hand, the left hand, and right leg; correct?

A Yes.
Q We come to another section here on page 46, Consultation with Dr. Michael Young, Parkinson's Disease Expert/Neurologist.
Do you see that?
A I do.
Q All right. First, what was the purpose of your needing to consult with Dr. Michael Young?
A Dr. Michael Young is an expert on Parkinson's -- he's a neurologist who specializes in Parkinson's disease. I do not -- I do not have that training or expertise, and I mentioned to you that I'm not giving any medical opinions. So I had a consultation with him in order to elicit his background in those areas and knowledge of the plaintiff so that I could get information I needed to fulfill my area of analysis.
Q Jumping ahead for a moment, when you created your life care plan for Gary McElhiney, was it based on the consultation and thereby recommendations from Dr. Young?
A In part. It was based on all of the information I had. I didn't rely solely on Dr. Young. I obviously considered all the records I reviewed. I considered the treatment plan that the

plaintiff life care planner prepared. I considered information from my examination of Mr. McElhiney. So it was not solely on Dr. Young. It was an integration of all of the information available to me.

Q When you, as an expert, are creating a life care plan and a treating doctor recommends a particular procedure, let's say two years in the future, but a consulting physician hired by the defense says the procedure is unnecessary, how do you go about reconciling that for purposes of the life care plan you create as the defense life care planner?

A That is the purpose of the consultation that I have with the specialist, is to determine if there, in fact, are differences. And if there are, in fact, differences, I attempt to discern why are there differences of opinion between a treating doctor or a plaintiff-retained expert and a defense expert. I try to make that understanding.

And, again, I'm not a medical doctor. I'm not qualified to make independent medical decisions. But what I am doing in this case is, I am providing a second opinion. So if there is a difference of the type that you're describing, I am giving a

second opinion, and I am going to be relying on the expert available to me for that input; recognizing fully that there is a difference of opinion.

Q All right. And in this case the expert, at least in the McElhiney case, is Michael Young, who was the Parkinson's disease expert hired by the defense?

A That's -- he is hired by the defense, yes.

Q Well, and you rely on that consultation from Dr. Young as a part of your creating and developing that life care plan; right?

A In part, sir. Again, I consider all of the information available to me.

Q In the case of Mr. McElhiney -- and you can feel free to look at the --

A Um-hum.

Q -- any of the records you want, was there any particular item you can look to where Dr. Young and the treating physician disagreed as to an item that was necessary for the future?

A I would -- do you happen to have the life care plan that your expert prepared in this case and I can -- that would help me?

Q We don't have that right here. I mean, we could get that during the break if you want to see

that. Would --

A That would facilitate my --

Q Yeah.

A -- ability to answer your question.

Q Okay. We'll do that.

The key that I'm -- that I'm honing in on here for a moment is simply this: That if there is an area where the treating physician has recommended something for Gary McElhiney and the consulting physician disagrees with that recommendation, what I'm trying to find out is what result you end up with as the life care planner for the defense and how you got there.

A Um-hum. Okay. I understand your question --

Q Okay.

A -- if it's elicited as a question.

Q What we'll do is, during the break, probably during the lunch break, we'll go ahead and get that to you so that you'll be able to look at it; okay? Will that work?

A Fine.

Q All right. Near the bottom of page 46 in the McElhiney report, you say -- and, again, this is still in the section where you're referring to the

consultation with Dr. Young -- "Our discussion also included a review of Mr. McElhiney's unrelated musculoskeletal problems and peripheral nerve issues including radiculopathies. Dr. Young noted PD can affect some of the same areas of motor functioning as Mr. McElhiney's underlying musculoskeletal problems."

Did I read that correctly?

A You did.

Q All right. And then you say "Dr. Young concluded that Mr. McElhiney appears to have a well-supported diagnosis of PD, including motor (bradykinesia) and nonmotor features."

Do you see that?

A Yes.

Q All right. So you know that Dr. Young is fully supportive of a strong diagnosis of the Parkinson's disease for Gary McElhiney, correct?

A My understanding is he believes that Mr. McElhiney is appropriately diagnosed with Parkinson's disease.

Q And as you go over to page 47, in that first full paragraph right around the middle, "He elaborated about Mr. McElhiney's complex medical condition and indicated he would require ongoing

neurological care, along with integrated care for his conditions related to PD."

Correct?

A You read that right.

Q Now, when you are creating a life care plan, let's take a given area, for example, medications which will be needed in the future, my question is: Do you list out the items first that you believe the plaintiff is going to need in the way of future medications and then get that approved by a physician, and perhaps a consulting physician, or does the physician make those recommendations first and then you include them in your life care plan?

A In all cases, I conduct the interview before I consult with the physicians, and during the interview, I elicit from the plaintiff what their prescribed medications are so I know that going into my consultation with the physician.

Then during the consultation with the physician, I review the plaintiff's prescribed medication protocol and at the same time look at what is in the plaintiff-retained life care planner's life care plan, and then we discuss which are related and which are not related.

And in that way, I ultimately defer to the consulting physician for what medications should be included in my life care plan.

Q When you include medications in your life care plan, are these brand name drugs or generic?

A Whatever is being prescribed. If it's a generic, then we use a generic. If it's a brand name, we use brand name. Whatever the treating doctor prescribed is what we use --

Q All right.

A -- unless I'm instructed otherwise.

Q Instructed otherwise by --

A To use -- to use a different medication by the consulting doctor.

Q All right. So but that recommendation would be from a consulting doctor or a treating doctor; right?

A I always use the treating doctors. But if there's an override, then I'll defer to the consulting doctor.

Q All right.

A As you elicited from me earlier, I don't prescribe medications.

Q I understand that. What I just want to make sure of and clarify before moving on to the

next area is this: You don't put together a life care plan, and then once you've got what you want the life care plan to be, you then go to a doctor and say, Now I want your support for it? You wouldn't do that, do you?

A That's true. I don't do that.

Q All right. That would be unsatisfactory life care planning to do it that way; right?

A I personally don't do it that way. I don't know if that violates a, you know, ethic code, their standard of practice. But it's getting somebody to do this rubber stamp on a life care plan that's published, no, I don't do it that way.

Q All right. And you don't do it that way for what reason?

A Because I believe it's appropriate to do it the way I do it.

Q All right.

A And because I'm not a medical doctor so I believe it's appropriate to have an interactive discussion. And some medical doctors do not like to be consulted with, and they'll ask you to put things in writing. That's not my preferred way to go. They'll say, Give me questions, and I'll answer the questions.

But in my opinion, it's more, let's say, beneficial to have an interactive discussion and discuss why certain recommendations are included or not included.

Q All right. We then come to a section, Summary and Impressions. And I note you have this in each of your reports. What is the purpose of this section, Summary and Impressions?

A Well, it's a lengthy report. There's a lot of information, including medical information which appears in the appendixes from medical records. So this is basically, as the heading states, intended to be a high-level summary and boiling down, okay, well, what are my opinions.

Q If you come over to page 48 in the McElhiney report, you'll see, near the bottom of the paragraph beginning with the words "Concerning his claimed loss."

You see that?

A Yes.

Q All right. It says "Concerning his claimed loss of earning capacity damages, during my February 12th, 2025 clinical interview of Mr. McElhiney, he apprised me that he 'stopped being a truck driver in 2014,' and he then pursued

part-time employment from 2015 through early 2016, well before his July 18th [sic] PD diagnosis."

Do you see that?

A Yes.

Q Here's my question. First, it's your understanding he had the diagnosis of Parkinson's disease made in 2018; right?

A Yes.

Q Okay. When was it, pre-diagnosis, that Gary McElhiney first began to experience signs and symptoms which were being caused by his Parkinson's disease?

A I think that's a question better posed to a medical doctor. That is a medical question.

Q All right. That's not something that you know; correct?

A I'm not a medical doctor.

Q That's not something you've considered; correct?

A No. I considered it but I'm not giving opinions on that matter.

Q Well, if you've considered it, just tell me what is it that you considered about that.

A That it's possible that he did have some manifestations of Parkinson's before it was formally

diagnosed.

Q Okay. Let me give you an example; okay?

Today is the 17th of February. Assume you have someone who today begins to experience significant chest pains, and the person is 70 years old, and this goes on for 30 days and it gets worse every day, and for whatever reason no physician can be consulted.

And on day 30, the person sees a physician and the physician says, You have significant cardiac disease, and gives a stamp of that diagnosis and then begins treatment. In that instance, the diagnosis is made on day 30, but for 30 days before that, the person is experiencing signs or symptoms of the heart disease.

Do you follow that so far?

A Yes.

Q Okay. For purposes of your analysis, as to when a person can or cannot work, or has the ability or doesn't have the ability to work, do you go by the diagnosis date or the date when the person began to experience the signs and symptoms of a disease and illness or condition that will later be diagnosed?

A In your hypothetical, we need to consider

both.

Q All right. In that hypothetical it would be essential to consider both; correct?

A I believe it would be important to consider both. If you want to use the word "essential," I'm okay with that word as well.

Q Okay. All right. This section in each of these reports entitled "Summary and Impressions," is that the section meant to contain your opinions?

A Well, there are opinions in other areas, but my overarching opinions, I would -- that's a good way to put it. I gave you an example earlier. In the Mental Health section, though, there are my opinions in terms of how the person presented cognitively, affectively, interpersonally.

Q All right. And then you have an area in this report, Appendix A, Review of Medical Records. What is this section all about and as it relates to each of the seven cases?

A Yes. This is information obtained from medical records. It's verbatim statements, chronologically organized and categorically organized. The categories are results of diagnostic testing, procedures, and assessments.

Q All right. And then you come to your Life

Care Plan Prepared for Gary Layne McElhiney Sr. And that was prepared as of the date of May 8th, 2025; correct?

A Yes.

Q You have in the report a Work History chart. What is that chart meant to show us?

A Mr. McElhiney's Work History chart appears on page 13. There's three different columns. It has his Job Title, his Name of Organization, and his Dates of Employment. This is chronologically organized, reverse chronological order, actually.

Q Okay. It's meant to have a summary of the work history in a chart form so it's a little easier to view?

A Yes, sir.

Q And if we go to page 14, you see a little bit beyond the middle of the page, the paragraph beginning with the words "When asked about adaptive."

Do you see that?

A I do.

Q All right. It says "When asked about adaptive aids Mr. McElhiney was using during my exam, he cited only his deep brain stimulator device. He apprised me he has hearing aids, though

he was not wearing them."

Is that what it says?

A Yes.

Q All right. And the deep brain stimulator device, do you know whether it was turned on or off during the time you interviewed him?

A I believe it was turned off.

Q Okay.

A It had just been implanted, I believe, 15 days before I interviewed him.

Q All right. Do you have it documented that it was turned off at the time of the interview?

A No.

Q What makes you think it was turned off?

A Because it had been relatively recent onset since the interval when it was implanted and that time I saw him.

Q And that would make you think it was therefore turned off?

A Or he had just been continuing to adapt to it.

Q Is it fair to say you don't know whether it was turned on or off at the time of your interview? Without guessing.

A I can't recall exactly, sir, because it's

been a while ago. But as we sit here, my best recollection is it was not turned on because it was still relatively new.

Q All right. Is there any other reason you know of other than this, because it was relatively new, that would make you otherwise think it was not turned on?

A No.

Q In that final paragraph on page 14, it notes "In 2016 or 2017, Mr. McElhiney recalled, his wife left the workplace to provide him caregiver services."

Correct?

A That's what it says.

Q So you understood during that time period, as well as by the time of your interview, that his wife was his caregiver?

A Yes.

MR. ROMANO: You want to take a break?

MR. TUBIN: I think now is a good time, if that's okay with you.

VIDEOGRAPHER: Off record, 11:17 a.m.

(A brief recess is had from 11:17 a.m. to 11:36 a.m.)

VIDEOGRAPHER: On record, 11:36 a.m.

THE WITNESS: Mr. Romano, you had asked me the last question. I just want to maybe supplement my answer to that.

BY MR. ROMANO:

Q Yes. Sure. Go ahead.

A You had asked me whether I knew if Mr. McElhiney's deep brain stimulator device was on or not.

Q Yes.

A And I told you it was over a year ago, I don't recall exactly. But after we took the recess, I looked at my report. It says "was using" his DBS, which leads me to believe that I was aware that he had it on. It is progressive active in my report so I do believe I was aware that he did have it on.

Q All right. What page of your report are you looking at?

A Page 14, third paragraph in the bottom.

Q Tell us what it says.

A "When asked about adaptive aids Mr. McElhiney was using during my exam, he cited only his deep brain stimulator device. He apprised me" he was -- he has hearing aids, "though he was not wearing them."

But the operative words are "was using

during my exam."

Q When you have a patient with Parkinson's disease, if you learn at some point that person has a deep brain stimulator into his brain, what difference does it make to you as the interviewing rehabilitation specialist and life care planner as to whether or not it is on or off during the interview?

A I think it's probably more material to a medical doctor than it would be to me because I'm not making any independent judgments. However, if the person is complaining about it either being effective or ineffective, then I would -- that would have some materiality to me.

Q All right. Have you ever had the occasion to interview a patient with advanced Parkinson's disease where you were able to watch him or her with the deep brain stimulator on and watch them at another time with it off?

A No. I can't think of an occurrence of that.

Q If we go to the Exhibit 4, which I've placed in front of you. And I've provided copies to counsel. This appears to be the report on Frank Wayne Mousser. Do you have that?

(Exhibit 4 was marked.)

THE WITNESS: Yes, sir.

BY MR. ROMANO:

Q All right. Just take a look at it a moment there. Take your time just to make sure you're familiar with it, and then we'll go through some questions.

A Yes, sir.

Q And you're aware that Mr. Mousser is -- has suffered through both kidney cancer and a later diagnosis of bladder cancer; correct?

A Yes.

Q Is this report formatted in a similar way to the other reports?

A Yes.

Q If you will go to your section on Summary and Impressions, page 45. Are you there?

A Yes.

Q Okay. And one question, before I move on from there. When you work as a rehabilitative specialist and are hired as an expert in a case and you do a life care plan, do you make any determinations at all with respect to either liability or underlying causation?

A No.

Q You leave that up to others including, in many instances, physicians; correct?
A Yes, sir.
Q All right. So if you take someone in a case like this, Frank Wayne Mousser, when you render an opinion, it is based on the condition that he has as of the time you see him in terms of your future -- your recommendations for his future. Is that accurate?
A Yes. It's not prospect- -- it's not retrospective. It's prospective, going forward, if that's what you're asking.
Q Right. So, for example, when you create and develop a life care plan, your concern is not on what got the person into that condition. Your focus is on what his or her needs are for the future?
A Yes.
Q If you come over to page 47, I want to go through this paragraph, near the top. "Additionally, Mr. Mousser is pursuing a claim of loss of earning capacity he associates with his MCBCL experiences."
All right. Do you see that?
A Yes.
Q When you use that phrase "loss of earning

capacity" in this paragraph, are we talking about loss of earning capacity in the future?

A No.

Q Are we talking about loss of earning capacity in the past?

A Since he left the workplace --

Q All right.

A -- or earlier, depending on when he's -- when he's alleging his condition precluded him from working.

Q From Dr. Shahnasarian's perspective, is there a difference between lost wages in the past and loss of earning capacity in the past?

A I'm not sure I understand what you're asking. Can you rephrase it, please?

Q Sure.

From your perspective and your work as an expert, when you were assessing a person's past earnings, is there a difference between lost wages or lost earnings in the past and loss of earning capacity in the past?

A Yes.

Q All right. What is the difference, from your perspective?

A A person may be able to continue to work

but in a compromised capacity where they're not able to realize their -- let's say true earning capacity before they became disabled.

So, for example, a person theoretically may have worked full-time throughout their career and then an event came, and they're still working but they're only working half time so they're -- and there are cases like that where that happens and their earning capacity is diminished even though they're still working.

Q And then when you are assessing loss of future earning capacity or loss of ability to work in the future, what do you mean by that? Define that for us.

A That is an impairment to someone's ability to optimize their earning capacity or their earning potential.

Q Here, again, on page 47, you state "Mr. Mousser contends that problems with UTUC, including an October 20, 2020," and you see this "nephroureterectomy he underwent adversely affected his ability to maintain his employment. He continued to work in the auto industry after he left CAM, and he last worked as a sales manager with Mercer Motor Company between January and

October 2023."

Did I read that right?

A You did.

Q All right. You then state "Again, he conveyed kidney-related problems interfered with his ability to work. Mr. Mousser's wife testified on March 2024 that her husband ceased working and retired, 'because it was too taxing on his health. He had a lot of pain. His blood pressure would be up... His eyes would be puffy... Those symptoms happened at least a few times a week.' The Moussers assert that Mr. Mouser's MCBCL water contamination incidents shortened his worklife."

You see that?

A Yes.

Q All right. Is it important for you to take into consideration the observations of a man's wife as to what he can or cannot do in his work?

A In some cases, it is.

Q Well, in this case, was it --

A Yes.

Q -- important?

A I did.

Q Okay.

A I took it into consideration.

Q And is it important to take into consideration the symptoms and the pain being expressed by an individual as to his own observations about his health and how it affects his work?

A It's something that is important to consider and I always do consider it.

Q All right. Why is it important to consider that?

A Because it's a subjective report and I have to consider it with respect to not just his subjective report but all of the evidence, but I am interested in a person's self-report of what their limitations and capacities are.

Q All right. When you take into account those considerations, do you go back in your work and assess that person's work ethic throughout life?

MR. TUBIN: Objection, form.

BY MR. ROMANO:

Q Is that important?

A I'm not sure how you're defining "work ethic" but some of the metrics that I do hone in on are their work propensity, stability of their career, stability of their earnings history, trajectory of their career development, all of those

things.

Q All right.

A I'm not sure if that's synonymous with how you're defining "work ethic."

Q Well, you know at some point in time, Mr. Mousser took it upon himself to join the United States Marine Corps; right?

A I understand he was enlisted, yes, and he served and he was honorably discharged, is what I understand.

Q Okay. But does that, for example, become a factor you consider that someone at a very young age volunteered for military service in the United States Marine Corps? Is that a "tell" for you about his attitude towards work?

MR. TUBIN: Objection, form.

THE WITNESS: I think it has to be considered along with all other information.

Some people go into the military -- one of the people was, I believe, Mr. Sparks, for reasons that he associated with the dysfunctional family life and that was his motivation for going into the military service.

People have different motivations for pursuing military service, sir.

BY MR. ROMANO:

Q All right.

A There's not a one-size-fits-all.

Q As to Mr. Mousser, do you know the reasons he had made a decision to go into the United States Marine Corps?

A I don't recall that we had that discussion. Perhaps it's in my report. If you have a place you can refer me to, I'm glad to look at it. But as we sit here, I don't recall.

Q Well, my real overall question is simply: Is it something you want to consider? In other words, the work history of an individual, and as a part of that the individual's work ethic, is that something to consider when you're trying to assess earning capacity and a person's employment?

A Again --

MR. TUBIN: Objection, form.

THE WITNESS: -- I'm not sure how you're defining "work ethic" but I told you some of the metrics that a vocational expert will examine, the ones I mentioned to you, stability of their work, their work propensity, the trajectory of their career development, types of work that they've initiated, those are

important factors.
BY MR. ROMANO:
Q All right.
A So I do consider all of those factors that you had mentioned.
Q True, you are familiar with the phrase "work ethic?"
A Yes.
Q All right. What is your definition of "work ethic"?
A Well, as an employer for my employees, when I am assessing work ethic and giving performance appraisals and raises, and, you know, things of that nature, perhaps similar to you, who goes above and beyond their job responsibilities, who is there early, who is there late, who does more than, you know, their job description says to do.
Q All right.
A I think everybody has a different definition, but as an employer and you're asking me personally, those are some of the things that I look for.
Q All right. If you have someone with a good work ethic who has a desire to work, to do a job and to do a job well and to be steady and solid

in that job, that is an important factor to consider in terms of the likelihood of that person wanting to continue down the path with a good work ethic; right? That makes sense?

MR. TUBIN: Objection, form.

THE WITNESS: I'm not sure I'm following you. But there's an adage in psychology, the best predictor of future behavior is past behavior. I think that's what you're alluding to.

BY MR. ROMANO:

Q And you opine on page 47 "I am unaware of any evidence that associates a medical basis for Mr. Mousser being unable to work as an automotive salesperson/manager secondary to his UTUC."

Do you see that?

A Yes.

Q And the basis for your opinion is what?

A The paragraph above indicates --

Q On page 47?

A Yes, sir. There's a citation from Mr. Mousser's treating urologist on July 24, 2024. He said that he did not advise Mr. Mousser to cease working. He said he would have "said no, do not stop working" if Mr. Mousser had asked him.

There's also a discussion of Mr. Mousser's former treating nephrologist, Dr. Daniel Kevin Flood, and he provided similar testimony in August of 2024. He said he would have encouraged Mr. Mousser to maintain his employment.

So those are two treating doctors. And I'm not aware of any medical advisement that Mr. Mousser cease working.

Q Any other items you considered to form your opinion on this point?

A Well, down in the same paragraph, I did have consultations with Dr. Stadler and Dr. Johnstone. Dr. Stadler is an oncologist. Dr. Johnstone is a nephrologist. And their opinion was similar to the treating doctors, that there were no physical disqualifications from Mr. Mousser continuing his former employment in auto sales.

Q And if you go back up to page 47, you see where his wife said that he has ceased working? You see where I'm pointing to?

A No.

Q It's the paragraph that begins with the words "Additionally, Mr. Mousser is pursuing."

You see that?

A Yes, sir.

Q Okay. Go down several lines and you'll see Mr. Mousser's wife testified on March 2024 that her husband "ceased working and retired because it was too taxing on his health."

You see that?

A Yes.

Q "He had a lot of pain."

Right?

A Yes.

Q She says "His blood pressure would be up."

Yes?

A Yes, sir.

Q She says "His eyes would be puffy."

Yes?

A Yes.

Q And then it said "These symptoms happened at least a few times a week."

You see that?

A Yes, sir.

Q If you go over to page 48, you then state your opinion up at the top on those two paragraphs -- correct? -- about work?

A I do.

Q All right. And go to the life care plan, please. And specifically page seven of seven of the

life care plan.

You there?

A I am.

Q Okay. I'm just picking these out as an example. But on page seven, it says at the top, for the item, Cystoscopy.

You see that?

A Yes.

Q And then it says "Duration, year one"; and then "Frequency, one time"; right?

A Yes.

Q Okay. And then to the right, it has estimated cost, $509.21 to $631.04 each time; correct?

A Yes, sir.

Q All right. Here's my question: What is the source of information to you to determine that range of cost? And if there's a place in the document you can refer us to, please do.

A Yes. If you look in the footnote in the document, you'll see the source of the cost.

Q All right.

A There's two --

Q And the source for this is right there on page seven --

A Yes.
Q -- at the bottom of the printed areas; right?
A Yes.
Q Okay.
A Underneath the entry, you'll see the source specified.
Q Okay.
A So here --
Q What is the source?
A There are two sources.
Q What?
A These are both medical databases, FAIR Health and Context4 Healthcare.
Q Okay. When you use that phrase "medical database," what is a medical database?
A There's a description of these two medical databases on pages that precede page seven that you just referred to.
Q What is a database, though?
A It's a compilation of medical bills that are sorted by CPT codes, which are billing codes used in the medical profession.
Q All right. And is it these CPT codes that you rely upon from these databases to determine the

cost you have put here for these items on page seven?

A In part.

Other parts to it include the geography. So these are all specific to the locale where Mr. Mousser lives, and also the percentiles that we use. We used the 50th and the 75th percentile.

Q All right. Explain that.

A Within a distribution of scores, or numbers in this case, or dollar values, the 50th would be the median, the exact midpoint. And then as you go to the right of the bell curve, 60th would be 60 percent of the values are higher, 40 percent are -- I'm sorry. 60 percent are lower, 40 are higher. When you get to the 75th, you would have 75 percent are lower, 25 percent are higher.

Q All right. When you go to get the cost for this particular -- this cystoscopy, where do you, Dr. Shahnasarian, go to physically to look? Is it a site on the internet? Is it a book? Where is it? Physically, where do you go to find this information?

A There's a book called Physicians Fee Reference that specifies CPT codes. And the CPT codes are pretty universally used.

There are two different databases that I subscribe to, the ones that are mentioned there, FAIR Health and Context4 Healthcare.

Q All right. Do you give any consideration when completing a life care plan to what a patient would have to pay privately if he were to go to a private physician and pay cash out of his or her own pocket for a procedure such as a cystoscopy?

A These are non-negotiated, non-discounted rates that are included in the database.

So this is what you would pay if you were a private payor. There are no collateral sources. There's no insurance. There's no Medicare that is offset.

Q So if Frank Wayne Mousser were to go on his own to get a cystoscopy, the range he would pay in his geographical area would be $509.29 to $631.04? Is that what you're saying?

A Yes. Within a reasonable degree of rehabilitation certainty, correct.

Q When you go to this reference to make these cost determinations, do you do any research to determine the source upon which the author or writer of that publication did in order to arrive at the conclusion that you are utilizing?

A I'm not certain I understand your question. These are very widely accepted within the rehabilitation profession. In fact, your expert used the same two databases.

Q No. My question is this: If you want to find out the cost of a CT scan, because you're going to put it in a life care plan, you go to that reference book; right?

A Well, it's a database.

Q Database.

A Okay.

Q Well, is it a -- I thought you said it was a book.

A Physician Fee Reference is a book that you get the CPT codes from.

Q Okay.

A But the databases provide the billing information.

Q Okay. Do life care planners, including yourself, typically then go to research, well, what is the source upon which they base their information to put their CT -- the code together?

A I'm not sure I'm following you but these are medical bills. They're millions of medical bills. If you look at the description on page four

and seven, I believe one of them -- there's 493 different geographic areas.

Q Let me -- let me rephrase the question.

A 32 billion billed procedures --

Q Yeah.

A -- included in this database. And it's updated every six months.

Q Okay. What I'm trying to find out is, in the real world when people go in for a procedure, what are they having to pay for that procedure? Are you telling me what you have here in the life care plan, those are real world numbers as to what an individual would have to pay if he were to go private pay?

A Within a --

MR. TUBIN: Objection, form.

THE WITNESS: Within a reasonable degree of certainty, the numbers I have are reasonable estimates within the locale in which Mr. Mousser resides of what he would pay. These are non-discounted and non-negotiated rates.

BY MR. ROMANO:

Q In the case of Frank Wayne Mousser, did you prepare an update life care plan dated May 23rd,

2025?

A Yes.

Q All right. You see that at the back? It should be way at the back.

A I recall I did prepare an update for him, yes.

Q Okay. My question is simply this: What was the reason which made it necessary for you to prepare an update life care plan which was issued May 23rd, 2025?

A Because he disclosed to me a new medical problem when I examined him, which was the bladder cancer. We knew about the kidney cancer but we did not know about the bladder cancer. So I just learned about that when I interviewed him, and I wanted to have an opportunity to consult with Dr. Stadler and Dr. Johnstone regarding any change to the initial life care plan based on his new problem with the bladder cancer.

MR. ROMANO: Let's go off the record, please.

VIDEOGRAPHER: Off the record, 12:07 p.m.

(A luncheon recess is had from 12:07 p.m. to 12:56 p.m.)

VIDEOGRAPHER: On record, 12:56 p.m.

(Exhibit 5 was marked.)
BY MR. ROMANO:
Q Good afternoon, again, Dr. Shahnasarian.
A Good afternoon.
Q I've handed you what we have marked as Exhibit 5. And have you taken a look at that where you can identify this as being the Rehabilitation Evaluation of Edgar Allen Peterson IV, dated May 8th of 2025?
A Yes, sir, it appears that way.
Q The format of this report, is it similar to the format of the other six cases?
A Yes.
Q If you come over to page five, you see at the top that he was at Camp Lejeune from January 1975 to January 1977 for a total of 24 months while serving in the US military --
A Yes.
Q -- right?
He reported his Parkinson's disease began on July 1st, 2001. Is that what it says?
A Yes.
Q All right. Do you know what that means when he says "My Parkinson's disease began on 2001" without speculating as to what he meant by that?

A Well, I don't want to speculate on any of my testimony. But my interpretation of what he said is onset -- I'm -- I'm interchanging the word "began" and "onset." Again, he's not a medical doctor or a neurologist.

Q And then around the middle of the page, it says -- page five, "During Mr. Peterson's February 2024 deposition, he used a text-to-speech software device called NaturalReader when he could not verbally answer. Throughout the testimony, there were issues reading and understanding the text-to-speech software."

Correct?

A Yes.

Q And then you come down to this indented and italicized paragraph where he states during his February 1st, 2024 answers to interrogatories "I was terminated from my associate attorney position with the Hardison Law Firm suffering a staggering loss of income. I have lost the ability to walk. I cannot speak coherently. I have lost my sense of smell. I can no longer produce a discernible writing in print or cursive. I lost my independence upon the voluntary surrender of my Tennessee's driver's license."

Do you see that?

A Yes, sir.

Q Between the time he was discharged from active duty in the United States Marine Corps and the time he went to work for the Hardison Law Firm, do you know what he was doing to make a living?

A I have his work history on page 11 of my report and it indicates that after the Marine Corps he worked as an Assistant District Attorney General in Tennessee. And then he also worked as a Special Assistant US Attorney during that interim period. I understand he was not compensated in the latter position. And then he joined the Hardison Law Firm in 2000.

Q And the years he was with the District Attorney's Office, were you aware that he was a prosecutor for the State?

A Yes.

Q All right. And you're aware of the rigors involved of trial and trial lawyering; correct?

A I am, sir.

Q All right. You're certainly aware of the rigors involved of being an expert because you've been in court many times yourself; right?

A True.

Q All right. And in doing the work he was doing as a courtroom advocate, it was necessary for him at all times to be someone who was physically capable and alert in terms of mobility; correct?

MR. TUBIN: Objection to form.

THE WITNESS: In terms of the exertion, using the United States Department of Labor nomenclature, I would characterize his exertional demands as light, being a trial lawyer, but cognitively complex.

BY MR. ROMANO:

Q In your work, have you ever considered exactly why it is that an individual who is thought processing with intensity all day, while sitting at a desk, goes home and is exhausted, exhausted from the work?

MR. TUBIN: Objection to form.

THE WITNESS: Have I ever considered that?

BY MR. ROMANO:

Q Yes.

A Sure.

Q The ability of a courtroom trial lawyer to verbally communicate is vital; correct?

A It's an essential function of the job.

Q And another essential function of the job

would be reasonably speedy thought processing while you're on your feet advocating a position in the courtroom; right?

MR. TUBIN: Objection, form.

THE WITNESS: You have to be able to think on your feet quickly.

BY MR. ROMANO:

Q Yes.

A You have to integrate information. And thought processing is another important cognitive capacity in that job.

Q And over the years, in your work, you have certainly run into thousands of trial lawyers on the plaintiff or defense side; right?

A Probably over my career.

Q Okay. On page six of the report, you then move to your Records Review section. And that goes on for -- up until page eight where you then start with the Background Information section; right?

A Yes.

Q And in this instance -- and I'm moving over to page 38 -- you've consulted with disease expert Dr. Michael Young who is a neurologist; correct?

A Yes, sir.

Q How many times did you consult with Dr. Young regarding Eddie Peterson?

A We had one interactive consultation and then we had exchanged correspondence.

Q All right. And the interactive exchange, that was April 9th of 2025 where you consulted for 45 minutes with Dr. Young?

A Yes.

Q All right. Was that in person or via telephone or via Zoom?

A Zoom, I believe.

Q You come to page 40 near the top "In late 2004, Mr. Peterson underwent implantation of a deep brain simulator."

Correct?

A Yes.

Q And then below that in the next paragraph Dr. Bertorini, a neurologist who previously treated Mr. Peterson, opined that his patient's" conviction -- "condition is progressive and incurable."

Correct?

A Yes, sir.

Q It also states "Mr. Peterson's Parkinson's disease sequelae has included problems with falling

and inpatient psychiatric admissions."

Correct?

A Yes.

Q And in the next paragraph below, you see where a physician had characterized Eddie Peterson's condition as "severe"; correct?

A Yes.

Q Come over to page 41, please, that second paragraph down. "Mr. Peterson apprised me he did not request accommodations before his dismissal. He stated 'no physicians said I couldn't go back to work,' and he denied applying for any job after his severance. He and his wife described an approximately 2-month self-employment attempt Mr. Peterson initiated after" the time he left work at that law firm.

"The Petersons conveyed Mr. Peterson's PD symptoms -- including tremors, fatigue, and cognitive difficulties -- impaired his ability to persist in his self-employment. Mr. Peterson has not had subsequent employment or made vocational rehabilitation attempts."

Is that what it says?

A Yes.

Q He states that the "Parkinson's disease

symptoms -- including tremors, fatigue, and cognitive difficulties -- impaired his ability."

Did you ask him how it impaired his ability to work?

A You'll see on page 36, there's a discussion to that end. He identified his tremors in his hands, fatigue. His wife provided some supplemental information about concentration. She indicated the fatigue also was a main factor.

And, of course, there's some testimony from his prior employer.

Q All right. And where do you have that noted? Which page?

A Page 34, has prior employer, Mr. Potter, near the bottom.

There's some other testimony from -- yeah, Jerry Potter, June 2024.

Q Okay. And if you look on page 41, you will see, going to that second to the last paragraph there where it says "Based on my review of Mr. Peterson's medical records, clinical interview of him, collateral information his wife provided, and consultation with Dr. Young, within a reasonable degree of vocational rehabilitation certainty Mr. Peterson's capacity to continue work as an

associate lawyer expired on or about the time he left the Hardison Law Firm.

"The constellation of his PD symptoms exempted him from continuing to work in his former capacity. If not for the PD symptoms, it is reasonable to presume Mr. Peterson would have had a worklife expectancy between the ages of 65-67."

Correct?

A Yes, sir.

Q All right. Now, getting very basic for a moment. What is the difference between life expectancy and worklife expectancy?

A Life expectancy is how long you're expected to live. Worklife expectancy is how long you're expected to remain in the workplace and earn wages.

Q All right. To what extent do you give consideration to formulate your opinion by considering how long a given individual intends to work as opposed to how long statistical databases suggest he might work?

A I considered that --

Q All right.

A -- as well as other factors.

Q All right. Well, what are the other

factors you consider in prognosticating how long somebody would have worked if someone you learned has expressed a desire to work well into his 70s?

A Other factors that I consider are where the person is at in their worklife cycle. I consider factors such as financial need. So if someone is in their early to mid 60s and has a big mortgage they have to pay and they tell me that they want to work five more years, that's very credible.

Health problems the person may or may not have could be another factor. Personal factors of myriad types, having to pay a big alimony when you're in your 60s, young kids, there's many factors that can extend a worklife beyond the traditional worklife years.

Q Did you ask Eddie Peterson how long he intended to work?

A I believe I asked him about his career plans, which would embed that question. I don't believe he stated any time frame beyond the traditional worklife.

Q What is the traditional worklife?

A Typically age 65 to 67, according to Social Security guidelines.

Q And does that mean typically that's when

people do retire or typically that's when people think they may want to retire?

A It depends. Some vocations people retire earlier such as people who do heavy labor. This man was not doing heavy labor in his career. He was doing light-duty work. But you'll see in some occupations, construction work, for example, some of the skilled trade occupations, they have an earlier than traditional worklife which is 65 to 67 according to Social Security guidelines. Every case is different.

Q Are there any guidelines for professionals such as lawyers or life care planners --

A I mean --

Q -- in terms of worklife expectancy?

A I don't know about life care planners or lawyers. I don't - I'm not familiar with anything.

Q Are there any such --

A But there are others -- for example, the American Medical Association, they had a publication that they published every two years, Social Economic Characteristics of Physicians, and it was broken down by many factors, including physician specialty area.

So, for example, the AMA found that

surgeons tend to have a shorter worklife than primary care doctors and their earnings peaked earlier. There was a curvilinear relationship between -- not, likes. For example, a trial lawyer might have a linear earnings curve. But, yes, I am familiar with some publications of professional associations that address worklife.

Q On page 41, you state "While Dr. Young conveyed to me that Mr. Peterson was likely incapable of performing the type of cognitively complex work required of him as an associate lawyer after 2003, he opined Mr. Peterson likely possessed the residual capacity necessary to perform" lex -- "less cognitively complex work after his employment with the Hardison Law Firm ended."

Correct? That's what it states?

A Yes, sir.

Q "I discussed with the neurologist/PD expert employment that would have made use of Mr. Peterson's transferable skills such as conducting basic legal research and reviewing/proofreading legal documents. And Dr. Young noted that employment of these sorts would have been within Mr. Peterson's residual capacity."

Is that what it states?

A Yes.

Q All right. And then you state "My review of Mr. Peterson's records has led me to conclude that he would have been able to persist in the workplace working in a reduced, less remunerative position, until approximately mid-2004 to mid-2005. Thereafter, my analysis has led me to conclude it is less than probable that Mr. Peterson would have been a vocational rehabilitation candidate."

Did I read that correctly?

A You did.

Q And then you have your Records Review starting on page 44, followed by your life care plan for Eddie Peterson; correct?

A Yes, sir.

Q All right. And you note, as a part of your work, he graduated from law school back in 1973; right?

A Yes.

Q Then he went into the US Marine Corps and ultimately became a member of the US Marine Judge Advocate Division, or JAG officer; right?

A Yes.

Q And you learned that when he left the Hardison Law Firm in 2003, he started receiving

disability benefits; correct?
A He did.
Q And those benefits came through the Social Security Administration; correct?
A Yes.
Q And Social Security had determined, obviously, that he was totally and completely disabled from work; correct?
A They did.
Q The Social Security Act defines disability as "The inability to engage in any substantial, gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or which has lasted or can be expected to last for a continuous period of not less than 12 months."
That's the definition; correct?
MR. TUBIN: Objection to form.
THE WITNESS: I don't have it memorized but I will accept if that's how you're representing it.
BY MR. ROMANO:
Q All right. And so that I understand it, your opinion is that Eddie Peterson would have been able to persist in the workplace working in a

reduced, less remunerative position, until approximately 2004 to mid-2005; right?

A Yes, sir.

Q If you go to that period of 2000 to 2003, what is your understanding of what his daily responsibilities were working as a law firm associate at the Hardison Law Firm?

A His former -- well, a letter that he wrote to the Social Security Administration said that he had been involved in 300 jury trials with the Office of District Attorney. Okay. That was before Hardison.

I believe he tried maybe eight cases or so with Hardison, is what he told me, but he was a litigator.

So to that end, he was taking depositions. He was conducting research. He was writing briefs. He was arguing, did hearings and trial.

Basically performing the full scope of job responsibilities you would expect of a trial lawyer.

Q All right. Those responsibilities, would you agree, required mental acuity and alertness on a steady, continuous basis when he's doing that work; correct?

A Yes.

Q All right. And physically, you have to have the stamina to be able to conduct yourself as a high-level advocate when you're in the courtroom or taking depositions?

A Yeah.

MR. TUBIN: Objection to form.

THE WITNESS: Yes.

BY MR. ROMANO:

Q All right. Did you ever see the letter that was written back on June 26th of 1991 by the Attorney General of the United States to Eddie Peterson? The Attorney General at the time, Dick Thornburgh.

A There's thousands of pages that I -- tens of thousands of pages. I can't recall that specifically. But if you see it in my directory and can identify it, then perhaps I can remember --

Q I'm just asking if you remember seeing it. If you don't remember seeing it, let me just -- let me ask you a question.

Assume that on June 26th of 1991, the Attorney General of the United States of America wrote a personal letter to Eddie Peterson expressing appreciation for Eddie Peterson's role in a very important and successful prosecution, and thanking

him for his devotion to the system, hard work, and for being successful in that prosecution.

Assuming that to be true, does that tell you something about the kind of person we're dealing with, with Eddie Peterson, in terms of his work ethic and drive and ability to complete tasks?

MR. TUBIN: Objection to form and foundation.

THE WITNESS: It certainly is very positive and it does tell me -- yes, it tells me that he obviously impressed his supervisor.

BY MR. ROMANO:

Q By your records, you see that he was involved, when he was a prosecutor, in over 300 jury trials; right?

A Yes.

Q But as I understand your opinion, it's that as of December 2003, he had transferable skills to conduct basic legal research and reviewing/proofreading of legal documents; correct?

A Yes.

Q And that -- does that opinion come from you or does that come from Dr. Young or a combination?

A Combination, plus the records --

Q All right.
A -- plus his wife's statements.
Q Do you know if Mr. Peterson was conducting basic legal research and reviewing/proofreading legal documents in his role as a trial attorney?
A More likely than not, he was doing that kind of work while doing other more complex work and multi-tasking.
Q In your opinion, but for Eddie Peterson's Parkinson's disease diagnosis, would he have continued to receive $82,000 annually as an attorney?
MR. TUBIN: Objection, form.
THE WITNESS: Can you restate the question?
BY MR. ROMANO:
Q Yes.
Assuming he had no Parkinson's disease, he's with the Hardison firm and he stays there, he keeps making $82,000 or more per year; right?
MR. TUBIN: Objection to form.
THE WITNESS: You're citing his terminal rate of pay, yes. Okay.
(Interruption.)
THE WITNESS: Mr. Romano, I think there's

something there for you.

MR. ROMANO: Thank you.

Just so the record may reflect this, somebody just walked in and handed me some documents. I need to take five to look at these documents because I think it's going right into what we're talking about now.

So the documents are here and I just want to ask you about them. And I would just share this with you, it has to do with the letter from the Attorney General and one more letter. But I think that's what are in these.

Let's take a break, let me look at these quickly.

MR. TUBIN: Okay.

VIDEOGRAPHER: Off record, 1:29 p.m.

(A brief recess is had from 1:29 p.m. to 1:43 p.m.)

(Exhibit 6 was marked.)

VIDEOGRAPHER: On record, 1:43 p.m.

BY MR. ROMANO:

Q I've handed the witness a copy of Exhibit 6, which appears to be a letter from the Attorney General of the United States dated June 26th, 1991 to Eddie Peterson from Dick

Thornburgh. Do you have that in front of you?
A Yes, sir.
Q All right. I know we've talked a little bit about this letter. But now have you had a chance to read it?
A I have, sir.
Q And you see where he is throwing accolades to Eddie Peterson for his work on this particular criminal prosecution?
MR. TUBIN: Objection, foundation.
THE WITNESS: Positive comments, yes.
BY MR. ROMANO:
Q And you see where he says "I understand that your contributions were instrumental in obtaining the series of convictions against" -- I won't mention the person's name here -- "Although this case required the combined efforts of many representatives of the State Attorney General's Office and the Department of Justice, the convictions in this case are a testimony to your dedication and expertise as an attorney."
Is that what it says?
A It does, sir.
MR. TUBIN: Objection, foundation.
BY MR. ROMANO:

Q All right. We know from your testimony that he worked for a few years at the Hardison Law Firm; correct?

A Yes.

Q All right. If you would look at what we have marked as Exhibit 7, a letter from David Cook of the Hardison Law Firm to the attention of Ms. Parker in Memphis, Tennessee with the Social Security Administration and a letter dated April 21st, 2004.

Do you see that?

(Exhibit 7 was marked.)

THE WITNESS: Yes, sir.

BY MR. ROMANO:

Q All right. And you see where he says "I am the president of and a shareholder in the Hardison Law Firm, which is a professional corporation."

Correct?

A Yes.

Q "I have been employed with this office and its predecessors since I've passed the Bar examination in April of 1977. I have known of Mr. Peterson and his reputation virtually that entire span of time."

Correct?

A Yes.

Q And then he explains how Mr. Peterson went to work for their firm in the next paragraph. You see that starting with "In May of 2000, Mr. Peterson came to work for the Hardison Law Firm" --

A Yes.

Q -- "as an associate attorney"?

A Yes, sir.

Q "His ethical reputation was and is outstanding. And he had the reputation of being an excellent litigator or trial lawyer with approximately 300 jury trials with the Office of the District Attorney General in Shelby County on his resumé."

Correct?

A Yes.

Q All right. And then in that next paragraph, he states "Initially, he maintained that reputation as an excellent litigator with Hardison, which is a firm that concentrates on the civil aspects of litigation. Mr. Peterson adapted quite readily from his criminal law roots, but during the summer of 2003, something happened to him which altered his performance at Hardison."

Do you see that?

A Yes.

Q And then in that next paragraph, he states "Sometime around June or July of 2003, he began to ignore his responsibilities and his job performance would seem to deteriorate rather precipitously. His billing had become virtually non-existent and it was noted that he was out of the office for extended and unexcused periods of time."

Do you see that?

A Yes.

Q As you go to the next to last paragraph, you see his statement "If I were asked to give Mr. Peterson a positive reference to a potential employer, I could not and I would not be able to do so as he is, in my opinion, no longer capable of the rigors required for the practice of law."

Is that what it states?

A You read that correct.

Q All right. So a partner in the firm where Mr. Peterson worked has said that there was a shift or a change in Eddie Peterson in 2003; right?

A Yes.

Q And that shift caused him, meaning this attorney David Cook, to ultimately come to the

conclusion he "no longer capable of the rigors required for the practice of law."

Right?

A Yes.

Q And he doesn't state anything about what aspects of the practice of law; correct?

A He doesn't state anything beyond what is written here.

Q All right.

A He states that the man was a lawyer who had been an accomplished lawyer who worked for him and he does no -- he feels he no longer can practice in that capacity, is how I'm interpreting this statement.

Q All right. When you look at the Attorney General's letter and you look at what David Cook is saying about Eddie Peterson, is it true that you can take from that that he was a -- just a terrific advocate, lawyer, professional. True?

MR. TUBIN: Objection to form.

BY MR. ROMANO:

Q Before Parkinson's disease?

A I'm not sure how you're using "terrific," but that would not be a clinical term I would use to describe him, but certainly accomplished, respected,

very positive comments about him, those would be words that I would use.

Q All right. As a lawyer and as an employee, you don't know anything at all negative about Eddie Peterson before the Parkinson's disease. True?

A Before 2003 date that he's citing, I would agree with that.

Q Okay.

A What I know about him, and he was well thought of, well regarded as a professional.

Q Okay. Then we come to 2003, and his employer, a shareholder of the firm, president of the firm says he's got to leave because he cannot meet the rigors of the practice of law. And he's out; right?

A That's what the letter says.

MR. TUBIN: Objection to form.

BY MR. ROMANO:

Q All right. When you look at that in this particular case, does that give you pause in the opinion you've already given and say, Hey, I should go back and reconsider this because it appears as though the Parkinson's disease is what placed him in a position where he can no longer work as a lawyer

in any capacity?

MR. TUBIN: Objection to form.

THE WITNESS: Sir, I think I maybe -- I didn't make it clear in my report, by I accepted this premise. That's why we cut his worklife as a lawyer off at 2003, part of the reason, not the only reason, but the records support this. And I'm not disputing that he was quite debilitated when he left the Hardison firm and likely would not have been able to continue to work as a trial lawyer. That's in my report, I believe.

BY MR. ROMANO:

Q All right.

A I can show it to you, where it is.

Q Let's go to --

A Yeah. That would be on my page 41.

Q All right. Let's go to --

A Last paragraph.

Q All right. Let's go to the last paragraph. And I look at the wording where you say "I discussed with the neurologist/PD expert employment that would have been made" -- well, I'm sorry.

"I discussed with the neurologist/PD

expert employment that would made use of Mr. Peterson's transferable skills such as conducting basic legal research and reviewing/proofreading legal documents. And Dr. Young noted that employment of these sorts would have been within Mr. Peterson's residual capacity."

So do I understand, then, you're saying no to that practice of law over in 2003?

A What I'm saying is, his former work as a trial lawyer, within a reasonable degree of vocational rehabilitation certainty, would have come to the end in 2003, which is consistent with this letter I just reviewed from Mr. Cook.

Q Right.

A But he did have some residual capacity to perform far less cognitively complex work. It would have been a short-lived period, as I cited later on in that paragraph, but he did have some residual capacity.

Q All right. You know, from looking at the letter from his employer and conducting your own analysis that in 2003, Eddie Peterson is struggling mightily as a lawyer. You know that. True?

MR. TUBIN: Objection. Objection to form.

THE WITNESS: I'm not disputing that he

wasn't able to continue to perform the essential functions of his job as a lawyer, and hence I appropriated that in my analysis. That's why we have a cutoff date of his work as a lawyer of 2003.

BY MR. ROMANO:

Q All right. To where he would be earning zero or be earning some amount?

A Some amount.

Q And the "some amount" would be what?

A Very modest amount. He would not have been able to earn the kind of wages he historically earned, and it would have been for a short-lived period of time.

Q And the short-lived period of time would have been to what?

A As I indicated in the last sentence on that page, mid-2004 to mid-2005.

Q If your opinion were accepted, are you saying, then, that during that period for one to two years or so, the transferable skills would have kept him in law, but doing such things as legal research and writing?

A Much less cognitively complex. Not necessarily just in law. Perhaps for an insurance

company, something making use of his transferable skills, which I delineated earlier in the report. And it would have been less -- his compensation would have diminished.

Q All right. We'll switch and go to the Rothchild matter.

MR. ROMANO: And what's our --

CERTIFIED STENOGRAPHER: 8.

MR. ROMANO: 8? Thank you.

(Exhibit 8 was marked.)

BY MR. ROMANO:

Q We have now marked as Exhibit 8 your report in the Diane Lynn Rothchild matter dated May 8th of 2025. Do you have that in front of you?

A Yes, sir.

Q If you would go over to page five, please. At the top, you indicate that "During her 2024 testimony, Ms. Rothchild indicated she resided off base and that she frequently visited MCBCL for recreational purposes. She reported her Parkinson's disease began in 1993."

Does it state that?

A Yes.

Q All right. When you say "her Parkinson's disease began in 1993," does that mean that is when

she was diagnosed with Parkinson's disease or is that when she had the onset of signs and symptoms related to Parkinson's disease?

MR. TUBIN: Objection to form.

THE WITNESS: This is her self-statement, her self-report, and I'm accepting it as what it says. She reported she believes her Parkinson's disease began in 1993.

BY MR. ROMANO:

Q And then it is stated a little bit below that "According to Ms. Rothchild's February 2024 deposition, DeLalio Elementary School at MCBCL employed her from August 1972 for a school year, then she was employed by Tarawa Terrace II Elementary School at MCBCL from August 1973 to January 1975."

Correct?

A Yes.

Q "According to Ms. Rothchild's February 2024 testimony, she stopped teaching at Parkway South High School in 2009 due to her Parkinson's disease symptoms."

Does it state that?

A Yes.

Q And then in that next paragraph

"Ms. Rothchild testified that she learned about contaminated water issues at MCBCL approximately 20 years ago when she received a survey from the Federal Government. She noted she developed tremors, unsteady walking, moving slowness, fatigue, weakness, sleeping issues, balance problems, swallowing issues, voice problems, slurred speech, handwriting changes, freezing feet, dry eyes, teeth chattering, difficulty concentrating, body stiffness, urinary retention, and low blood pressure -- all of which she attributes to the MCBCL contaminated water incidents."

Is that what it states?

A Yes.

Q If you go over to page seven, you note her current weight was 94 pounds; right?

A Yes.

Q And then a little bit below on page seven, it has Presenting Problems.

You see that?

A Yes.

Q What did she report to you as her presenting problems?

A Tremors throughout body worsened by stress and cold temperatures, chattering teeth, need to use

mouth guard, increased saliva production, gait problems, body feels stiff, fatigue and weakness, difficulty sleeping, speech production difficulties including with projection and articulation, problems with swallowing and choking, concentration difficulties, trouble voiding bladder contributing to interrupted sleep, vision problems, lower extremity cramping, prominent in morning before taking medications.

Q Then come over to page eight, please. And you see Education. And she received a high school diploma in 1965; right?

A Yes.

Q And a bachelor's degree in 1969 --

A Yes, sir.

Q -- in elementary education from Southern Illinois University; right?

A Yes.

Q Then she received a master's degree in special education from Southern Illinois University around 1976; correct?

A Yes.

Q Then doctoral studies, special education, Southern Illinois University.

A Yes.

Q And she was a certified high school special education teacher; right?
A Yes.
Q Elementary education certification license; right?
A Yes, sir.
Q And special education certification license. True?
A Yes.
Q Did you, at any time, discuss with Ms. Rothchild her work as a special education teacher --
A Yes.
Q -- and how that differed from the work of a teacher in a school not doing special education of children?
A Yeah. Yes.
Q All right. Explain to us your understanding, from your perspective as an expert in this case, as to the difference between a special education teacher and a teacher who is not teaching special education children classes in the school setting.
A Some of the main differences she presented to me -- obviously, there's commonalities. You're

doing lecture planning, you're delivering instruction, you're assessing student progress, you're interfacing with parents and others, and so forth, so there's some similarities.

The main differences that she presented in her particular job had to do the potential need to interact with children who were behaviorally acting out, would be one major difference. Obviously that happens in traditional classrooms but it's more, let's say, apt to happen in a special education classroom.

And the other main difference, she was preparing individualized education plans, which are called IEPs in Florida and elsewhere, and these are plans that she indicated she personally typed, prepared. So you have to have insight beyond what a traditional classroom teacher would have. You have to know the children, their special needs, how they can benefit from different interventions.

Q And in terms of education, she did go beyond her bachelor's degree to get further education in the field of special education; right?

A Yes.

Q And then she became certified as a professional in the area of -- or as a teacher in

the area of special education; correct?
A Yes, sir.
Q All right. If you go to the top of page 11, the first full paragraph, when asked about her mental functioning, Ms. Rothchild cited problems with memory. She expressed her belief, her cognitive capability -- or capacities had diminished. She complained of short-term memory trouble and cited recent onset of long-term memory problems. "I can't multi-task anymore at all."
And she also told you about difficulties with comprehension and processing; correct?
A Yes.
Q If we go to page 22, you see where it states "Mr. Smith is the only person that provides Ms. Rothchild caregiver services"?
And he does that, but is not compensated for it; correct?
A Correct, sir.
Q They describe the following attendant care services. And then you have listed in your report "Transportation, assisting with meal preparation, home repairs, scheduling medical and other appointments, help with personal errands, general daily assistance as needed, occasionally reading

documents."

You see that?

A Yes.

Q And if you come down to the next to last paragraph on page 22, she informed you that she enjoys visiting with her 11-year-old grandson but she states "I am no longer able to read. Television is okay but I can't see."

Correct?

A Yes.

Q Then to page 24 where she states -- and I'm going to the paragraph closer to the bottom that says "Again, Ms. Rothchild informed me," that paragraph.

"Again, Ms. Rothchild informed me she is unable to use a computer board. She said 'That's why I had to quit working. I could not use a computer.'"

You see that?

A Yes.

Q And in the final area on page 24, she told you that through training and work experience, she developed the following skills. And then she stated "preparing and delivering classroom instruction, participating and developing 504 plans and

individualized education plans or IEPs, managing classroom behavior, interacting with parents and teachers to coordinate IEPs, facilitating the development of students who have behavioral disorders."

Is that what she stated to you?

A I elicited them from -- she didn't just articulate them, but I elicited those skills from her.

Q All right. Do you know what level of special education children's needs she was teaching? And here -- here's where -- the gist of my questions.

Is it children in a regular school with special needs, or children who are profoundly challenged, or do you know?

MR. TUBIN: Objection to form.

THE WITNESS: When you say "profoundly challenged," you're talking about kids, like, on G-tubes and breathing devices, you know, unable to ambulate, unable to --

BY MR. ROMANO:

Q With significant behavioral problems. In other words, I know there are levels of challenges the children have. Do you know what level it was in

terms of the children she was teaching in her capacity as a special education teacher?

MR. TUBIN: Objection to form.

THE WITNESS: I don't -- from what she described to me, they weren't medically challenged because she didn't say, you know, I had to know how to, for example, administer emergency first aid if it was required, or, you know, help a child who was on a catheter or intervene with a G-tube or a trach or anything like that. So she wasn't dealing with children who were that type of medically challenged.

My understanding was that they were basically intellectually challenged and behaviorally -- some had behavioral issues.

BY MR. ROMANO:

Q All right. And for purposes of your assessments in Ms. Rothchild's case, did you make any assumptions as to the additional skills or talents needed by her in her work as a special education teacher as compared to a teacher who is doing work not in the field of special education?

A Yes, I did.

Q All right. Tell us about that, please.

A Well, I've been doing this for a long time

and I've had many special education teachers over the years. I've interacted with them professionally as well as clinically. So I do know the kind of work that they need to do, things like redirecting children, intervening when there are behavioral issues, being sensitive to accommodations that they require.

There's a lot of diagnostic work that's done as well, especially -- she told me a major part of her job was the IEPs. So there's quite a bit of diagnostic work and prescriptive work that's done when you're writing IEPs as well.

Q All right.

A That would not be true of a traditional classroom teacher.

Q All right. Did you give consideration to the fact that although all teachers need to be paying attentions -- attention to their students, that when in a classroom, whether a special education teacher is needed, the alert level of that special needs teacher is enhanced over and above regular teaching in a classroom because of the challenges of the children?

A I'm not sure I can agree with that because the special ed classrooms tend to have fewer kids in

them than mainstream children, number of students. You have to be -- if you're teaching 40-plus kids, which is not uncommon nowadays, in a classroom, and you're the only teacher, you have to really be really alert.

Not to say you don't have to be really alert in the same situation if you have, let's say, 12 special needs kids, but the student-teacher ratio tends to be much lower.

Q Did you ask her to give you any examples of specific challenges the children that she was teaching had? In other words, this child had this condition or disease or illness or was in a position where he or she needed more help because...?

Did you ever get into the specifics with her using specific examples of children she had taught?

A I don't recall. But what I do recall is, I don't believe there was, like I said, medically challenged kids, so to speak. And you used the word "illness." My understanding was that the main challenges she encountered were of a behavioral or disciplinary behavior.

And they weren't -- they weren't necessarily frequent, which is another reason you

have to be very alert because you have to preempt these occurrences because sometimes they are spontaneous, and you can redirect kids. That was my understanding of the kind of awareness, classroom awareness she had to have with the population of students that she taught.

Q Going over to page 27, near the bottom, you see that it is stated "Ms. Rothchild indicated she had a caseload of 24 students and that the classrooms where she taught had from 20 to 25 students. She discussed the cognitive demands of her former employment including her need to multi-task, rapidly shift mental sets, and tend to students who had special needs. Ms. Rothchild left full-time employment at the end of 2009 academic year."

Correct?

A Yes, sir.

Q And then in this instance, going over to page 32, you did have a consultation with disease expert Steve Gollomp, who is a neurologist; is that right?

A Yes.

Q Did you discuss the need of a deep brain stimulator with Dr. Gollomp?

A Yes.
Q And because off her age, was it determined it would not be worth the risk to do that?
A Yes. That was his assessment.
Q True that Diane Rothchild stopped working full-time in 2009 and at that time she was 63 years of age; right?
A Yes.
Q And she had been working as a special education teacher; right?
A Until that time.
Q Right. Your opinion is that the only reason you believed Diane Rothchild retired was because she could no longer use a keyboard. Is that accurate?
A That's --
MR. TUBIN: Objection to form.
THE WITNESS: Well, she didn't completely retire. She did hold jobs after she left the school but she retired from the school because she told me that she could no longer use a keyboard. And, now, she had an accommodation. It's in my report. You'll see. You probably read it.
The school accommodated her and she was

able to perform her job but she said the school chose not to continue to extend that accommodation to her of making a typist available. And she said that's the only reason she left. She said she could do everything else in her job.

BY MR. ROMANO:

Q At the time she stopped working, she had been making $78,000 annually; right?

A Yes.

Q And it is your understanding that she obtained part-time employment without the use of a keyboard and as a substitute teacher until 2011; correct?

A Yes. That's true.

Q And that one to two times a week at $150 per day; correct?

A That's what her testimony said.

Q All right. So that means she went from making $78,000 annually to, at most, $10,800 annually, if you do the multiplication; correct?

A I haven't --

MR. TUBIN: Objection to form.

THE WITNESS: -- done the math.

BY MR. ROMANO:

Q Well, if you do the math at $150 a day, one to two times per week, we'll take even two times per week, so 300 a week times four weeks time nine months comes out to $10,800 --

MR. TUBIN: Objection to form.

BY MR. ROMANO:

Q -- as an approximation; correct?

A It sounds in the ballpark.

Q All right. And she told you that being a substitute teacher was too difficult and not worth the money; correct?

A That's what she said.

Q And what did you interpret that to mean when she said it was too difficult for her to be a substitute teacher?

A She also cited the drive time to her place of employment.

What I interpreted it as, she made a value judgment and determined that the compensation she was deriving either wasn't needed for her -- I know she is making quite a bit of money now through her pension. So she made a value judgment based on multiple factors and decided not to continue her work participation.

Q That was your interpretation of what she

meant when she said "it was too difficult"?
A Where are you referring to me, please? What part of my report?
Q I have here a quote from you. Well, actually, it's a quote from her that you put in your report where you're speaking to her --
A I think that's her statement, not my interpretation.
Q -- about a substitute. And she said "It was too difficult and not worth the money."
And I asked you for your interpretation.
A Well, basically, what I told you, basically, she made a value judgment looking at multiple factors and determined that she did not want to continue working.
Q You had asked Ms. Rothchild whether she believed she could have continued to work as a substitute teacher beyond 2011. And she stated "I guess I could have, but being a sub is more difficult."
Do you know what she meant by that when she said being a substitute teacher "is more difficult"?
A Well, I would obviously defer to her. But what I perceived that statement -- I know from my

working with other people who have done that kind of work is, it's not steady work. You might be called, you know, at the spur of a moment, so a teacher gets sick and you're asked to substitute for that teacher. So it's not steady. In some ways, it's more difficult than having a sustained, dedicated job.

The work was within her capacity, is what I understood, but she, again, made a value judgment. And her value, her perception was it's difficult.

Q You agree that behavioral management is involved in special education -- in a special education classroom?

A Yes. In all classrooms, but also in special education classrooms.

Q And you understand that it would have been Diane Rothchild's job at all times to create a safe environment in the classroom for each student. True?

MR. TUBIN: Objection to form.

THE WITNESS: I believe that's inherent in a position of authority such as a teacher.

BY MR. ROMANO:

Q So true in her instance also?

A All teachers.

Q And you understand that sometimes students require physical assistance from their special education teacher; correct?

A Some more than others. But I don't know if I can say that as a blanket statement. Obviously there's limits, too, in terms of safety. I mean, unfortunately, we have terrible things happening in schools today beyond -- well beyond the teacher's control.

Q And is it accurate to state that a special education teacher has specialized knowledge as to each student's disability or limitations in the classroom?

MR. TUBIN: Objection to form.

THE WITNESS: They have knowledge of the IEP, if that's what you're asking. But they wouldn't -- for example, if a student has neuropsychological difficulties, not necessarily have that level of depth, but generally, yes, they would have knowledge of what the IEP specifies.

BY MR. ROMANO:

Q Well, they need to know about the conditions their children in the classroom have; correct?

A The conditions.
Q Yes. And some of these limitations can be individualized. True?
A Most are individualized.
Q And the limitations can be limitation on the ability to learn. True?
A Could be.
Q And the limitations can be limitations which are emotional in nature. True?
A Sometimes.
Q And the limitations can, in some instances, be physical in nature. True?
A Sometimes.
Q When she talked to you about work as a substitute teacher, did you understand her to mean being a substitute special education teacher or a substitute teacher in the regular school setting, not special education?
A I understood the latter because she did not say substitute special education teacher.
Q If you go to page 34 with regard to typing accommodation, Diane Rothchild told you that a substitute typing IEPs was not sustainable. And then you indicated that you have not reviewed any documentary or testimonial evidence addressing these

representations. And you then state you would be surprised if no accommodations whatsoever would have been extended to Ms. Rothchild after the 2009 school year when she left her job; is that correct?

A Yes.

Q All right. Did you review any documents that support your position on this?

A I'm not sure I understand your question. It sounds like two negatives in there.

Q Yeah. Let me -- yeah. Let me rephrase the question. You said that, in your discussions "I would be surprised if no accommodations whatsoever would have been extended to Ms. Rothchild after the 2009 school year."

When you say you would have been surprised, and we are working through your methodology as an expert, are you saying there were no accommodations or you don't know?

A What I'm saying is that I understand that they were extended -- she did get the accommodations for one year. She said the only thing she couldn't do was use a typewriter to type the IEPs up. And for one year, accommodations were extended to her, a typist was made available to her. And then she said it was not sustainable thereafter. I believe that's

her testimony.

Q Right.

A She used the word "sustainable." And, yes, I am surprised that a public organization would not accommodate extend -- Americans with Disabilities Association accommodations to a very experienced special education teacher like Ms. Rothchild, or that there wasn't some opportunity to make some exception to one job duty that, by her own statement, she indicated she was unable to perform, or to swap duties with a co-worker.

Or as I indicated in there, students who are aspiring to become teachers need internship placements, and that would have been an exceptional opportunity for a student to have insight into how to prepare IEPs from a very experienced special education teacher like Ms. Rothchild. So that's where my surprise comes in.

Q All right. When she said it was not "sustainable," did you conduct any research as part of your assessment of opinions in this case to find out whether or not she was correct that no accommodations were being extended to her?

A No, I don't know how I could do that to go retroactively back that many number of years and do

that with any, you know, certainty.

Q As part of your opinions, are you assuming that a typing accommodation by a substitute creating an IEP is sustainable?

A I'm not sure I would make the statement the way you posed the statement. I think the way I put it is better put, which is I am surprised that there would not be any accommodation whatsoever extended to her, including the different modalities that I just described. That would be surprising to me, yes, with a woman of her experience, who had a stable work history, advanced credentialing, the number of years of experience, I would be -- I am surprised that there's not some accommodation that was made for her.

Q Are you, then, assuming that the school would have offered the accommodation she needed?

A I don't know that she approached them so we don't know that because she never did say, Would you work with me? Are there other things we can do to help? The only thing I can't do is type up these IEPs.

Q Well, are you making the assumption, though, that the school would have offered that accommodation?

A I'm not going beyond what I said, which is I am -- I would be surprised. That's -- that's where I'm going to stand. I'm not going to assume that they would have actually done it, but, yes, there are ways that she could have been accommodated, that I've seen accommodated. I don't know that she reached out to her doctor and say, Doctor, can you, you know, help me with this, can you write me a letter?

I mean, if I was counseling her on how to preserve her job and stay there, these are different things I would have definitely explored with her.

Q Did you review any policies or procedures from the School District or the State with respect to special accommodations for teachers with disabilities within their classrooms?

A No.

Q Would it be a fair statement to say that as of 2009, Diane Rothchild was essentially a disabled person in a classroom of disabled children?

MR. TUBIN: Objection to form.

THE WITNESS: She definitely had some disabilities, including manual disabilities. And she did teach disabled children.

I'm good if you are.

MR. ROMANO: Are you, Dawn?
CERTIFIED STENOGRAPHER: I'm good.
MR. ROMANO: All right.
THE WITNESS: Did you need to see the others?
CERTIFIED STENOGRAPHER: No, no, no, no.
MR. ROMANO: We'll go to the next exhibit, which will be Exhibit --
CERTIFIED STENOGRAPHER: 9.
MR. ROMANO: Exhibit 9. This will be the report on Richard Douglas Sparks.
(Exhibit 9 was marked.)
BY MR. ROMANO:
Q And I have handed you Exhibit 9, which is the report that you completed regarding Richard Douglas Sparks with a date of May 8th, 2025. Is that what you have in front of you?
A Yes.
Q All right. If you would go to page 48 of your report. And down at the bottom of the page, you see "The earliest record I reviewed suspecting Mr. Sparks was experiencing PD is an office note Dr. Clemons authored on December 18th, 2013. This note references a diagnosis of possible PD that a neurologist in Portugal considered four years

earlier and describes symptoms of tremor and stumbling Mr. Sparks apparently exhibited. Subsequent records identify several neurological complaints Mr. Sparks presented including increased tremors on his right side, upper extremity worse than lower extremity, impaired fine motor movement, shortness of breath, sensory deficits, and cognitive dysfunction."

Is that what it states?

A Yes.

Q And then come over to page 49, second paragraph down shows "A disability evaluation conducted on February 12th, 2018, determined Mr. Sparks' PD adversely affected his ability to work. Records from the Department of Veterans Affairs identified service-connected disability benefits to which he was deemed entitled."

Is that what it states?

A Yes.

Q And then come down to the final paragraph on page 49. And you're discussing his employment. And you say "I appreciate Mr. Sparks' representation of difficulties he experienced that led to his decision to sever his employment. However, within a reasonable degree of vocational rehabilitation

certainty, he possessed transferable skills that would have enabled him to transition to employment that remained within his capacity.

"He was in the withdrawal/decline phase of his career development when he exited the workplace, and it is reasonable to presume his worklife expectancy would have been in the range of 65 to 67 had he chosen to seek alternate employment."

There. Is that what it says?

A Yes.

Q All right. I know we've talked about this a few times today. Very briefly, define "transferable skills."

A A transferable skill is something that you develop vis-a-vis your education and training, work experience that has value, not just in the occupation in which you may be working in at a point in time, but it can be transferred to other occupations or other places of employment.

Q All right. If you go to page 50, and you go to the second full paragraph, what transferable skills are you referencing when you state "Mr. Sparks possessed transferable skills that would have afforded him a competitive advantage in alternative positions"?

A There's a transferable skills analysis I presented on pages 36 and 37 of my report. He does have several work-related credentials. He has computer-use skills that I identified including with MS Word, Excel, PowerPoint. And there's specific proprietary law enforcement software that he had been using.

He had skills in questioning and interrogating people requesting entry into the United States at a stationary post, physically inspecting vehicles for contraband, enforcing federal laws and regulations, searching vehicles with K9s and other tools, making referrals to appropriate regulatory authorities, documenting contacts of individuals requesting entry into the United States, using weapons including shotguns and handguns, arresting people, supervising up to 60 customs and immigration agents, knowledge of endangered species and insects, performing security operations both locally and abroad, interacting with the traveling public, he said literally thousands of people during a typical day.

Q Would an applicant who suffers tremors be a more competitive candidate as a TSA officer than one who does not suffer from tremors?

A It depends on how prevalent the tremors are.

Q You saw the tremors present in Mr. Sparks. True?

A I saw them? You mean visibly saw them?

Q Yeah.

A I --

Q When you interviewed him.

A Again, I was by Zoom. I wasn't person to person and I can't recall specifically if I saw the manifestations of his tremors.

Q Generally --

A But I do accept that he has them. I do accept that he has them.

Q All right. Generally, if you have two people applying to become a TSA officer and all things are equal except one has tremors and one does not have tremors, would an applicant who suffers tremors be a more competitive candidate or less competitive candidate as a TSA officer than one who does not suffer the tremors?

A Well, under the Americans with Disabilities Act, the criteria for hiring an individual is, are they able to perform the essential functions of the job, or are they able to

perform the essential functions of the job with some reasonable accommodation. This is what would qualify you.

Q All right.

A So the fact that he has tremors, alone, is not a disqualifying factor. The factor is, is he able to perform the essential functions of a job with or without his tremors and with or without reasonable accommodations. That's the criteria.

Q So specifically as to a TSA officer, you understand they do have arrest powers; correct?

A I'm sorry. What?

Q They can arrest somebody, a TSA officer?

A I don't know that to be a fact.

Q Well, if you assume that they do have arrest powers, would an applicant who has difficulty applying handcuffs be a more competitive candidate as a TSA officer or a security guard than one who does not have that difficulty?

A If that's an essential function of the job and he had difficulty performing that job, he would be less competitive.

Q All right. He would be at a disadvantage in terms of trying to get that job?

MR. TUBIN: Objection, form.

THE WITNESS: If, in fact, that is an essential function of a job. I don't know that it is.

BY MR. ROMANO:

Q Would an applicant who has trouble with memory be a more competitive candidate as a dispatcher than one who does not have any memory issues at all?

A So, again, it goes back to my definition of essential and marginal functions of a job and can accommodations reasonably be extended to a job incumbent. That's really the criteria.

The fact that they make -- and, again, memory is such a general, how -- how impaired is a memory and can -- you know, can it be mitigated.

Q Would an applicant -- I'm sorry.

If you go to page 50 of your report, you state "Mr. Sparks's decision to leave his employment as a customs and border protection officer in April 2017 was" voluntarily -- "voluntary and not necessitated solely by his PD. However, he quite likely would have been rendered incapable of employment as a customs and border protection officer due to the progression of his PD" systems -- symptoms."

Correct?

Is that what it says?

A Yes.

Q All right.

A And it goes on. It says "and unrelated co-morbidities at that time, including his larynx and vision."

Q All right. And you also say that "Work opportunities remaining viable for Mr. Sparks would have involved semiskilled, sedentary and light work along the lines discussed herein"?

A Yes.

Q Okay. And you state "Work opportunities remaining viable for Mr. Sparks would have involved semiskilled, sedentary and light work along the lines discussed herein."

That's similar to the wording of the last question, but same answer? Yes?

A That's what it says.

Q All right. Is it your opinion that a TSA officer is semiskilled and they only do sedentary and light work?

MR. TUBIN: Objection, form.

THE WITNESS: The essential functions of what a TSA officer does are in the sedentary

and light-exertion range.
BY MR. ROMANO:
Q All right.
A And "semiskilled" is another term of art from the Department of Labor on the taxonomy of unskilled, which is you learn how to do a job at an average level from a short demonstration to 30 days of on-the-job work experience, then the next category is semiskilled. So, yes, it would fall in that semiskilled range.
Q When we talk about TSA officers, are we talking about these individuals like the ones we see at the airports guiding us into and out through security?
A Some are in airports. There are other locales. They are --
Q Right.
A They are not exclusive things. --
Q But the ones most people come into contact with are TSA officers in airports?
A I would say the public. But they do -- they do work in other work environments.
Q Have you ever seen the medical and psychological guidelines for TSA officers which was created by the US government?

A I have.
MR. TUBIN: Objection.
BY MR. ROMANO:
Q All right. Do you have a copy of that?
A No.
Q I don't mean here, but --
A No.
Q -- at your office.
A I've had -- I've had people who went into that line of work in the past.
MR. ROMANO: Let's go to -- Exhibit 10?
CERTIFIED STENOGRAPHER: Yes, sir.
(Exhibit 10 was marked.)
BY MR. ROMANO:
Q All right. Tell me when you're ready.
A Ready.
Q Ready? All right. Does this appear to be a copy of the Medical & Psychological Guidelines for Transportation Security Officers with an effective date of March 8th, 2018; correct?
A Yes.
Q All right. If you would go to page two, you see that it provides a Mission Impact Statement.
Do you see that?
A Yes.

Q And then right under that, you have Purpose.

Do you see that?

A Yes.

Q And it says "The medical guidelines provide a responsive connection between a medical condition and a predictable degree of job performance, conduct and mission readiness. The medical guidelines are designed to reflect the underlying correlation between recognized medical conditions and safe and effective job performance. The medical guidelines apply to Transportation Security Officers, Expert Transportation Security Officers, Lead Transportation Security Officers, Supervisory Transportation Security Officers, and Security Training Instructors."

Correct?

A Yes.

Q All right. And then we go to page three and you will see a Table of Contents. And that lists the areas you can go to to find information throughout these guidelines; right?

A Yes, sir.

Q All right. Then if you'll go to page 20. This is the section noting "Essential Job

Functions." And it includes essential job functions for a TSO officer; right?

A Yes.

Q All right. Then if you flip to the next page, 21, we have here what are now a total of 89 essential job functions; correct?

A Yes, sir.

Q And under these functions, is it true it includes lift and carry baggage up to 50 pounds without assistance, and squat, bend, stoop, and do pat-downs?

A It does say that.

Q Stand continuously up to four hours without a break?

A What number are you on?

Yes, I see that. Number 10.

Q Walk up to 3 miles during the shift?

A Yes.

Q Climb ladders, climb stairs?

A Yes.

Q Operate controls on ETD to determine if sample explosive -- if sample contains explosive substance?

A What number, sir? Oh, I'm sorry. I see it. Number 25.

Q You got it.
A If you don't mind mentioning the number when you read it, please.
Q As you go through these -- I won't hit every one of them, but as you go through them, you see, like, number 33 reading "travel documents in order to verify travel date and time for current day and selective dates [sic]."
And just in looking through it, you see this entire list; right?
A Yes.
Q Okay. The question is, then: How would you expect someone who suffers from vision, speech, tremors, and Parkinson's disease symptoms to ever be able to perform all of these tasks as a TSO officer?
MR. TUBIN: Objection to form.
THE WITNESS: I'm reviewing my report and looking at his representation of his functional capacities to me. And this -- my examination was conducted in, I believe March of 2005 -- 2025 based on what he told me. At that time, he would not have been capable of performing the physical demands of these jobs, if, in fact, these are the essential functions and they can't be accommodated.

BY MR. ROMANO:

Q If you go back to page 13, you'll see here on 13 and 14 it shows restrictions for those who might have a neurological disorder; correct?

MR. TUBIN: Objection to form, foundation.

THE WITNESS: I'm not sure I understand the question.

BY MR. ROMANO:

Q Yeah. If we look at the -- again, we're still talking about our Medical & Psychological Guidelines for Transportation Security Officers. And if you look on page 13 and 14, there's a section "Other Neurological Disorders."

You see that?

A Yes.

Q Okay. And this provides restrictions for those who are affected by these various neurological disorders; correct?

MR. TUBIN: Objection, form, foundation.

THE WITNESS: I'm not sure I understand the content of this document here. It says "Provide restrictions for 12 months after surgery," for example. And I'm not sure who is to provide these. I don't know if it's the job incumbent or healthcare provider. I'm not sure

I understand this language.
BY MR. ROMANO:
Q All right. Well, you see this section, for example, it provides restrictions. In fact, look over on page 14. "Provide restrictions for Parkinson's disease unless all of the following conditions are met."
And then you see it lays out the conditions, including "tremors and muscle rigidity are not inferring with performance of essential job functions."
You see that?
A Yes.
Q All right. So these are all things that are going to have to be considered on whether or not somebody is going to be hired to become a TSO officer; right?
MR. TUBIN: Objection, form.
THE WITNESS: I think these are considerations but the language is a little bit confusing to me. Who is to provide these restrictions in these areas? I don't know if it's the job incumbent or healthcare provider or an independent examiner who is going to do a fitness-for-duty examination. But it appears

that these are criteria used to assess whether the person is a qualified candidate.

BY MR. ROMANO:

Q All right. And if you look on page 15, you have an area near the bottom there where it has psychiatric disorders, and then it lists out psychiatric disorders which on becoming or applying for a job, these are going to be considerations that they are looking for to see if someone qualifies or fails to qualify, right?

MR. TUBIN: Objection to form.

THE WITNESS: Apparently these are criteria that are considered. It's not as clear as I would like it to be to really assess how it pertains to job candidates.

BY MR. ROMANO:

Q All right. And true in this instance, Richard Sparks was diagnosed with depressive mood disorder; correct?

A He was.

Q All right. Is it your opinion that a dispatcher is semiskilled?

A Yes. Obviously it's going to depend on -- some are unskilled. Again, the definition is up to 30 days of on-the-job training, but generally, the

more complex ones, yes, they would be in the semiskilled area.

Q All right. When you consider you're talking about him becoming a dispatcher, what is it that you are contemplating as to the type of dispatcher he would be? What I really mean for that, the type of organization he might work for as a dispatcher.

A It could be a building company. I've had people who perform that jobs. They work, for example, for concrete companies, sending out concrete trucks to different destinations.

Q Would you consider him for a job as a dispatcher for a police or sheriff's department?

A Well, he's past retirement age. I think we have to put everything into perspective now. I believe he's 70 or 71 years old, and he's been out of the workplace --

Q Sure.

A -- for a number of years, so.

Q Well, backing up, though --

A Yeah. To be backing up --

Q -- to the time period you say he should have been working.

A At the time he left the workplace, he

voluntarily left his job, there were no medical recommendations or advisements. And he chose not to pursue other employment. He said it was his own decision. He totally made that decision on his own.

So we're looking -- we're at a different point in time now than we were when he left the workplace.

Q All right. At the period of time when he stopped working, your conclusion is he could have kept working; right?

A Yes.

Q All right. And your conclusion is that at least one field he could have gone into was to be a dispatcher; right?

A Well, he -- what he was doing was more physically demanding than a dispatcher. And, again, he chose -- he chose to leave that job.

Q All right.

A But, yes, he could have at that time gone into being a dispatcher.

Q All right. My question is only this: From your perspective, what level of a dispatcher? And by that I mean, you just mentioned a business, for example. Could he have been a dispatcher for 911 in a big city?

A I would not recommend that for him.
Q All right. And why would you not recommend that for him?
A He does have some cognitive difficulties. He's -- and, again, are we going back to when he was --
Q Back. Yes, back.
A At that time, he was interacting with the public extensively. He, I believe, was at the Phoenix airport. These are international arrivals. And he was -- he said he had to -- there's a lot of information that he had to be aware of, including different visas from different countries. That's all documented in my report.

He had to -- he had to be able to size someone up quickly to determine if there was something suspicious about the person. And, yes, he did have to apprehend people if there was an issue that arose. I understand it was infrequently but it could happen.

So at that point in time, it appears that he did have quite a bit of ability to multi-task, process information, make decisions rapidly. I would not have ruled out at that point in time some types of dispatching jobs for him.

Q Back at that time -- true? -- he did have neurocognitive deficits, though; correct?

A You're asking me about the period around 2017?

Q Yes.

A He had mild cognitive impairment, according to the records, around that period of time.

Q And if you go back to 2018, had the VA made any decisions regarding his ability to work?

A Is this somewhere in my report specifically that you can point me to? I can find it. It will just take a while.

Q Well, I have my notes. I don't have the page of your report, but I have my notes that the VA had concluded he could not work, going back to 2018.

Let me ask it this way, Dr. Shahnasarian. If you assume the VA had determined he could not work as of 2018, would you have any reason to disagree with that?

A No, I don't. If that's what records show, that's what the records show.

MR. ROMANO: All right. This would be a good time for a break, then.

MR. TUBIN: Yeah.

MR. ROMANO: And then I'm going to go right on to the Tukes matter.

MR. TUBIN: Okay.

VIDEOGRAPHER: Off record, 3:09 p.m.

(A brief recess is had from 3:09 p.m. to 3:24 p.m.)

(Exhibit 11 was marked.)

VIDEOGRAPHER: On record, 3:24 p.m.

BY MR. ROMANO:

Q I've handed you what we've marked as Exhibit 11, which is a copy of your report on Jacqueline Yvonne Tukes dated April 8th, 2025. Is that what you have in front of you?

A Yes, sir.

Q Okay. And if we go to page five, you indicate at the top that she had been at Camp Lejeune from June of '85 to January of '87 for a total of 19 months, noting that she resided at Hadnot Point besides Tarawa Terrace. Is that what you have?

A Yes.

Q And then if you would go to page 12, under General Information, you note that "Ms. Tukes conveyed during her April 2024 deposition that she was hospitalized for pancreatitis circa 1990. She

indicated she was first diagnosed with left kidney cancer on June 15th, 2010, after she experienced blood pressure problems and that she underwent a partial nephrectomy on August 20th, 2010, performed by a Dr. Matthew Nielsen."

And then just below that she conveyed that "she underwent at least five nephrectomies from 2010 to 2023."

Do you see that?

A Yes.

Q And in this instance, on page 19 under your section Consultations with Disease Experts, you note that you consulted with Dr. Walter Stadler, who is a medical oncologist, and with Dr. Duncan Johnstone, who is a nephrologist; correct?

A Yes.

Q And when we get to page 20, the section that includes your Summary and Impressions, in that middle paragraph, you note that "Dr. Jayaram, Ms. Tukes' treating hematologist oncologist, testified in 2024 that his patient's kidney transplant is expected to last between 10 and 15 years and that she will likely need a second kidney transplant.

"In his May 10th, 2024 office note,

Dr. Jayaram stated 'Hopefully at this point she should be cured of disease, but she would need to be followed for 5 years to say that. But she will need to have continued chronic monitoring. We will consider CT imaging in 6 months' time but I" do -- "but I want to see how she does from a transplant standpoint before ordering.'"

Is that what the note says?

A Yes.

Q All right. And then you have your appendix, where you conduct a complete review of the medical records; correct?

A Yes, sir.

Q Okay. And, again, as we go through your report, is it formatted similar to the way in which each of the other reports are formatted or structured?

A Yes.

Q And in this case, there's no claim being pursued as it relates to wages or lost wages; right?

A That's what I understand, sir.

Q Then for Ms. Tukes, on April 8th, 2025, you prepared a life care plan, which is attached to your report; correct?

A Yes, sir.

Q In the life care plan, do you lay out what her challenges are going to be in the future in light of her suffering through this kidney cancer and kidney disease?

A The life care plan identifies her future rehabilitation and intervention needs.

Q And the physician upon whom you are relying for the life care plan, was that the two physicians that were mentioned earlier?

A Well, again, I'm relying on all the information available to me. But I had consultations with Dr. Johnstone specifically in this case.

Q All right. And have there been any -- is there an addendum or any type of a supplement to the report you did in Ms. Tukes' case?

A No.

Q I'll go to Exhibit 12, which will be a matter relating to Robert Eugene Welch.

(Exhibit 12 was marked.)

MR. ROMANO: I have a copy of the exhibit for you, as usual, and copies to counsel.

BY MR. ROMANO:

Q Do you have there in front of you the report you rendered in the case of Robert Eugene

Welch which is dated May 8th of 2025?

A I do.

Q All right. And if you would go to page five of your report, you note at the top "According to Mr. Welch's military records, he was on active duty from August 1968 to September 1973 and was discharged from military service at the rank of captain. Records note his military occupational specialty was judge advocate."

You have that?

A Yes.

Q And then as you come down a few paragraphs below, you have "In May 2024, Maureen Welch," his spouse, "testified that the Workers' Compensation Appeals Board employed her husband from 1976 and that he had the same job, in different offices of the Appeals Board. She conveyed Mr. Welch was a presiding judge for the Appeals Board in Pomona, California. And she indicated that her husband retired from the Appeals Board in 2005. And then one week later, he returned to part-time work until 2010. Mr. Welch provided similar information about his work history during my clinical interview with him on February 2nd, 2025."

Is that what it states?

A Yes.

Q And then when you come over to page 28, we are at the section dealing with your Summary and Impressions; correct?

A Yes.

Q And as to Mr. Welch, what are the areas in which you are offering opinions for him? By "areas," I mean, what opinions?

A I understand that he does not have a claim of loss of earning capacity or lost past wages. So in his case it is a life care plan. I have developed, again, the same methodology I applied earlier.

Q If you come down to the last paragraph on page 28, it states "Apparently Mr. Welch's last seizure was in April 2014. Dr. Markus, Mr. Welch's treating neurologist for his problems with epilepsy, documented his patient's right-hand tremor problems in a note dated August 24th, 2021, and suspected Mr. Welch might have been exhibiting PD symptoms.

"Dr. Neff, also a neurologist, diagnosed PD on November 16th, 2021. Additionally, on March 10th, 2022, Dr. Neff indicated Mr. Welch was experiencing mild cognitive impairment, without dementia, along with obstructive sleep apnea.

"Dr. Tracy, June 9th, 2022 office note includes an assessment of mild cognitive impairment for which Mr. Welch was prescribed Aricept. Mr. Welch and his wife dispute a dementia diagnosis."

Is that what it states that I just read?

A You read it correctly.

Q All right. And then if you go to the middle of page 29, "He described problems with falls, complained of intermittent hand tremors, 'grabbing of the feet' problems, trouble with balance, fatigue, concentration problems, sleep problems, loss of sense of smell, illegible handwriting, and other manifestations he associates with PD as noted. Additionally, Mr. Welch describes symptoms of mild cognitive impairment and emotional distress. He provided a similar account during my February 2nd, 2025 clinical interview."

Is that what it states?

A Yes.

Q And from here, your work has been to create and develop a life care plan for Mr. Welch, and you did that and it is attached to the report?

A I did.

Q Correct?

A Yes.
Q All right. Have you done any recent, let's say within the last three years, speaking presentations to any statewide or national or international life care planning groups or organizations?
A I don't think so. My CV lists all of my presentations at professional association meetings. I don't believe so in the last three years.
Q In the last three years, in the area of rehabilitation, have you done any -- or given any speaking presentations to any statewide, national, or international organizations?
A On what topic?
Q Rehabilitation.
A I don't think so. Again, my CV would correct me if I'm wrong, but I don't believe so in that time frame.
I've lectured at other places such as universities but not in -- not in front of the groups you mentioned.
Q Yeah. The groups I'm referring to would be life care planning groups or rehabilitation groups or professionals.
A I don't think so.

Q As a part of your work as an expert, do you have a --

A Actually, let me correct myself.

Q Sure. Sure.

A I think there may have been one.

Q Okay.

A Yeah.

Q When, where, and around what --

A Around '22 or 2023, in that time frame.

Q What's the location and the group?

A I believe it was the American Board of Vocational Experts. It would be on my CV.

Q It's in the CV?

A Yeah.

Q All right. In your work as an expert, do you ever provide the attorney who hired you on the case with a direct examination outline for him or her to follow when conducting your direct examination at trial?

A I've been asked to do that and I have done that.

Q All right. Do you do it on your own or only if you were asked to do it by the particular lawyer?

A If I'm asked to propose questions. And

some of them may be used, not used, especially in the technical content, that's -- that's when it tends to occur most often.

Q Do you save those --

A No.

Q -- direct examination outlines from case to case?

A No.

Q Are they published anywhere? On the internet? In blogs? Speeches? Books?

A They could be published as sample questions in -- in my books, my Assessment of Earning Capacity in particular.

They're case-specific. So every case is different. So there are technical questions that can arise and I'm asked to help to present questions that would help be understandable.

Q We'll go to the next exhibit.

CERTIFIED STENOGRAPHER: This is 13.

(Exhibit 13 was marked.)

BY MR. ROMANO:

Q All right. If you could look at that, please. This is Exhibit 13.

All set?

A Ready when you are.

Q Okay. I will represent to you that Exhibit 13 are documents provided to me which I understand are the documents that the government produced for us regarding your deposition either last night or this morning; okay? I have not been able to assess them but I did look at them quickly during the lunch break.

So, first, have you had a chance to page through them?

A I --

MR. TUBIN: Can I --

MR. ROMANO: Sure.

MR. TUBIN: So these were produced six days ago. This stuff from this morning is not contained within these documents, I don't believe. These were produced when the document demands were responded to on February 11th. That's the only correction I'll make.

MR. ROMANO: If you are correct, then I have -- then I don't even have the documents you produced this morning.

BY MR. ROMANO:

Q Let me do this: Let's -- let's -- we'll keep moving with this exhibit. I don't know what it will ultimately be called other than Exhibit 13.

But the first document here is -- looks -- and I've got these all together in this exhibit. But it is a 15-page exhibit. And it says at the top left, Amendment of Solicitation/Modification of Contract. Do you recognize this document?

A Vaguely. This is -- I have people in my office who handle all billing and contract work but I probably have seen this.

Q When were you first hired on this case?

A I don't know, as we sit here. This says 11/29/23. That would sound to be about the time but I couldn't tell you precisely.

Q All right. As you look at this cover document, page one of 15, it is dated 11/29/2023, Amendment of Solicitation/Modification of Contract.

You see that?

A Yes.

Q All right. And this is a contract between the government and Career Consultants of America, Inc.; correct?

A Yes.

Q And as you come down below, it discusses -- whoops. Let me fix the microphone here.

It shows "The purpose of this modification

is to increase the contract ceiling."

You see that?

A Yes, I do.

Q When you first agreed to work as a rehab specialist and life care planner on this case, was there a contract ceiling placed on you in the beginning?

A I don't remember. I believe so.

Q And what was that amount?

A That, I don't know.

Q Who within your organization would know?

A Perhaps Rose Bock, B-o-c-k.

Q And what is Rose Bock's title?

A Bookkeeper/accounting. We don't really have titles. We're not that official.

Q All right.

A But that's her area.

Q And you see down in the right-hand corner, it indicates a date signed by a representative from the government of 11/29/2023?

You see that?

A Yes.

Q All right. And then when you come to the next page, two of 15, it has a description of the contents and different pages we can look to to find

these various documents.

You see that?

A Yes.

Q When you first were hired to be an expert on this case, did you, in any way, solicit the government to get you involved as an expert in this case?

A No.

Q All right. So somebody from the government reached out to you to engage your services as an expert?

A Correct.

Q All right. Are you the one who made the decision to agree to have CCA provide expert services for the government in this case?

A Yes.

Q The fee schedule that you normally use in personal injury cases, does that fee schedule apply to the work you were doing in this case?

A Yes.

Q Is there any difference between your normal fee schedule and the fee schedule being utilized in this case where you were employed by the government to do this work?

A One small difference.

Q What's the difference?
A They told me that the government does not pay a retainer fee in advance.
Q All right. Other than that, your fee schedule is identical to what you would be charging in a personal injury case for your rehab and life care planning services?
A Yes.
Q As you sit here today, do you know what your charges total for CCA?
A I don't. It looks like you have the invoices and you could probably do the math.
Q I won't go through all this with you. I'll just go through some of the pages.
A Yes, sir.
Q All right. When you get past page 15, that very next page, there is an invoice dated June 30th, 2025.
Do you see that?
A Yes.
Q All right. Is this invoice the same format and structure CCA uses for each of its invoices it submits to the government?
A Yes.
Q Okay. Is this invoice similar in form and

structure to the invoice you would generally use in personal injury cases when hired by private law firms as opposed to the government?

A Yes.

Q All right. Then go three or four pages over, and you will come to a document, page one of five.

Actually, if you go to the top, you'll see what look to be Bates-stamped numbers. You see at the top?

A Yes.

Q And it's -- you see that 15JC1V23 right in there?

A Yes, sir.

Q Okay. Well, the last three digits are 003 and it says page one of five.

A Yes.

Q Are you on the same page I'm on?

A I am.

Q Okay. And this says Amendment of Solicitation/Modification of Contract, and a date of 4/23/2025. Is this the type of information that is being handled by your bookkeeping department?

A Yes, sir.

Q There is several pages after that. You

will see a -- an additional Amendment of Solicitation/Modification of Contract with a date, which it shows page one of 13. That's up in the top right corner, page one of 13.

A I see one of 13.

Q Yeah. There you go. That would be -- you see it? One of 13?

A 13. Did you say 13 or 14?

Q One of 13.

A Oh, I have that one, yeah.

Q Okay. And then down at the bottom right-hand corner, it shows a date signed of 11/20/2024.

A Yes.

Q Do you see that?

A I do.

Q Okay. As you sit here right now, do you know what ceiling has been placed on you --

A No.

Q -- as --

A No, I don't.

Q No idea?

Do you know you're getting paid?

A Yes, I am getting paid, yeah.

Q Okay.

A The scope of the project has changed from the beginning, so...
Q All right. When it started, what was your understanding as to the scope of your work to be done?
A I understand there was a hundred plaintiffs over five different tracks broken down by disease category.
Q All right.
A Twenty per track. And ten chosen by plaintiff, ten chosen by defense, is what I understood.
Q And as things evolved, what did you understand how that changed --
MR. TUBIN: Objection.
BY MR. ROMANO:
Q -- without revealing any discussions you had with government lawyers.
MR. TUBIN: Yeah. Objection, attorney work product.
As he said, no discussions with attorneys to be disclosed during that answer.
THE WITNESS: Can't answer that question, then.
BY MR. ROMANO:

Q All right. You did have a scope of work change, though, from the time you started the project; right?

A Correct.

Q So as you were about to begin your work on this project, what did you understand your role to be?

A Basically what I described to you earlier, that the plaintiffs were pursuing damages and I was asked to assess damages in areas of vocational rehabilitation and life care planning.

Q When you submit your invoices, is -- do you do that within certain time parameters such as once every 30 days, once every 90 days? Is that how you do it?

A Yes. We do it on the 1st of the month -- I'm sorry. Well, whatever the last day of the month is. So if February is 28 days, more or less, it's not a perfect world, but that's our goal to run the -- and so the 1st and the 15th typically is what we do. Twice a month, monthly.

Q Is that what you typically do in non-government work cases?

A Yes.

MR. ROMANO: All right. What we'll do,

when we take a break, let me make a phone call because this package that was delivered to me I thought was the package that would have the documents that you all were producing this morning. But if that's not them, then I don't have them.

MR. TUBIN: Right. So these are the documents that were produced last week on the 11th.

This morning, you should have been copied on the email that had those documents as an attachment. But I understand if you need to make a call and get those.

MR. ROMANO: It's possible that I was copied but I would have been driving over here so I don't have those.

MR. TUBIN: Right.

MR. ROMANO: Let me just state this: Among other things, because of the late production and because of our not having them, I just need to make a statement on the record that we'll need to keep the deposition open.

By the way, I'm not done yet, but we'll need to keep this deposition open in order to have an opportunity to adequately review and

assess those documents and then complete the deposition at a later time.

BY MR. ROMANO:

Q Do you consider the area of vocational rehabilitation to be a science?

A I do.

Q Do you consider the area of life care planning to be a science?

A Yes.

Q All right. If each is a science, then is it true that it is essential to be as precise and accurate as reasonably possible?

A Yes, sir.

Q As a part of your firm's work on these seven Camp Lejeune cases, did you make any what we would call field notes, meaning handwritten notes or typewritten notes or dictations as you were moving along? Did you do that?

A Yes.

Q All right. Have you saved and preserved all of those notes?

A All of my handwritten notes, yes.

Q All right. Now, I recognize there may be some notes you make of meetings you have with government counsel. Are there notes you made as you

were doing your actual field work on the case, reviewing documents, meeting with witnesses, conferring with consultants? Did you keep those kinds of notes?

A Yes, sir.

Q Are those handwritten notes or are they typed or recorded in some way?

A Handwritten notes, and there's some dictation that I did when I was writing my reports.

Q All right. Have the handwritten notes been produced to the government?

A If they asked for them, I produced them. Again, I have a records custodian, but anything that was asked for, we produced.

Q All right. As to any recordings such as dictation, has that been produced to the government?

A No.

Q All right. But you do --

A But --

Q -- you do have it?

A The dictations would be included in the reports, the -- transcribed, of course.

Q All right. Those recordings, though, the dictation recordings, are they preserved? You still have those?

A Could be. I -- I personally don't keep them but my secretaries may. I don't know.

Q When you do a dictation, is it transcribed by someone in-house within CCA?

A Yes.

Q When you testify as an expert, do you typically use demonstrative aids to assist you in explaining your testimony to the judge and jury?

A Sometimes.

Q When you do use demonstrative aids in your capacity, first, as a life care planner, do you use any demonstrative aids other than in some way displaying the life care plan itself?

A Typically, it is the life care plan, and I'll go through the life care plan as it's being shown.

Q As it's being displayed?

A Um-hum.

Q Yes?

A Yes.

Q Okay. And as to any components, rehabilitative work in nature, do you have any demonstrative aids that you typically take to the courthouse with you?

MR. TUBIN: Hold on a second,

Dr. Shahnasarian.

CMO 17 specifies that the parties will confirm a timeline for disclosure of demonstrative exhibits. And to the extent that we're eliciting -- or you're eliciting information to be put on demonstratives, I believe that conflicts with the order so I would instruct you not to answer that.

BY MR. ROMANO:

Q The questions I'm asking about is in the past, what have you done? In other words, in the past, you've created demonstrative aids to take with you, such as for a life care plan. When you display it, is it displayed on a computer and on a big screen?

A Sometimes on a board. Sometimes on an ELMO.

Q All right. As to -- and in the past when you have testified, have you been frequently using a PowerPoint or a keynote presentation in order to present your testimony?

A No.

Q Have you ever done that?

A No, not that I can recall.

Q As a part of your work in this case, did

you take any photographs?
A No.
Q As a part of your work in this case, did you take any video or digital film footage?
A No.
MR. TUBIN: That looks like it could be perhaps what was produced this morning.
Yep.
MR. ROMANO: Is that it?
MR. TUBIN: That was what was produced this morning.
MR. ROMANO: Let me just hand it to you first.
Is that what this is?
MR. TUBIN: Yep.
MR. ROMANO: Okay. Well, that's great.
MR. TUBIN: So do you want to retract your statement about keeping the deposition open, or do you want to go through this first?
MR. ROMANO: No. Let me go through this.
MR. TUBIN: Okay.
MR. ROMANO: Let's make this Exhibit --
CERTIFIED STENOGRAPHER: 14.
MR. ROMANO: -- 14, please.
(Exhibit 14 was marked.)

MR. ROMANO: Did I give one to each of you?
MR. TUBIN: Yes.
MR. ROMANO: Thank you.
MR. TUBIN: With the pool log on the back and all.
MR. ROMANO: What's that?
MR. TUBIN: With the towel log on the back and all.
MR. ROMANO: I will confess to you my wife is making these copies from over at the hotel, and apparently the back side of all the paper has that. It's kind of funny.
MR. TUBIN: It is funny.
MR. ROMANO: All right.

BY MR. ROMANO:

Q All right. You have Exhibit 14 there in front of you?

A I do, sir.

Q All right. And you see up at the top, it says Attachment to Statement of Work.

A Yes.

Q And then right under that -- well, above that, it says, at the top, US Department of Justice. And then over to the right, it says Request,

Authorization and Contract for Services of Expert Witness, Litigative Consultant, or ADR Neutral. Is that what it says?

A Yes.

Q And then we come down and it says Attachment to Statement of Work.

A Correct.

Q "Career Consultants of America, CCA, agrees to provide the following service and be bound by the following terms in support of the government case in the Camp Lejeune Justice Act litigations."

Is that what it says?

A Yes.

Q All right. And then you have a series of provisions on page one which are the items you were agreeing to in order to be utilized as an expert in the case; right?

A Yes, sir.

Q By the way, it says Attachment 2. Do you know what Attachment 1 would be?

A No.

Q All right. And then we come to the next page and it says Attachment 3 and it has Schedule, Rate, and Cost, SRC.

You see that?

A Yes.
Q All right. And then 3.1. It states "The contractor for this contract is Career Consultants of America, Inc."
That's what it says?
A Yes.
Q Go to 3.3. Well, let me go to 3.2 first.
True, it states "The contractor shall provide the government expert witness services in support of the case: Camp Lejeune Act Litigation."
Is that what it says?
A Yes.
Q And then 3.3, under the heading Labor Rate, it states "The identified labor rate represents the fully loaded hourly rates for each labor skill classification."
Correct?
A Yes.
Q Do you know what that means "fully loaded hourly rate"?
A I'm interpreting it as hourly rate. I don't know what "fully loaded," per se, means.
Q It then states "The contractor shall provide personnel in the labor categories and at the hourly rate set forth below. The addition of other

labor categories requires a modification of the contract and can be approved only by a contracting officer."

Is that what it states?

A Yes.

Q And then in 3.5, under Funding, it states "The contractor shall not exceed the amount of $199,810."

You see that?

A Yes.

Q Did you come up with that ceiling amount?

A No.

Q Do you know how that ceiling amount was arrived at by anybody?

A I do not.

Q Was it discussed with you before it was decided?

A Not that I recall.

Q It then states "As judicial action obviates the need to increase/decrease workload, a modification will be issued to adjust the level of funding as necessary. If work is performed above the said amount without a proper modification from the contracting officer, the contractor is potentially working at risk."

Is that what it says?
A Yes.
Q And then we have a chart which shows a number of items at basically the bottom third or so of this page; right?
A Yes, sir.
Q Then on the next page the chart continues; right?
A Yes.
Q Okay. If you go back to the first page of the chart, it shows, President (Reports), and then Unit, hourly, and then Rate, $715. Is that the rate that would be charged for your services?
A Yes.
Q Underneath that, it refers to Counselor. And that person is charged at a rate of $450 per hour; correct?
A Yes.
Q All right. What is a counselor at CCA?
A Other staff on my -- other people on my staff.
Q Are they life care plan --
A They're professional staff who would testify as experts.
Q Professional staff?

A Correct.
Q Professional staff that can testify?
A Right. As expert witnesses. So obviously my custodian right -- you could subpoena anybody, but -- but these are professional expert witnesses.
Q All right. And then you come over to Attachment 3.
Do you have that in front of you?
A I do.
Q All right. And then we have another chart. Do you see the chart?
A Yes.
Q Right above that, you have Funding.
A I see that.
Q You have 3.5?
A 3.5? I'm sorry? Yes. I see that. Funding. Correct.
Q And in this document, it says "The contract schedule ceiling shall increase to $299,810."
Do you see that?
A Yes.
Q By the way, the seven cases that we have discussed today, are those the only seven where you personally were on board as an expert to render

reports for the Camp Lejeune litigation?

A I'm not a hundred percent sure. I'm half of -- and, again, we've been on this so many years, it's kind of hard for me to recall everything. But I have a vague recollection of maybe a couple of plaintiffs who maybe passed away early on.

Q Okay. And Dr. Navarro, whose deposition will be taken -- is it Dr. Navarro or not?

A Ms. Navarro.

Q Ms. Navarro. Ms. Navarro, who we will be deposing tomorrow, is she full-time with CCA?

A Yes.

Q All right. And what is her title or job title?

A Again, we're not that formal. We're a small business, but --

Q Well, when she holds herself out as an expert, what is her area of expertise?

A Vocational rehabilitation and life care planning. She does some office management responsibilities, director -- operational responsibilities.

Q Then, let me see. There's another Attachment 3. Yeah.

If you page through the last page of this

exhibit --

A Yes.

Q -- there is another Attachment 3.

Do you see that?

A Yes.

Q Okay. Then come down to 3.5. And under the heading of Funding, it says "The contract scheduled ceiling shall increase to $549,750."

You see that?

A Yes.

MR. ROMANO: This will be the next exhibit.

CERTIFIED STENOGRAPHER: There you go. It's Exhibit 15.

(Exhibit 15 was marked.)

MR. ROMANO: 15?

CERTIFIED STENOGRAPHER: 15, yes. Thank you.

BY MR. ROMANO:

Q All set?

A Yes.

Q All right. I've handed you, and also to government counsel, a copy of Exhibit 15. Does this appear to be another packet of contract-related documents between the government and CCA?

A It does.
Q All right. And this contains, among other things, different modifications of the contracts at different times --
A Yes.
Q -- correct? All right.
A These look similar, if not identical to what was in the previous --
MR. TUBIN: Yeah.
THE WITNESS: -- exhibit.
MR. ROMANO: All right. Going to invoices. We'll make this Exhibit 16.
(Exhibit 16 was marked.)
BY MR. ROMANO:
Q All set?
A Yes, sir.
Q All right. If you go to Exhibit 16, these invoices, move over to page -- or Bates-stamped number -- you see the Bates-stamped numbers at the bottom?
If you'll move over to 0052. And at the top, it shows it is page one of 19. And it says Solicitation Contract Order for Commercial projects -- Products and Commercial Services.
You see that?

A Yes.
Q And this is a contract between the government and the CCA; right?
A Yes, sir.
Q All right. Now, when you look at that date, it says "Award/Effective Date 5/5/2023"?
A Yes.
Q Does this appear to be the initial contract document that you had with the government?
A It looks that way.
Q All right. And if you go to Bates-stamped page number 70, you see down on page 70, it has "List of Attachments." And then under that, it has "Statement of Work."
You see that?
A Yes.
Q And then Schedule, Rate, and Cost.
You see that?
A Yes.
Q Okay. Do you know, as you sit here right now, what those attachments were?
A No.
MR. TUBIN: John, I don't --
MR. ROMANO: Yeah.
MR. TUBIN: -- mean to interrupt you.

If I can be any help, Tom, Exhibit 14 should correspond into that, if that's any help.

MR. ROMANO: All right. To the Statement of Work?

MR. TUBIN: (No verbal response.)

MR. ROMANO: Okay. Let's go back to 14. I just want to make sure that we are -- all right. This is the document that was produced?

MR. TUBIN: This morning.

MR. ROMANO: This morning? Okay.

BY MR. ROMANO:

Q We've been advised by government counsel that Exhibit 14 corresponds to the attachment of the Statement of Work.

Do you see that?

A Yes.

Q All right. This appears to at least be a form document.

A Okay.

Q If you need to grab something, sir, go ahead.

A Okay.

Q Other than this Statement of Work appearing in Exhibit 14, have you seen any other

document which is a CCA-specific Statement of Work which sets forth in a bullet-point fashion your scope of work for this case?

A That my office generated?

Q No. That you received.

A Oh. Not that I can -- not that I recall, no.

Q Did your office generate anything in the nature of a scope of work type of a document?

A I have a standard retention letter that I send. It's pretty boilerplate.

Q Okay. In this case, there was no retainer; right?

A That's correct.

Q All right. But even though there was no retainer, did you send the government your standard retention letter?

A I don't recall. I don't get involved in that. It's usually my secretaries who do that. And typically we do.

Q All right. But the retention letter that you would have used with the government, is it identical to a retention letter you would use on any injury or tort case?

A Yes.

Q All right. As you sit here today, do you know what your current ceiling is for CCA?
A No.
Q Are you aware that it exceeds $700,000?
A I -- I don't know.
MR. TUBIN: Objection to form.
THE WITNESS: I have no idea where it is other than if I looked at these, you know, ceiling levels specified here.
BY MR. ROMANO:
Q Okay. Is CCA a corporation?
A Yes.
Q Does it have shareholders?
A I'm the owner of the company. I'm the only shareholder.
Q You're it?
A Yes.
Q Okay. Are you the president?
A Yes.
Q Are you the CEO?
A As I said, we're a small business. We don't really have formal titles but I do go by president.
Q Okay. But you are the head of the company?

A Yes.
Q All right. On a matter like this where you are talking about billings into the multiples of hundreds of thousands of dollars, are you saying you actually have no idea what the billings are on a case of this magnitude?
A Well, I have some idea.
Q All right.
A I wouldn't say no idea.
Q Well, do you have an idea that the ceiling is $799,654.75?
A No. But if that's what the documents shows, I'll, you know, defer to that. I don't think our billings have come close to that but you can do the math. I don't know.
Q If you look on page -- by the way, we're on Exhibit 15. Look at Bates-stamped page number 23.

As you look at this, does this invoice --
MR. TUBIN: Do you mean -- sorry -- Exhibit 16?
MR. ROMANO: I'm sorry. It is 16.
MR. TUBIN: Okay.
MR. ROMANO: Yeah.

BY MR. ROMANO:

Q Exhibit 16, invoices. Go to Bates-stamped page 23, 0023. Is this invoice the first invoice that CCA sent to the government?

A I don't know, sir.

Q All right. Well, looking at this invoice on February 28th, 2025, did CCA begin its practice of billing on the 1st and 15th of each month shortly after you entered into the agreement with the government to work as an expert on this case?

A No. That's been a longstanding practice for us.

Q The 1st and 15th?

A Yes.

Q Okay. Then here's my question: If you entered into a contract with the government back in 2023, would your practice have been to send invoices to the government right after you signed the contract on the 1st and 15th of each month?

A Yes.

Q All right. And your office has all of those invoices; correct?

A I hope so.

Q All right. Your bookkeeping department --

A Yes.

Q -- will have those?

A I'm sorry I'm not able to probably give you as full information because I don't do the billing, but I'm doing the best I can today with it.

Q When you complete a life care plan in your work on a case such as these cases in the Camp Lejeune matter, once the life care plan is completed, do you have any automatic system in place whereby you go back and reassess everything to make sure you got it right?

A The measure that I apply after the life care plan is completed, I do a final review on it, and then we transmit it to whoever contributed and give them an opportunity and an invitation to review it and respond with any changes, amendments, or indicate their approval.

Q And the people who would --

VIDEOGRAPHER: Sorry, Counsel, microphone.

MR. ROMANO: Oh.

All set?

VIDEOGRAPHER: Um-hum.

BY MR. ROMANO:

Q When others review that completed life care plan, are you referring to people in-house with CCA?

A Well, ultimately, it's trans-- yes. My

CCA people are looking at it, as am I, but also the final step is where we send it to the contributors; so, for example, Dr. Young, Dr. Gollomp, Dr. Stadler, Blackstone [sic].

Q In these seven cases, in each instance, did you forward the completed life care plan to each of those physicians?

A Yes.

Q All right. And what is it that you ask that physician to do when you submit the completed life care plan to him or her?

MR. TUBIN: Objection.

Under CMO, those communications are not discoverable, and I instruct you not to answer the question.

BY MR. ROMANO:

Q I'm not asking you to reveal anything that anybody told you. I'm just saying, when you complete a life care plan, you say you send it out to a contributor. This applies to all life care plans that you do?

A Yes.

Q All right. A contributor would be a consulting physician or a treating physician in a given case?

A A healthcare provider, or it could be a teacher if it is a child case in, you know, a pediatric situation.

But it is the people who have made contributions to the life care plan in terms of interventions, specifying treatment protocols.

Q All right. So when you have one of those contributors and you have a completed life care plan and you submit the life care plan to her, for example, what is it that you expect that contributor to do?

A To review --

MR. TUBIN: Same -- same objections, same instruction not to answer.

BY MR. ROMANO:

Q In terms of the life care plan, in any of your life care plans in this instance, did you complete the life care plan and then send it to a contributor and then edit it?

A No. There weren't any changes that were communicated back to me. The contributors agreed that the life care plan was appropriate, had no changes to make.

So there were no, let's say, subsequent editions published.

Q All right.
A That would include the Mousser case after he had the bladder cancer diagnosis.
Q And then the supplement?
A Yes, the same life care plan, you'll see.
MR. ROMANO: All right. This would be a good time to take 15 minutes, please. Let me chat with co-counsel. But I'm about done. I may be done. I may have some additional questions but I'll try to expedite this.
VIDEOGRAPHER: Off record, 4:48 p.m.
(A brief recess is had from 4:48 p.m. to 5:06 p.m.)
VIDEOGRAPHER: On record, 5:06 p.m.
BY MR. ROMANO:
Q Going back for a moment to Exhibit 14.
Under the first page under Statement of Work, if you go to number 5, it says "CCA will submit detailed itemized statements for services rendered and costs incurred in connection with this contract for payment monthly and a final invoice within 60 days of the completion and acceptance of all services."
Do you see that?
A Yes.

Q All right. My understanding is, in this instance, you actually were sending your invoices to them twice a month, 1st and 15th; right?

A To the -- to the best of my knowledge, that's our standard practice, unless my bookkeeper was doing it differently. Again, I don't get involved in the minutiae of the billing, so...

Q Right. You know of no reason why she should do it differently in this case; correct?

A No. Unless she was instructed, you know, to do it, you know, a different way.

Q Are you aware of her being instructed to do it in a different way?

A I am not.

Q Did you instruct her to do --

MR. TUBIN: Objection, CMO. Any communications between you and your staff are not discoverable so don't answer that.

CMO 17. Sorry.

BY MR. ROMANO:

Q Now, at any time since you have undertaken expert work in this case, have you been submitting proposals for work you need to do?

A I don't understand.

Q All right. I understand that if CCA does

work, like, ten hours of work on a given project, on the 1st and 15th you send an invoice for that amount and get paid; right?

A Yes.

Q All right. If you contemplate work that you need to do, do you just do it, or do you have to get pre-approval for it?

A Just do it.

Q And that is in all instances of the work you've done so far in this case?

A Yes.

Q All right. Regarding -- I'm going to skip around a little bit here for clarification on a few items with different cases. So if you need to pull the reports for any reason, take your time and do that.

Regarding Mr. Peterson's case, despite Eddie Peterson's prior employer stating that he was not competent to practice law in any capacity, is it still your opinion that Mr. Peterson still could have worked as a lawyer by conducting legal research or proofreading or reviewing documents for a few years after December 2003?

A No. I never said he could work as a practicing lawyer. He would have been more in a

paraprofessional capacity doing those kinds of things, making use of skills he developed as a lawyer, but not as a practicing lawyer. That was not my testimony before.

Q Regarding Mr. Sparks, do you stand by your opinion in your report that Mr. Sparks would be a competitive candidate to be a TSA officer?

A At what period of time? That's the question.

When he voluntarily left his job with the customs, I think he could have at that time. Today, no. I think he's 71 years old now too, and he's been out of the workplace a number of years. But it depends on what point in time.

Q Well, we're going back to that time period when you say he could have still been working in some capacity --

A Yeah --

Q -- due to the transferable skills.

A Yeah. That was just an example, but that was not an exhaustive example of jobs that would have been accessible to him. But that particular job was similar, if not less demanding than what he did as a customs agent. And he voluntarily left the job, workplace at that time. So, yes, at that time

I think that would have been viable for him.

Q All right. You said that there were five or six individuals within CCA who assisted in doing work on these cases, these reports. First, who are they?

A Ms. Navarro, Rose Bock, Armen Zakaryan, Jennifer Drapeau, Cheryl Wilson.

Q When those individuals who are not rehab specialists or life care planners do work on the file, are their hours billed to the file?

A No. They're subsumed in my hourly rate.

Q And tell me which employees have the billing subsumed in your hourly rate and which you bill for, such as Navarro.

A Ms. Navarro billed for her own cases that she did -- worked on the case.

The other people are support staff and I do not -- oh, Rose Bock is one other person -- I think I mentioned her. Yeah. But, no, they -- they don't bill for their work. They're employees of mine and their work that they do is incorporated in my hourly rate.

Q In terms of the work that you did overall on these seven cases, what is your best estimate as the percentage of work you did as compared to the

percentage of work done by your support staff?

MR. TUBIN: Objection, form.

THE WITNESS: I don't know that I can give you any accurate estimate, sir. My hours are, you know -- they're accounted for in the invoices. There is a lot of administrative work that went on, a lot of coordination work that went on, getting tens of thousands of documents. And then there were some -- a lot of logistical issues, including how they were transmitted to us from the Department of Justice.

BY MR. ROMANO:

Q Let's take, for example, a medical records review. If you have 3,000 pages of a given hospital record on an individual for which you were doing work like you're doing in these cases, who is it that actually sits down and reads the entire 3,000 pages of the hospital record?

A I have staff who help at different points in time. I have some staff who basically sort the records chronologically and categorically. That's a very tedious task to undertake.

Then I have other staff who will review the records, and they will extract information out

for me to review, to streamline it for me. Those staff are the ones who would be more likely to review every single record. I don't review every single page of every single record. That would be not feasible to do.

Q Have you utilized AI or artificial intelligence in any aspect whatsoever regarding the evaluation and assessment of these seven cases?

A No. We're just starting to use it now, but, no, not in these cases.

Q As to methodology, do you have any criticism of the plaintiff life care planners and their work?

A I -- as we sit here, sir, you know, again, there's been so much documentation to review, I think there were some things that were similar to what I did. I mentioned Mr. Fryer uses the same sources that we used for life care planning. Context4 Health and FAIR Health are two of the ones. And he probably uses Physicians Fee reference as well. We use the same percentiles for our cutoffs.

There are some differences of opinions. I think there were many more similarities than differences in the life care plan content.

Q Yeah, I understand there are certainly

differences as to your conclusions or opinions. My question is: Do you have any criticism of either of the plaintiff life care planners as to their methodology, the steps which they took in order to arrive at their opinions?

A There were some concerns I had about Ms. Hairston's.

I -- and, again, I'm going from my recollection here. But I don't recall that in all instances she identified who the source of her intervention was or where the protocols came from or specifically where the cost information came from.

Q Are there any other criticisms you have as to Ms. Hairston?

A You know, again, I'm going from my memory with a lot of -- a lot of information here. I don't recall who wrote the life care plan for Mr. Peterson that you retained.

Do you recall?

Q Mr. Stadler.

A Mister who?

Q Yeah. You have referred to it right there.

A No. Peterson's. Your life care planner for Peterson, I don't recall who it was. But

they're -- and -- oh, so the other thing, too, about Hairston, now you're refreshing my memory, there were some really inflated costs that she had for some of the therapies that I think she must have made a typo or some type of a, you know, scribner's error or whatever it was. But some of the therapies were very inflated. I recall that.

Q Right.

A And she didn't cite her source so that's a methodological thing I could not verify.

Q All right. Any other criticisms you can think of?

A Again, the best -- I'm doing the best I can to field your questions after a long day and much information to reflect on. And I'm going back to the Peterson, I don't remember who recommended some of his incontinent supplies but they appeared to be very, let's say, inflated.

Q Assuming the first contract with the government was signed in 2023, did you begin your work immediately on these cases?

A Best I can do to answer that question is refer you to the invoices because we billed -- our practice is to bill for work as it is performed.

Q All right. And you covered that

previously, whenever it was you would have started, you would have also commenced sending out bills on a regular basis?

A Yes.

MR. ROMANO: I have no further questions.

MR. TUBIN: Okay. Let me make a statement on the record for the United States that we object to and disagree with keeping the deposition open especially under the pretense of -- well, under the reason of the documents that were produced this morning, as it was a total of less than ten pages, and counsel walked through and derived questions from them with the witness as well as the other documents that were produced.

So I want to take a break and just think if there's anything we need to discuss, but I just want to put that on the record.

VIDEOGRAPHER: Off record, 5:21 p.m.

(A brief recess is had from 5:21 p.m. to 5:24 p.m.)

VIDEOGRAPHER: On record, 5:24 p.m.

MR. TUBIN: The United States will reserve its right to review the transcript under Rule 38. And I have no questions for you,

Dr. Shahnasarian.

VIDEOGRAPHER: This concludes today's testimony. The time is 5:25 p.m. We're off record.

CERTIFIED STENOGRAPHER: Okay. And if I could get everyone's transcript orders, please.

MR. ROMANO: We do need to order it, yes.

CERTIFIED STENOGRAPHER: Okay. Do you need a rough draft?

MR. ROMANO: What's that?

CERTIFIED STENOGRAPHER: Do you need a rough draft?

MR. ROMANO: Let me check and see what -- I know there's a protocol in place, and I don't want to violate the protocol.

MR. TUBIN: There's so many protocols in place. Yeah.

And we requested a rough, yes.

CERTIFIED STENOGRAPHER: Okay.

MR. ROMANO: But we do need to order it.

THE WITNESS: I will be able to read this?

MR. TUBIN: Yes.

CERTIFIED STENOGRAPHER: Yes.

(The reading and signing of the deposition is not waived.)

(At 5:25 p.m. the deposition was concluded.)

CERTIFICATE OF OATH

STATE OF FLORIDA)
COUNTY OF HILLSBOROUGH`)

I, the undersigned authority, certify that MICHAEL SHAHNASARIAN, PH.D. appeared before me remotely and was duly sworn.

WITNESS my hand and official seal this 24th day of February 2026.

_____

DAWN A. HILLIER, RMR, CRR, CLR
Notary Public - State of Florida
My Commission No.: HH 300744
Expires: 12-15-2026

CERTIFICATE

STATE OF FLORIDA)
COUNTY OF HILLSBOROUGH)

I, DAWN A. HILLIER, RMR, CRR, CLR certify that I was authorized to and did stenographically report the deposition of MICHAEL SHAHNASARIAN, PH.D.; that a review of the transcript was requested; and that the transcript is a true and complete record of my stenographic notes.

I further certify that I am not a relative, employee, attorney, or counsel of any of the parties, nor am I a relative or employee of any of the parties' attorney or counsel connected with the action, nor am I financially interested in the action.

DATED this 24th day of February 2026.

_____

DAWN A. HILLIER, RMR, CRR, CLR

February 24, 2026

IN RE: Camp LeJeune Water Litigation

Dear Dr. Shahnasarian:

Herein, you will find the transcript of your deposition taken on February 17, 2026, and a Errata Sheet for your use in entering any changes to the deposition.

Please do not edit or make marks on the transcript itself. If you desire to make any changes, they should be noted on the Errata Sheet. If no changes are to be noted, please indicate that on the Errata Sheet so counsel are aware that no changes were made.

After reading the transcript, please execute the Errata Sheet, including date and place of signing and return to Golkow at the address indicated below.

Thank you for your prompt attention.

Sincerely,

Dawn A. Hillier, RMR, CRR, CLR
GOLKOW LITIGATION SERVICES, LLC
1650 Market Street, Suite 5150
Philadelphia, PA 19103
877.370.3377

ERRATA SHEET

I, MICHAEL SHAHNASARIAN, PH.D., have read the foregoing pages of my deposition given on February 17, 2026 in the case of In Re: Camp LeJeune Water Litigation, Case No. 7:34-CV-00897, and wish to make the following additions, deletions or corrections:

PAGE	LINE	CHANGE AND REASON FOR CHANGE
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____

In all other respects, the transcript is true and accurate.

_____

MICHAEL SHAHNASARIAN, PH.D.

&

& 2:9,18 4:23 7:23 158:18 162:10

0

0000000624 4:16
0000002616 4:18
0023 208:2
003 184:15
0052 202:21
00897 1:2 227:5
01576 4:16,18

1

1 4:6 19:9,11 195:20
10 4:23 35:9 158:11,13 160:16 170:22
10,800 139:20 140:4
10:09 41:17
10:10 41:21,22
10:20 41:18
10:23 41:23,24
10th 170:25 174:23
11 4:24 99:7 131:4 132:6 169:7,11
11/20/2024 185:13
11/29/2023 180:14 181:20
11/29/23 180:11
1100 2:18 3:6
11019 36:10
115 4:14
117 4:17
11:17 75:22,23
11:36 75:24,25
11th 179:17 188:9
12 5:1 110:16 136:8 162:22 169:22 172:18 172:20
12-15-2026 224:15
125 4:20
12:07 96:22,23
12:56 96:24,25
12th 69:23 150:13
13 5:2 73:8 162:2,3,12 178:19,20,23 179:2,25 185:3 185:4,5,7,8,8,9
14 5:4 73:16 75:9 76:18 162:3,12 163:5 185:8 193:23 193:24,25 194:17 204:1,7 204:14,25 212:16
149 4:21
15 5:6 74:10 164:4 170:22 180:3,14 181:24 183:16 201:14,15,16 201:17,23 207:17 212:7
150 139:16 140:1
158 4:23
15jc1v23 184:12
15th 170:2 187:20 208:7 208:12,18 213:3 214:2
16 5:9 202:12 202:13,17 207:21,22 208:1
1650 226:22
169 4:24
16th 174:22
17 1:12 16:2,8 192:2 213:19 226:7 227:4
172 5:1
178 5:2
17th 7:4 71:3
18th 70:2 149:23
19 4:6 169:18 170:11 202:22
19103 226:23
193 5:4
1965 128:12
1968 173:6
1969 128:14
1972 126:13
1973 109:18 126:15 173:6
1975 97:16 126:16
1976 128:21 173:15
1977 97:16 117:23
1980s 59:25
1986 23:1
199 2:10
199,810 197:8
1990 169:25
1991 4:15 59:25 112:10,21 115:25
1993 125:21,25 126:8
1997 36:14
1:29 115:16,17
1:43 115:18,20
1st 97:21 98:17 187:16,20 208:7,12,18 213:3 214:2

2

2 4:7 20:6 41:25 42:3,11,16 103:14 195:19
20 23:2 35:9 81:20 127:3 137:10 159:24 170:17
2000 99:14 111:4 118:5
20005 3:7
2001 97:21,24
2003 108:12 109:25 111:4 113:18 118:24 119:4,22 121:7 121:12 122:6 123:8,12,22 124:5 214:23
2004 4:17 102:13 109:6 111:2 117:10 124:18
2005 109:6 111:2 124:18 161:20 173:20
2009 126:21 137:15 138:6 145:3,14 148:19
201 1:15 5:6
2010 170:2,4,7 173:22
2011 139:13 141:18
2013 149:23
2014 69:25 174:16
2015 70:1
2016 56:6,11,18 70:1 75:10
2017 75:10 155:20 168:4
2018 70:7 150:13 158:20 168:9,16,19
202 5:9
202-616-8367 3:7
2020 81:20
2021 174:19,22
2022 39:17 174:23 175:1
2023 60:10 82:1 170:8 177:9 208:16 220:20
2024 57:10 82:7 87:22 88:4 89:2 98:8,17 104:17 125:17 126:11 126:20 169:24 170:21,25 173:13
2025 45:1 69:23 73:2 96:1,10 97:9 102:6 125:14 149:16 161:21 169:12 171:22 173:1 173:24 175:18 183:18 208:6
2026 1:12 7:5 23:12 224:10 225:19 226:1,7 227:4
20th 170:4
21 4:17 160:5
21st 117:10
22 131:14 132:5 177:9
22312 224:12 225:21
224 4:3
225 4:3
23 207:18 208:2
23rd 95:25 96:10
24 87:22 97:17 132:11,21 137:9 226:1
24th 174:19 224:9 225:19
25 51:24 54:23 92:16 137:10 160:25
26 4:15
2617 4:19
26th 112:10,21 115:25
27 137:7
2701 2:5
27607 2:14
28 174:2,15 187:18
28144 2:10
28th 208:6
29 175:9
2930 2:18
299,810 199:20
2nd 173:24 175:18

3

3 4:10 44:2,4,6 44:7,15,16 160:17 195:23 199:7 200:24 201:3
3,000 217:15,18
3.1. 196:2
3.2 196:7
3.3 196:13
3.3. 196:7
3.5 197:6 199:15,16
3.5. 201:6
30 71:6,9,13,13 157:7 164:25 187:14
300 2:14 111:10 113:14 118:13 140:3
300744 224:14
30th 183:18

32 95:4 137:20
33 161:6
33409-4053 2:5
33602 1:16
33618 36:11
34 104:14 144:21
36 104:5 152:2
37 152:2
38 101:22 221:25
3:09 169:4,5
3:24 169:6,8

4

4 4:11 77:22 78:1
4/23/2025 184:22
40 92:13,14 102:12 136:2
41 4:7 103:8 104:18 108:8 122:17
43 35:11
44 4:10 109:13
45 78:17 102:7
450 198:16
46 61:3 64:23
47 65:22 79:18 81:18 87:12,20 88:18
48 69:15 89:20 149:19
49 150:11,21
493 95:1
4:48 212:11,12

5

5 4:13 97:1,6 171:3 212:18
5/5/2023 203:6
50 151:20 155:17 160:9
500 40:3
504 132:25
509.21 90:13
509.29 93:17
50th 92:7,10
5150 226:22
525 2:9
549,750 201:8
561-533-6700 2:6
5:06 212:13,14
5:21 221:19,20
5:24 221:21,22
5:25 1:13 222:3 223:1

6

6 4:14 115:19 115:23 171:5
60 24:2 92:13 92:14 152:17 212:22
60s 106:7,13
60th 92:12
63 138:6
631.04 90:13 93:18
64105 2:19
65 106:23 107:9 151:7
65-67 105:7
67 106:23 107:9 151:7

7

7 4:2,17 117:6 117:12
70 24:2 71:5 165:17 203:12 203:12
700,000 206:4
704-633-5244 2:10
70s 106:3
71 165:17 215:12
712 1:15
715 198:12
75 92:16
751 2:14
75th 92:7,15
78 4:11
78,000 139:9,20
7859186 1:19
799,654.75 207:11
7:34 1:2 227:5

8

8 4:2,20 125:8,9 125:10,12
80s 31:17
816-421-1600 2:19
82,000 114:11 114:20
843-848-5939 2:15
85 169:17
87 169:17
877.370.3377 226:23
89 160:5
8th 45:1 73:2 97:8 125:14 149:16 158:20 169:12 171:22 173:1

9

9 4:21 149:9,10 149:12,14
90 187:14
90s 31:17 46:6 46:6
911 166:25
94 127:16
97 4:13
9:19 1:13 7:5
9:36 19:6
9:39 19:8

9th 102:6 175:1

a

a.m. 1:13 7:5 19:6,8 41:21,22 41:23,24 75:22 75:23,24,25
abadir 24:18,19
abadir's 24:21
ability 21:16 22:13,14 52:14 64:4 71:20,20 81:12,15,22 82:6 98:20 100:22 103:19 104:2,4 113:6 144:6 150:14 167:22 168:10
able 15:19 16:24 18:9 25:21 36:7 64:20 77:17 80:25 81:1 101:5 109:4 110:25 112:2 119:15 122:10 124:1,12 132:7 139:1 153:24 153:25 154:7 161:15 167:15 179:6 209:1 222:21
above 86:15 87:19 135:21 194:23 197:22 199:13
abroad 152:20
abuse 51:7
academic 137:15
accept 110:20 153:13,14
acceptance 212:22
accepted 94:2 122:5 124:19
accepting 126:6
access 14:9 32:20 33:6
accessible 215:22
accolades 116:7
accommodate 146:5
accommodated 138:25 148:6,6 161:25
accommodati... 138:22 139:3 144:22 147:3,8 147:14,17,25 154:2
accommodati... 22:2 103:10 135:6 145:2,12 145:18,20,23 146:6,23 148:15 154:9 155:11
accomplished 120:11,25
account 83:15 175:17
accounted 217:5
accounting 181:14
accurate 19:22 19:24 79:9 138:15 143:10 189:12 217:4 227:24
acronyms 25:25
act 110:10 153:23 195:11 196:10
acting 130:7
action 197:19 225:16,17
active 25:20 76:14 99:4 173:5
activities 18:5 18:10,13 22:4 23:19 24:4 35:21 36:18 54:13
activity 110:12
actual 9:12 42:25 190:1
actually 9:15 22:17 23:24 33:10 54:9 56:15 73:11 141:5 148:4 177:3 184:8 207:5 213:2 217:18
acuity 111:22
adage 87:7
adapt 74:20
adapted 118:22
adaptive 73:19 73:23 76:20
addendum 45:4 172:15
addition 24:16 38:8 196:25
additional 29:21 134:19 185:1 212:9
additionally 79:20 88:23 174:22 175:15
additions 227:6
address 30:1 36:9 108:7 226:13
addressing 144:25
adequately 188:25
adjust 197:21
administer 22:8 29:4 34:8 47:8 134:7

administered 34:9
administration 13:5 29:1 110:4 111:9 117:9
administrative 217:6
admissions 103:1
admitted 51:8
adr 195:2
advance 183:3
advanced 77:16 147:12
advantage 151:24
adversely 81:21 150:14
advice 9:2,4,12
advise 87:23
advised 204:13
advisement 88:7
advisements 166:2
advocate 100:2 109:22 112:3 120:19 173:9
advocating 101:2
affairs 150:16
affect 21:16 65:5
affected 81:21 150:14 162:17
affectively 72:15
affects 83:4
affirmative 6:8
afforded 151:24
afternoon 97:3 97:4
age 84:13 106:23 138:2,7 165:15
agent 215:24
agents 152:18
ages 105:7
ago 43:13,15 51:24 75:1 76:10 127:3 179:14
agree 48:15 49:18 111:22 121:8 135:24 142:11 182:14
agreed 181:4 211:21
agreeing 195:16
agreement 31:2 208:8
agrees 195:9
ahead 61:18 64:19 76:5 204:22
ai 218:6
aid 134:8
aids 73:23,25 76:20,23 191:7 191:10,12,23 192:12
airport 167:10
airports 157:13 157:15,20
alert 100:4 135:20 136:5,7 137:1
alertness 111:22
alimony 106:12
alleging 80:9
allen 4:13 97:8
allotted 29:10
alluding 52:7 87:9
altered 118:25
alternate 151:8
alternative 151:25
ama 107:25
ambulate 133:21
amendment 5:2 180:4,15 184:20 185:1
amendments 17:13 209:14
america 23:1 112:22 180:19 195:8 196:4
american 39:17 47:6 107:20 177:11
americans 146:5 153:22
amount 124:8,9 124:10,11 181:9 197:7,11 197:13,23 214:2
analysis 12:15 26:25 50:13 53:25 61:17 71:18 109:7 123:22 124:3 152:1
analytical 54:4 54:15
announced 10:9
annually 114:11 139:9 139:20,21
answer 6:4 15:2,4 16:3 41:11 64:4 68:24 76:3 98:10 156:18 186:22,23 192:8 210:14 211:14 213:18 220:22

answered 16:8
answers 27:25 98:17
anybody 197:14 199:4 210:18
anymore 131:10
anyways 58:7
apart 9:16
apnea 174:25
apparently 150:2 164:12 174:15 194:12
appeals 173:15 173:17,18,20
appear 42:16 158:17 201:24 203:8
appearances 2:1 3:1 7:10
appeared 220:17 224:7
appearing 204:25
appears 19:15 19:24 42:20 44:16 65:11 69:11 73:7 77:24 97:10 115:23 121:23 163:25 167:21 204:18
appendix 72:17 171:11
appendixes 69:11
applicable 12:4 53:25
applicant 152:23 153:18 154:16 155:5 155:16
applied 50:13 53:19 54:8 58:11 174:12
applies 210:20
apply 159:12 182:18 209:10
applying 30:19 103:12 153:16 154:17 164:7
appointments 131:24
appraisals 86:13
appreciate 150:22
appreciation 112:24
apprehend 167:18
apprised 69:24 73:25 76:22 103:9
approach 32:13 33:2
approached 27:10 147:18
appropriate 68:16,20 152:14 211:22
appropriated 124:3
appropriately 65:20
approval 209:15 214:7
approved 19:20 66:10 197:2
approximate 23:18 39:22
approximately 24:1 35:6,7 36:14 40:1 103:14 109:6 111:2 118:13 127:2
approximation 140:7
april 4:17 102:6 117:10,23 155:19 169:12 169:24 171:22 174:16
apt 130:10
aptitude 22:8
arbitration 40:6
area 21:9 23:23 30:3,4 34:24 51:20 57:22 61:17 64:8 66:6 68:1 72:16 93:17 107:24 130:25 131:1 132:21 164:5 165:2 176:10 181:17 189:4,7 200:18
areas 20:19 27:16 30:2 54:18 61:15 65:5 72:10 91:2 95:2 159:21 163:22 174:6,8 187:10
arguing 111:18
aricept 175:3
arm 60:6,24
armen 216:6
arose 167:19
arrest 154:11 154:13,16
arresting 152:17
arrivals 167:10
arrive 34:15 93:24 219:5
arrived 197:14
arriving 27:1 33:3
art 157:4
articulate 133:8

articulation 128:4
artificial 218:6
aside 22:18,21 22:22 34:10,11 37:21 39:3
asked 17:12 20:17 31:1 58:10 73:18,22 76:1,6,20 87:25 106:18 119:13 131:4 141:11 141:16 142:4 177:20,23,25 178:16 187:10 190:12,14
asking 56:14,16 79:12 80:15 86:20 112:18 143:16 168:3 192:10 210:17
aspect 218:7
aspects 46:11 46:12 118:22 120:6
aspiring 146:13
assembling 25:16
assert 82:12
assess 12:2 35:21 83:17 85:15 164:1,14 179:6 187:10 189:1
assessed 11:13 18:3 45:10 59:2
assessing 15:7 22:13,24 23:21 33:2 35:18 80:18 81:11 86:12 130:2
assessment 26:9 30:7 31:20 38:3 53:9 54:3 54:4 57:18 138:4 146:21 175:2 178:12 218:8
assessments 28:10 53:19 58:18 72:24 134:18
assist 191:7
assistance 131:25 143:2 160:10
assistant 99:9 99:11
assisted 216:3
assisting 131:22
associate 98:18 105:1 108:11 111:7 118:8
associated 84:21
associates 79:21 87:13 175:14
association 31:10 39:18 55:17 107:20 146:6 176:8
associations 108:7
assume 71:3 112:21 148:3 154:15 168:18
assuming 113:3 114:18 147:2 147:16 220:19
assumption 147:23
assumptions 134:19
attached 44:19 171:23 175:23
attachment 5:5 188:12 194:21 195:6,19,20,23 199:7 200:24 201:3 204:14
attachments 203:13,21
attack 52:15 53:3
attacked 52:21
attempt 62:17 103:14
attempts 103:22
attendance 27:21
attendant 131:20
attention 117:7 135:18 226:15
attentions 135:18
attitude 84:15
attorney 4:14 98:18 99:9,11 111:11 112:11 112:12,22 114:5,12 115:11,24 116:18,21 118:8,14 119:25 120:15 177:16 186:19 225:13,15
attorney's 99:16
attorneys 186:21
attributes 127:11
august 88:3 126:13,15 170:4 173:6 174:19
author 38:19 93:23
authored 38:22 39:12 149:23
authoritative 37:19,24 38:10

39:5
authorities 152:14
authority 14:23 142:22 224:6
authorization 195:1
authorized 225:6
authors 38:9 39:4
auto 81:23 88:17
automatic 209:7
automotive 87:14
available 62:4 63:2,13 139:4 145:24 172:11
average 157:7
award 203:6
aware 13:3 76:13,15 78:9 88:7 99:16,19 99:22 167:12 206:4 213:12 226:11
awareness 137:4,5

b

b 39:13 181:12
bachelor's 128:14 130:21
back 20:8,12 31:2 32:23 42:9 43:20 51:13 83:16 88:18 96:3,4 103:11 109:17 112:10 121:23 146:25 155:9 162:2 167:5,7,7 168:1 168:9,16 194:5 194:8,12 198:10 204:7 208:15 209:8 211:21 212:16 215:15 220:15
background 59:6 61:15 101:19
backgrounds 45:21 49:1,14
backing 165:21 165:22
baggage 160:9
bailiwick 10:13
balance 127:6 175:12
ballpark 140:8
bar 39:17 117:22
base 9:21 54:12 54:16 94:21 125:19
based 30:7,8 51:19 53:3 54:23 61:20,22 79:6 96:18 104:20 140:22 161:21
basic 105:10 108:21 113:19 114:4 123:3
basically 69:12 111:19 134:14 141:12,13 187:8 198:4 217:21
basis 35:22 87:13,18 111:23 221:3
bates 4:15,18 184:9 202:18 202:19 203:11 207:17 208:1
batteries 22:8
beach 2:5
becoming 164:7 165:4
began 56:6,10 56:18,21,25 57:3 60:10 70:10 71:22 97:20,24 98:4 119:4 125:21 125:25 126:8
beginning 57:10 69:17 73:18 181:7 186:2
begins 71:4,12 88:22
behalf 1:11 2:3 3:3 7:14,18,20 7:23
behavior 87:8,9 133:2 136:23
behavioral 133:4,23 134:15 135:5 136:22 142:11
behaviorally 130:7 134:15
belief 131:6
believe 20:25 38:1,20 39:10 43:9 59:4 66:9 68:16,20 72:4 74:7,9 76:13,15 84:20 95:1 102:11 106:18 106:20 111:13 122:12 136:19 142:21 145:25 161:20 165:17 167:9 176:9,17 177:11 179:16 181:8 192:7
believed 138:13 141:17
believes 65:19 126:7
bell 2:13 7:20 92:12

belllegalgrou... 2:15
bend 160:10
beneficial 69:2
benefit 130:19
benefits 110:1 110:3 150:17
berens 39:12
bertorini 102:18
best 26:14,17 32:3 35:9 40:2 43:14 46:5 58:2 75:1 87:8 209:3 213:4 216:24 220:13,13,22
bethune 2:18 7:23
better 57:6 70:13 147:7
beyond 24:4 73:17 86:15 106:14,20 120:7 130:16 130:21 141:18 143:8,8 148:1
big 106:7,12 166:25 192:14
bill 216:14,20 220:24
billed 95:4 216:10,15 220:23
billing 20:7,13 91:22 94:17 119:7 180:7 208:7 209:3 213:7 216:13
billings 207:3,5 207:14
billion 95:4
bills 91:21 94:24,25 221:2
bit 40:10 73:17 116:4 126:10 127:18 135:10 140:21 163:20 167:22 214:13
blackstone 210:4
bladder 78:11 96:12,14,19 128:6 212:3
blanket 143:5
blind 46:23
blogs 178:10
blood 82:9 89:10 127:10 170:3
blvd 2:5
board 47:6 132:16 173:15 173:17,18,20 177:11 192:16 199:25
bock 181:12 216:6,18
bock's 181:13
body 31:8,18 127:9,24 128:2
boilerplate 205:11
boiling 69:14
book 25:22 38:21,23 39:10 39:16 92:20,23 94:8,13,14
bookkeeper 181:14 213:5
bookkeeping 184:23 208:23
books 37:14,16 37:17,21,23 38:6,8,9,11 39:3,4,19 178:10,12
border 155:19 155:23
bottom 59:18 64:23 69:16 76:18 91:2 104:15 132:12 137:7 149:20 164:5 185:11 198:4 202:20
boulevard 1:15
bound 195:9
boxes 19:1
bradykinesia 65:13
brain 11:9 73:24 74:4 76:7 76:22 77:4,4,18 102:14 137:24
branch 36:15
brand 67:5,7,8
break 40:18,19 40:21,22 41:1 43:23 63:25 64:18,19 75:19 115:13 160:14 168:24 179:7 188:1 221:16
breath 150:7
breathing 133:20
brief 27:1 41:22 75:23 115:17 169:5 212:12 221:20
briefly 26:22 51:14 54:5 151:12
briefs 111:17
broken 107:22 186:7
brought 52:22
building 165:9
bullet 205:2
business 24:7 166:23 200:16 206:21

c

c 181:12
california 173:19
call 17:18,18 55:16 188:1,13 189:16
called 8:1 23:1 25:22 34:18 50:21 54:10 92:23 98:9 130:14 142:2 179:25
calls 15:1 16:6 17:23
cam 81:24
camp 1:5 7:7 9:18 11:13 26:23 27:7,11 45:9 97:15 169:16 189:15 195:11 196:10 200:1 209:5 226:3 227:4
cancer 78:10 78:11 96:13,13 96:14,19 170:2 172:3 212:3
candidate 109:9 152:24 153:19,20 154:17 155:6 164:2 215:7
candidates 164:15
capability 131:7
capable 100:4 119:16 120:1 161:22
capacities 29:18 83:14 131:7 161:19
capacity 8:15 8:21 10:6 21:13 21:20,20,25 27:23 35:20 38:4 53:8,8 54:21 60:12,17 69:22 79:21 80:1,2,5,13,21 81:1,2,9,12,16 85:16 101:11 104:25 105:5 108:13,24 120:13 122:1 123:6,15,19 134:2 142:8 151:3 174:10 178:13 191:11 214:19 215:1 215:17
captain 173:8
cardiac 71:10
care 8:10,16,22 9:8 10:2,3,12 10:15,16,22,24 12:1,3,12,13,19 12:24 13:9,12 13:15,22,25 14:3 15:15,16 17:11 20:20,22 21:6 23:5 24:25 30:3,16,17,20 30:25 31:5,9,10 31:19,21 33:14 34:25 39:2,6,12 40:19 44:18 45:23,24 46:2,4 46:24 47:14 52:7 61:19 62:1 62:7,12,12 63:11,22 64:12 66:1,1,5,13,23 66:24 67:3,5 68:2,3,8,12 73:1 77:6 78:22 79:14 89:24 90:1 93:5 94:7 94:19 95:11,25 96:9,18 107:13 107:16 108:2 109:13 131:20 171:23 172:1,5 172:8 174:11 175:22 176:5 176:23 181:5 183:7 187:11 189:7 191:11 191:13,14,15 192:13 198:22 200:19 209:4,6 209:11,23 210:6,11,19,20 211:5,8,9,16,17 211:18,22 212:5 216:9 218:12,18,24 219:3,17,24
career 22:16 23:1,4 35:11 47:12 81:5 83:24,25 85:24 101:15 106:18 107:5 151:5 180:19 195:8 196:3
caregiver 75:11 75:17 131:16
carolina 1:1 2:10,14
carpenito 3:4 7:17,18
carry 160:9
case 1:2 7:8 9:18 16:23 20:16,24 21:18 25:9 28:1,12,14 28:15,21,23 29:2,2,23,25 30:13,14 32:12 33:1,1,22 34:23 35:15 40:9 42:18 48:10,11 51:11,17 56:9

59:3,19 62:23 63:4,5,14,22 78:21 79:5 82:20 92:10 95:24 107:10 116:17,20 121:21 129:20 134:18 146:21 171:19 172:13 172:16,25 174:11 177:17 178:6,7,14,14 180:9 181:5 182:5,7,15,19 182:23 183:6 190:1 192:25 193:3 195:11 195:17 196:10 205:3,12,24 207:6 208:9 209:5 210:25 211:2 212:2 213:9,22 214:10,17 216:16 227:4,5
caseload 137:9
cases 9:19 10:2 11:13 12:16 13:5 14:6 15:7 15:19 18:3 21:24 22:1,24 23:21,21 25:3,5 25:8 26:10,19 26:21,23 27:11 29:3,10,12 31:20,25 32:1 34:13,16 35:7 35:16,18 38:2 45:10 51:3 53:7 53:20,23 66:15 72:19 81:8 82:19 97:12 111:13 182:18 184:2 187:23 189:15 199:23 209:5 210:5 214:14 216:4 216:15,24 217:17 218:8 218:10 220:21
cash 93:7
categorically 72:22 217:22
categories 27:24 72:23 196:24 197:1
category 38:3 157:9 186:8
catheter 134:9
causation 34:19 78:24
caused 70:11 119:24
cautionary 52:1,9
cca 5:7 23:13 23:15 24:6 36:15,17,18 182:14 183:10 183:22 191:4 195:8 198:19 200:11 201:25 203:3 205:1 206:2,11 208:3 208:6 209:24 210:1 212:18 213:25 216:3
cease 87:23 88:8
ceased 82:7 88:19 89:3
ceiling 181:1,6 185:18 197:11 197:13 199:19 201:8 206:2,9 207:10
center 2:14
ceo 206:20
certain 18:16 34:8 45:14 46:18 69:3 94:1 187:13
certainly 99:22 101:13 113:9 120:25 218:25
certainty 93:20 95:18 104:24 123:11 147:1 151:1
certificate 4:3,3 224:1 225:1
certification 31:8 47:5 129:4 129:7
certified 6:14 8:4 19:4 24:24 44:3 45:23,24 46:2,4 125:8 129:1 130:24 149:2,6,9 158:12 178:19 193:23 201:13 201:17 222:5,8 222:11,19,23
certify 224:6 225:5,12
challenge 51:16
challenged 50:20 133:16 133:19 134:6 134:12,14 136:20
challenges 51:15 133:24 135:23 136:11 136:22 172:2
challenging 52:14
chance 116:5 179:8
change 49:20 49:23 96:17 119:22 187:2 227:7,7

changed 20:2 20:23 186:1,14
changes 17:13 127:8 209:14 211:20,23 226:7,10,10,11
characteristics 107:22
characterize 100:8
characterized 103:5
charge 37:3
charged 198:13 198:16
charges 183:10
charging 183:5
chart 73:6,6,7 73:13 198:3,7 198:11 199:11 199:11
chat 212:8
chattering 127:9,25
check 222:13
cheryl 216:7
chest 71:5
child 134:9 136:12 211:2
children 129:16 129:22 130:7 130:18 133:14 133:15,25 134:1,11 135:5 135:23 136:1 136:11,16 143:24 148:20 148:24
children's 133:11
choking 128:5
chose 139:2 166:2,17,17
chosen 151:8 186:10,11
chronic 60:3 171:4
chronological 25:16 73:11
chronologically 72:22 73:10 217:22
circa 169:25
circumstances 51:18
citation 87:21
citations 55:20
cite 220:9
cited 73:24 76:21 123:17 131:5,9 140:16
citing 114:22 121:7
city 2:19 166:25
civil 3:6 118:21
claim 27:23 53:24 54:1 79:20 171:19 174:9
claimed 20:18 69:18,22
claims 35:19,19 35:20 53:7
clarification 214:13
clarify 67:25
classes 129:22
classification 196:16
classroom 130:11,17 132:24 133:2 135:15,19,22 136:3 137:4 142:13,18 143:13,24 148:20
classrooms 130:9 135:25 137:10 142:14 142:15 148:16
clear 122:4 164:14
clemons 149:23
clerical 25:12
clients 9:2
climb 160:19 160:19
clinical 28:25 29:9,9,13 46:16 48:18,23 69:23 104:21 120:24 173:23 175:18
clinically 29:15 29:19 135:3
close 40:24 207:14
closer 132:12
clr 224:13 225:5,22 226:21
cmo 16:2,8 192:2 210:13 213:16,19
code 68:10 94:22
coded 54:12
codes 91:22,22 91:24 92:24,25 94:15
cognitive 36:3 101:10 103:19 104:2 131:7 137:11 150:7 167:4 168:6 174:24 175:2 175:16
cognitively 72:15 100:10 108:10,14 123:16 124:24
coherently 98:21
cold 127:25
collateral 12:14 93:12 104:22

color 54:11
columns 73:8
combination 43:24 113:24 113:25
combined 116:17
come 9:5 20:8 20:12 43:20 47:17 55:22 58:3 59:5 61:2 69:5,15 72:25 79:18 97:14 98:15 102:12 103:8 113:22 113:23 119:25 121:12 123:11 128:10 132:4 150:11,20 157:19 173:12 174:2,14 180:22 181:23 184:6 195:5,22 197:11 199:6 201:6 207:14
comes 38:14 140:4 146:18
coming 23:11
commence 15:25 16:10,22
commenced 221:2
comment 52:6
comments 116:11 121:1
commercial 202:23,24
commission 224:14
commonalities 129:25
communicate 14:12,24 15:20 100:23
communicated 211:21
communicati... 16:1,4,6,22 17:5,8,10 34:10 210:13 213:17
companies 165:11
company 23:13 23:13 24:6,7 25:4 81:25 125:1 165:9 206:14,25
compared 23:23 33:3,19 134:21 216:25
compensated 99:12 131:17
compensation 125:3 140:19 173:14
competent 214:19
competitive 151:24 152:24 153:19,20 154:17,22 155:6 215:7
compilation 91:21
complained 131:8 175:10
complaining 77:12
complaint 27:25 58:12
complaints 29:17 150:4
complete 59:1 113:6 171:11 189:1 209:4 210:19 211:18 225:9
completed 149:15 209:7 209:11,22 210:6,10 211:8
completely 110:7 138:18
completing 93:5
completion 212:22
complex 65:24 100:10 108:11 108:14 114:7 123:16 124:24 165:1
complexity 36:4
component 46:9,15,16
components 46:8 191:21
comprehension 131:12
comprehensive 27:19
compromised 81:1
computer 132:16,18 152:4 192:14
computes 12:7
concentrates 118:21
concentrating 127:9
concentration 48:20 104:8 128:5 175:12
concern 79:14
concerning 69:17,21
concerns 219:6
conclude 109:3 109:7
concluded 65:11 168:16 223:2

concludes 222:2
conclusion 93:25 120:1 166:9,12
conclusions 219:1
concrete 165:11,12
condition 65:25 71:23 79:6,15 80:9 102:20 103:6 136:13 159:7
conditions 16:15 30:12 66:2 143:24 144:1 159:11 163:7,9
conduct 22:17 29:9,21 36:18 50:13 66:15 112:2 113:19 146:20 159:8 171:11
conducted 18:21 150:13 161:20
conducting 23:24 26:25 32:13 108:21 111:17 114:3 123:3,21 177:18 214:21
conferring 190:3
confess 194:10
confirm 192:3
confirmation 44:20
conflicts 192:7
confusing 163:21
connected 150:16 225:15
connection 159:6 212:20
consent 14:12 14:23 15:8
conservative 59:13
consider 10:2 10:25 11:3,7,12 11:14,23 12:5 12:20,23 13:6 21:17,18,24 22:2 37:18,24 38:1,9 39:5 63:12 71:25 72:3,5 83:7,7,9 83:11 84:12 85:12,15 86:4 87:1 106:1,4,6 165:3,13 171:5 189:4,7
consideration 10:16 82:17,25 83:2 93:4 105:18 135:16
considerations 83:16 163:20 164:8
considered 11:18 54:20 61:24,25 62:1 70:18,20,22,23 84:18 88:9 100:12,18 105:22 149:25 163:15 164:13
considering 12:10 105:19
considers 21:22
consistent 123:12
constellation 105:3
constipation 60:9
construction 107:7
consult 29:24 33:6,8,11 61:8 66:16 96:16 102:1
consultant 195:2
consultants 23:1 180:19 190:3 195:8 196:3
consultation 18:19 61:3,14 61:20 62:14 63:9 65:1 66:19 66:20 102:3 104:23 137:20
consultations 14:19 15:13 30:5 88:12 170:12 172:12
consulted 68:22 71:8 101:22 102:6 170:13
consulting 22:23 23:20 29:22 62:9 64:9 66:11 67:2,14 67:16,20 210:24
consumes 24:1
contact 157:19
contacts 152:15
contain 17:7 72:9
contained 45:6 58:23 179:15
contains 160:22 202:2
contaminated 127:2,12
contamination 82:12
contemplate 214:5

contemplating 165:5
contemporan... 17:9
contends 81:19
content 162:21 178:2 218:24
contents 39:20 159:20 181:25
context 50:9 57:23
context4 91:14 93:3 218:19
contextual 57:19
continue 80:25 87:3 104:25 122:11 124:1 139:2 140:23 141:15
continued 3:1 81:23 114:11 141:17 171:4
continues 198:7
continuing 74:20 88:17 105:4
continuous 110:15 111:23
continuously 160:13
contraband 152:11
contract 5:3,6 180:5,7,15,18 181:1,6 184:21 185:2 195:1 196:3 197:2 199:19 201:7 201:24 202:23 203:2,9 208:15 208:18 212:21 220:19
contracting 197:2,24
contractor 196:3,8,23 197:7,24
contracts 5:8 202:3
contributed 209:12
contributing 128:6
contributions 116:14 211:5
contributor 210:20,23 211:10,19
contributors 17:12 31:1 210:2 211:8,21
control 143:9
controls 160:21
conversation 52:23
conversations 15:1 27:3
conveyed 82:5 103:17 108:9 169:24 170:6 173:17
conviction 102:20
convictions 116:15,20
cook 117:6 119:25 120:16 123:13
coordinate 133:3
coordination 217:7
copied 188:10 188:15
copies 42:11 77:23 172:22 194:11
copy 19:11 27:25 42:4,16 44:17 115:22 158:4,18 169:11 172:21 201:23
corner 181:18 185:4,12
corporate 2:14
corporation 117:18 206:11
corps 84:7,14 85:6 99:4,8 109:20
correct 8:12,18 9:2 12:17 26:2 31:5 34:20 45:1 47:15 57:18 60:25 65:18 66:3 70:16,19 72:3 73:3 75:13 78:11 79:2 89:22 90:14 93:20 98:13 99:20 100:4,23 101:24 102:15 102:22 103:2,6 105:8 108:16 109:14 110:1,4 110:8,17 111:24 113:20 117:3,19 118:1 118:16 119:19 120:6 126:17 128:21 131:1 131:12,18,19 132:9 137:17 139:14,17,21 140:7,11 143:3 143:25 145:4 146:22 154:11 156:1 158:20 159:17 160:6 162:4,18 164:19 168:2

170:15 171:12 171:24 174:4 175:25 176:17 177:3 179:19 180:20 182:12 187:4 195:7 196:17 198:17 199:1,17 202:6 205:14 208:21 213:9
correction 179:18
corrections 227:6
correctly 53:14 65:8 109:10 175:7
correlate 29:13 29:15
correlating 29:19
correlation 159:10
correspond 204:2
correspondence 102:4
corresponds 204:14
cost 10:25 11:7 13:12,14,19 14:1 30:19 90:13,18,21 92:1,17 93:22 94:6 195:24 203:17 219:12
costing 13:16
costs 10:17,18 11:3,12,16,23 12:2,7,11 212:20 220:3
counsel 7:10 14:10,19 15:2 15:17 33:14,24 34:11 42:12 43:5 77:24 172:22 189:25 201:23 204:13 209:17 212:8 221:12 225:13 225:15 226:11
counseling 9:6 9:23 22:18 23:5 23:5,25 46:21 47:14 148:10
counselor 24:24,25 198:15,19
countries 167:13
county 118:14 224:4 225:4
couple 200:5
course 27:21 28:4,7,10 35:11 36:6 104:10 190:22
courses 46:10
court 1:1 7:11 28:23 29:5 34:6 50:25 99:24
courthouse 191:24
courtroom 100:2,22 101:3 112:3
courts 21:2
cover 45:14 180:13
covered 220:25
cpt 91:22,24 92:24,24 94:15
cramping 128:8
cranial 59:25 60:4
create 10:14 48:2 62:12 79:13 142:17 175:22
created 10:1 12:23 47:22 61:19 157:25 192:12
creating 12:1 12:19 20:22 37:3,5 62:6 63:10 66:5 147:3
credential 46:7
credentialing 147:12
credentials 152:3
credible 106:9
criminal 51:7 116:9 118:23
criteria 46:3 47:1 153:23 154:9 155:12 164:1,13
criticism 218:12 219:2
criticisms 219:13 220:11
crr 1:17 224:13 225:5,22 226:21
ct 94:6,22 171:5
cts 28:9
cured 171:2
current 127:16 161:7 206:2
currently 23:2 35:14 36:25
curriculum 4:6 19:16,17 44:19
cursive 98:23
curve 92:12 108:5
curvilinear 108:3
custodian 43:17 190:13

199:4
customs 152:18 155:19,23 215:11,24
cut 48:22 122:5
cutoff 124:4
cutoffs 218:21
cutting 48:13
cv 1:2 19:19 20:1 37:13 55:20 176:7,16 177:12,13 227:5
cvs 13:21
cycle 106:5
cystoscopy 90:6 92:18 93:8,16

d

d 1:8,8
d.c. 3:7
daily 35:21 111:5 131:25
dale 36:10
damage 59:25
damages 20:18 20:19 38:2 54:1 69:22 187:9,10
daniel 88:2
data 29:15
database 91:16 91:16,20 93:10 94:9,10 95:6
databases 91:13,18,25 93:1 94:4,17 105:20
date 1:12 7:4 58:15 71:21,21 73:2 121:7 124:4 149:16 158:20 161:7 181:19 184:21 185:2,12 203:6 203:6 226:13
dated 4:15,17 45:1 95:25 97:8 115:24 117:9 125:13 169:12 173:1 174:19 180:14 183:17 225:19
dates 29:16 30:9 73:10 161:8
daubert 50:21 51:15
david 117:6 119:25 120:16
davis 2:18 7:23
dawn 1:17 7:12 149:1 224:13 225:5,22 226:21
day 23:3,3 35:22,22 71:7,9 71:13 100:14 139:17 140:1 152:22 161:7 187:17 220:14 224:9 225:19
days 43:13,15 71:6,13 74:10 157:7 164:25 179:14 187:14 187:14,18 212:22
dbjlaw.net 2:20
dbs 76:12
dealing 113:4 134:11 174:3
dear 226:5
death 110:14
debbie 39:12
debilitated 122:9
december 113:18 149:23 214:23
decided 140:23 197:17
decision 51:5 85:5 150:24 155:18 166:4,4 182:14
decisions 62:22 167:23 168:10
decline 151:4
decrease 197:20
dedicated 142:6
dedication 116:21
deemed 150:17
deep 11:9 73:24 74:4 76:7,22 77:4,18 102:13 137:24
defendants 3:3
defense 14:9,19 15:14,21 16:21 16:24 17:17 31:25 32:7,12 32:25 33:15,18 34:13 42:11 62:10,12,19 63:7,8 64:12 101:14 186:11
defer 11:20 67:1,19 141:24 207:13
deficits 150:7 168:2
define 10:5 50:10 81:13 151:12
defines 110:10
defining 83:21 84:4 85:20
definitely 24:10 148:12,22
definition 86:9 86:20 110:17 155:9 164:24
degree 93:19 95:17 104:24 123:10 128:14

128:19 130:21 150:25 159:7
degrees 10:7
delalio 126:12
deletions 227:6
delineated 125:2
delivered 188:2
delivering 130:1 132:24
demanding 166:16 215:23
demands 100:9 137:11 161:23 179:17
dementia 174:25 175:4
demographic 59:9
demonstrated 21:20,21
demonstration 157:7
demonstrative 191:7,10,12,23 192:4,12
demonstratives 192:6
denied 103:12
denote 6:15
department 3:5 5:4 7:15 35:14 100:7 116:19 150:15 157:5 165:14 184:23 194:24 208:23 217:11
depend 164:23
depending 29:1 80:8
depends 107:3 153:1 215:14
deponent 7:9
deposing 200:11
deposition 4:8 7:6 19:12 28:3 33:9 39:23 40:12 42:3,4,17 42:19 57:11 98:8 126:12 169:24 179:4 188:22,24 189:2 193:18 200:7 221:9 222:24 223:1 225:7 226:7,8 227:3
depositions 23:21 58:13 111:16 112:4
depressive 164:18
depth 143:19
derived 221:13
deriving 140:20
describe 120:25 131:20
described 24:5 103:13 134:5 147:10 175:9 187:8
describes 150:1 175:15
describing 38:3 62:25
description 86:17 91:17 94:25 181:24
descriptions 27:20
designed 159:9
desire 86:24 106:3 226:9
desk 100:15
despite 214:17
destinations 165:12
detail 45:13
detailed 212:19
details 45:15
deteriorate 119:6
determinable 110:13
determination 14:1
determinations 78:23 93:22
determine 13:14 62:15 90:17 91:25 93:23 160:21 167:16
determined 110:6 138:2 140:19 141:14 150:13 168:18
develop 10:14 79:14 151:15 175:22
developed 10:1 12:24 55:3 127:4 132:23 174:12 215:2
developing 12:1 12:19 20:22 63:11 132:25
development 83:25 85:24 133:4 151:5
device 60:10 73:25 74:5 76:7 76:22 98:9
devices 11:5 133:20
devotion 113:1
diagnosed 16:15 65:20 71:1,24 126:1 164:18 170:1 174:21
diagnoses 8:11 8:13,14
diagnosis 28:5 56:12,14,20

65:12,17 70:2,6 70:9 71:11,13 71:21 78:11 114:10 149:24 175:5 212:3
diagnostic 28:9 72:23 135:8,11
diane 4:20 125:13 138:5 138:13 142:17 144:22 148:19
dick 112:12 115:25
dictation 190:9 190:16,24 191:3
dictations 189:17 190:21
differed 129:14
difference 32:19 33:2,5 62:24 63:3 77:5 80:12,19,23 105:11 129:20 130:8,12 182:21,25 183:1
differences 33:17 62:16,17 62:18 129:24 130:5 218:22 218:24 219:1
different 5:7,8 9:19 16:14,15 21:13 22:5 25:25 26:12 27:15,18 28:16 29:24 30:10,14 30:21,23 36:4 46:8 47:8 54:13 54:19,19,20 58:13 67:13 73:8 84:24 86:19 93:1 95:2 107:11 130:19 147:9 148:11 165:12 166:5 167:13,13 173:16 178:15 181:25 186:7 202:3,4 213:11 213:13 214:14 217:20
differently 213:6,9
difficult 140:10 140:14 141:1 141:10,20,23 142:6,10
difficulties 36:5 36:7 60:7 103:19 104:2 128:3,6 131:11 143:18 150:23 167:4
difficulty 127:9 128:3 154:16 154:19,21
digital 193:4
digits 184:15
diminished 81:9 125:4 131:8
diploma 128:12
direct 177:17 177:18 178:6
directly 14:12 15:20
director 200:21
directory 58:23 112:16
disabilities 146:6 148:16 148:23,23 153:23
disability 110:1 110:10 143:12 150:12,16
disabled 81:3 110:8 148:20 148:20,24
disabling 21:15
disadvantage 154:23
disagree 168:20 221:8
disagreed 63:19
disagreement 31:3
disagrees 64:10
discern 62:17
discernible 98:22
discharged 84:9 99:3 173:7
disciplinary 136:23
disclosed 96:11 186:22
disclosing 16:4
disclosure 192:3
discounted 93:9 95:21
discoverable 16:7 210:14 213:18
discuss 17:5 58:1 66:24 69:3 129:10 137:24 221:17
discussed 44:20 108:18 122:22 122:25 137:11 156:11,16 197:16 199:24
discusses 180:23
discussing 48:25 150:21
discussion 55:4 65:1 68:21 69:2 85:8 88:1 104:6
discussions 145:11 186:17

186:21
disease 56:5,10 56:18,22,25 57:5 61:4,11 63:6 65:18,21 70:7,12 71:11 71:15,23 77:3 77:17 97:20,24 101:22 102:25 103:25 114:10 114:18 120:22 121:5,24 125:21,25 126:1,3,8,22 136:13 137:20 161:14 163:6 170:12 171:2 172:4 186:8
dismissal 103:10
disorder 162:4 164:19
disorders 133:5 162:13,18 164:6,7
dispatcher 155:7 164:22 165:4,6,8,14 166:14,16,20 166:22,24
dispatching 167:25
display 192:13
displayed 191:17 192:14
displaying 191:13
dispute 28:19 28:20 175:4
disputing 122:8 123:25
disqualificati... 88:16
disqualifying 154:6
disruption 22:15
distilling 29:25
distress 175:17
distribution 92:9
district 1:1,1 51:24 99:9,15 111:11 118:14 148:14
divide 32:4
division 3:6 7:3 109:22
doctor 44:10 57:7 62:7,19,21 67:9,14,16,17 67:20 68:3,19 70:14,17 77:10 98:5 148:7,8
doctoral 128:23
doctors 14:24 16:17 18:20 28:4 59:14 67:18 68:21 88:6,15 108:2
document 6:15 40:13,14 90:19 90:21 162:21 179:16 180:1,5 180:14 184:6 199:18 203:9 204:9,19 205:1 205:9
documentary 144:25
documentation 218:15
documented 13:22 29:18 74:11 167:14 174:18
documenting 152:14
documents 4:8 5:6 17:7 20:14 42:5,18 43:18 43:21,24 58:11 58:12 108:22 113:20 114:5 115:5,6,8 123:4 132:1 145:6 161:6 179:2,3 179:15,20 182:1 188:4,8 188:11 189:1 190:2 201:25 207:12 214:22 217:9 221:10 221:14
doing 14:22 24:13 25:8 62:23 99:6 100:1,2 107:5,6 111:23 114:6,7 124:22 129:15 130:1 134:22 134:25 166:15 182:19 190:1 209:3 213:6 215:1 216:3 217:16,17 220:13
dollar 92:10
dollars 207:4
douglas 4:22 149:11,16
downs 160:11
dr 7:9 44:20 57:20 61:3,8,9 61:21,24 62:3 63:10,18 65:1,4 65:10,16 80:11 88:2,12,13,13 88:14 92:19 96:17,17 97:3 101:23 102:2,7 102:18 104:23 108:8,23 113:23 123:5 137:25 149:23

168:17 170:5 170:13,14,19 171:1 172:12 174:16,21,23 175:1 192:1 200:7,8 210:3,3 210:4 222:1 226:5
draft 222:9,12
drapeau 216:7
drive 2:14 113:6 140:16
driver 69:25
driver's 98:24
driving 188:15
drop 60:10
drug 51:7
drugs 13:21 67:5
dry 127:8
due 48:12 126:21 155:24 215:19
duly 8:1 224:8
duncan 170:14
duration 90:9
duties 146:11
duty 25:21 99:4 107:6 146:9 163:25 173:6
dysfunction 60:9 150:8
dysfunctional 84:22
dyskinesia 60:21

e

e 1:8,8 38:19 39:13,13
earlier 44:21 58:10 67:22 72:12 80:8 107:4,8 108:3 125:2 150:1 172:9 174:13 187:8
earliest 149:21
early 43:22 46:6 59:24 70:1 86:16 106:7 200:6
earn 22:14,15 105:15 124:12
earned 124:13
earning 21:19 21:20 27:23 35:20 38:4 53:8 53:8 54:21 58:20 69:22 79:21,25 80:2,4 80:13,20 81:2,9 81:12,16,16 85:16 124:7,8 174:10 178:13
earnings 21:21 80:19,20 83:24 108:2,5
easier 42:10 73:13
east 1:15
eastern 1:1
economic 107:21
economist 10:13,21 11:21 12:5
ed 135:25
eddie 102:2 103:5 106:16 109:14 110:24 112:11,23,24 113:5 114:9 115:25 116:8 119:22 120:17 121:5 123:22 214:18
edgar 4:13 97:8
edit 211:19 226:9
editions 38:5 39:9 211:25
education 10:7 21:14 59:16 128:11,16,20 128:23 129:2,4 129:7,11,15,21 129:22 130:10 130:13,20,22 130:22 131:1 133:1,11 134:2 134:21,22 135:1,20 138:10 142:12 142:13,15 143:3,11 144:16,18,20 146:7,17 151:15
effect 10:3,17 11:15 12:2
effective 77:13 158:19 159:11 203:6
efficient 26:20
efforts 116:17
eight 101:18 111:13 128:10
either 23:20 35:19 43:22 50:21 77:12 78:23 140:20 179:4 219:2
elaborated 65:24
elementary 126:12,15 128:16 129:4
elicit 30:11 61:14 66:17
elicited 64:17 67:22 133:7,8
eliciting 192:5 192:5
elmo 192:17

email 188:11
embed 106:19
emergency 134:8
emotional 144:9 175:16
employed 117:21 126:13 126:14 173:15 182:23
employee 37:6 121:4 225:13 225:14
employees 23:3 23:15 86:11 216:12,20
employer 86:11 86:20 104:11 104:14 119:15 121:13 123:21 214:18
employment 27:16 70:1 73:10 81:22 85:16 88:5,17 103:14,20,21 108:14,19,23 122:23 123:1,5 137:12,15 139:12 140:17 150:21,24 151:2,8,19 155:18,23 166:3
enabled 151:2
encountered 136:22
encouraged 88:4
endangered 152:19
ended 108:15
enforcement 152:6
enforcing 152:11
engage 110:11 182:10
engaged 18:4
engagement 27:14
enhanced 135:21
enjoys 132:6
enlisted 84:8
entered 208:8 208:15
entering 226:7
entire 117:25 161:10 217:18
entitled 45:20 47:18 55:22 72:8 150:17
entry 91:6 152:9,15
environment 142:18
environmental 3:6
environments 157:22
epilepsy 174:17
episodes 60:8
equal 153:17
equipment 10:18 11:5 12:3 13:4
erectile 60:9
errands 131:24
errata 226:7,10 226:11,13 227:1
error 20:2 220:6
especially 25:9 135:9 178:1 221:9
esquire 2:4,8 2:13,17 3:4,4,5
essential 72:3,6 100:24,25 124:2 153:25 154:1,7,20 155:2,10 156:24 159:25 160:1,6 161:24 163:10 189:11
essentially 148:19
estimate 32:4 35:9 40:2 216:24 217:4
estimated 90:13
estimates 95:19
etd 160:21
ethic 68:10 83:17,22 84:4 85:14,20 86:7 86:10,12,24 87:3 113:6
ethical 118:10
eugene 5:1 172:19,25
evaluating 36:6 57:2
evaluation 4:10 4:11,13,20,21 4:24 5:1 9:17 9:17 44:17 54:17 97:8 150:12 218:8
evaluations 8:24 9:10
evaluator 47:4
event 81:6
everybody 21:13 86:19
everyone's 30:13 222:6
evidence 83:12 87:13 144:25
evolved 186:13
exact 6:15 38:18,25 92:11

exactly 32:14 32:19 39:10 46:14 74:25 76:11 100:13
exam 73:24 76:21 77:1
examination 4:2 8:5 28:22 28:24 30:8 33:23 34:1,2 46:25 62:2 117:23 161:19 163:25 177:17 177:19 178:6
examinations 28:25
examine 18:18 51:12 85:22
examined 8:2 96:12
examiner 45:21 48:25 49:14 163:24
example 13:7 33:22 48:16 66:6 71:2 72:12 79:13 81:4 84:11 90:5 107:7,19,25 108:4 134:7 143:17 162:23 163:4 165:11 166:24 210:3 211:10 215:20 215:21 217:14
examples 136:10,16
exceed 197:7
exceeds 206:4
excel 152:5
excellent 118:12,20
except 153:17
exception 146:9
exceptional 146:14
exchange 102:5
exchanged 102:4
exclusive 157:18
execute 226:12
exempted 105:4
exertion 100:6 157:1
exertional 100:9
exertionally 36:2,3
exhausted 100:15,15
exhaustive 215:21
exhibit 4:6,7,10 4:11,13,14,17 4:20,21,23,24 5:1,2,4,6,9 19:9 19:11 20:6 41:25 42:3,16 44:1,7,15,16 77:22 78:1 97:1 97:6 115:19,23 117:6,12 125:10,12 149:7,8,10,12 149:14 158:11 158:13 169:7 169:11 172:18 172:20,21 178:18,20,23 179:2,24,25 180:2,3 193:22 193:25 194:17 201:1,12,14,15 201:23 202:10 202:12,13,17 204:1,14,25 207:17,21 208:1 212:16
exhibited 150:2
exhibiting 174:20
exhibits 4:5 6:14 192:4
existent 119:7
exited 151:5
expect 9:22 111:20 161:13 211:10
expectancy 12:6 105:7,12 105:12,13,14 107:15 151:7
expected 105:14,15 110:14,15 170:22
expedite 212:10
experience 21:14 56:21 57:3 70:10 71:4 71:22 132:22 147:11,13 151:16 157:8
experienced 146:7,16 150:23 170:2
experiences 79:22
experiencing 71:14 149:22 174:24
expert 15:14 16:7 21:2 22:18 22:23 23:20 24:1,8,9,11,14 26:9 27:8,10,14 32:13 50:10,18 61:4,9 62:6,19 62:20 63:2,4,6 63:22 78:21 80:18 85:21 94:3 99:23 101:23 108:19 122:22 123:1 129:19 137:21

145:17 159:13 177:1,15 182:4 182:6,11,14 191:6 195:1,16 196:9 199:3,5 199:25 200:18 208:9 213:22
expertise 12:9 21:3 61:12 116:21 200:18
experts 16:5 47:7 58:19 170:12 177:12 198:24
expired 105:1
expires 224:15
explain 21:9 92:8 129:18
explained 33:5 33:20
explaining 191:8
explains 118:3
explanatory 58:7
explored 148:12
explosive 160:22,22
expressed 83:3 106:3 131:6
expressing 112:23
ext 2:10
extend 106:14 139:2 146:5
extended 119:8 145:3,13,20,23 146:23 147:9 155:11
extensively 167:9
extent 15:1 16:5 105:17 192:4
extract 217:25
extremity 128:8 150:5,6
eyes 82:10 89:13 127:8

f

f 1:9 2:4
face 60:6,23
facilitate 64:2
facilitating 22:14 133:3
fact 62:16,17 94:3 135:17 154:5,14 155:1 155:13 161:24 163:4
factor 12:12 22:7 84:12 87:1 104:9 106:11 154:6,6
factored 12:15
factors 12:6 21:18,23 22:2 29:2 86:1,4 105:24 106:1,4 106:6,11,13 107:23 140:23 141:14
fails 164:10
fair 48:20 74:22 91:13 93:3 148:18 218:19
fall 10:13,20,21 12:4 38:2 157:9
falling 102:25
falls 175:10
familiar 16:13 16:19 28:14,21 29:6 78:6 86:6 107:17 108:6
family 9:20 84:22
far 71:16 123:16 214:10
fashion 205:2
fatigue 103:18 104:1,7,9 127:5 128:2 175:12
feasible 218:5
features 65:13
february 1:12 7:4 56:6,11,18 69:23 71:3 98:8 98:17 126:11 126:19 150:13 173:24 175:18 179:17 187:18 208:6 224:10 225:19 226:1,7 227:3
federal 34:23 127:4 152:12
fee 92:23 94:14 182:17,18,22 182:22 183:3,4 218:20
feel 15:10 57:23 63:15
feels 120:12 128:2
feet 60:11 101:2,6 127:8 175:11
fewer 135:25
field 8:9 37:22 38:10 39:6 130:22 134:22 166:13 189:16 190:1 220:14
fields 21:3
fifth 60:4
file 27:17 216:10,10
filing 50:20
film 193:4
final 75:9 132:21 150:20 209:11 210:2 212:21

financial 106:6
financially 225:16
find 14:16 19:5 31:23 64:11 92:21 94:6 95:8 146:21 159:21 168:12 181:25 226:6
fine 60:16 64:22 150:6
finish 41:2
firm 4:17 34:15 98:19 99:5,13 103:16 105:2 108:15 109:25 111:6,7 114:19 117:3,7,17 118:4,6,21 119:20 121:13 121:14 122:10
firm's 36:13 189:14
firms 184:3
first 8:1 16:1 18:8 30:6 33:15 37:22 41:3 45:13,20 46:7 51:23 56:4,13 56:22 57:3 61:7 65:23 66:8,13 70:5,10 131:4 134:8 170:1 179:8 180:1,9 181:4 182:4 191:11 193:13 193:19 196:7 198:10 208:2 212:17 216:4 220:19
fitness 163:25
fits 85:3
five 25:17 43:8 52:20,23,24,24 55:21 97:14 98:7 106:9 115:5 125:16 169:15 170:7 173:4 184:7,16 186:7 216:2
fix 180:23
fleming 3:22
flemming 7:2
flip 160:4
flood 88:3
florida 1:16,18 2:5 7:7 23:13 36:11 51:15,24 130:14 224:3 224:14 225:3
focus 54:5 79:15
folks 9:24
follow 71:16 177:18
followed 109:13 171:3
following 49:16 87:6 94:23 131:20 132:23 163:6 195:9,10 227:6
follows 8:2
foot 60:10
footage 193:4
footnote 90:20
footnotes 13:17
foregoing 227:3
forensic 38:15
form 11:17 44:20 73:13 83:18 84:16 85:18 87:5 88:9 95:16 100:5,17 101:4 110:18 112:6 113:7 114:13,21 120:20 121:18 122:2 123:24 126:4 133:17 134:3 138:17 139:23 140:5 142:20 143:14 148:21 154:25 156:23 161:16 162:5,19 163:18 164:11 183:25 204:19 206:6 217:2
formal 14:20 200:15 206:22
formally 70:25
format 55:25 56:2 97:11,12 183:22
formatted 45:8 45:9 78:13 171:15,16
formatting 45:15
former 88:2,17 105:4 111:8 123:9 137:12
formulate 15:7 53:10 105:18
forth 13:12 46:14 59:22 130:4 196:25 205:2
forward 79:11 210:6
found 20:1 107:25
foundation 113:8 116:10 116:24 162:5 162:19
foundations 38:14
founded 22:25
four 28:24 29:11,12 38:5 43:8 50:15 52:20 53:17 54:2 94:25

140:3 149:25 160:13 184:5
frame 106:20 176:18 177:9
frank 4:12 77:24 79:5 93:15 95:24
free 63:15
freezing 127:8
frequency 90:10
frequent 60:8 136:25
frequently 125:19 192:19
front 77:23 116:1 125:14 149:17 169:13 172:24 176:20 194:18 199:8
frye 50:21 51:15
fryer 218:17
fulfill 61:17
full 8:7 32:24 65:23 81:5 111:19 131:4 137:15 138:6 151:21 200:11 209:2
fully 63:3 65:17 196:15,19,22
function 100:24 100:25 154:20 155:2
functional 29:17 161:18
functioning 65:5 131:5
functions 124:2 153:25 154:1,7 155:10 156:24 160:1,1,6,8 161:24 163:11
funding 197:6 197:22 199:13 199:17 201:7
funny 194:13 194:14
further 130:21 221:5 225:12
future 11:1,5,7 11:21 12:2,7,10 12:13,20 62:9 63:20 66:7,10 79:8,8,16 80:2 81:12,13 87:8 172:2,5

g

g 3:4 133:20 134:10
gainful 110:12
gait 128:1
gary 4:10 44:5 44:25 45:3,7 61:19 64:9 65:18 70:10 73:1
gather 22:10 28:20
general 4:15 15:24 47:20 99:9 112:11,12 112:22 115:11 115:24 118:14 131:24 155:14 169:23
general's 116:18 120:16
generally 22:12 27:8,9 58:22 143:20 153:12 153:15 164:25 184:1
generate 205:8
generated 48:23 205:4
generic 49:5 67:5,7,7
geographic 95:2
geographical 93:17
geography 11:19 92:4
getting 9:11 40:24 68:11 105:10 185:23 185:24 217:8
gist 133:12
give 9:12 10:16 27:1 35:8,9 39:16,21 42:6 51:25 58:9 68:24 71:2 93:4 105:17 119:13 121:21 135:16 136:10 194:1 209:1,13 217:3
given 9:12 11:4 13:8 16:23 42:7 51:20 59:2 66:6 105:19 121:22 176:11 210:25 214:1 217:15 227:3
gives 71:11
giving 40:2 57:7 61:13 62:25 70:20 86:12
glad 85:9
go 13:13 15:23 18:25 19:2 20:5 20:7 32:12 41:4 42:24 45:12 50:2,8 51:14 57:21 59:18 62:11 64:19 65:22 68:3,23 71:21 73:16 76:5 77:22 78:6 78:16 79:18 83:16 84:19 85:5 88:18 89:1 89:20,24 92:12

92:17,19,21 93:6,15,21 94:7 94:20 95:9,13 96:20 103:11 111:4 119:12 121:23 122:16 122:18,20 125:5,16 127:15 130:20 131:3,14 144:21 146:24 149:7,19 151:20,21 155:17 158:11 158:22 159:19 159:21,24 161:4,5 162:2 168:9 169:1,15 169:22 171:14 172:18 173:3 175:8 178:18 183:13,14 184:5,8 185:6 191:15 193:19 193:20 196:7,7 198:10 201:13 202:17 203:11 204:7,21 206:22 208:1 209:8 212:18
goal 187:19
goes 71:6 86:15 100:15 101:17 155:9 156:5
going 20:7 26:18 40:8 43:22 45:12,18 49:15,20 51:14 63:1 66:9,18 79:11 84:23 94:6 104:19 115:6 132:12 137:7,19 148:1 148:3,3 163:15 163:16,24 164:8,23 167:5 168:16 169:1 172:2 202:11 212:16 214:12 215:15 219:8 219:15 220:15
golkow 7:3 226:13,22
gollomp 137:21 137:25 210:3
good 7:17 13:21 15:11 33:22 39:18 41:15 48:19 72:12 75:20 86:24 87:3 97:3,4 148:25 149:2 168:24 212:7
governed 47:6
governing 31:8 31:18
government 5:7 12:25 27:4 34:11,22,24 35:3,5 40:21 43:4,12 127:4 157:25 179:3 180:19 181:20 182:6,10,15,24 183:2,23 184:3 186:18 187:23 189:25 190:11 190:16 195:10 196:9 201:23 201:25 203:3,9 204:13 205:16 205:22 208:3,9 208:15,17 220:20
grab 204:21
grabbing 175:11
graduated 109:17
graham 2:9
grandson 132:6
great 193:16
group 2:4,13 7:14,20 55:8 177:10
groups 176:5 176:21,22,23 176:24
grown 23:2
growth 12:6
guard 128:1 154:18
guess 141:19
guessing 74:24
guidance 47:13
guidelines 4:23 106:24 107:10 107:12 157:24 158:18 159:5,9 159:12,22 162:11
guiding 157:13

h

hadnot 169:19
hairston 219:14 220:2
hairston's 219:7
half 24:11 29:11 32:10,10 81:7 200:2
hand 42:11 60:6,6,24,24 174:18 175:10 181:18 185:12 193:12 224:9
handbook 39:11,11
handcuffs 154:17
handed 19:10 42:2,15 97:5 115:4,22 149:14 169:10 201:22

handguns 152:17
handle 31:20 180:7
handled 184:23
handles 43:17
hands 60:11 104:7
handwriting 127:8 175:14
handwritten 189:16,22 190:6,8,10
happen 63:21 130:10 167:20
happened 35:7 82:11 89:16 118:24
happening 143:7
happens 81:8 130:9
hard 113:1 200:4
hardison 4:17 98:19 99:5,13 105:2 108:15 109:25 111:7 111:12,14 114:19 117:2,7 117:17 118:6 118:20,25 122:9
head 60:5,23 206:24
heading 69:12 196:13 201:7
health 24:24,25 60:5 72:13 82:8 83:4 89:4 91:14 93:3 106:10 218:19,19
healthcare 16:17 32:21 33:6 91:14 93:3 162:25 163:23 211:1
hearing 73:25 76:23
hearings 40:6 111:18
heart 71:15
heavy 107:4,5
held 7:6 57:17
help 63:23 131:24 134:9 136:14 147:21 148:8 178:16 178:17 204:1,3 217:20
helped 15:6
hematologist 170:20
hey 121:22
hh 224:14
high 35:12 69:13 112:3 126:21 128:11 129:1
higher 92:13,15 92:16
highway 36:10
hillier 1:17 7:12 224:13 225:5 225:22 226:21
hillsborough 224:4 225:4
hired 15:21 23:20 26:23 32:6,7,11,15,25 33:4,18 34:13 34:22,23 35:5 62:9 63:6,8 78:21 163:16 177:16 180:9 182:4 184:2
hiring 153:23
historically 124:12
history 29:7 51:7,7 59:16 73:5,7,13 83:24 85:13 99:7 147:12 173:23
hit 161:4
hold 21:1 138:19 191:25
holds 200:17
home 18:9,10 18:13 100:15 131:23
homes 18:5
hone 83:22
honing 64:6
honorably 84:9
hope 208:22
hopefully 171:1
hospital 217:15 217:19
hospitalized 169:25
hotel 194:11
hour 28:24 40:24 198:17
hourly 196:15 196:20,21,25 198:12 216:11 216:13,22
hours 29:11,12 29:12 160:13 214:1 216:10 217:4
house 37:10 191:4 209:23
huh 6:8,9
hum 6:8 63:16 64:14 191:18 209:20
human 47:13
hundred 186:6 200:2
hundreds 207:4
husband 82:7 89:3 173:15,19

hypotension 60:8
hypothetical 71:25 72:2

i

ialcp 31:10
idea 185:22 206:7 207:5,7,9 207:10
identical 48:12 48:16,21 49:2 49:15,18 50:1 183:5 202:7 205:23
identified 13:16 13:18 19:11 104:6 150:16 152:4 196:14 219:10
identifies 54:13 172:5
identify 19:14 42:3 97:7 112:17 150:3
identifying 17:25 54:19
iep 143:16,21 147:4
ieps 130:14 133:1,3 135:10 135:12 144:23 145:22 146:16 147:22
ignore 119:5
ii 126:14
illegible 175:13
illinois 128:17 128:20,24
illness 71:23 136:13,21
imaging 171:5
immediately 220:21
immigration 152:18
impact 158:23
impaired 103:19 104:2,3 150:6 155:14
impairment 81:15 110:13 168:6 174:24 175:2,16
implantation 102:13
implanted 74:9 74:16
important 28:8 35:20,25 57:18 72:4 82:16,22 83:1,6,8,20 86:1 87:1 101:10 112:25
impose 34:7
imposed 29:5
impressed 113:11
impressions 48:18,23 69:6,8 72:8 78:17 170:18 174:4
inability 110:11
incapable 108:10 155:22
incident 21:21
incidents 82:13 127:12
include 16:14 26:8 27:17,19 27:24,25 28:25 29:16 66:13 67:4 92:4 212:2
included 65:2 67:3 69:3,4 93:10 95:6 102:25 190:21
includes 160:1 160:9 170:18 175:2
including 5:7 11:9 15:12 22:6 29:22 30:22 39:5 55:2 58:14 59:12 65:4,12 69:10 79:1 81:20 94:19 103:18 104:1 107:23 128:4 137:12 147:9 148:23 150:4 152:4,16 156:6 163:9 167:12 217:10 226:13
income 98:20
incontinent 220:17
incorporated 216:21
increase 11:21 181:1 197:20 199:19 201:8
increased 128:1 150:4
incumbent 155:12 162:25 163:23
incurable 102:21
incurred 212:20
indented 98:15
independence 98:23
independent 62:22 77:11 163:24
index 4:1
indicate 125:17 169:16 209:15 226:10
indicated 65:25 104:9 124:17 125:18 130:15 137:8 144:24 146:10,12

170:1 173:19 174:23 226:14
indicates 87:19 99:8 181:19
individual 9:20 9:21 11:4 18:2 29:18 83:3 85:13 95:13 100:13 105:19 153:24 217:16
individual's 85:14
individualized 130:13 133:1 144:3,4
individuals 9:5 18:24 25:2,20 33:8 55:1 58:14 152:15 157:12 216:3,8
industry 81:23
ineffective 77:13
inferring 163:10
inflated 220:3,7 220:18
inflation 12:6
info 2:20
information 14:1,2,16 17:3 17:8 22:6,10 28:2 29:14,14 30:1,22,24 48:4 49:6 51:6 53:18 54:20 57:14,19 59:6,9,10,11,14 59:16,17 61:16 61:23 62:2,4 63:13 69:10,10 72:20 84:18 90:17 92:22 94:18,21 101:9 101:19 104:8 104:22 159:21 167:12,23 169:23 172:11 173:22 184:22 192:6 209:2 217:25 219:12 219:16 220:15
informed 132:5 132:13,15
infrequently 167:19
inherent 142:21
initial 96:18 203:8
initially 56:5,17 118:19
initiated 85:25 103:15
injury 31:25 32:1 33:1 38:2 60:3 182:18 183:6 184:2 205:24
inpatient 103:1
input 15:11 63:2
inquire 30:6
insects 152:19
insight 130:16 146:15
inspecting 152:11
instance 10:15 60:22 71:12 101:21 137:19 142:24 164:17 170:11 210:5 211:17 213:2
instances 15:18 25:19 79:2 144:12 214:9 219:10
instruct 192:8 210:14 213:15
instructed 15:3 67:11,12 213:10,12
instruction 130:2 132:24 211:14
instructional 41:3
instructive 52:2
instructors 159:16
instrumental 116:14
insurance 13:1 93:13 124:25
integrate 101:9
integrated 66:1
integration 62:4
intellectually 134:14
intelligence 218:7
intended 69:13 106:17
intends 105:19
intensity 100:14
intention 52:3
interact 130:7
interacted 135:2
interacting 133:2 152:20 167:8
interactive 68:20 69:2 102:3,5
interactively 33:10
interchanging 98:3
interest 22:9
interested 28:8 28:11,13 83:13 225:16

interfacing 130:3
interfered 82:5
interim 99:11
intermittent 175:10
international 31:9 55:17 167:10 176:5 176:13
internet 92:20 178:10
interns 23:7,8
internship 146:13
interpersonally 72:15
interpret 140:13
interpretation 98:2 140:25 141:8,11
interpreted 52:9 140:18
interpreting 120:13 196:21
interrogating 152:9
interrogatories 28:1 98:17
interrupt 203:25
interrupted 128:7
interruption 6:5 114:24
interval 74:16
intervene 134:10
intervening 135:5
intervention 9:16 36:8 172:6 219:11
interventions 30:19 130:19 211:6
interview 18:22 18:23 28:25 29:9,10,13,15 34:3,4 66:15,17 69:23 74:12,24 75:16 77:8,16 104:21 173:23 175:18
interviewed 34:15 74:6,10 96:15 153:8
interviewing 77:5
interviews 34:12
inventories 22:9
invitation 209:13
invoice 183:17 183:21,25 184:1 207:19 208:2,2,5 212:21 214:2
invoices 5:9 20:13 183:12 183:23 187:12 202:12,18 208:1,16,21 213:2 217:6 220:23
involuntary 60:20
involved 22:4 25:11,15 35:22 99:20,23 111:10 113:14 142:12 156:10 156:14 182:6 205:18 213:7
involving 9:18 53:7
iq 22:8
issue 28:19,20 167:18
issued 53:1 96:9 197:21
issues 31:19 59:24 60:5 65:3 98:11 127:2,6,7 134:15 135:6 155:8 217:10
italicized 98:16
item 63:18,19 90:6
itemized 212:19
items 43:3,4,11 66:8 88:9 92:1 195:15 198:4 214:14
iv 4:13 97:8

j

jacqueline 169:12
jag 109:22
january 81:25 97:16,16 126:16 169:17
jaqueline 4:25
jayaram 170:19 171:1
jeff 3:22 7:2
jennifer 216:7
jerry 104:17
job 1:19 27:19 27:20 73:9 86:15,17,25,25 87:1 100:24,25 101:11 103:12 111:19 119:5 124:2 130:6 135:10 139:1,6 142:7,17 145:4 146:9 148:11 153:25 154:1,7 154:20,21,24 155:2,10,11 157:6,8 159:7

159:11,25 160:1,6 162:24 163:10,23 164:8,15,25 165:13 166:1 166:17 173:16 200:13 215:10 215:23,25
jobs 57:16 138:19 161:23 165:10 167:25 215:21
joey 3:5
john 2:4,6 7:13 203:23
johnstone 88:13,14 96:17 170:15 172:12
join 84:6
joined 99:13
jones 2:18 7:23
joshua 3:4 7:17
journal 55:5,16
jt 2:17 7:22
judge 52:10 53:1 109:21 173:9,18 191:8
judge's 51:5
judgment 140:19,22 141:13 142:9
judgments 77:11
judicial 197:19
july 70:2 87:22 97:21 119:4
jumping 61:18
juncture 54:14
june 4:15 104:17 112:10 112:21 115:25 119:4 169:17 170:2 175:1 183:18
jurisdiction 51:16
jury 39:25 111:10 113:14 118:13 191:8
justice 3:5 5:4 7:16 35:14 116:19 194:24 195:11 217:12

k

k 181:12
k9s 152:13
kansas 2:19
keep 27:3 179:24 188:22 188:24 190:3 191:1
keeping 193:18 221:8
keeps 114:20
kennedy 1:15
kept 14:18 124:22 166:10
kevin 88:2
key 6:3 64:6
keyboard 138:14,22 139:13
keynote 192:20
kidney 78:10 82:5 96:13 170:1,21,23 172:3,4
kids 106:13 133:19 135:25 136:2,8,20 137:3
kind 34:19 113:4 114:7 124:12 135:3 137:4 142:1 194:13 200:4
kinds 190:4 215:1
knee 60:2,2
knees 60:1
knew 76:6 96:13
know 9:17 13:25 14:16 17:2,15 20:3,7 24:10 25:6,25 29:7 37:7 41:6 41:6,11,12 46:3 48:15,18,19 52:2,21 56:9,20 57:1 58:6 65:16 66:18 68:10,10 70:16 74:5,22 75:5 84:5 85:4 86:13,17 96:14 97:23 99:6 107:16 114:3 116:3 117:1 121:4,10 123:20,23 130:18 133:10 133:16,20,24 133:25 134:6,7 134:9 135:3 140:20 141:21 141:25 142:3 143:4,23 145:18 146:24 147:1,18,19 148:7,8 151:11 154:14 155:2 155:15 162:24 163:22 179:24 180:10 181:10 181:11 183:9 185:18,23 191:2 195:20 196:19,22 197:13 203:20 206:2,5,8 207:13,15 208:4 211:2 213:8,10,11 217:3,5 218:14 219:15 220:5

222:14
knowledge 20:3 26:14,17 28:5 43:14 51:2,21 52:23 53:4 61:15 143:11 143:15,20 152:18 213:4
known 55:2 117:23

l

l 3:6
labor 100:7 107:4,5 157:5 196:13,14,16 196:24 197:1
ladders 160:19
laid 50:3
lamacchia 2:13 7:19,20
language 48:21 49:16,19 163:1 163:20
large 1:18
larynx 156:6
lasted 110:14
late 86:16 102:12 188:19
lateral 60:2
law 2:4 4:17 7:13 51:17 98:19 99:5,13 103:16 105:2 108:15 109:17 109:25 111:6,7 117:2,7,17 118:6,23 119:17 120:2,6 121:15 123:8 124:22,25 152:6 184:2 214:19
laws 152:12
lawyer 100:10 100:22 105:1 108:4,11 111:20 118:12 120:10,11,19 121:3,25 122:6 122:11 123:10 123:23 124:2,5 177:24 214:21 214:25 215:3,3
lawyering 99:20
lawyers 27:4 35:13 40:21 55:4 101:13 107:13,17 186:18
lay 50:14 53:13 59:7 172:1
layne 4:10 44:25 45:3 73:1
lays 163:8
lead 159:14
leads 76:13
learn 28:14,15 77:3 144:6 157:6
learned 96:15 106:2 109:24 127:1
leave 79:1 121:14 155:18 166:17
leaves 37:7
lecture 130:1
lectured 176:19
led 109:3,7 150:23
left 60:1,2,6,24 75:11 80:6 81:23 103:15 105:2 109:24 122:9 137:14 138:19 139:5 145:4 165:25 166:1,6 170:1 180:4 215:10 215:24
leg 60:1,1,6,24
legal 2:13 7:20 108:21,22 113:19,20 114:4,5 123:3,4 124:22 214:21
lejeune 1:5 7:7 9:18 11:13 26:23 27:7,11 45:9 97:15 169:17 189:15 195:11 196:10 200:1 209:6 226:3 227:4
lengthy 69:9
leslie 2:13 7:19
letter 4:15,17 14:20 111:8 112:9,23 115:10,11,23 116:4 117:6,9 120:16 121:17 123:13,21 148:9 205:10 205:17,21,23
letters 47:1
level 46:11 48:13 69:13 112:3 133:10 133:25 135:20 143:19 157:7 166:22 197:21
levels 133:24 206:9
lex 108:13
liability 78:24
license 24:23 98:25 129:5,8
life 8:9,16 9:8 10:1,3,12,15,16 10:22,24 12:1,6 12:11,12,19,24 13:9,12,15,22 13:25 14:3

15:15,16 17:10 20:20,22 21:6 23:5 24:25 30:3 30:15,16,20,25 31:5,9,10,19,21 33:14 34:25 39:2,6,12 44:18 45:23,24 46:2,4 46:24 47:14 61:19 62:1,7,12 62:12 63:11,21 64:12 66:5,13 66:23,24 67:3,4 68:1,3,8,12 72:25 77:6 78:22 79:14 83:17 84:22 89:24 90:1 93:5 94:7,19 95:11 95:25 96:9,18 105:11,13 107:13,16 109:13 171:23 172:1,5,8 174:11 175:22 176:5,23 181:5 183:6 187:11 189:7 191:11 191:13,14,15 192:13 198:22 200:19 209:4,6 209:10,22 210:6,11,19,20 211:5,8,9,16,17 211:18,22 212:5 216:9 218:12,18,24 219:3,17,24

lift 160:9

light 20:9 100:9 107:6 156:10 156:15,22 157:1 172:3

likelihood 87:2

likely 49:6 108:9,12 114:6 122:10 155:22 170:23 218:2

likes 108:4

limitation 33:23,25 34:6 51:11 52:5 144:5

limitations 29:5 34:7 51:3,10 83:14 143:12 144:2,5,8,8,11

limited 28:23 50:25 51:19

limiting 53:2

limits 143:6

line 45:16 158:10 227:7

linear 108:5

lines 89:1 156:11,16

list 39:18 44:22 59:1 66:8 161:10 203:13

listed 58:13,14 58:17 131:21

lists 159:21 164:6 176:7

literally 152:21

litigation 1:5 3:6 7:8 27:7 118:22 196:10 200:1 226:3,22 227:5

litigations 195:11

litigative 195:2

litigator 111:15 118:12,20

little 26:18 40:10 41:3 45:13 73:13,16 116:3 126:10 127:18 163:20 214:13

live 26:16 105:14

lived 123:17 124:13,15

lives 92:6

living 99:6

llamacchia 2:15

llc 226:22

loaded 196:15 196:19,22

locale 13:19 92:5 95:19

locales 157:16

locally 152:20

location 36:12 177:10

log 194:5,8

logistical 217:10

logistics 25:9 25:11

long 36:12 57:16 105:13 105:14,19,20 106:1,16 131:9 134:25 220:14

longer 98:22 119:16 120:1 120:12 121:25 132:7 138:14 138:21

longstanding 208:10

look 13:15,24 20:11 26:7 40:13 43:23 44:9 48:5,10,10 49:13 53:16 57:9 58:24 63:15,18 64:20 66:22 78:4 85:9 86:21 90:20 92:19 94:25 97:6 104:18

115:5,13 117:5 120:15,16 121:20 122:21 162:9,12 163:5 164:4 178:22 179:6 180:13 181:25 184:9 202:7 203:5 207:16,17,19
looked 19:23 20:1 76:12 206:8
looking 44:10 44:15 57:1 76:17 123:20 141:13 161:9 161:18 164:9 166:5 208:5 210:1
looks 180:1 183:11 193:6 203:10
loss 53:7,24 54:21 69:18,22 79:21,25 80:2,4 80:13,20 81:11 81:12 98:19 174:10 175:13
lost 80:12,19,20 98:20,21,23 171:20 174:10
lot 17:3 19:1 25:8,9,12,12,24 40:4 69:10 82:9 89:7 135:8 167:11 217:6,7 217:9 219:16 219:16
low 127:10
lower 92:14,16 128:7 136:9 150:6
lumbar 60:3,4
lump 17:15
lunch 43:23 64:19 179:7
luncheon 96:23
lynn 4:20 125:13

m

mabry 36:10
made 12:20 70:7 71:13 85:5 96:8 103:21 108:19 122:23 123:1 140:18 140:22 141:13 142:9 145:24 147:15 166:4 168:10 182:13 189:25 211:4 220:5 226:11
magazine 55:13
magnitude 207:6
main 2:9,18 22:3 32:19 33:5 104:9 129:24 130:5,12 136:21
mainstream 136:1
maintain 37:6 81:22 88:5
maintained 37:10 118:19
maintaining 37:4
maintenance 37:6,9
major 130:8 135:9
majority 58:17
make 8:10,12 8:23 9:9 10:24 17:14 44:10 45:14 53:19 62:20,22 66:12 67:25 74:18 75:6 77:5 78:5 78:22 93:21 99:6 122:4 134:18 146:9 147:5 155:13 167:23 179:18 188:1,13,21 189:15,24 193:22 202:12 204:8 209:8 211:23 221:6 226:9,9 227:5
makes 74:14 87:4
making 10:4 77:11 114:20 125:1 139:3,9 139:20 140:21 147:23 152:13 194:11 215:2
malone 2:17 7:22,22
man 107:4 120:10
man's 82:17
manage 23:3
management 142:11 200:20
manager 81:24 87:15
managing 133:1
manifestations 70:25 153:11 175:14
manner 6:14 11:22
manual 148:23
march 57:10 82:7 89:2 158:20 161:20 174:23
marcus 3:4 7:15
marcus.tubin 3:8

marginal 155:10
marianne 24:18,21,21
marine 84:7,14 85:6 99:4,8 109:20,21
marines 9:20 25:21
mark 40:9 44:1 44:6
marked 19:9 41:25 42:2,15 44:7 78:1 97:1 97:5 115:19 117:6,12 125:10,12 149:12 158:13 169:7,10 172:20 178:20 193:25 201:15 202:13
market 226:22
marketing 36:18
marks 226:9
markus 174:16
master's 46:10 128:19
material 16:7 77:9
materiality 77:14
math 139:24 140:1 183:12 207:15
matter 13:10 70:21 125:6,13 169:2 172:19 207:2 209:6
matters 23:22 52:4
matthew 170:5
maureen 173:13
mcbcl 79:22 82:12 125:19 126:12,15 127:2,11
mcelhiney 4:10 44:5,18 45:1,3 45:8,19 56:9 59:19 61:19 62:2 63:5,14 64:9,24 65:11 65:18,20 69:16 69:24 70:10 73:1,23 75:10 76:21
mcelhiney's 57:10 65:2,6,24 73:7 76:7
meal 131:22
mean 10:5 47:9 52:21 63:24 81:13 106:25 107:14 125:25 140:13 143:6 144:15 148:10 153:5 158:6 165:6 166:23 174:8 203:25 207:20
meaning 18:21 119:24 189:16
means 16:10 97:23 139:19 196:19,22
meant 56:11 59:7 72:9 73:6 73:12 97:25 141:1,21
measure 47:10 209:10
measurement 47:11
measurements 46:13
measures 22:9
medial 60:2
median 92:11
medical 4:23 8:10,13,17,22 8:24 9:1,4,12 10:18 11:5,8 12:3,3,3,10 15:11,12 46:11 52:4,8 57:7,7 58:16,18 61:13 62:21,22 65:24 68:19,21 69:10 69:11 70:14,14 70:17 72:17,21 77:10 87:13 88:7 91:13,15 91:16,17,21,23 94:24,24 96:11 98:4 104:21 107:20 131:23 157:23 158:18 159:5,6,9,10,12 162:10 166:1 170:14 171:12 217:14
medically 60:21 110:12 134:5,12 136:19
medicare 12:13 93:13
medication 13:8,10,11,13 13:17,19 14:2 66:22 67:13
medications 8:19 10:18,25 59:12 66:7,10 66:18 67:2,4,23 128:9
meet 17:20 24:15 121:15
meeting 190:2
meetings 176:8 189:24

member 31:12 31:15 109:21
members 9:20
memorized 110:19
memory 48:19 131:6,8,9 155:6 155:7,14,15 219:15 220:2
memphis 117:8
meniscus 60:2 60:3
mental 24:23 24:25 47:10,11 72:13 110:13 111:22 131:5 137:13
mention 28:19 116:16
mentioned 31:4 61:12 85:22 86:5 93:2 166:23 172:9 176:21 216:19 218:17
mentioning 161:2
mercer 81:25
met 163:7
methodological 220:10
methodologies 47:18 50:3,8,9 50:12 53:9,19
methodology 50:11,16 52:13 52:16 53:3,5,24 54:8,22 58:10 145:17 174:12 218:11 219:4
metric 47:10
metrics 83:22 85:21
michael 1:10 4:2,6,9 7:9,25 8:8 61:3,8,9 63:5 101:23 224:7 225:7 227:2,25
microphone 180:23 209:17
mid 106:7 109:6,6 111:2 124:18,18
middle 53:6 65:23 73:17 98:6 170:19 175:9
midpoint 92:11
mightily 123:23
mild 168:6 174:24 175:2 175:16
miles 160:17
military 25:24 58:20 84:13,19 84:23,25 97:17 173:5,7,8
millions 94:24
mind 38:14 161:2
mine 216:21
minute 19:3
minutes 41:15 102:7 212:7
minutiae 213:7
mission 158:23 159:8
missouri 2:19
mistake 58:8
mister 219:21
mitigated 36:7 155:15
mobility 100:4
modalities 147:9
model 54:9,11 55:3
modest 124:11
modification 5:3 180:4,15,25 184:21 185:2 197:1,21,23
modifications 5:8 202:3
moment 35:4 39:4 44:9 61:18 64:7 78:5 105:11 142:3 212:16
monetary 38:2
money 140:11 140:21 141:10
monitoring 171:4
month 103:14 187:16,17,21 208:7,18 213:3
monthly 187:21 212:21
months 11:1 95:7 97:17 110:16 140:4 162:22 169:18 171:5
mood 164:18
morbidities 156:6
morning 7:17 20:9 43:22 128:8 179:5,14 179:21 188:5 188:10 193:7 193:11 204:10 204:11 221:11
mortgage 106:8
motions 50:21 50:22,22 52:13
motivation 84:23
motivations 84:24
motor 65:5,12 81:25 150:6

mouser's 82:12
mousser 4:12 77:25 78:9 79:5 79:20 81:19 84:6 85:4 87:14 87:23,25 88:5,8 88:16,23 92:6 93:15 95:20,24 212:2
mousser's 82:6 87:22 88:1 89:2
moussers 82:11
mouth 128:1
move 55:21 78:19 101:17 202:18,21
movement 60:20 150:6
moving 52:12 67:25 101:21 127:5 179:24 189:17
mris 28:10
multi 114:8 131:10 137:13 167:22
multiple 52:19 140:23 141:14
multiples 207:3
multiplication 139:21
muscle 163:9
musculoskele... 59:24 65:3,6
myriad 106:12

n

n 1:8 2:9 38:19 39:13
n.w. 3:6
name 7:2 8:7 39:10 67:5,8,8 73:9 116:16
national 176:4 176:12
naturalreader 98:9
nature 51:8 86:14 144:9,12 191:22 205:9
navarro 24:15 24:16 25:4 200:7,8,9,10,10 216:6,14,15
near 59:18 64:23 69:16 79:19 102:12 104:15 137:7 164:5
necessarily 6:15 53:24 124:25 136:25 143:19
necessary 11:25 29:22 63:20 96:8 100:2 108:13 197:22
necessitated 155:21
need 11:1,4 66:9 71:25 106:6 115:5 127:25 130:6 135:4,17 137:12,24 143:23 146:13 149:4 170:23 171:2,3 188:12 188:21,22,24 197:20 204:21 213:23 214:6 214:14 221:17 222:7,9,11,20
needed 61:16 66:7 131:25 134:20 135:20 136:14 140:20 147:17
needing 61:8
needs 20:2 79:16 130:18 133:11,15 135:21 136:8 137:14 172:6
neff 174:21,23
negative 6:9 121:4
negatives 145:9
negotiated 93:9 95:21
nephrectomies 170:7
nephrectomy 170:4
nephrologist 88:2,14 170:15
nephroureter... 81:21
nerve 59:25 60:4 65:3
neurocognitive 168:2
neurological 66:1 150:3 162:4,13,17
neurologist 61:4,10 98:5 101:23 102:18 108:18 122:22 122:25 137:21 149:25 174:17 174:21
neuropathy 60:11
neuropsychol... 143:18
neutral 195:2
never 51:2 147:19 214:24
new 37:6,8 43:24 75:3,6 96:11,18
nielsen 170:5

night 43:22 179:5
nine 59:5,19 140:4
nomenclature 100:8
non 24:9 36:3 93:9,9 95:21,21 119:7 187:23
nonmotor 65:13
normal 182:22
normally 182:17
north 1:1 2:10 2:14 36:10
notary 1:18 224:14
note 6:14 69:6 109:16 127:15 149:22,24 169:23 170:13 170:19,25 171:8 173:4,8 174:19 175:1
noted 26:4 65:4 104:13 108:23 119:8 123:5 127:4 175:15 226:10,10
notes 14:18 17:9 75:10 168:14,15 189:16,16,17 189:21,22,24 189:25 190:4,6 190:8,10 225:10
notice 4:7 42:4 42:17
noting 159:25 169:18
november 174:22
nowadays 136:3
nuances 28:15
number 26:21 39:22 44:2,6 136:1 146:25 147:13 160:15 160:16,24,25 161:2,6 165:20 198:4 202:19 203:12 207:17 212:18 215:13
numbers 92:10 95:12,18 184:9 202:19
numbness 60:1

o

o 1:8,8,8,9 181:12
oath 4:3 224:1
object 37:1 221:8
objection 11:17 14:25 16:2 83:18 84:16 85:18 87:5 95:16 100:5,17 101:4 110:18 112:6 113:7 114:13,21 116:10,24 120:20 121:18 122:2 123:24 123:24 126:4 133:17 134:3 138:17 139:23 140:5 142:20 143:14 148:21 154:25 156:23 158:2 161:16 162:5,19 163:18 164:11 186:15,19 206:6 210:12 213:16 217:2
objections 211:13
observations 82:17 83:4
observe 18:4,9 18:12
obstructive 174:25
obtain 22:6 30:18
obtained 15:8 72:20 139:12
obtaining 116:15
obviates 197:20
obviously 47:1 61:24 110:7 113:11 129:25 130:8 141:24 143:5 164:23 199:3
occasion 77:15
occasionally 131:25
occasions 35:5 50:19 52:25
occupation 151:17
occupational 22:9 173:8
occupations 107:7,8 151:19
occur 178:3
occurred 40:1 52:19
occurrence 77:20
occurrences 137:2
october 81:20 82:1
offered 147:17 147:24
offering 52:3 174:7

office 4:14 19:18 36:9,13 36:13 54:9 99:16 111:10 116:19 117:21 118:13 119:8 149:22 158:8 170:25 175:1 180:7 200:20 205:4,8 208:20
officer 109:22 152:24 153:16 153:20 154:10 154:13,18 155:19,24 156:21,25 160:2 161:15 163:17 197:3 197:24 215:7
officers 157:11 157:20,24 158:19 159:13 159:14,14,15 162:11
offices 36:15 173:16
official 181:15 224:9
offset 12:14 13:6 93:14
oh 42:8 160:24 185:10 205:6 209:18 216:18 220:1
okay 9:1 16:5 17:15 19:4 20:10 24:16 26:7,15 34:2,5 37:21 38:8 39:14 40:22 41:10 43:25 45:16 49:5 50:14 57:20 58:1,3 60:17 64:5,14,16,21 69:14 70:9 71:2 71:2,18 72:6,7 73:12 74:8 75:21 78:19 82:24 84:11 89:1 90:4,12 91:5,8,15 94:11 94:16,19 95:8 96:7 101:16 104:18 111:11 114:23 115:15 121:9,12 132:8 156:13 161:12 162:16 169:3 169:15 171:14 177:6 179:1,5 183:25 184:15 184:20 185:11 185:17,25 191:21 193:16 193:21 198:10 200:7 201:6 203:20 204:7 204:11,20,23 205:12 206:11 206:18,24 207:23 208:14 221:6 222:5,8 222:19
okeechobee 2:5
old 71:6 132:6 165:17 215:12
omitted 6:7
once 12:11 68:2 187:14,14 209:6
oncologist 88:13 170:14 170:20
one's 21:13
ones 18:17 85:22 93:2 157:12,19 165:1 218:2,19
ongoing 65:25
onset 28:12 29:16 30:9 74:16 98:3,4 126:2 131:9
open 188:22,24 193:18 221:9
operate 160:21
operational 200:21
operations 23:3 152:20
operative 28:9 76:25
opine 87:12
opined 102:19 108:12
opinion 20:17 54:21 62:18,24 63:1,3 69:1 79:6 87:18 88:10,14 89:21 105:18 110:24 113:17,22 114:9 119:16 121:22 124:19 138:12 156:20 164:21 214:20 215:6
opinions 15:8 27:1 33:3 34:16 34:19 53:10 57:8 61:13 69:14 70:21 72:9,10,11,14 146:21 147:2 174:7,8 218:22 219:1,5
opportunities 16:20 28:16 156:9,13
opportunity 15:15 28:22 29:3,24 33:10 96:16 146:8,15 188:25 209:13

opposed 24:8 105:20 184:3
opposing 35:2
optimize 81:16
order 13:14 15:7,25 25:17 31:20 34:15 48:2 53:1 61:14 73:11 93:24 161:7 188:24 192:7,20 195:16 202:23 219:4 222:7,20
ordering 171:7
orders 222:6
organization 31:13,16 73:9 146:4 165:7 181:11
organizations 176:6,13
organized 48:4 72:22,23 73:11
orthotic 60:10
outline 177:17
outlines 178:6
outside 34:14 37:11,12
outstanding 118:11
overall 53:25 85:11 216:23
overarching 72:11
overly 51:6,9
override 67:19
overview 27:2 55:22 58:9
own 18:5 83:3 93:7,16 123:21 146:10 166:3,4 177:22 216:15
owner 206:14

p

p 1:8
p.m. 1:13 96:22 96:23,24,25 115:16,17,18 115:20 169:4,5 169:6,8 212:11 212:12,13,14 221:19,20,21 221:22 222:3 223:1
pa 226:23
package 188:2 188:3
packet 201:24
page 4:1 43:8 45:18,20 53:6 53:17 54:2 55:21 58:3 59:5 59:19 61:3 64:23 65:22 69:15 73:8,16 73:17 75:9 76:16,18 78:17 79:18 81:18 87:12,20 88:18 89:20,25 90:5 90:25 91:18 92:1 94:25 97:14 98:6,7 99:7 101:16,18 101:22 102:12 103:8 104:5,13 104:14,18 108:8 109:13 122:17 124:18 125:16 127:15 127:18 128:10 131:4,14 132:5 132:11,21 137:7,20 144:21 149:19 149:20 150:11 150:21 151:20 155:17 158:22 159:19,24 160:5 162:2,12 163:5 164:4 168:15 169:15 169:22 170:11 170:17 173:3 174:2,15 175:9 179:8 180:3,14 181:24 183:16 183:17 184:6 184:16,18 185:3,4 195:15 195:23 198:5,7 198:10 200:25 200:25 202:18 202:22 203:12 203:12 207:16 207:17 208:2 212:17 218:4 227:7
pages 42:25 50:15 91:18 112:14,15 152:2 181:25 183:14 184:5 184:25 217:15 217:19 221:12 227:3
paid 12:11 185:23,24 214:3
pain 59:25 60:1 82:9 83:2 89:7
pains 71:5
palm 2:5
pancreatitis 169:25
paper 18:19 194:12
paragraph 56:4 57:9,22 65:23 69:17 73:17 75:9 76:18 79:19 80:1 87:19 88:11,22 98:16 102:17 103:4,9 104:19 118:4,19 119:3

119:12 122:19 122:21 123:18 126:25 131:4 132:5,12,14 150:12,20 151:21 170:19 174:14
paragraphs 89:22 173:12
paralysis 60:4
parameters 187:13
paraprofessio... 215:1
parents 130:3 133:2
parker 117:8
parkinson's 56:5,10,18,22 56:24 57:5 61:4 61:10,11 63:6 65:18,21 70:6 70:11,25 77:2 77:16 97:20,24 102:24 103:25 114:10,18 120:22 121:5 121:24 125:20 125:24 126:1,3 126:8,21 161:14 163:6
parkway 126:20
part 10:23 14:5 26:8 57:18 61:22 63:10,12 70:1 85:14 92:3 109:16 122:6 135:9 139:12 141:3 146:20 147:2 173:21 177:1 189:14 192:25 193:3
partial 170:4
participating 132:25
participation 140:24
particular 59:3 62:8 63:18 92:18 116:8 121:21 130:6 177:23 178:13 215:22
parties 192:2 225:14,15
partner 119:20
parts 92:4
passed 117:22 200:6
past 80:5,12,13 80:18,20,21 87:8 158:10 165:15 174:10 183:16 192:11 192:12,18
paste 48:22
pasting 48:13
pat 160:11
path 87:3
patient 9:13 11:4 77:2,16 93:5
patient's 102:19 170:21 174:18
patients 8:23 9:2
pause 121:21
pay 13:1 93:6,7 93:11,16 95:10 95:13,14,20 106:8,12 114:23 183:3
paying 135:18
payment 212:21
payments 12:13,20,24
payor 93:12
payroll 27:21
pd 65:4,12 66:2 70:2 103:17 105:3,5 108:18 122:22,25 149:22,24 150:14 155:21 155:24 174:20 174:22 175:15
peaked 108:2
pediatric 211:3
peer 46:23 54:22,24,25 55:4,5,7,8
pension 140:22
people 22:15 23:4 24:13 25:7 34:14 55:1 84:19,20,24 95:9 107:1,1,3 107:4 142:1 152:9,17,22 153:16 157:19 158:9 165:10 167:18 180:6 198:20 209:16 209:23 210:1 211:4 216:17
perceived 141:25
percent 24:2 92:13,13,14,16 92:16 200:2
percentage 23:18,22,23 24:7 32:5,5,6 216:25 217:1
percentile 92:7
percentiles 92:6 218:21
perception 142:10

perfect 26:16 41:20 187:19
perform 108:13 123:16 124:1 139:1 146:11 153:24 154:1,7 161:15 165:10
performance 27:20 86:13 118:25 119:5 159:8,11 163:10
performed 170:4 197:22 220:24
performing 36:5 108:10 111:19 152:19 154:21 161:22
period 46:18 75:15 99:11 110:15 111:4 123:17 124:14 124:15,20 165:23 166:8 168:3,7 215:8 215:15
periodical 55:14,15
periods 119:9
peripheral 65:3
permission 14:11
permitted 51:12
persist 103:20 109:4 110:25
person 11:1 17:21,25 18:4 24:17 34:3 37:8 46:1 55:7 71:5 71:9,14,19,21 72:14 77:3,12 79:15 80:25 81:4 87:2 102:9 106:5,10 113:4 131:15 148:20 153:9,10 164:2 167:17 198:16 216:18
person's 28:5 48:19 80:18 83:13,17 85:16 116:16
personal 23:19 31:25 32:1 33:1 106:11 112:23 131:24 182:18 183:6 184:2
personality 22:8
personally 8:24 26:24 36:22 37:18,24 68:9 86:21 130:15 191:1 199:25
personnel 27:17 196:24
persons 55:8
perspective 80:11,17,24 129:19 165:16 166:22
pertains 10:12 164:15
pertinent 29:8
perusing 20:4
peterson 4:13 4:16,18 97:8 102:2,13,19 103:9,15,20 105:6 106:16 108:9,12 109:8 109:14 110:24 112:12,23 113:5 114:3 115:25 116:8 117:24 118:3,5 118:22 119:14 119:21,22 120:17 121:5 123:22 214:20 219:17,25 220:16
peterson's 98:7 102:24 103:5 103:17 104:21 104:25 108:20 108:24 109:3 112:24 114:9 123:2,6 214:17 214:18 219:24
petersons 103:17
ph.d. 1:10 4:2,6 4:9 7:25 46:11 224:7 225:7 227:2,25
pharmacies 13:18,20
phase 151:4
phases 54:3
philadelphia 226:23
phoenix 167:10
phone 17:18 188:1
photographs 193:1
phrase 21:7 60:13,15 79:25 86:6 91:15
physical 88:16 110:13 143:2 144:12 161:23
physically 92:19,21 100:3 112:1 152:10 166:16
physician 62:9 63:19 64:8,10 66:11,11,12,19 66:21 67:2 71:7 71:9,10 93:7

94:14 103:5 107:23 172:7 210:10,24,24
physicians 14:7 15:20 17:6,17 17:24 52:6 66:16 79:2 92:23 103:11 107:22 172:9 210:7 218:20
pick 57:21
picking 90:4
picture 37:8
pinnacle 54:16 54:18
place 1:14 48:14 85:9 90:18 140:16 209:7 222:14 222:17 226:13
placed 33:23,25 60:18 77:23 121:24 181:6 185:18
placements 146:14
places 27:18 151:19 176:19
plaintiff 13:20 15:17 18:8 28:3 30:7,16 32:6,20 32:21 33:4,7,13 33:24 58:15,19 59:10 61:16 62:1,19 66:9,17 66:23 101:14 186:11 218:12 219:3
plaintiff's 18:9 31:24 32:16 33:19 59:14 66:21
plaintiffs 1:11 2:3 4:7 7:14,21 7:24 11:20 13:4 16:14 18:3,4,13 20:19 34:12 35:22 42:17 51:12 186:7 187:9 200:6
plan 9:8 10:3 10:15,24 12:12 13:9,12 14:3 15:16 20:22 30:3,16,25 31:21 33:14 44:18 61:19,25 62:7,12 63:11 63:22 66:6,14 66:24 67:3,5 68:2,3,12 73:1 78:22 79:14 89:24 90:1 93:5 94:7 95:12,25 96:9,18 109:13 171:23 172:1,5 172:8 174:11 175:22 191:13 191:14,15 192:13 198:22 209:4,6,11,23 210:6,11,19 211:5,8,9,16,18 211:22 212:5 218:24 219:17
planner 8:16 10:22 24:25 30:17 45:23,24 46:2,5 62:1,13 64:12 77:6 181:5 191:11 219:24
planner's 66:24
planners 31:5,9 31:10,19 94:19 107:13,16 216:9 218:12 219:3
planning 8:10 10:12 20:20 21:6 23:6 30:21 34:25 39:3,6,12 47:14 68:8 130:1 176:5,23 183:7 187:11 189:8 200:20 218:18
plans 10:2,16 12:1,13,19,24 13:15,23,25 15:15 17:11 46:24 106:19 130:13,15 132:25 133:1 210:21 211:17
pleadings 27:24
please 7:10 8:7 19:14 41:8,12 44:14 57:24 80:15 89:25 90:19 96:21 103:8 125:16 128:10 134:24 141:2 161:3 178:23 193:24 212:7 222:6 226:9,10,12
plus 113:25 114:2 136:2
pocket 93:8
point 29:8 46:22 77:3 84:5 88:10 151:17 166:6 167:21 167:24 168:12 169:19 171:1 205:2 215:14
pointing 88:20
points 217:20
police 165:14
policies 148:13
pomona 173:18
pool 194:5
population 137:5

portugal 149:25
posed 57:6 70:13 147:6
position 98:18 99:13 101:2 109:6 111:1 121:25 136:13 142:22 145:7
positions 151:25
positive 113:10 116:11 119:14 121:1
possessed 108:12 151:1 151:23
possible 15:10 70:24 149:24 188:14 189:12
possibly 14:18 14:19
post 152:10
postdate 28:20
potential 81:17 119:14 130:6
potentially 197:25
potter 104:14 104:17
pounds 127:16 160:9
powerpoint 152:5 192:20
powers 154:11 154:16
practice 22:25 24:14 30:20 31:5,11 51:25 52:4 68:11 119:17 120:2,6 120:12 121:15 123:8 208:6,10 208:16 213:5 214:19 220:24
practicing 46:17,20 214:25 215:3
pre 70:9 214:7
precede 91:18
precipitously 119:6
precise 35:8 189:11
precisely 180:12
precluded 80:9
predate 28:19
predecessors 117:22
predictable 159:7
predictor 87:8
preempt 137:1
preferred 68:23
prejudicial 51:6,9
premise 122:5
preparation 131:22
prepare 95:25 96:5,9 146:16
prepared 15:17 17:7,11 19:17 62:1 63:22 73:1 73:2 130:16 171:23
preparing 130:13 132:24
prescribe 8:19 67:23
prescribed 59:13 66:18,21 67:6,9 175:3
prescriptive 135:11
present 3:21 11:18 12:7 17:25 18:1 153:3 178:16 192:21
presentation 192:20
presentations 176:4,8,12
presented 72:14 129:24 130:5 150:4 152:2
presenting 59:11,20,23 60:22 127:19 127:23
preserve 148:11
preserved 189:20 190:24
president 10:9 117:16 121:13 198:11 206:18 206:23
presiding 173:18
pressure 82:9 89:10 127:11 170:3
presume 105:6 151:6
pretense 221:9
pretty 92:25 205:11
prevalent 153:1
previous 35:4 35:16 202:8
previously 102:18 221:1
primary 36:13 108:2
print 98:22
printed 91:2
prior 22:1 104:11,14 214:18
private 13:1 93:7,12 95:14

184:2
privately 93:6
probable 25:17 109:8
probably 42:9 64:19 77:9 101:15 138:23 180:8 183:12 209:1 218:20
problem 96:12 96:19
problems 21:15 59:10,20,23 65:3,7 81:19 82:5 102:25 106:10 127:6,7 127:19,23 128:2,4,7 131:5 131:10 133:23 170:3 174:17 174:18 175:9 175:11,12,13
procedural 51:5
procedure 11:8 62:8,10 93:8 95:9,10
procedures 50:12 59:12 72:24 95:4 148:13
proceedings 40:6
proceeds 54:15
process 29:6 54:15 167:23
processes 54:4 54:4,19
processing 100:14 101:1 101:10 131:12
produce 43:4 98:22
produced 20:9 20:14 30:16 43:12,13,21 179:4,13,16,21 188:8 190:11 190:12,14,16 193:7,10 204:9 221:11,15
producing 188:4
product 186:20
production 4:8 42:5,18 43:1,7 60:7 128:1,3 188:20
products 202:24
profession 91:23 94:3
professional 22:22 24:2 55:6 55:12,14 108:6 117:17 120:19 121:11 130:25 176:8 198:23 198:25 199:2,5
professionally 135:2
professionals 55:18 107:12 176:24
profile 22:11
profound 30:10
profoundly 133:15,18
prognosis 8:17 28:5
prognosticating 106:1
progress 130:2
progression 155:24
progressive 76:14 102:20
project 186:1 187:3,6 214:1
projection 128:4
projects 202:24
prominent 128:8
promise 26:19
prompt 226:15
pronouncing 53:14
proofreading 108:22 113:20 114:4 123:4 214:22
propensity 83:23 85:23
proper 14:8 197:23
proposals 213:23
propose 177:25
proposed 50:19
proprietary 152:6
prosecution 112:25 113:2 116:9
prosecutor 99:17 113:14
prospect 79:10
prospective 79:11
protection 155:19,23
protocol 66:22 222:14,15
protocols 22:5 30:18 211:6 219:11 222:16
provide 8:24 9:22 13:19 20:17 43:19 48:3,3 53:18 59:1 75:11 94:17 159:6 162:22,24 163:5,21

177:16 182:14 195:9 196:9,24
provided 77:23 88:3 104:7,22 173:22 175:17 179:2
provider 162:25 163:23 211:1
providers 16:18 32:21 33:7
provides 57:19 131:15 158:23 162:16 163:4
providing 62:23
provisions 195:15
psychiatric 103:1 164:6,7
psycho 47:10
psychological 4:23 8:13 157:24 158:18 162:10
psychologist 21:5
psychology 87:7
psychometric 47:4,9
psychosocial 46:12
public 1:18 21:2 146:4 152:21 157:21 167:9 224:14
publication 93:24 107:20
publications 37:23 108:6
publish 31:11 33:14
published 38:5 39:17 55:9,11 59:15 68:13 107:21 178:9 178:11 211:25
puffy 82:10 89:13
pull 40:14 214:14
punctuation 6:3
purpose 47:25 61:7 62:14 69:7 159:2 180:25
purposes 13:9 62:11 71:18 125:20 134:17
pursue 166:3
pursued 69:25 171:20
pursuing 79:20 84:25 88:23 187:9
purview 10:20 10:22 12:5
put 9:8 37:7 42:8 56:19 68:1 68:22 72:12 92:1 94:7,22 141:5 147:7,7 165:16 192:6 221:18
putting 25:16
pyramids 54:3

q

qualifications 45:21 49:1,4,14 52:12
qualified 47:7 51:20 62:22 164:2
qualifies 164:9
qualify 154:3 164:10
question 6:4 12:18 13:9 15:2 15:4,24 16:3 21:19,21 32:24 41:7 47:20 57:6 64:4,15,17 66:8 70:5,13,14 76:2 78:19 85:11 90:16 94:2,5 95:3 96:7 106:19 112:20 114:15 145:8 145:11 156:18 161:12 162:7 166:21 186:23 208:14 210:15 215:9 219:2 220:22
questioning 152:8
questions 29:8 30:1,2 43:25 44:11 68:24,25 78:7 133:13 177:25 178:12 178:15,16 192:10 212:10 220:14 221:5 221:13,25
quickly 20:4 101:6 115:14 167:16 179:6
quit 132:17
quite 118:22 122:9 135:10 140:21 155:21 167:22
quotations 6:14
quote 6:15 141:4,5

r

r 38:19,19 39:13
radiculopathies 65:4
radiculopathy 60:3

raises 86:13
raleigh 2:14
range 90:18 93:16 151:7 157:1,10
rank 173:7
rapel 53:8,14 55:3
rapidly 137:13 167:23
rarely 37:5
rate 114:23 195:24 196:14 196:14,20,21 196:25 198:12 198:12,16 203:17 216:11 216:13,22
rates 93:10 95:22 196:15
rather 52:2 119:6
ratio 136:8
rays 28:10
reached 148:7 182:10
read 6:15 19:19 33:8 57:25,25 65:8 66:4 82:2 109:10 116:5 119:19 132:7 138:24 161:3 175:6,7 222:21 227:2
readily 118:23
readiness 159:8
reading 98:11 131:25 161:6 222:24 226:12
reads 217:18
ready 158:15 158:16,17 178:25
real 85:11 95:9 95:12
realize 81:2
really 37:5 136:4,5,6 155:12 164:14 165:6 181:14 206:22 220:3
reason 40:20 51:1 68:15 71:7 75:4 96:8 110:12 122:7,7 136:25 138:13 139:4 168:19 213:8 214:15 221:10 227:7
reasonable 93:19 95:17,18 104:23 105:6 123:10 150:25 151:6 154:2,9
reasonably 101:1 155:11 189:12
reasons 36:1 51:5 84:21 85:4
reassess 209:8
recall 14:14 39:10 46:14 51:23 74:25 76:11 85:7,10 96:5 112:15 136:18,18 153:10 192:24 197:18 200:4 205:6,18 219:9 219:17,19,25 220:7
recalled 75:10
receive 114:11
received 127:3 128:11,19 205:5
receiving 13:4 109:25
recent 43:10 74:15 131:9 176:2
recess 41:22 75:23 76:11 96:23 115:17 169:5 212:12 221:20
recognize 180:5 189:23
recognized 159:10
recognizing 63:2
recollection 46:5 75:2 200:5 219:9
recommend 9:14 167:1,3
recommendat... 64:10 67:15
recommendat... 10:4,24 30:12 61:21 66:12 69:3 79:8 166:2
recommended 12:11 13:8,11 64:8 220:16
recommending 9:17
recommends 62:7
reconciling 62:11
reconsider 121:23
record 6:15 7:1 7:11 19:2,6,7,8 25:22 41:21,24 43:6 56:23 75:22,25 96:20 96:22,25 115:3 115:16,20 149:21 169:4,8 188:21 212:11 212:14 217:16

217:19 218:3,4 221:7,18,19,22 222:4 225:9
recorded 190:7
recordings 190:15,23,24
records 15:12 15:12 16:13,14 16:19 20:8 25:10,15,16,24 27:1,15,15,16 27:16,21,22 28:7,13,16,18 28:21 29:7,14 29:19 30:8 33:9 43:17 57:2 58:4 58:16,18,20,20 58:21,22,24 59:2 61:24 63:17 69:12 72:17,21 101:17 104:21 109:3,12 113:13,25 122:7 150:3,15 168:7,21,22 171:12 173:5,8 190:13 217:14 217:22,25
recreational 125:20
redirect 137:3
redirecting 135:4
reduced 109:5 111:1
reduces 12:7
reengineering 22:3
refer 40:15 45:19 53:5 85:9 90:19 220:23
reference 37:24 38:11 39:6,18 39:19 47:1 92:24 93:21 94:8,14 119:14 218:20
references 6:4 6:6,8,9 149:24
referencing 44:15 151:22
referral 30:1,2
referrals 8:23 9:10 152:13
referred 60:21 91:19 219:22
referring 43:6 64:25 141:2 176:22 209:23
refers 198:15
reflect 115:3 159:9 220:15
reflected 6:14
refreshing 220:2
regard 144:21
regarded 121:11
regarding 24:6 34:19 42:18 57:15 96:17 102:2 149:15 168:10 179:4 214:12,17 215:5 218:7
regular 133:14 135:22 144:17 221:3
regulations 152:12
regulatory 152:14
rehab 181:4 183:6 216:8
rehabilitation 4:10,11,13,20 4:21,24 5:1 8:9 8:16 9:5 20:20 20:21 21:4,6,8 21:9,10,11,12 21:17,22 22:13 22:18 23:24 34:24 36:8 37:22 38:10,15 38:24 44:17 46:12,13,21 47:13 55:6,12 55:18 60:13,14 60:18 77:6 93:20 94:3 97:7 103:22 104:24 109:9 123:11 150:25 172:6 176:11,15,23 187:11 189:5 200:19
rehabilitative 9:22 78:20 191:22
related 5:6 12:10 20:19 23:22 24:8,9,11 57:4 66:2,25,25 82:5 126:3 152:3 201:24
relates 35:19 72:18 171:20
relating 35:19 172:19
relationship 58:15 108:3
relative 225:12 225:14
relatively 74:15 75:3,5
relevant 22:11
relied 30:22
rely 61:23 63:9 91:25
relying 63:1 172:8,10
remain 105:15
remained 151:3

remaining 156:9,14
remember 14:22 112:17 112:18,19 181:8 220:16
remotely 224:8
remunerative 109:5 111:1
render 8:17,22 9:1,4 31:21 34:19 45:4 79:5 199:25
rendered 16:16 17:4 29:17 40:9 56:15 155:22 172:25 212:20
rendering 54:21
repairs 131:23
rephrase 80:15 95:3 145:10
report 26:5,7 29:20 40:9 44:4 44:17,25 45:4,5 45:7,13,15,19 47:21,21 48:10 48:11 49:20,25 54:6,7 55:25 56:20,24 57:2 57:21 59:15 64:24 69:9,16 72:17 73:5 76:12,14,16 77:24 78:13 83:10,12,13 85:8 97:11 99:8 101:16 122:4 122:12 125:2 125:13 126:6 127:22 131:21 138:23 141:3,6 149:11,15,20 152:2 155:17 161:17 167:14 168:11,15 169:11 171:15 171:24 172:16 172:25 173:4 175:23 215:6 225:6
reported 56:5 56:17 97:20 125:20 126:7
reporter 1:17 7:11
reporter's 4:3 6:3
reports 17:2,3 17:4 28:9,9 45:9 47:21,24 48:2,6,9 49:2 49:13 50:4 56:2 56:10 58:18,25 59:8 69:7 72:8 78:14 171:16 190:9,22 198:11 200:1 214:15 216:4
represent 179:1
representation 150:22 161:18
representations 145:1
representative 181:19
representatives 116:18
representing 110:21
represents 196:15
reputation 117:24 118:10 118:11,20
request 4:8 14:20 27:15,22 28:22 42:5,17 42:25 43:7 103:10 194:25
requested 16:20 43:3,18 222:18 225:8
requesting 14:23 152:9,15
requests 9:3
require 65:25 135:7 143:2
required 31:20 36:2 108:11 111:22 116:17 119:17 120:2 134:8
requirements 30:21
requires 197:1
research 29:22 54:23 93:22 94:20 108:21 111:17 113:19 114:4 123:3 124:23 146:20 214:21
reserve 221:23
reserved 25:20
reside 11:20
resided 125:18 169:18
residents 23:7,8
resides 13:20 95:20
residual 108:13 108:24 123:6 123:15,18
resources 47:13
respect 11:5 39:19 78:23 83:11 148:14
respected 120:25
respects 227:24
respond 17:13 31:2 209:14
responded 179:17

response 204:6
responsibilities 27:20 86:15 111:6,20,21 119:5 200:21 200:22
responsive 159:6
restate 114:14
restricted 50:25 51:19
restricting 53:2
restrictions 162:3,16,22 163:4,5,22
result 64:11 110:14
results 72:23
resume 22:1
resumé 118:15
retained 14:9 15:16 16:21,24 17:17 30:16 31:24 33:13,24 35:1 58:19 62:19 66:23 219:18
retainer 183:3 205:13,16
retention 127:10 205:10 205:17,21,23
retire 107:1,2,3 138:19
retired 82:8 89:3 138:13,20 173:20
retirement 165:15
retract 193:17
retraining 21:25
retroactively 146:25
retrospective 79:11
return 226:13
returned 173:21
returns 27:22
reveal 210:17
revealing 186:17
reverse 73:11
review 15:16 17:12 18:19 25:21 28:17 30:8,15 31:1 36:22 55:8 65:2 66:21 72:17 101:17 104:20 109:2,12 145:6 148:13 171:11 188:25 209:11 209:13,22 211:12 217:15 217:24 218:1,3 218:3,15 221:24 225:8
reviewed 15:12 17:2 25:24 26:1 26:8 46:23 54:22,22,24,25 55:5,5,7 58:4 58:25 59:2 61:25 123:13 144:24 149:21
reviewing 25:15 26:25 28:13 108:22 113:20 114:4 123:4 161:17 190:2 214:22
reviews 27:21
richard 4:22 149:11,15 164:18
right 9:11 10:14 11:12,25 12:18 13:7,24 14:2,5,21,21 16:23 18:2,12 18:16,21 20:5 21:1 23:10,15 24:3,12 25:2 26:1 31:4,12,23 32:9,11,18,23 33:12,16 34:21 35:10,13,25 37:14,17 38:6 38:16 39:2 40:8 40:8 41:14 42:6 42:21,24 43:3 43:10,16,20 44:14,23 45:7 45:12,18,21 47:3,18,20 48:5 48:7,24 49:2,17 50:2,6 51:13,22 52:5,11,11,18 52:25 53:5,6,13 53:16,22 54:2 55:21 56:4 57:1 58:24 59:20 60:1,2,6,6,9,17 60:24,24 61:7 63:4,11,24 64:23 65:10,16 65:23 66:4 67:10,15,17,21 68:7,8,14,18 69:5,21 70:7,15 72:2,7,16,25 73:22 74:4,11 75:4 76:16 77:15 78:4 79:4 79:13,23 80:7 80:23 82:2,4,16 83:8,15 84:2,7 85:2 86:3,9,18 86:23 87:4 89:8 89:24 90:10,12 90:16,22,24 91:3,24 92:8,12 92:17 93:4 94:8 96:3 97:19,23

99:19,22,24
100:1 101:3,14
101:19 102:5,9
104:12 105:10
105:17,23,25
109:2,16,18,22
110:23 111:2
111:21 112:1,9
113:15 114:1
114:20 115:7
116:3 117:1,5
117:15 118:18
119:20,22
120:3,9,15
121:3,16,20
122:14,18,20
123:14,20
124:7 125:5,24
127:16 128:12
128:17 129:2,5
129:18 130:22
131:3 133:10
134:17,24
135:13,16
137:22 138:7
138:10,12
139:9,19 140:9
145:6 146:2,19
149:3,19 150:5
151:11,20
153:15 154:4
154:23 156:4,8
156:20 157:3
157:17 158:4
158:15,17,22
159:1,19,22,24
160:2,4 161:10
163:3,14,17
164:4,10,17,21
165:3 166:8,10
166:12,14,18
166:21 167:2
168:23 169:2
171:10,20
172:14 173:3
174:18 175:8
176:2 177:15
177:22 178:22
180:13,18
181:16,18,23
182:9,13 183:4
183:16,21
184:5,12 185:4
185:12,17
186:3,9 187:1,3
187:25 188:7
188:17 189:10
189:20,23
190:10,15,18
190:23 192:18
194:15,17,20
194:23,25
195:14,17,22
196:2 198:5,8
198:19 199:3,4
199:6,10,13
200:13 201:22
202:2,6,11,17
203:3,5,11,20
204:4,9,18
205:13,15,21
206:1 207:2,8
208:5,17,20,23
209:9 210:9,23
211:7 212:1,6
213:1,3,8,25
214:3,5,12
216:2 219:22
220:8,11,25
221:24
rigidity 163:9
rigors 99:19,23
119:17 120:1
121:15
risk 138:3
197:25
rmr 1:17
224:13 225:5
225:22 226:21
robert 5:1
172:19,25
roger 39:9 55:2
role 20:16,21
112:24 114:5
187:6
romano 2:4,4
4:2 7:13,13,13
8:6 11:24 15:5
16:11 19:5,10
19:13 20:5,11
20:15 41:2,5,14
41:17 42:1,6,14
44:1,4,8 75:19
76:1,4 78:3
83:19 85:1 86:2
87:11 95:23
96:20 97:2
100:11,19
101:7 110:22
112:8 113:12
114:16,25
115:2,21
116:12,25
117:14 120:21
121:19 122:13
124:6 125:7,9
125:11 126:9
133:22 134:16
139:7,25 140:6
142:23 143:22
149:1,3,7,10,13
155:4 157:2
158:3,11,14
162:1,8 163:2
164:3,16
168:23 169:1,9
172:21,23
178:21 179:12
179:19,22
186:16,25
187:25 188:14
188:18 189:3
192:9 193:9,12
193:16,20,22
193:24 194:1,4
194:7,10,15,16

201:11,16,19 202:11,14 203:24 204:4,7 204:11,12 206:10 207:22 207:24,25 209:18,21 210:16 211:15 212:6,15 213:20 217:13 221:5 222:7,10 222:13,20
romanolawgr... 2:6
roots 118:23
rose 181:12,13 216:6,18
rotate 23:8
rothchild 4:20 125:6,13,18 127:1 129:11 131:5,16 132:13,15 137:8,14 138:5 138:13 141:16 144:22 145:3 145:13 146:8 146:17 148:19
rothchild's 126:11,19 134:18 142:17
rough 222:9,12 222:18
roughly 31:16
rubber 68:12
rule 221:25
ruled 167:24
ruling 51:23 52:2,10 53:1
run 101:13 187:19

s

s 1:8 38:19,19 39:13
safe 142:17 159:11
safety 143:6
sales 81:24 88:17
salesperson 87:15
salisbury 2:10
saliva 128:1
sample 160:22 160:22 178:11
samples 46:23
save 45:16 178:4
saved 189:20
saw 54:11 74:17 153:3,5,5 153:10
saying 93:18 120:17 123:7,9 124:20 145:17 145:19 207:4 210:18
says 45:23 53:11 54:3 62:10 69:21 71:10 73:22 74:2 75:14 76:12,19 86:17 89:10,13 90:5,9 97:21,24 98:7 103:23 104:20 116:13,22 117:15 121:14 121:17 126:7 132:13 151:9 156:2,5,19 159:5 162:21 171:8 180:3,10 184:16,20 194:21,24,25 195:3,5,12,19 195:23 196:5 196:11 198:1 199:18 201:7 202:22 203:6 212:18
scan 94:6
schedule 182:17,18,22 182:22 183:5 195:23 199:19 203:17
scheduled 201:8
scheduling 131:23
scholastic 46:9 46:15
school 109:17 126:12,13,15 126:21 128:11 129:1,15,22 133:14 138:20 138:20,25 139:1 144:17 145:3,14 147:16,24 148:14
schools 143:8
sciatica 60:4
science 189:5,8 189:10
scope 12:8 33:23,25 111:19 186:1,4 187:1 205:3,9
scores 92:9
screen 192:15
scribner's 220:5
se 196:22
seal 224:9
searching 152:12
second 62:24 63:1 103:8 104:19 150:11 151:21 170:23 191:25

secondary 87:15
secretaries 191:2 205:19
section 45:20 47:17 48:24 49:1,14 50:3,15 53:17 55:22 58:4,5,25 59:6 59:7 61:2 64:25 69:5,8 72:7,9 72:13,18 78:16 101:17,19 159:25 162:12 163:3 170:12 170:17 174:3
sections 48:9
security 58:20 106:24 107:10 110:4,6,10 111:9 117:9 152:19 154:18 157:14 158:19 159:13,13,14 159:15,16 162:11
sedentary 156:10,15,21 156:25
see 9:14 13:16 13:17 20:16 37:13 42:8,25 49:6 54:11 55:19,23 56:7 56:16 57:12,20 58:11 61:5 63:25 65:14 69:16,19 70:3 73:16,20 79:7 79:23 81:20 82:14 87:16 88:18,20,24 89:2,5,18 90:7 90:21 91:6 96:3 97:14 99:1 103:4 104:5,19 107:6 112:9,16 113:13 116:7 116:13 117:11 117:15 118:5 119:1,10,13 127:20 128:11 131:14 132:2,8 132:19 137:8 138:23 149:4 149:21 157:12 158:23,24 159:3,20 160:16,24 161:6,9 162:2 162:14 163:3,8 163:12 164:9 170:9 171:6 180:16 181:2 181:18,21 182:2 183:19 184:8,9,12 185:1,5,7,15 194:20 195:25 197:9 199:11 199:14,16,21 200:23 201:4,9 202:19,25 203:12,15,18 204:16 212:5 212:24 222:13
seeing 56:13 112:18,19
seek 151:8
seem 58:6 119:6
seen 20:13 42:21 43:1 148:6 157:23 180:8 204:25
sees 71:9
seizure 174:16
selective 161:8
self 29:20 56:24 58:7 83:13 103:14,20 126:5,6
semiskilled 156:10,15,21 157:4,9,10 164:22 165:2
send 205:11,16 208:16 210:2 210:19 211:18 214:2
sending 165:11 213:2 221:2
sense 10:9 22:22 87:4 98:21 175:13
sensitive 135:6
sensory 150:7
sent 208:3
sentence 57:22 124:17
september 173:6
sequelae 102:25
series 116:15 195:14
served 84:9
service 25:22 37:11 84:13,23 84:25 150:16 173:7 195:9
services 9:23,23 12:3 13:4 75:12 131:16,21 182:11,15 183:7 195:1 196:9 198:13 202:24 212:19 212:23 226:22
serving 97:17
set 13:12 44:12 59:22 178:24 196:25 201:20 202:15 209:19
sets 137:13 205:2

setting 34:10,11 39:3 129:23 144:17
seven 11:13,20 15:18 20:18 25:19 26:10 35:18 49:3,13 50:4 53:20 72:19 89:25,25 90:5,25 91:18 92:2 95:1 127:15,18 189:15 199:23 199:24 210:5 216:24 218:8
sever 150:24
several 36:1 39:9,15 42:24 89:1 150:3 152:3 184:25
severance 103:13
severe 103:6
shahnasarian 1:10 4:2,6,9 7:9 7:25 8:8 57:20 92:19 97:3 168:17 192:1 222:1 224:7 225:7 226:5 227:2,25
shahnasarian's 80:11
share 115:9
shareholder 117:16 121:13 206:15
shareholders 206:13
sheet 226:7,10 226:11,13 227:1
shelby 118:14
sheriff's 165:14
shift 119:21,24 137:13 160:17
short 40:25 123:17 124:13 124:15 131:8 157:7
shortened 82:13
shorter 108:1
shortly 208:7
shortness 150:7
shotguns 152:16
show 59:7 73:6 122:15 168:21 168:22
shown 191:16
shows 150:12 162:3 180:25 185:3,12 198:3 198:11 202:22 207:13
sic 70:2 161:8 210:4
sick 142:4
side 31:24,25 32:16 33:18,19 35:2 101:14 150:5 194:12
sided 54:10
sides 54:12
signature 224:12 225:21
signed 181:19 185:12 208:17 220:20
significant 71:5 71:10 133:23
signing 222:24 226:13
signs 56:13,22 57:3 70:10 71:14,22 126:2
similar 12:18 27:10 45:8 48:7 50:22 51:15 56:1 78:13 86:14 88:3,15 97:11 156:17 171:15 173:22 175:17 183:25 202:7 215:23 218:16
similarities 130:4 218:23
similarly 11:3
simply 64:7 85:11 96:7
simulator 102:14
sincerely 226:18
single 218:3,4,4
sir 8:18 9:25 11:6,23 14:4 19:15,24 20:25 27:5,13 32:2 34:17 40:23 41:13 42:20 43:9 44:3 45:17 53:21 59:4 63:12 73:15 74:25 78:2,8 79:3 84:25 87:21 88:25 89:12,19 90:15 97:10 99:2,21 101:25 102:23 105:9 108:17 109:15 111:3 116:2,6,23 117:13 118:9 122:3 125:15 128:15 129:6 131:2,19 137:18 158:12 159:23 160:7 160:24 169:14 171:13,21,25

183:15 184:14 184:24 189:13 190:5 194:19 195:18 198:6 202:16 203:4 204:21 208:4 217:4 218:14
sit 14:21 38:18 39:1,21 75:1 85:10 180:10 183:9 185:17 203:20 206:1 218:14
site 92:20
sits 217:18
sitting 100:14
situation 22:7 136:7 211:3
six 25:18 43:8 45:9 58:3 95:7 97:12 101:16 179:14 216:3
size 85:3 167:15
skill 151:14 196:16
skilled 107:8
skills 21:15 108:20 113:18 123:2 124:21 125:2 132:23 133:8 134:19 151:1,13,22,23 152:1,4,8 215:2 215:19
skip 214:12
sleep 128:7 174:25 175:12
sleeping 127:6 128:3
slowness 127:5
slurred 127:7
small 182:25 200:16 206:21
smell 98:21 175:13
smith 131:15
social 58:20 106:24 107:10 107:21 110:3,6 110:10 111:9 117:8
software 47:22 98:9,12 152:6
solely 61:23 62:3 155:21
solicit 182:5
solicitation 5:3 180:4,15 184:21 185:2 202:23
solid 86:25
somebody 17:24 68:12 106:2 115:4 154:13 163:16 182:9
someone's 21:19,25 27:17 81:15
sorry 49:9 92:14 122:24 154:12 155:16 160:24 187:17 199:16 207:20 207:22 209:1 209:17 213:19
sort 28:2 217:21
sorted 91:22
sorts 108:23 123:5
sound 6:8,9 180:11
sounds 140:8 145:9
source 12:14,25 13:1,1,1,25 90:17,21,24 91:7,10 93:23 94:21 219:10 220:9
sources 13:16 30:23 91:11 93:12 218:18
south 126:21
southern 128:16,20,24
span 117:25
sparks 4:22 84:20 149:11 149:16,22 150:2,4,14,22 151:23 153:3 156:9,14 164:18 215:5,6
sparks's 155:18
speak 14:6,23 15:8 16:20,24 17:16 27:6 98:21 136:20
speaker 6:6
speaking 22:12 48:17 141:6 176:3,12
special 99:10 128:20,23 129:2,7,11,15 129:20,22 130:10,18,22 131:1 133:11 133:15 134:2 134:20,22 135:1,19,21,25 136:8 137:14 138:9 142:12 142:12,15 143:2,10 144:16,18,20 146:7,16 148:15
specialist 8:16 9:15 60:12,14 60:18 62:15 77:6 78:21 181:5

specialists 9:10 15:14 16:21,25 17:6,17 29:23 29:24 30:6 34:13 216:9
specialize 47:12
specialized 28:2 143:11
specializes 61:10
specialty 24:22 25:1 35:6 107:23 173:9
species 152:19
specific 18:6 29:2,25 30:13 58:12 92:5 136:11,16 152:5 178:14 205:1
specifically 20:19 24:10 27:7 56:11 89:25 112:16 153:10 154:10 168:12 172:12 219:12
specifics 136:15
specified 46:18 91:7 206:9
specifies 92:24 143:21 192:2
specifying 211:6
speculate 98:1
speculating 97:25
speech 60:6 98:8,12 127:7 128:3 161:13
speeches 178:10
speedy 101:1
spiel 41:3
spontaneous 137:3
spouse 173:14
spur 142:3
squat 160:10
sr 4:10 45:1,3 73:1
srb 25:22
src 195:24
st 2:18
stability 83:23 83:24 85:22
stable 147:12
stadler 88:12 88:13 96:17 170:13 210:4 219:20
staff 23:8 25:7 25:11,14,18 198:20,21,23 198:25 199:2 213:17 216:17 217:1,20,21,24 218:2
staggering 98:19
stairs 160:19
stamina 112:2
stamp 68:12 71:11
stamped 184:9 202:18,19 203:11 207:17 208:1
stand 148:3 160:13 215:5
standard 30:20 31:4 51:25 52:4 52:7 68:11 205:10,16 213:5
standardized 22:6 29:1,4 46:13 47:8
standards 31:11,19
standpoint 171:7
start 44:11 101:18
started 20:23 55:3 109:25 186:3 187:2 221:1
starting 26:24 109:13 118:5 218:9
state 1:18 7:10 81:18 82:4 89:20 99:17 108:8 109:2 116:18 120:5,7 125:22 126:23 143:10 145:1 148:14 151:22 155:18 156:13 188:18 224:3 224:14 225:3
stated 103:11 106:20 126:10 132:23 133:6 137:8 141:18 171:1
statement 5:5 56:17,19 119:13 120:14 126:5 141:7,25 143:5 146:10 147:5,6 148:18 158:23 188:21 193:18 194:21 195:6 203:14 204:4,15,24 205:1 212:17 221:6
statements 72:21 114:2 212:19
states 1:1 7:16 7:18 10:10 35:2 47:3,12 69:13

84:7,14 85:5 98:16 99:4 100:7 102:24 103:25 108:16 108:25 112:11 112:22 115:24 118:19 119:3 119:18 120:10 127:13 131:15 132:7,11 150:9 150:18 152:10 152:16 173:25 174:15 175:6 175:19 196:2,8 196:14,23 197:4,6,19 221:7,23
statewide 176:4 176:12
stating 214:18
stationary 152:10
stationed 57:15 57:16,16
statistical 105:20
statute 51:17
stay 148:11
stays 114:19
steady 86:25 111:23 142:2,5
stenographer 8:4 19:4 44:3 125:8 149:2,6,9 158:12 178:19 193:23 201:13 201:17 222:5,8 222:11,19,23
stenographer's 6:14
stenographic 1:17 225:10
stenographic... 225:6
step 30:19 51:14,14 210:2
steps 13:13 15:25 26:24 54:19 219:4
steve 137:21
sticking 35:4
stiff 128:2
stiffness 127:10
stimulation 11:9
stimulator 73:24 74:4 76:7 76:22 77:4,18 137:25
stoop 160:10
stop 87:25
stopped 69:24 126:20 138:5 139:8 166:9
strausner 38:19 38:22
streamline 218:1
street 2:9 3:6 226:22
stress 127:24
stricken 50:25 51:2
strong 65:17
structure 48:3 183:22 184:1
structured 48:6 171:17
struggling 123:22
student 130:2 136:8 142:18 143:17 146:15
student's 143:12
students 133:4 135:18 136:1 137:6,9,11,14 143:1 146:12
studies 128:23
stuff 179:14
stumbling 150:2
sub 141:19
subject 11:15 38:22
subjective 83:10,12
submit 187:12 210:10 211:9 212:19
submits 183:23
submitting 213:22
subpoena 199:4
subscribe 93:2
subsequent 103:21 150:3 211:24
subspecialties 21:5
subspecialty 21:12
substance 160:23
substantial 110:11
substitute 139:13 140:10 140:15 141:9 141:18,22 142:4 144:15 144:16,17,20 144:23 147:3
subsumed 216:11,13
successful 112:25 113:2
suffer 152:25 153:21
suffered 78:10
suffering 98:19 172:3
suffers 152:23 153:18 161:13

suffice 27:12
suggest 105:21
suite 1:15 2:14 2:18 226:22
summary 69:6 69:8,13 72:8 73:12 78:16 170:18 174:3
summer 23:11 118:24
supervise 23:4
supervised 46:18
supervising 152:17
supervisor 113:11
supervisory 159:15
supplement 76:3 172:15 212:4
supplemental 45:4 104:8
supplied 26:1
supplies 220:17
support 25:7,11 68:4 122:8 145:7 195:10 196:10 216:17 217:1
supported 65:12
supportive 65:17
sure 37:18 44:10 49:10 67:25 76:5 78:5 80:14,16 83:21 84:3 85:19 87:6 94:23 100:21 120:23 135:24 145:8 147:5 162:6,20,23,25 165:19 177:4,4 179:12 200:2 204:8 209:9
surgeons 108:1
surgery 11:8,10 162:23
surprise 146:18
surprised 145:2 145:12,16 146:4 147:7,14 148:2
surprising 147:10
surrender 98:24
survey 127:3
suspected 174:19
suspecting 149:21
suspicious 167:17
sustainable 144:23 145:25 146:3,20 147:4
sustained 142:6
swallowing 60:7 127:7 128:5
swap 146:11
swear 7:12
switch 125:5
switching 39:2
sworn 8:2 224:8
symptoms 30:9 30:10 56:13,22 57:4 70:11 71:14,22 82:10 83:2 89:16 103:18 104:1 105:3,5 126:2 126:22 150:1 155:25 161:14 174:20 175:16
syncopal 60:8
synonymous 84:3
synthesized 30:24
system 113:1 209:7
systems 155:24

t

t 1:8 38:19
table 159:20
take 13:7 26:24 40:13,18,19,21 40:22,25 46:1 48:24 66:6 75:19 78:4,5 79:4 82:17 83:1 83:15 115:5,13 120:18 140:2 168:13 188:1 191:23 192:12 193:1,4 212:7 214:15 217:14 221:16
taken 1:11 39:23 97:6 200:8 226:7
takes 48:13
talents 134:20
talk 27:6 40:20 157:11
talked 116:3 144:14 151:11
talking 34:3 80:1,4 115:7 133:19 157:12 162:10 165:4 207:3
tampa 1:16 7:7 22:25 36:10
tarawa 126:14 169:19

tariff 10:8,9,10
tariffs 10:3,5 10:17 11:15 12:2
task 131:10 137:13 167:22 217:23
tasking 114:8
tasks 113:6 161:15
taught 136:17 137:6,10
tax 27:22
taxing 82:8 89:4
taxonomy 157:5
teach 148:24
teacher 129:2 129:12,15,21 129:21 130:17 130:25 134:2 134:21,21 135:15,20,21 136:4,8 138:10 139:13 140:10 140:15 141:18 141:22 142:3,5 142:22 143:3 143:11 144:15 144:16,17,20 146:7,17 211:2
teacher's 143:8
teachers 133:3 135:1,17 142:25 146:13 148:15
teaching 126:20 129:21 133:11 134:1 135:22 136:2 136:12
tear 60:2
technical 178:2 178:15
tedious 217:23
teeth 127:8,25
telephone 102:10
television 132:7
tell 8:7 25:6 33:17 38:17,18 38:25 40:19 41:8,12 44:14 54:5 57:24 58:4 58:7 70:22 76:19 84:14 106:8 113:3,10 134:24 158:15 180:12 216:12
telling 95:11
tells 113:10
temperatures 127:25
template 47:22 47:23,25 48:2 49:16
templated 48:22 49:6,10 49:19
templating 48:12
ten 32:3 41:15 43:13,15 186:10,11 214:1 221:12
tend 108:1 135:25 137:13
tends 136:9 178:3
tennessee 99:10 117:8
tennessee's 98:24
tens 15:11 112:14 217:8
term 120:24 131:8,9 157:4
terminal 114:22
terminated 98:18
terms 9:9,15 20:21 21:14 26:24 30:9 32:5 48:16 52:7 53:25 56:2 72:14 79:7 87:2 100:4,6 107:15 113:5 130:20 134:1 143:6 154:24 195:10 211:5,16 216:23
terrace 126:14 169:19
terrible 143:7
terrific 120:18 120:23
test 34:8
testified 8:2 40:5 82:6 89:2 127:1 170:21 173:14 192:19
testify 52:15 191:6 198:24 199:2
testifying 22:23 39:25
testimonial 144:25
testimony 6:7 16:16 28:3 33:9 44:22 50:19,20 50:24 51:4,19 52:1,4,14 53:2 88:3 98:2,10 104:10,16 116:20 117:1 125:18 126:20 139:18 146:1 191:8 192:21 215:4 222:3
testing 22:6 34:4 46:13

72:24
tests 22:8 29:1 29:4 47:8
tetrahedron 54:10,13,16
text 98:8,12
thank 8:4 40:17 41:19 42:13 115:2 125:9 194:4 201:17 226:15
thanking 112:25
theoretically 81:4
theory 53:9
therapies 220:4 220:6
thing 25:8 44:11 145:21 147:21 220:1 220:10
things 10:17,25 11:8 21:24 29:16 30:9 47:1 51:7 68:22 84:1 86:14,21 124:22 135:4 143:7 147:20 148:12 153:17 157:18 163:14 186:13 188:19 202:3 215:2 218:16
think 18:25 20:8 26:20 33:21 34:17 37:20 40:25 42:23 57:6,22 70:13 74:14,18 75:6,20 77:9,20 84:17 86:19 87:9 101:5 107:2 114:25 115:6,12 122:3 141:7 147:6 163:19 165:15 176:7,16,25 177:5 207:13 215:11,12 216:1,19 218:16,23 220:4,12 221:16
thinking 38:21 48:17
third 76:18 198:4
thirteen 37:15 37:16
thornburgh 112:13 116:1
thought 94:12 100:13 101:1 101:10 121:11 188:3
thousand 39:24 40:3
thousands 15:11 101:13 112:14,15 152:21 207:4 217:8
three 25:11 29:11 43:8 50:15 52:20 53:17 54:10 73:8 159:19 176:3,9,10 184:5,15
throwing 116:7
time 1:13 7:5 9:21 14:11 19:25 20:23 24:2 29:10 30:15 34:6 36:23,23 40:14 40:18 45:16 46:4,19 50:24 51:11 56:12,13 56:20,21 57:3 59:15 66:22 70:1 74:6,12,17 74:23 75:15,16 75:20 77:19 78:5 79:7 81:5 81:7 84:5 90:10 90:13 99:3,5 103:15 105:1 106:20 112:12 117:25 119:9 124:14,15 129:10 134:25 137:15 138:6,6 138:11 139:8 139:12 140:3 140:16 151:18 156:6 161:7,21 165:23,25 166:6,8,19 167:8,21,24 168:1,8,24 171:5 173:21 176:18 177:9 180:11 187:2 187:13 189:2 200:11 212:7 213:21 214:15 215:8,11,14,15 215:25,25 217:21 222:3
timeline 192:3
times 5:8 8:13 30:11 32:5 33:18 35:6 39:22 40:1 52:18,20,21 82:11 89:17 99:24 100:3 102:1 139:16 140:2,2,3 142:17 151:12 202:4
title 38:25,25 73:9 181:13 200:13,14

titles 38:18 39:16 181:15 206:22
today 9:19 11:14 15:19 39:21 42:22 71:3,4 143:8 151:12 183:9 199:24 206:1 209:3 215:11
today's 7:4 222:2
together 9:8 17:16 20:12 42:9 68:1 94:22 180:2
told 76:10 85:20 111:14 131:11 132:21 135:9 138:21 140:9 141:12 144:22 161:21 183:2 210:18
tom 204:1
tomorrow 24:15 200:11
took 17:9 76:11 82:25 84:6 219:4
tools 37:25 38:11 39:6 152:13
top 45:20 79:19 89:21 90:5 97:15 102:12 125:17 131:3 169:16 173:4 180:3 184:8,10 185:3 194:20 194:24 202:22
topic 176:14
tort 205:24
torts 3:6
total 97:16 160:5 169:18 183:10 221:12
totally 110:7 166:4
towards 84:15
towel 194:8
trach 134:10
track 186:10
tracks 186:7
tracy 175:1
trade 107:8
traditional 106:14,21,22 107:9 130:9,17 135:14
traditionally 10:21
trail 6:6
train 23:4
trained 21:4
training 61:12 132:22 151:15 159:16 164:25
trajectory 83:25 85:24
trans 209:25
transcribed 190:22 191:3
transcript 221:24 222:6 225:8,9 226:6,9 226:12 227:24
transferable 21:15 108:20 113:18 123:2 124:21 125:1 151:1,13,14,21 151:23 152:1 215:19
transferred 151:18
transition 151:2
transmit 209:12
transmitted 17:11 30:25 217:11
transplant 170:22,24 171:6
transportation 131:22 158:19 159:12,13,14 159:15 162:11
travel 161:6,7
traveling 152:21
treated 102:18
treaters 14:13 15:9,13
treating 14:7 14:24 16:17 28:4 32:21 33:7 62:7,18 63:19 64:8 67:8,16,18 87:22 88:2,6,15 170:20 174:17 210:24
treatment 8:25 9:9 16:16 28:6 28:7 29:17 52:8 59:12,13 61:25 71:12 211:6
tremor 60:19 150:1 174:18
tremors 60:5 60:19,23 103:18 104:1,6 127:5,24 150:5 152:23,25 153:1,3,11,17 153:18,19,21 154:5,8 161:14 163:9 175:10
trial 99:20,20 100:9,22 101:13 108:4 111:18,20 114:5 118:12

122:11 123:10 177:19
trials 23:21 39:25 111:10 113:15 118:13
triangle 54:10
tricare 12:21
tried 58:9 111:13
trouble 60:7 128:6 131:9 155:5 175:11
truck 69:25
trucks 165:12
true 8:10,15 9:13,16 49:7 68:6 81:2 86:6 99:25 113:3 120:17,19 121:6 123:23 129:8 135:14 138:5 139:15 142:19,24 144:3,6,9,12 153:4 160:8 164:17 168:1 189:11 196:8 225:9 227:24
try 26:20 34:18 62:20 212:10
trying 64:11 85:15 95:8 154:24
tsa 4:23 152:24 153:16,20 154:10,13,18 156:20,25 157:11,20,24 215:7
tso 160:2 161:15 163:16
tube 134:10
tubes 133:20
tubin 3:4 7:15 7:15 11:17 14:25 16:2 20:10 40:24 41:4,20 75:20 83:18 84:16 85:18 87:5 95:16 100:5,17 101:4 110:18 112:6 113:7 114:13,21 115:15 116:10 116:24 120:20 121:18 122:2 123:24 126:4 133:17 134:3 138:17 139:23 140:5 142:20 143:14 148:21 154:25 156:23 158:2 161:16 162:5,19 163:18 164:11 168:25 169:3 179:11,13 186:15,19 188:7,17 191:25 193:6 193:10,15,17 193:21 194:3,5 194:8,14 202:9 203:23,25 204:6,10 206:6 207:20,23 210:12 211:13 213:16 217:2 221:6,23 222:16,22
tuesday 7:4
tukes 4:25 18:18 169:2,12 169:23 170:20 171:22 172:16
turned 74:5,7 74:12,14,19,23 75:2,7
turner 3:5
twenty 23:17 186:10
twice 187:21 213:3
two 24:13 25:10 25:14 30:2 37:13 43:11 45:18,20 46:22 46:23 50:15 53:17 62:8 88:6 89:21 90:23 91:11,17 93:1 94:4 107:21 124:21 139:16 140:2,2 145:9 153:15 158:22 172:8 181:24 218:19
type 9:22 47:22 51:11 54:20 58:22 59:11 62:25 108:10 134:12 145:22 147:21 165:5,7 172:15 184:22 205:9 220:5
typed 130:15 190:7
types 22:4 28:2 29:16 30:22 36:4 47:8 50:22 85:24 106:12 167:25
typewriter 145:22
typewritten 189:17
typical 51:4 152:22
typically 28:24 51:4 94:20 106:23,25 107:1 187:20 187:22 191:7 191:14,23

205:20
typing 25:12 144:21,23 147:3
typist 139:3 145:24
typo 220:5

u

u 38:19
u.s. 3:5
uh 6:8,9
ultimately 67:1 109:21 119:25 179:25 209:25
um 6:8,9,9 63:16 64:14 191:18 209:20
unable 21:25 87:14 132:16 133:21,21 146:10
unaware 87:12
uncommon 136:3
under 10:20,22 12:5,8 16:7 38:2 46:17 49:13 51:17,18 53:5 153:22 159:1 160:8 169:22 170:11 194:23 196:13 197:6 201:6 203:13 210:13 212:17,17 221:9,10,24
underlying 65:6 78:24 159:10
underneath 91:6 198:15
undersigned 224:6
understand 36:2 41:7,8 64:14 67:24 80:14 84:8,10 94:1 99:12 110:23 113:17 116:13 123:7 142:16 143:1 144:15 145:8 145:19 154:11 162:6,20 163:1 167:19 171:21 174:9 179:3 186:6,14 187:6 188:12 213:24 213:25 218:25
understandable 178:17
understanding 10:8,11 56:23 62:20 65:19 70:6 98:11 111:5 129:19 134:13 136:21 137:4 139:11 186:4 213:1
understood 75:15 142:9 144:19 186:12
undertake 217:23
undertaken 54:14 213:21
underwent 81:21 102:13 170:3,7
unexcused 119:9
unfortunately 143:7
unit 198:12
united 1:1 7:16 7:18 10:10 35:2 84:6,13 85:5 99:4 100:7 112:11,22 115:24 152:10 152:16 221:7 221:23
universally 92:25
universities 176:20
university 38:20 128:17 128:20,24
unnecessary 62:10
unrelated 65:2 156:5
unsatisfactory 68:7
unskilled 157:6 164:24
unsteady 127:5
update 95:25 96:5,9
updated 95:7
upper 150:5
urinary 127:10
urination 60:9
urologist 87:22
usdoj.gov 3:8
use 21:7 22:5 47:23 48:1 49:22 50:8 67:7 67:8,9,13,13,18 72:5 79:25 91:15 92:7 108:19 120:24 121:2 123:1 125:1 127:25 132:16,17 138:14,21 139:12 145:22 152:4 182:17 184:1 191:7,10 191:11 205:23 215:2 218:9,21 226:7
used 16:9 30:23 53:9 91:23 92:7

92:25 94:4 98:8 136:20 146:3 164:1 178:1,1 205:22 218:18
uses 183:22 218:17,20
using 47:22 49:11,12 60:10 73:23 76:12,21 76:25 100:7 120:23 136:16 152:7,16 192:19
usual 172:22
usually 205:19
utilized 182:23 195:16 218:6
utilizing 93:25
utuc 81:19 87:15

v

v 1:8
va 168:9,15,18
vague 200:5
vaguely 180:6
valuation 38:1
value 11:19 12:8 140:18,22 141:13 142:9 142:10 151:16
values 92:10,13
variety 58:11
various 30:12 162:17 182:1
vehicles 152:11 152:12
verbal 204:6
verbally 98:10 100:23
verbatim 72:21
verify 161:7 220:10
veritext 1:14 7:3
veterans 13:5 150:15
viable 156:9,14 216:1
video 7:6 18:14 193:4
videographer 3:22 7:1,2 19:6 19:8 41:21,24 75:22,25 96:22 96:25 115:16 115:20 169:4,8 209:17,20 212:11,14 221:19,22 222:2
view 73:14
viewed 52:1
violate 222:15
violates 68:10
virtually 117:24 119:7
vis 15:11,11 151:15,15
visas 167:13
visibly 153:5
vision 128:7 156:7 161:13
visit 18:8
visited 125:19
visiting 132:6
vitae 4:6 19:16 19:17 44:19
vital 100:23
vocational 20:20 21:5,8,8 21:10,11,17,22 22:10,12 23:5 23:24 30:2 36:8 38:15,24 47:6 47:13 85:21 103:21 104:24 109:9 123:11 150:25 177:12 187:10 189:4 200:19
vocations 107:3
voice 127:7
voiding 128:6
voluntarily 155:20 166:1 215:10,24
voluntary 98:24 155:20
volunteered 84:13

w

wage 35:19 53:23
wages 22:14,15 80:12,19 105:16 124:12 171:20,20 174:10
waived 222:25
walgreens 13:21
walk 26:18,22 98:20 160:17
walked 115:4 221:13
walking 127:5
wallace 2:8,9
wallacegraha... 2:11
walter 170:13
want 13:25 15:23 27:6 40:12,16,18,20 40:21 57:25 63:17,25 67:24 68:2,4 72:5 75:19 76:2 79:18 85:12 94:5 98:1 106:9 107:2 115:8 141:15 171:6 193:17,19 204:8 221:16 221:18 222:15

wanted 36:1 96:16
wanting 87:2
washington 3:7
watch 77:17,18
water 1:5 7:7 82:12 127:2,12 226:3 227:4
way 15:6 20:2 26:20 27:10 32:14 33:2 40:10,13 42:10 45:8,8 48:4,7 53:2 57:4 60:13 60:15 66:10 67:1 68:8,9,13 68:14,17,23 72:12 78:13 96:4 97:10 147:6,6 168:17 171:15 182:5 188:23 190:7 191:12 195:19 199:23 203:10 207:16 213:11 213:13
wayne 4:12 77:25 79:5 93:15 95:24
ways 142:5 148:5
we've 19:11 42:15 116:3 151:11 169:10 200:3 204:13
weakness 127:6 128:2
weapons 152:16
wearing 74:1 76:24
website 36:20 36:22 37:1,4
weed 39:9 55:2
week 82:11 89:17 139:16 140:2,3,3 173:21 188:8
weeks 43:11 140:3
weight 127:16
welch 5:1 172:19 173:1 173:13,17,22 174:6,20,23 175:3,4,15,22
welch's 173:5 174:15,16
went 15:25 99:5 109:20 118:3 139:19 158:9 217:7,8
west 2:5
whatsoever 8:22 12:25 145:2,12 147:8 218:7
whitney 2:8
whoops 180:23
widely 94:2
wife 75:11,17 82:6,18 88:19 89:2 103:13 104:7,22 175:4 194:10
wife's 114:2
wilson 216:7
wisconsin 38:20
wish 227:5
wished 17:14
withdrawal 151:4
witness 4:2 7:12 8:1,3 11:18 15:3 16:9 19:10 22:19,23 24:1,8,9,11,14 26:9 27:8,14 41:16,19 42:13 50:10 76:1 78:2 84:17 85:19 87:6 95:17 100:6,18 101:5 110:19 112:7 113:9 114:14 114:22,25 115:22 116:11 117:13 122:3 123:25 126:5 133:18 134:4 138:18 139:24 142:21 143:15 148:22 149:4 155:1 156:24 161:17 162:6 162:20 163:19 164:12 186:23 195:2 196:9 202:10 206:7 217:3 221:14 222:21 224:9
witnesses 190:2 199:3,5
woman 147:11
word 16:9 39:11 49:11,22 50:3,4,9 60:19 72:5,6 98:3 136:20 146:3 152:5
wording 48:11 49:15 122:21 156:17
words 14:22 21:8 48:1 49:13 69:17 73:18 76:25 85:13 88:23 121:2 133:24 136:12 192:11
work 5:5 8:21 10:7,23 14:5 21:13,14,16 22:1,14,14,17

22:19 23:19,22
23:23,25 24:1
24:14 25:12
26:25 27:9
31:23 32:6,13
32:14,15 34:24
35:21 36:4,17
46:23 50:10,18
56:1 57:17
59:16 64:21
71:19,20 73:5,7
73:13 78:20
80:17,25 81:12
81:23 82:6,18
83:5,16,17,21
83:23 84:4,15
85:13,14,20,23
85:23,25 86:7
86:10,12,24,24
87:3,14 89:22
99:5,7 100:1,12
100:16 101:12
103:12,15
104:4,25 105:4
105:20,21
106:3,9,17
107:6,7 108:11
108:14 109:17
110:8 111:23
113:1,5 114:7,7
116:8 118:4,6
121:25 122:11
123:9,16 124:4
129:11,14
132:22 134:20
134:22 135:4,8
135:11,11
140:24 141:17
142:2,2,8
144:14 147:12
147:20 150:15
151:15 152:3
156:8,10,13,15
156:22 157:8
157:22,22
158:10 165:7
165:10 168:10
168:16,19
173:21,23
175:21 177:1
177:15 180:7
181:4 182:19
182:24 186:4
186:20 187:1,5
187:23 189:14
190:1 191:22
192:25 193:3
194:21 195:6
197:22 203:14
204:5,15,24
205:1,3,9 208:9
209:5 212:18
213:22,23
214:1,1,5,9,24
216:4,9,20,21
216:23,25
217:1,7,7,17
218:13 220:21
220:24
worked 25:3,4
25:7 27:18
35:15 81:5,24
99:9,10 106:2
117:2 119:21
120:11 214:21
216:16
worker 146:11
workers 173:14
working 20:23
35:14,23 80:10
81:6,7,10 82:7
87:24,25 88:8
88:19 89:3
109:5 110:25
111:6 132:17
138:5,9 139:8
141:15 142:1
145:16 151:17
165:24 166:9
166:10 197:25
215:16
worklife 82:13
105:7,12,14
106:5,14,15,21
106:22 107:9
107:15 108:1,7
122:6 151:6
workload
197:20
workplace 22:3
75:11 80:6
105:15 109:5
110:25 151:5
165:18,25
166:7 215:13
215:25
works 37:19
world 26:16
95:9,12 187:19
worse 71:6
150:5
worsened
127:24
worth 138:3
140:10 141:10
write 148:9
writer 93:23
writing 68:23
98:22 111:17
124:23 135:12
190:9
written 37:13
37:18,22 39:9
112:10 120:8
wrong 176:17
wrote 39:17
111:8 112:23
219:17
wwallace 2:11

x

x 28:10

y

yeah 41:2 64:3
95:5 104:16
112:5 122:17

129:17 145:10
145:10 153:6
162:9 165:22
168:25 176:22
177:7,14 185:6
185:10,24
186:19 200:24
202:9 203:24
207:24 215:18
215:20 216:19
218:25 219:22
222:17
year 35:11
76:10 90:9
114:20 126:13
132:6 137:16
145:4,14,21,23
years 11:1 23:2
32:3 40:6 51:24
54:23 62:8 71:5
99:15 101:12
106:9,15
107:21 117:2
124:21 127:3
135:2 138:6
146:25 147:13
149:25 165:17
165:20 170:23
171:3 176:3,9
176:10 200:3
214:23 215:12
215:13
yep 193:8,15
young 44:20
61:3,8,9,21,24
62:3 63:5,10,18
65:1,4,10,16
84:12 101:23
102:2,7 104:23
106:13 108:8
108:23 113:23
123:5 210:3
yvonne 4:25
169:12

z

zakaryan 216:6
zero 124:8
zoom 2:8,13,17
3:5 7:19,22
17:18,19,20,23
18:20 102:10
102:11 153:9

Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate. The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

DISCLAIMER: THE FOREGOING FEDERAL PROCEDURE RULES ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY. THE ABOVE RULES ARE CURRENT AS OF APRIL 1, 2019. PLEASE REFER TO THE APPLICABLE FEDERAL RULES OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.

VERITEXT LEGAL SOLUTIONS

COMPANY CERTIFICATE AND DISCLOSURE STATEMENT

Veritext Legal Solutions represents that the foregoing transcript is a true, correct and complete transcript of the colloquies, questions and answers as submitted by the court reporter. Veritext Legal Solutions further represents that the attached exhibits, if any, are true, correct and complete documents as submitted by the court reporter and/or attorneys in relation to this deposition and that the documents were processed in accordance with our litigation support and production standards.

Veritext Legal Solutions is committed to maintaining the confidentiality of client and witness information, in accordance with the regulations promulgated under the Health Insurance Portability and Accountability Act (HIPAA), as amended with respect to protected health information and the Gramm-Leach-Bliley Act, as amended, with respect to Personally Identifiable Information (PII). Physical transcripts and exhibits are managed under strict facility and personnel access controls. Electronic files of documents are stored in encrypted form and are transmitted in an encrypted

fashion to authenticated parties who are permitted to access the material. Our data is hosted in a Tier 4 SSAE 16 certified facility.

Veritext Legal Solutions complies with all federal and State regulations with respect to the provision of court reporting services, and maintains its neutrality and independence regardless of relationship or the financial outcome of any litigation. Veritext requires adherence to the foregoing professional and ethical standards from all of its subcontractors in their independent contractor agreements.

Inquiries about Veritext Legal Solutions' confidentiality and security policies and practices should be directed to Veritext's Client Services Associates indicated on the cover of this document or at www.veritext.com.

Exhibit 786

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF NORTH CAROLINA

- - - - -

IN RE: NO. 7:23-CV-00897

CAMP LEJEUNE WATER
LITIGATION

This Document Relates To:
ALL Cases

- - - - -

Tuesday, March 10, 2026

- - - - -

Oral Videotaped Deposition of CHAD STALLER, MBA, MAC, CVA, taken at The Center for Forensic Economic Studies, 30 Washington Avenue, Suite B2, Haddonfield, New Jersey, commencing at 9:12 a.m., by and before Robin L. Clark, Registered Professional Reporter and Notary Public in and for the State of New Jersey.

- - - - -

APPEARANCES:

DAVIS, BETHUNE & JONES, LLC
BY: TED RUZICKA, ESQ
1100 Main Street, #2930
Kansas City, Missouri 64105
816-421-1600
truzicka@dbjlaw.com
For the Plaintiffs

WEITZ & LUXENBERG
BY: BENJAMIN VanSLYKE, ESQ.
Fisher Building
3011 West Grand Boulevard
24th Floor
Detroit, Michigan 48202
313-800-4170
bvanslyke@weitzlaw.com
For the Plaintiffs

U.S. DEPARTMENT OF JUSTICE
BY: MICHAEL CROMWELL, ESQ.
JOSEPH B. TURNER, ESQ.
950 Pennsylvania Avenue NW
Washington, D.C. 20530
202-514-2000
michael.w.cromwell@usdoj.gov
joseph.b.turner@usdoj.gov
For the Defendant

ALSO PRESENT:
DAVID LANE, ESQ.

ZOOM APPEARANCES:

JENNA BUTLER, ESQ.

J.T. MALONE, ESQ.

LESLIE LaMACCHIA, ESQ.

- - - - -

I N D E X

WITNESS		PAGE
CHAD STALLER		
BY MR. CROMWELL:		9, 404
BY MR. RUZICKA:		396

E X H I B I T S

NUMBER	DESCRIPTION	MARKED
Staller Exhibit 1	Résumé and Testimony List	11
Exhibit 2	Notice of Deposition and Subpoena dated 1/16/2026	13
Exhibit 3	Notice of Deposition and Subpoena dated 2/18/2026	14
Exhibit 4	Plaintiff's Objections and Responses to Defendant's Notice of Videotaped Deposition of Chad Staller	16
Exhibit 5	Plaintiffs' Designation and Disclosure of Phase III Expert Witnesses	35
Exhibit 6	Plaintiffs' Designation and Disclosure of Phase III Expert Witnesses	36
Exhibit 7	Amsler Expert Report dated 10/29/25	44
Exhibit 8	Connard Expert Report dated 10/29/25	44
Exhibit 9	Dyer Expert Report dated 10/29/25	45
Exhibit 10	Gleesing Expert Report dated 10/29/25	45

Exhibit 11	Hill Expert Report dated 10/29/25	46
Exhibit 12	Howard Expert Report dated 10/29/25	46
Exhibit 13	Laramore Expert Report dated 10/29/25	46
Exhibit 14	McElhiney Expert Report dated 10/29/25	47
Exhibit 15	Mousser Expert Report dated 10/29/25	47
Exhibit 16	Peterson Expert Report dated 10/29/25	47
Exhibit 17	Rothchild Expert Report dated 10/29/25	48
Exhibit 18	Sparks Expert Report dated 10/29/25	48
Exhibit 19	Tukes Expert Report dated 10/29/25	48
Exhibit 20	Welch Expert Report dated 10/29/25	49
Exhibit 21	Household Services and Home Health Care Services Omnibus Report	50
Exhibit 22	Staller Rebuttal Report dated 1/30/26	51
Exhibit 23	Materials Considered Lists for bladder cancer for Plaintiffs Dyer and Laramore	53
Exhibit 24	Materials Considered Lists for kidney cancer for Plaintiffs Mousser, Tukes, and Howard	54

Exhibit 25	Materials Considered Lists for leukemia Plaintiffs Amsler, Connard, Gleesing, and Hill	55
Exhibit 26	Materials Considered Lists for Parkinson's disease for Plaintiffs McElhiney, Peterson, Rothchild, and Welch	55
Exhibit 27	Materials Considered List for Omnibus Report	56
Exhibit 28	Materials Considered List for Rebuttal Reports	56
Exhibit 29	First Supplemental Materials Considered List dated 2/5/26	57
Exhibit 30	Second Supplemental Materials Considered List dated 3/5/26	58
Exhibit 31	Collection of Retention Letters Bates-stamped PLG-EXPERT__ STALLER__ 0000000024 through 41	64
Exhibit 32	Collection of Invoices Bates PLG-EXPERT__STALLER__ 0000000042 through 91	69
Exhibit 33	Expert Report of Peter Rybolt dated 1/20/26	118
Exhibit 34	Damages Checklist/Injury/Adult for Amsler Bates PLG-EXPERT__STALLER__AMSLER __ 0000000001 to 11	200
Exhibit 35	Deposition Transcript of Allan Wayne Howard taken 2/16/24	311

Exhibit 36	Damages Checklist Injury/Adult for Laramore Bates 0000000001 to 11	319
Exhibit 37	Providence St. Mary Medical Center Record for Keller Bates 01501__KELLER__0000000143 to 152	330
Exhibit 38	Deposition Transcript of Deana Criswell taken 8/6/24	344
Exhibit 39	Deposition Transcript of David William Fancher dated 1/22/24	355
Exhibit 40	Disability Report Form SSA-3368, Bates labeled 01368__MCELHINEY__SSA__0000000034 through 39	361
Exhibit 41	Notification of Personnel Action Bates 00682__SPARKS__DHS__0000000003	388
Exhibit 42	Excerpt of Deposition of Richard Douglas Sparks taken 1/26/25	389

DEPOSITION SUPPORT INDEX

- - - - -

Direction to Witness Not to Answer

Page	Line
NONE	

Request for Production of Documents

Page	Line
23	6
26	4
77	3
91	6

Question Marked

Page	Line
NONE	

THE VIDEOGRAPHER: We are now on the record. My name is David Lane, a videographer for Golkow, a Veritext division. Today's date is March 10, 2026, and our time on the record is 9:12 a.m.

This video deposition is being held in Haddonfield, New Jersey, in the matter of Camp Lejeune Water Litigation. Our deponent today is Chad Staller.

Counsel, please introduce yourselves and state whom you represent.

MR. CROMWELL: Michael Cromwell on behalf of the DOJ.

MR. TURNER: Joseph Turner for the United States.

MR. RUZICKA: Ted Ruzicka with the Plaintiffs' Leadership Group.

MR. VanSLYKE: Ben VanSlyke with the Plaintiffs' Leadership Group.

THE VIDEOGRAPHER: Our court

reporter today is Robin Clark and will now swear in our witness.

- - - - -

CHAD STALLER, having been duly sworn, was examined and testified as follows:

- - - - -

BY MR. CROMWELL:

Q. Good morning, Mr. Staller. Would you please state your name?

A. Chad Lawrence, Lawrence is spelled L-A-W-R-E-N-C-E, Staller.

Q. Mr. Staller, my name is Michael Cromwell, I'm an attorney with the U.S. Department of Justice and you understand you're testifying here in the Camp Lejeune Water Litigation; is that correct?

A. Yes.

Q. Okay. And you have been deposed before; is that correct?

A. Yes.

Q. And you're familiar with the rules and procedures of depositions?

A. Yes.
Q. Okay. So just so that I'm clear, you've done very well, I'll be asking you questions, you'll be responding. I will do my best not to talk over you and let you complete your answers. I will ask that you let me complete my questions; is that fair?
A. Yes.
Q. Counsel, obviously, may object from time to time, but unless instructed otherwise, I'll ask that you answer my questions; is that fair?
A. Yes.
Q. If you don't understand a question, which, undoubtedly, I will ask some poor ones, please let me know. If you do answer the question, I'm going to assume you understood the question; is that fair?
A. It is.
Q. Is there any reason today, medical or otherwise, that you cannot hear, understand, or respond to my questions today?

A. No.
Q. And you understand you're testifying under oath which is the same as testifying in front of a court?
A. Yes.
Q. Okay. You indicated before that you have been deposed before; is that correct?
A. Yes.
Q. I'm going to go ahead and enter Exhibit 1. I'll let you mark that first.

- - - - -

(Résumé and Testimony List marked Staller Exhibit 1 for identification.)

- - - - -

BY MR. CROMWELL:
Q. Mr. Staller, this is simply a copy of your résumé and testimony list that you have produced in this case; is that correct?
A. Yes.
Q. Okay. And according to your

testimony list, you last gave deposition testimony in October of 2025; is that right?

A. No.

Q. When is the last time you gave -- well, let me ask you this. How many times have you testified since October of 2025?

A. I would approximate 20 to 30 times.

Q. Were those all depositions?

A. No.

Q. Okay. How many of those were depositions?

A. Probably half, so if we went with the estimate of 30, which I think there was more than 20, so as an approximation 30, 15, I would approximate, were depositions, 15 would have been trials.

Q. Okay. When was the last time you testified under oath?

A. The week of February -- the last week of February.

Q. Okay. Mr. Staller, just based looking at your testimony list, is it correct that you have been deposed over 100 times in the last two years?

A. I haven't totaled up my testimony list, I wouldn't disagree with that estimate.

Q. Okay. All right. And since May of 2018, you have given testimony in depositions 400 times; is that correct?

A. I haven't totaled up but I wouldn't disagree with that estimate.

Q. Okay. You are testifying today as a result of a Notice of Deposition and subpoena; is that correct?

A. Yes.

Q. Okay. And you would have received two versions. I'm going to mark both just for the record.

A. Thank you.

- - - - -

(Notice of Deposition and Subpoena dated 1/16/2026 marked Staller Exhibit 2 for

identification.)

- - - - -

BY MR. CROMWELL:

Q. The first one is dated January 16, 2016 [sic]; is that correct?

A. Yes.

Q. The second one, which we'll mark as Exhibit 3. The second one is dated February 18, 2018, [sic]; is that correct?

A. Yes.

- - - - -

(Notice of Deposition and Subpoena dated 2/18/2026 marked Staller Exhibit 3 for identification.)

- - - - -

BY MR. CROMWELL:

Q. Did you review both of these --

A. Yes.

Q. -- documents before? And did you review the various requests for documents contained within each of these subpoenas?

A. Yes.
Q. And it's my understanding you provided documents that were responsive to the requests in these subpoenas; is that correct?
A. Prior to today, yes.
Q. In general, you produced retention letters and invoices; is that correct?
A. Yes.
Q. Are you aware of any documents that are responsive to the document requests that were not produced?
A. No.
Q. Are you aware of any documents that were withheld because they were attorney-client or work product documents?
A. No, I don't believe any documents were withheld for that reason.
Q. Okay. I'm going to go ahead and enter the Plaintiff's Objections and Responses and mark this as Exhibit 4.

- - - - -

(Plaintiff's Objections and Responses to Defendant's Notice of Videotaped Deposition of Chad Staller marked Staller Exhibit 4 for identification.)

- - - - -

BY MR. CROMWELL:

Q. Mr. Staller, these are Plaintiff's Objections and Responses to Defendant's Notice of Videotaped Deposition of Chad Staller; is that correct?

A. Yes.

Q. And just for clarification, these, and for the completeness of the record, these objections and responses were originally served in response to Exhibit 2 dated -- these are dated February 3, 2026; is that right?

A. Yes.

Q. Okay. If the date was the only thing that changed on the amended notice, would you presume that the responses would be the same?

A. I have no reason to think

that aside from the date change that the substance would be different.

Q. Okay. Did you have any role in formulating these responses and objections?

A. Yes, I recall going through these with Plaintiff's counsel --

Q. Okay.

A. -- assisting in the responses.

Q. Did you approve the responses?

MR. RUZICKA: Object to the extent that that calls for any communications that were between you and counsel. To the extent you can answer with that stipulation, go ahead and respond.

THE WITNESS: I mean, I'm not -- approve, I know I discussed the content, I don't know if I saw the final iteration and quote, unquote, approved it, as if someone would approve a piece of artwork or

something of that nature, but I remember discussing the responses.

BY MR. CROMWELL:

Q. Understood. Do you --

THE VIDEOGRAPHER: Someone is beeping.

THE WITNESS: Is it beeping now?

THE VIDEOGRAPHER: I don't know, I was hearing a phone the going off, I wasn't sure who it was.

THE WITNESS: Do you hear it now?

THE VIDEOGRAPHER: Not right now, I'll tell you if it comes up. It's, like, alerts.

THE WITNESS: I think this is on mute.

MR. RUZICKA: I'm not hearing anything.

BY MR. CROMWELL:

Q. Make sure we keep that on the record. Mr. Staller, do you have any Excel

files or documents that contain formulas or calculations that you used to arrive at your opinions in these cases?

A. Yes.

Q. Do you know if those documents were produced?

A. Not the underlying Excel. I know they weren't produced.

Q. But they do exist?

A. Yes.

Q. Okay. Did you prepare an Excel for each of the cases in which you are offering an opinion?

A. Yes.

Q. Okay. Mr. Staller, if you look at request number four, which is on page 7 and this is the responses, Plaintiff's responses on Exhibit 4 and this asks specifically, "For any and all notes, memos, calculations, tables, graphs, charts, and other similar documents you have created in connection with these Camp Lejeune water contamination cases;" is that correct?

A. Yes.
Q. I'll let you get to that section, it's on page 7.
A. Of the request?
Q. No, sorry on Exhibit 4, these are the objections and responses to the requests. And in response to request number four, Plaintiffs stated that, "Chad Staller has made a reasonable and diligent search of his records and does not have any documents responsive to request number four;" is that correct?
A. To number four?
Q. Yes.
A. I'm reading the response and I think it says, "PLG objects to request number 4 as overly broad, unduly burdensome in that it seeks and any and all and on the grounds that it seeks materials that were prepared in anticipation of or for use in litigation, as such materials are protected from disclosure by the work product doctrine."
Q. Right. And, "Subject to and

without waiving the foregoing objections, Chad Staller has made a reasonable and diligent search of his records and does not have any documents responsive to request number 4;" is that correct?

A. It goes on to say that, yes.

Q. And you're indicating that there are Excel files that contain formulas for your calculations in these cases; is that correct?

A. Yes, so when I read this, I don't see a request for Excel files, but there are Excel files that have office macros that are proprietary in nature and I'm aware of federal court decisions that prevent the disclosure of proprietary data development, especially in the circuit of North Carolina.

Q. If you look at request number 5 and the objections that Plaintiffs prepared, this is the bottom of page 7, top of page 8. This also asks for any and all information, factual observations, tests, supporting data, calculations, et cetera,

in which made by or provided to you or which you have reviewed or relied upon in reaching any opinions with respect to matters relevant in this litigation, aside from information identified in your reports or your Materials Considered Lists; is that correct?

A. You're paraphrasing.

Q. I did not include videotapes, measurements, examinations, that's true, but --

A. Okay.

Q. -- but, generally speaking, is that what the request asks for?

A. It has a laundry list of requests in five, but some of the items noted in request 5 would be tests, supporting data, calculations, then it goes on with other requests.

Q. Right. And in response, it says, "Chad Staller has made a reasonable and diligent search of his records and does not have any documents responsive to request number 5;" is that right?

A. That's the response, yes.
Q. You would agree with me there are no similar objections in request number 5 that there were for request number 4?
A. There are none.
MR. CROMWELL: Okay. At this time, and on the record, I would like to make a request for the Excel files that were not produced that Mr. Staller has indicated exist that contain formulas. I think the parties in this litigation have generally reached agreement that those formulas are discoverable and have been produced to each party and so --
MR. RUZICKA: We can talk about this later, but my understanding, that this issue has been addressed with other counsel and that there's a dispute as to whether they should be discoverable especially in light of his testimony that they're proprietary

in nature, but we can talk about it after the deposition.

BY MR. CROMWELL:

Q. Okay. Just for the record, did you rely upon these Excel files in formulating your opinions in this case?

A. I don't know about the term, "relied upon," I use them and --

Q. Okay. Do they help -- sorry.

A. I was going to say just for the record, all my Excels are presented in my respective reports, so all the basis for the Excel calculations are set forth in the report in narrative. The Excel calculations are presented in the attached tables, that any of the three opposing economists could recreate my tables based upon the narrative and my output of the tables.

Q. But would you agree with me that the formulas themselves that are in your Excel files we're discussing are not similarly identified in your reports; is that correct?

A. No, they couldn't be -- well, I say I do net present value and then to any economist that has a certain meaning of a specific formula that's established for centuries, and then I give the respective inputs of those variables being inflationary or growth factor, the discount rate being the denominator, the number of periods are set forth in the report. For any of the other specific calculations, all of the basis are established in the specific paragraphs of the reports, but the specific, in an Excel, it would have to be like equals in a cell --

Q. Sure.

A. -- and then two plus two, that's not displayed as an illustration, true.

Q. Right. So just to be clear, the formulas themselves are not in your reports, even though the inputs may be?

A. The inputs, well, I would say the inputs are in narrative form, the output is in the actual Excel, but the

actual visualization of a cell, say, four where it might be two plus two is not be displayed with a cell seeing two plus two.

Q. We'll maintain our objection and request for those to be produced, obviously, we can discuss those at a later time.

Mr. Staller, what, if anything, did you do to prepare for today's deposition?

A. Got reacquainted with my files. To get reacquainted with my files, that would consist of reading my reports, reviewing the opposing defense economist reports, generally looking at the materials, there's too many files to reread with specificity all the substantive documents, but I did read my reports, defense reports.

I think it's just the notifications of the watch, but --

THE VIDEOGRAPHER: Are you able to silence that?

THE WITNESS: I think it is on

silence, I think, is there? I'm so sorry. I think it is. Here, let me hit this button. No, that doesn't do it. Oh, yeah, all these, sorry, oh my God.

MR. CROMWELL: We can go off the record for a second.

THE WITNESS: Sorry about that.

THE VIDEOGRAPHER: Off the record, 9:28 a.m.

- - - - -

(Discussion was held off the record.)

- - - - -

THE VIDEOGRAPHER: We're back on the record at 9:29 a.m.

BY MR. CROMWELL:

Q. Mr. Staller --

A. Sorry about that.

Q. -- it's okay, we were just discussing what you did to prepare for today's deposition. You indicated that you read your reports that you have prepared in this case?

A. Yes.
Q. You indicated that you reviewed defense expert reports that were produced in this case?
A. For the respective Plaintiffs, yes.
Q. Okay. Can you tell me the experts whose reports you were reviewing for the defense experts' reports you were reviewing?
A. For each of the -- it would have been Ms. Yount, Tosic and then there was the third economist, I don't recall the name right now.
Q. Do you recall the name Dr. Andrew Brod?
A. Yes.
Q. Was that one of the reports -- or were those the reports you were reviewing?
A. Yes.
Q. Okay. Were there any other defense expert reports you were reviewing?
A. No.

Q. Do you know if you identified any of defense expert reports in your materials considered lists?

A. I don't know.

Q. Prior to preparing for this deposition, had you ever reviewed their reports before?

A. Yes, I believe of Ms. Yount, I believe she had -- I think we had an initial version, then a supplemental version. So I believe I have seen her report, supplemental versions of her reports.

Q. When you say, "supplemental version," what are you referring to?

A. I believe there was an initial disclosure back in the summer or early fall and then there was an additional round of updated reports.

Q. Okay. Just for clarity of the record, are you referring to the reports that were produced by the United States in the spring of 2025 during the initial disclosures of damage expert

reports?

A. That would be the initial ones I'm referring to, yes.

Q. All right. There aren't -- there isn't some other report in between that you're referring to, just making sure?

A. No.

Q. Okay. Did you review your Excel files at all in preparing for this deposition?

A. No.

Q. Did you review any of the items or materials that you cite in your report or that you refer to in your materials considered lists?

A. Not in detail, no.

Q. Anything that wasn't in detail?

A. Some of the materials in Section 1 of my reports is typically documents relied upon. I might have perused some of the Plaintiffs' records in some of those Plaintiffs, but I can't say in detail on any of them.

Q. Did you review any of these documents with counsel during your -- first of all, did you meet with counsel for Plaintiffs in preparing for your deposition?

A. Yes.

Q. And when did you meet?

A. Last night.

Q. And for how long?

A. Two and a half to three hours approximately.

Q. Okay. Did you review any documents with counsel during your meetings?

A. It would have been discussion of my report, my reports, and then the corresponding defense economist reports.

Q. Have you had any communications with anyone other than Plaintiff's counsel to prepare for your deposition?

A. No.

Q. Did you discuss -- well, let me take a step back.

Did you have members or colleagues who were helping prepare your reports in these cases?

A. Yes.

Q. Can you tell me who those people were?

A. It would have been Adam Gilham, G-I-L-H-A-M, and then Stephen Dripps.

Q. Did you discuss this physician with either Mr. Gilham or Mr. Dripps?

A. Yesterday, I did speak to Mr. Gilham about these, yes.

Q. Okay. And what was the nature of that conversation?

A. More of the fact that it's going to be a long day of deposition on many Plaintiffs. I don't think anything of substance of our calculations or our conclusions.

Q. Okay. Just to clarify, did you discuss your opinions or the opinions you would be offering in this case with Mr.

Gilham?

A. Nothing specific, no.

Q. Okay. Have you ever had any communications with the individual Plaintiffs in the Camp Lejeune litigation?

A. No.

Q. Have you ever had any communication with the individual Plaintiff's treating physicians?

A. No.

Q. When did you first become aware of the Camp Lejeune litigation?

A. I don't have the retention letter in front of me. It might have been winter '24, I believe, probably initial contact was sometime in the winter of '24.

Q. Okay. When you were initially contacted for these cases, was that the first time you learned about Camp Lejeune litigation?

A. No.

Q. When did you first learn about Camp Lejeune Water Litigation?

A. I have been seeing

commercials on it on TV since, like, the early 2000s. I don't know, just as a casual person in the marketplace, I know it is on, I think lawyers were advertising for issues related to it for many years in between sporting events or Price is Right.

Q. Prior to being engaged by Plaintiffs in these cases, had you ever been sought or did anyone ever reach out to you to work on any kind of litigation involving Camp Lejeune water?

A. I don't believe so.

Q. Okay. Mr. Staller, you understand you were named by Plaintiffs in Camp Lejeune Justice Act Litigation as an expert witness, correct?

A. Yes.

Q. And you were named as a retained expert to provide opinions on behalf of Plaintiffs with kidney cancer, bladder cancer, NHL or non-Hodgkin's lymphoma, leukemia, and Parkinson's; is that correct?

A. Yes.

Q. And you were originally disclosed in February of 2025, does that sound right?

A. That sounds right. I'm going to go ahead and enter Exhibit 5.

- - - - -

(Plaintiffs' Designation and Disclosure of Phase III Expert Witnesses marked Staller Exhibit 5 for identification.)

- - - - -

BY MR. CROMWELL:

Q. And just for the record, Exhibit 5 is "Plaintiffs' Designation and Disclosure of Phase III Expert Witnesses," and this is dated February 7, 2025; is that right?

A. Yes.

Q. And this has you listed as an expert in each of the diseases except for non-Hodgkin's lymphoma; is that right?

A. Yes, that's correct.

Q. So in February 2025, you were not, at the time, offering any opinions

with any Plaintiffs that were claiming non-Hodgkin's lymphoma from Camp Lejeune water; is that correct?

A. At that time, yes.

Q. Okay. I'm going to go ahead and introduce Exhibit 6, this is, "Plaintiffs' Designation and Disclosure of Phase III Damage and Offset Expert Witnesses." And this is dated October 29, 2025.

- - - - -

(Plaintiffs' Designation and Disclosure of Phase III Expert Witnesses marked Staller Exhibit 6 for identification.)

- - - - -

BY MR. CROMWELL:

Q. Mr. Staller, in the October 2025 disclosure, you were named as an expert in each of the five diseases listed there; is that correct?

A. Yes.

Q. Are you familiar with each of the 25 what we call Track 1 -- first of

all, are you familiar with the term Track 1 Plaintiffs?

A. No.

Q. Okay. Do you recall how many individual Plaintiffs you were originally retained to review in these cases?

A. No.

Q. Okay. Do you know who the 25 trial Plaintiffs are in this case?

A. I'm reading the caption, I imagine it's them, but I don't know if that's inclusive or if there has been changes, but just from the caption, it appears to be around 25 names listed there.

Q. Okay. Would you agree with me just based off the number of reports, you are not offering an expert opinion in each of the Track 1 Plaintiffs cases?

A. Correct.

Q. Am I correct that you are offering an expert opinion in 19 Track 1 cases; is that correct?

A. Yes.

Q. And this includes Plaintiffs

Amsler, Connard, Carter, Criswell, Davis, Dyer, Fancher, Gleesing, Hill, Howard, Keller, Laramore, McElhiney, Mousser, Peterson, Rothchild, Sparks, Tukes, and Welch; is that correct?

A. Yes.

Q. Any that I have not listed or left out?

A. Not that I am aware of.

Q. Okay. Just to be clear, you are not offering expert report or opinions for Mr. Mark Cagiano; is that correct?

A. True.

Q. And you are not offering any expert report or opinions for Mr. David Downs; is that correct?

A. True.

Q. You are not offering an expert report or opinions for Mr. Robert Kidd; is that correct?

A. True.

Q. Okay. What information, if anything, did you receive between your initial disclosure in February 2025 and

your subsequent disclosure in October of 2025?

MR. RUZICKA: I'm going to object just to the extent it calls for any communications between you and counsel. With that stipulation, you can answer.

THE WITNESS: Documents received, if your question is documents received between February of '25 and October of '25?

BY MR. CROMWELL:

Q. Yes, we'll start there.

A. A significant amount of documents, specific documents for the Plaintiffs I was working on, which would be deposition testimony for life care plans for some of them, wage records for some of them, medical records, medical billing records, damages, assessment forms, other discovery, I can't recall for each of the Plaintiffs in here, but, basically, I would describe it as relevant case file materials for each of the Plaintiffs I was tasked

with developing economic loss models for.

Q. Okay. You indicated damages forms. You received all the amended damages forms for each of the Plaintiffs you're offering testimony for?

A. Yes.

Q. You also indicated medical records; is that correct?

A. Yes.

Q. What role do the medical records have in your opinions in this case?

A. More for general context of, I'm not a physician, obviously, so it would give me context either sometimes those records were relied upon or referenced by Michael Fryar, the life care planner, that prepared life care plan reports for some of the Plaintiffs. Other medical records that did not have life care plans, just give me background information, kind of how the Plaintiff might be doing, just learn about the Plaintiff in addition to learning about them from their deposition testimony.

Q. Okay. Fair to say you did

review individual Plaintiff's medical records as part of developing your opinions in this case?

A. Obviously not to form medical conclusions, but to learn about Plaintiffs, yes.

Q. Sure. You indicated that you reviewed life care testimony. Who -- whose testimony were you specifically referring to?

MR. RUZICKA: Objection, form. Go ahead. You can answer if you can.

THE WITNESS: I thought I testified of life care plans, not testimony.

MR. CROMWELL: Okay.

THE WITNESS: But I did read the life care plans of Michael Fryar.

BY MR. CROMWELL:

Q. Okay. Did you review the life care plans of Ms. Hairston?

A. I might have had those. I

think I did have those, yes.

Q. Okay. Did you review the life care plans of the United States experts, Dr. Shahnasarian or Ms. Navarro?

A. To my recollection, I thought Shahnasarian was a vocational expert. I didn't see a life care plan of Shahnasarian or Navarro.

Q. Does the distinction between Mr. -- or Dr. Shahnasarian being a vocational expert change whether you reviewed materials produced by him?

A. No.

Q. Okay. In October of -- or forgive me. In February 2025, you would agree with me, you did not prepare a report for, in the cases of Criswell, Tukes, Howard, Mousser, Davis, or Keller; is that correct?

A. True. In February of 2025, that's true.

Q. And since then you have now prepared reports for each of those individuals; is that right?

A. Yes.
Q. Is the reason you prepared reports now for those individuals based off new information that you received from them?
A. Since February of '25, correct, additional information was received that allowed for the calculation of certain damages, models for those Plaintiffs.
Q. And is it your testimony that you did not have that information prior to February 2025?
A. That would be my recollection.
Q. All right. Forgive me, this is just logistical, you have a lot of reports.
A. Yes, a lot of Plaintiffs to discuss.
Q. I am going to go ahead and enter these into the record and then eventually we'll talk about them.
A. Okay.

Q. So we'll go ahead, you prepared 14 Plaintiff-specific standalone reports; is that correct?

A. Yes.

Q. Okay. I'll go ahead and mark this as Exhibit 7 and this is your expert report from October 2025 in the Amsler case.

- - - - -

(Amsler Expert Report dated 10/29/25 marked Staller Exhibit 7 for identification.)

- - - - -

MR. CROMWELL: We will mark as Exhibit 8 your expert report from October 2025 in the Connard case.

- - - - -

(Connard Expert Report dated 10/29/25 marked Staller Exhibit 8 for identification.)

- - - - -

MR. CROMWELL: We will mark as Exhibit 10 your expert report from October 2025 in the Dyer case.

MR. RUZICKA: I'm sorry, did I just miss something? Did you say ten?

MR. CROMWELL: Yes.

MR. RUZICKA: It should be Exhibit 9, right.

THE WITNESS: It should be nine.

MR. CROMWELL: I apologize, nine, you are correct. That's my fault. Dyer's exhibit should be -- Exhibit number is number nine. Thank you for that.

MR. RUZICKA: Sure.

- - - - -

(Dyer Expert Report dated 10/29/25 marked Staller Exhibit 9 for identification.)

- - - - -

MR. CROMWELL: We'll mark as Exhibit 10 your October 2025 for Mr. Gleesing.

- - - - -

(Gleesing Expert Report

dated 10/29/25 marked Staller Exhibit 10 for identification.)

- - - - -

MR. CROMWELL: We'll mark as Exhibit 11 your October 2025 report for Mr. Hill.

- - - - -

(Hill Expert Report dated 10/29/25 marked Staller Exhibit 11 for identification.)

- - - - -

MR. CROMWELL: We'll mark your October 2025 report for Mr. Howard as Exhibit 12.

- - - - -

(Howard Expert Report dated 10/29/25 marked Staller Exhibit 12 for identification.)

- - - - -

MR. CROMWELL: We'll mark your October 2025 report for Mr. Laramore as Exhibit 13.

- - - - -

(Laramore Expert Report

dated 10/29/25 marked Staller Exhibit 13 for identification.)

- - - - -

MR. CROMWELL: We'll mark your October 2025 report for Mr. McElhiney as Exhibit 14.

- - - - -

(McElhiney Expert Report dated 10/29/25 marked Staller Exhibit 14 for identification.)

- - - - -

MR. CROMWELL: We'll mark your October 2025 report for Mr. Mousser as Exhibit 15.

- - - - -

(Mousser Expert Report dated 10/29/25 marked Staller Exhibit 15 for identification.)

- - - - -

MR. CROMWELL: We will mark your October 2025 report for Mr. Peterson as Exhibit 16.

- - - - -

(Peterson Expert Report

dated 10/29/25 marked Staller Exhibit 16 for identification.)

- - - - -

MR. CROMWELL: We will mark your October 2025 report for Ms. Rothchild as Exhibit 17.

- - - - -

(Rothchild Expert Report dated 10/29/25 marked Staller Exhibit 17 for identification.)

- - - - -

MR. CROMWELL: We will mark your October 2025 report for Mr. Sparks as Exhibit 18.

- - - - -

(Sparks Expert Report dated 10/29/25 marked Staller Exhibit 18 for identification.)

- - - - -

MR. CROMWELL: We will mark your October 2025 report for Ms. Tukes as Exhibit 19.

- - - - -

(Tukes Expert Report dated

10/29/25 marked Staller Exhibit 19 for identification.)

- - - - -

MR. CROMWELL: We will mark your October 2025 report for Mr. Welch as Exhibit 20.

- - - - -

(Welch Expert Report dated 10/29/25 marked Staller Exhibit 20 for identification.)

- - - - -

BY MR. CROMWELL:

Q. Thank you for your patience. Those would be the total 14 Plaintiff-specific reports that you prepared in these cases; is that correct?

A. Yes.

Q. Okay. You also prepared a combined an omnibus household and home health aide services report; is that correct?

A. Yes.

Q. We will mark that report as Exhibit 21.

- - - - -

(Household Services and Home Health Care Services Omnibus Report marked Staller Exhibit 21 for identification.)

- - - - -

BY MR. CROMWELL:

Q. And, Mr. Staller, in your omnibus report, is it okay if we just commonly refer to it as that?

A. I'll know what you're talking about, yes.

Q. Exhibit 21, in that report, you value past and future loss of household services incurred by Scott Keller, Ronald Carter, Jefferson Criswell, and Cometto Davis; is that correct?

A. Yes.

Q. And, additionally, you assess the value of past medical and related care services incurred by Scott Keller, Ronald Carter, and David Fancher; is that correct?

A. Yes.

Q. Is it accurate to say that

the opinions contained in the household report for Scott Keller, Ronald Carter, Jefferson Criswell, Davis, and Cametto Davis is all the total opinions that you hold for these Plaintiffs in these cases; is that correct?

A. For those Plaintiffs, correct.

Q. For instance, you do not have a separate report for those individuals; is that right?

A. True.

Q. Okay. You also prepared a single page rebuttal report; is that correct?

A. Yes.

Q. I'll go ahead and mark your rebuttal report as Exhibit 22.

- - - - -

(Staller Rebuttal Report dated 1/30/26 marked Staller Exhibit 22 for identification.)

- - - - -

BY MR. CROMWELL:

Q. All right. Mr. Staller, Exhibits 7 through 22 are the only reports you have created and are relying upon in the Camp Lejeune cases you're testifying for; is that correct?

A. Yes.

Q. As you sit here today, do you plan to offer any other reports in these cases?

A. Sitting here today, no.

Q. Do you have any intention of creating reports for any of the other cases?

A. I don't, no, not as I sit here today.

Q. Okay. Do these 16 reports set out the totality of and the scope of the opinions and testimony you plan to offer in these cases?

A. Yes.

Q. Are you planning to form any additional opinions about these cases?

A. To the -- as I sit here

today, no, but to the extent between now and trial if there's additional information presented to me that would require either modifying or updating my opinions for these Plaintiffs, I would be happy to do so. If defense economists issue new reports that need review and comment, I'll take a look at that information. But as I sit here today, this is the universe of what I would testify to as of today.

Q. Understood. Okay. Mr. Staller, you also provided various compositions of Materials Considered Lists for these cases; is that right?

A. Yes.

Q. And you divided these, we'll call them MCLs, by the Plaintiff's Track 1 disease; is that right?

A. Yes.

Q. You have an MCL for bladder cancer Plaintiffs Dyer and Laramore, that we will mark as Exhibit 23.

- - - - -

(Materials Considered Lists

for bladder cancer for Plaintiffs Dyer and Laramore marked Staller Exhibit 23 for identification.)

- - - - -

BY MR. CROMWELL:

Q. You have an MCL for kidney cancer Plaintiffs Mousser and Tukes and Howard that we will mark as Exhibit 24. I apologize, I have one copy of this, sorry. No, I lied.

- - - - -

(Materials Considered Lists for kidney cancer for Plaintiffs Mousser, Tukes, and Howard marked Staller Exhibit 24 for identification.)

- - - - -

THE WITNESS: You're not under oath.

BY MR. CROMWELL:

Q. Huh?

A. You're not oath.

Q. Not yet. Not yet anyways. All right. You have an MCL for leukemia

Plaintiffs Amsler, Connard, Gleesing and Bruce Hill that we will mark as Exhibit 25.

- - - - -

(Materials Considered Lists for leukemia Plaintiffs Amsler, Connard, Gleesing, and Hill marked Staller Exhibit 25 for identification.)

- - - - -

BY MR. CROMWELL:

Q. You have an MCL for Parkinson's disease Plaintiffs McElhiney, Peterson, Rothchild, and Welch and we will mark that as Exhibit 26.

- - - - -

(Materials Considered Lists for Parkinson's disease for Plaintiffs McElhiney, Peterson, Rothchild, and Welch marked Staller Exhibit 26 for identification.)

- - - - -

BY MR. CROMWELL:

Q. You also prepared an MCL for

your omnibus report; is that correct?
A. Yes.
Q. And we'll mark that as Exhibit 27.

- - - - -

(Materials Considered List for Omnibus Report marked Staller Exhibit 27 for identification.)

- - - - -

BY MR. CROMWELL:
Q. You have an MCL for rebuttal reports and we'll mark that as Exhibit 28. Almost through the hard part, I promise.

- - - - -

(Materials Considered List for Rebuttal Reports marked Staller Exhibit 28 for identification.)

- - - - -

BY MR. CROMWELL:
Q. You also provided a first supplemental MCL dated February 5, 2026; is that correct?
A. Yes.

Q. We will mark this as Exhibit 29.

- - - - -

(First Supplemental Materials Considered List dated 2/5/26 marked Staller Exhibit 29 for identification.)

- - - - -

BY MR. CROMWELL:

Q. For this MCL identified as Exhibit 29, this generally disclosed that you reviewed the expert report of Peter Rybolt dated January 20, 2026; is that right?

A. Yes.

Q. You reviewed his report; is that correct?

A. That's true, yes.

Q. Did your review of his report change any of your opinions in this case?

A. No.

Q. Was there any particular reason you reviewed his report?

MR. RUZICKA: I object to the

extent that it calls for any communications with counsel. Outside of that stipulation, you can answer, if you can.

THE WITNESS: Plaintiff's counsel said there was an additional expert that I -- they asked me to take a look at to read the report, so I read the report.

BY MR. CROMWELL:

Q. In your view, does his report have any relevance to the opinions you're offering in this case, these cases?

A. No.

Q. You also prepared a second supplemental MCL dated March 5, 2026; is that correct?

A. Yes.

Q. We will mark this as Exhibit 30.

- - - - -

(Second Supplemental Materials Considered List dated 3/5/26 marked Staller Exhibit 30

for identification.)

- - - - -

BY MR. CROMWELL:

Q. And this generally disclosed Mr. Michael Fryar's first amended therapies cost analysis table for Plaintiffs Terry Dyer and Richard Sparks; is that correct?

A. Yes.

Q. And you reviewed those tables; is that right?

A. Yes.

Q. Did the review of those tables change your opinions that you're offering in these cases?

A. They will, yes. I have a few cost change for these respective Plaintiffs, so that would necessitate me updating my present value of the future medical care for these two individuals.

Q. As you sit here today, do you know how it will change those calculations?

A. For Sparks, I believe, right, that was the adjustment for home health aide that, I believe, he had a 1,092 hours,

but that should really start in year three, it should be something less, so it would likely bring down the present value for Sparks.

For Mr. Dyer, I would have to look at that table again. I don't recall the number adjustment there off the top of my head.

Q. Okay. With regards to your opinion in Sparks, do you know exactly what the present value will be for home healthcare at this time?

A. No, not off the top of my head.

Q. Okay. When do you plan on formulating your opinions or updated opinions with regard to those two cases?

A. Today is the 10th, probably within the next two weeks.

Q. And will you be producing or providing updated expert reports in those two cases?

A. Yes, these changes would require updated reports, yes.

Q. Okay. Aside from these two reports, or these two issues in those reports, are there any other issues in those cases that you plan on updating your opinions in?

A. No, I think a prior question was, would I do updates or additional reports, with the life care plan cases, typically, I would make them prospective so at a time of a trial, so I should have clarified a prior answer that the life care plan cases should be updated or I'll probably update all of the reports for the passage of time when there's an actual trial in this matter to adjust for current inflation rates, current discount rates.

And also some of the life care plans, those should start prospectively at the time of trial, so I would eliminate elapsed past months as, you know, depending on when the trial occurs. So there would be updates to all the reports for passage of time. And then -- but no other reason for these two, it would

just be for these two data point changes and then the passage of time, so I would probably use current interest rate and discount rate for those two.

Thinking about it, maybe I wouldn't and just keep it consistent with my initial reports and then update them all collectively for the same interest rate, same discount rate at the time of trial versus having an inconsistent two reports with the others.

Q. Understood. Understood. Mr. Staller, this collection of MCLs, is that the total -- does that contain the total amount of materials that you have reviewed or considered in preparing your opinions in these cases?

A. Yes, Exhibit 23 --

Q. Through Exhibit 29?

A. -- thirty --

Q. Or 30, my apologies.

A. -- would contain the universe of documents I considered --

Q. Okay.

A. -- for these cases.
Q. Do you know whether your review of the United States experts' reports are contained at all in the MCLs that you provided in these cases?
A. I know it was a report was prepared as Exhibit 22.
Q. When you say, "Exhibit 22," you're referring to your rebuttal report?
A. Yeah, so it identifies that I've read the various reports for Ms. Yount, Dr. Brod, and Dr. Tosic. Whether those actual reports are listed in 23 through 30 --
Q. I think if you look at Exhibit 28, it lists those reports.
A. It does, yes.
Q. Okay. Prior to formulating your opinions -- sorry, strike that.
In response to -- excuse me. In response to the subpoena you received in this case, you provided certain contracting documents or retainer letters; is that correct?

A. Yes.
Q. Okay. And for the record, this is a collection of letters produced by Plaintiffs Bates-stamped PLG-EXPERT__ STALLER__ 24 through 41. And we'll mark this as Exhibit 31.

- - - - -

(Collection of Retention Letters Bates-stamped PLG-EXPERT__ STALLER__ 0000000024 through 41 marked Staller Exhibit 31 for identification.)

- - - - -

BY MR. CROMWELL:
Q. Mr. Staller, these retention letters indicate that you were originally engaged in these Camp Lejeune cases as early as July 2024; is that your recollection?
A. Yes.
Q. In these documents, you identify that you receive for each case a $2500 retainer; is that correct?
A. Yes.

Q. Is that -- did you actually charge this retainer, or is that simply a standard form to your billing practices or both?

A. So standard form for Plaintiff matters. Do we actually charge a retainer for 2500 for each of these? I don't recall.

Q. Okay. Is your standard rate $385 an hour?

A. In 2024 it was, yes.

Q. Okay. What is it now?

A. 425.

Q. And in 2024, you charged $2,600 for a half a day of testimony; is that correct?

A. Yes.

Q. What is that rate today?

A. 2700.

Q. Okay. So for a full day, is that just double?

A. Yes.

Q. Okay. So 5400?

A. Yes.

Q. Okay. You provided a retention letter to perform work on the Mark Cagiano case and this is Bates number ending in 31. Do you see that? Nope, that's not right. This is Bates number and ending in 25, my apologies.

A. Yes.

Q. I think we already established you did not prepare a report for Mr. Cagiano?

A. True.

Q. Were you asked to prepare or reach opinions regarding Mr. Cagiano's past or future economic damages?

MR. RUZICKA: I'm going to object to the extent that that calls for any communication between counsel. To the extent you can answer with that stipulation, you can go ahead.

THE WITNESS: In July of 2024, I was asked to consider materials or review materials for Mr. Cagiano. Ultimately, I did not

prepare a report after reviewing initial materials.

BY MR. CROMWELL:

Q. Okay. Why did you not prepare a report, excluding any conversations that you've had with counsel?

A. Ultimately, it would be that in reviewing fact-specifics material to Mr. Cagiano, there wasn't a need for an economic loss calculation of either future medical care or diminished earning -- earnings or earning capacity.

Q. Okay. Same question with regards to Mr. David Downs, you provided a retention letter for Mr. Downs ending in Bates number 31. I keep saying 31, it's not. It's Exhibit 31, Bates number ending in 28.

A. Yes, I see the retention letter for Mr. Downs.

Q. Okay. And aside from any counsel -- or conversations you've had with counsel, can you tell me why you did not ultimately prepare a report with regards to

Mr. Downs' past or future economic damages?

A. After reviewing initial materials related to Mr. Downs, there was no basis to prepare an economic loss report for the categories of economic damages typically associated with the diseases that we're discussing today.

Q. Do you have any retention agreements for Scott Keller, Ronald Carter, David Fancher, or Cometto Davis?

A. I don't believe so.

Q. You are offering opinions for those individuals though; is that correct?

A. Yes.

Q. Okay. In response to the subpoena, you also produced a number of invoices; is that correct?

A. Yes.

Q. And this is a collection of invoices produced in response to your subpoena Bates numbered PLG-EXPERT__STALLER__ 42 through 91. We'll identify this as Exhibit 32.

- - - - -

(Collection of Invoices Bates PLG-EXPERT__STALLER__ 0000000042 through 91 marked Staller Exhibit 32 for identification.)

- - - - -

BY MR. CROMWELL:

Q. Mr. Staller, does this appear to be a complete collection of the invoices you have submitted in the cases that you have been working on with regards to Camp Lejeune?

A. Appears to be, yes.

Q. These are the invoices you submitted for work on these cases; is that right?

A. Yes.

Q. Do you have any kind of estimate as to how much you have billed for your work in these cases?

A. It would be a guess, no idea. It's in here.

Q. Sure. You would have no reason to dispute the numbers in the

invoices you submitted; is that fair?

A. No reason to dispute those, correct.

Q. Okay. You indicated before that you have staff members like Mr. Gilham and Mr. Drapes -- Dripps, I'm sorry, that helps you with these, your reports in these cases; is that right?

A. Yes.

Q. And you understand that Mr. Dripps was originally named and disclosed as an expert economist in these cases; is that right?

A. Yes.

Q. Do you know why he was named and disclosed as an expert besides any conversations you've had with Plaintiff's counsel?

A. Our standard practice is typically to have two senior economists cosign reports. We typically do that really just for belt and suspenders to make sure there's two competent witnesses available to provide live trial testimony.

We try not to overlap our vacation schedules, personal days, so that way with the variability of trials and continuances and rescheduling, that one of us would be available.

Q. Just so I understand, was the basis for naming two economists generally with regards to making sure you had availability for testifying on behalf -- for the opinions that are being offered?

A. Yes, at the time of trial, our goal is to provide a live witness when available and feasible and to help further that goal, we have two senior economists that are competent and have reviewed cases cosign reports.

Q. Okay. Does Mr. Gilham or Mr. Dripps review case materials in these -- for the opinions that you're offering?

A. They would have, yes.

Q. Did they help prepare any sections of your reports that you're offering?

A. Mr. Dripps would have reviewed the final reports, so to make sure he was comfortable with cosigning reports initially that would have entailed reviewing the reports in the sense of an editor, read the reports, check the tables, check the reports.

Mr. Gilham's role was that to assist me with, since we had so many reports to prepare, we collaborated to get all the materials reviewed and then reports written.

Q. Did Mr. Dripps, during the conversations that you've had -- or sorry, strike that.

In Mr. Dripps review and cosigning of the reports you're offering in this case, did you all ever have any disagreement as to the ultimate opinions being offered in these cases?

MR. RUZICKA: I'm going to object to the extent that it calls for communications between experts and is protected by CMO 17 and Rule

26, so I'm going to -- you can talk about any assumptions or facts that were relied upon in your reports, but you don't need to disclose the communications between you and Mr. Dripps.

THE WITNESS: Based upon that response, I don't have a response then, because it would be conversations with --

MR. CROMWELL: Fair enough.

THE WITNESS: -- me and Mr. Dripps.

BY MR. CROMWELL:

Q. Was there any information, assumptions, or data that Mr. Dripps or Mr. Gilham provided to you that you're relying upon for the reports you're offering in this case?

A. No verbal assumptions or anything -- it would have just been source documents that are referenced in Section 1 or cited in our footnotes, so nothing from them individually.

Q. Okay. Besides Mr. Gilham and Mr. Dripps, were there any other individuals who worked own these reports or the information that went into these reports?

A. No.

Q. Okay. You have also prepared -- or sorry, are you familiar with the Plaintiff-specific intake forms that were prepared for a number of the Plaintiffs in these cases?

A. Not my intake forms, but intake forms from Plaintiffs, yes.

Q. Well, correct me if I'm wrong, these are intake forms that are on your company's letterhead that Plaintiffs or Plaintiff's counsel completed; is that right?

A. So we don't have -- so that might be, I think the damages checklist.

Q. Yes.

A. I'm familiar with those.

Q. My apologies just for nomenclature.

A. Yes.
Q. So you consider these damages checklists --
A. Not -- sorry.
Q. So I'll start over, you are familiar with the Plaintiff-specific damages checklist that you all provided to Plaintiffs to complete in these cases; is that right?
A. That's correct, yes.
Q. Okay. And you provided these forms to counsel; is that right?
A. Yeah, it would have been two generic forms from our office, it would either be an injury adult form or a death adult form, so depending on the respective Plaintiff, those were the two standard documents presented to Plaintiff's counsel.
Q. Okay. You never sent these directly to any of the individual Plaintiffs though; is that right?
A. That's true.
Q. Okay. And then you -- these would have been completed and you would

have received these completed forms back; is that right?

A. Yes.

Q. Okay. Do you know who completed these damage forms?

A. To my recollection, the last question on the form asks who completed it. I don't remember the response on the 19, I don't know.

Q. Okay. Do you know if these damages forms were completed for each of the individual Plaintiffs that you're offering opinions about?

A. I don't know if I got -- not for every Plaintiff, I don't think I got them back for the omnibus Plaintiffs. And then for the individual Plaintiffs, I don't recall who I got them completed, as I sit here, I don't know off the top of my head.

Q. Okay. Do you know if you received a form or damages form from -- that contain information with regards to Ms. Tukes or Mr. Howard?

A. Off the top of my head, no.

If I did receive it, it would have been in Section 1 of the report.

Q. Okay. Mr. Staller, to the extent that those particular intake forms exist, I would ask that those be produced, those have not been produced to us, if you can let us know. I understand that -- I understand that the omnibus ones you do not have one for.

A. Sure. I'll take a look if we have them.

Q. What is the purpose of these damages forms?

A. Background information on the Plaintiffs. I mean, if you have taken a look at them, I imagine you have, it starts everything with just the generic case caption, the who, what, when, where. It goes into learning about the Plaintiff biographical information. We can usually get that information or we should from depositions or Answers to Interrogatories or medical records, but it's just a nice form to synthesize a lot of information

about the Plaintiff that would be typical inputs for an economic loss model.

Q. Okay. Do you rely on these reports for certain information you're identifying in your reports? Sorry, it's a horrible question.

Do you rely on these damages forms for any of the Plaintiff-specific opinions that you have in these cases?

A. If I do, it's footnoted within my report. In these cases, most of the information that was presented in the damages checklist were corroborated from other documents set forth in Section 1 and I would typically use those source materials. A few times I do recall I had to use data points from the damages checklist.

Q. To the extent you footnote or cite to these damages checklists, is that your source of information for that particular statement in your report versus any kind of other corroborating evidence?

A. Yeah. So I would just give a

hypothetical to your question, so if the date of birth was 1/1/1950 and I cite to damages checklist, that means I got that date of birth and that illustration from the damages checklist and not from another source.

Q. Okay. Do those damages checklists help you determine what kind of damages the Plaintiffs are seeking in any given case, or is that an independent determination that you make?

A. Possibly. I mean, it would give some underlying foundational information. It's going to depend on the checklist, so we do have a household service section in the checklists. So some Plaintiffs may have, again, I'm speaking collectively, may have completed it, because there's a pre and post section or checklist. Some questions in the checklist are occupation and wages before incident. So they might guide us to where the Plaintiffs believe there may be economic loss, not conclusive, but it will give us

maybe a starting point to further investigate.

Q. With regards to household services, did you see any information in these damages checklists that identified what particular services an individual Plaintiff could or could not do before or after their diagnosis?

A. Off the top of my head, I don't remember each respective checklist for the 19 of them. I would have to go through. So sitting here, I can't say yes or no.

Q. Okay. If there is not any information in those checklists, what kind of information would you rely upon to determine what kind of, for instance, household services a person or Plaintiff did before and after their diagnosis?

A. Deposition testimony, sometimes there might be a reference in a medical record to pain or limitation generally. Michael Fryar's report, life care plan reports might talk about

limitations, physical. These are all going to be mostly physical, not cognitive, in these cases. So mainly physical limitations, physical pain, fatigue. Ultimately as a reduction in household services to me is just a true factual question from the evidence of the Plaintiff of, I used to be able to do ABC, because of my bladder cancer, either I do things in pain or I can't do things as an illustration. So that's for me, as an economist, I kind of just look to the base foundation of limitation and then I would leave it to the trier of fact to determine the ultimate losses, which is why throughout many of the reports, as you see, I do this one hour per week that I'm sure we'll discuss in a bit.

Q. Sure. But before you get to the kind of one hour per week, so to speak, you made some determination as to whether the person has limitations or complete inability to perform some services due to their diagnosis, correct?

A. Yes.
Q. All right. If they don't have such limitations or inability to perform those services, is it fair to say you would not be offering an opinion with regards to lost household services; is that fair?
MR. RUZICKA: Objection, form. You can go ahead.
BY MR. CROMWELL:
Q. In other words, there would not be an economic damages -- there would not be economic damages for lost household services if, for instance, you did not see any sort of limitations or inability to perform household services after a diagnosis; is that fair?
MR. RUZICKA: Objection to form.
THE WITNESS: Generally, again, I would have to see what the -- it's going to depend on we're kind of just talking collectively here --

BY MR. CROMWELL:

Q. Sure.

A. -- and at a higher level, because, for example, someone might be doing household services, but they might have sequelae from their diagnosis where they're doing things but it's painful to do things, where I imagine they should be compensated to me to not have to do things in pain just because they might not have the financial resources to currently hire somebody to do those tasks, so they have to be completed, laundry has to get done even though there might be lingering effects from the diagnosis or from continued treatment. So, yes, it either would be that, in my mind, household services exists if there has either been limitation not doing certain things, household members picking up those tasks, third parties picking up those tasks, whether that's at gratis or through third-party payment or the individual doing such services but in a limited fashion, meaning in pain,

discomfort, or the service taking longer than what it normally should. So, for example, if one says I do the laundry, but I have to take breaks, I could fold five pieces of clothing and then I have to got to take a break whereas if I was not impacted, I would be able to do it in a shorter period of time. Because that's what we're virtually measuring, right, time, we're valuing time and the opportunity cost of that time.

MR. CROMWELL: All right. We have been going for over an hour, do you want to take a break? I don't know if you need one, we can keep going, it's up to you all.

THE VIDEOGRAPHER: All right. We're going to go off the record at 10:29.

- - - - -

(A recess was taken at this time.)

- - - - -

THE VIDEOGRAPHER: We're back on the record at 10:41 a.m.

BY MR. CROMWELL:

Q. Okay. Mr. Staller, just one thing, when we were talking about before, I asked you questions about the Excel files that you had indicated that you had prepared but not produced in this case.

Do you recall that testimony?

A. Yes.

Q. And you indicated or testified that it contains proprietary information with regards to the formulas that you're using; is that correct?

A. Yes.

Q. You also testified that any economist, including the United States government economist, could recreate the calculations that you're using in this case; is that right?

A. Yes.

Q. What is the nature of the formulas, if that's true, what is the nature of the formulas that makes it proprietary in this situation?

A. The Excel sheet itself has

schedules that allow us to do our NPV, our net present value calculations, in a more efficient and routine manner. So we've created schedules where you put inflation rate in, you put the discount rate, and then it will populate through the duration period. So it is an efficiency thing for our office. But as far as the inputs, the inputs will be the same for all of us whether Ms. Yount is using it, Dr. Tosic or I'm using it, it's more so we create the schedules, macros within Excel that allow us to do the calculations with efficiency by not having to recreate the wheel for every year of calculation.

Q. But what about that makes it proprietary is my question, because any economist is going to, right, have to make that same schedule whether there's a formula or not, as you've indicated, other experts can do it, what about the efficiency part of the Excel makes it proprietary?

A. So it's just not using Excel,

it's -- we've created a macro within Excel that allows us to put in growth rate, put in discount rate, and then a duration period and then it will carry out the calculation for that duration period. So it's establishing a macro, a formula or not -- a process within Excel that if we, for example, provide it to another economist or anybody, then they would not have to do the year-by-year calculation that they would have to do, if I just gave the inputs, they would have our system that would make it easier for them or anybody to do the NPV calculation in a particular case. That, I guess, that's easiest to say, the macro is -- we're presented with Excel. Excel gives end users the opportunity to create macros, which are calculation shortcuts to do certain calculations and we've created such a calculation that synthesizes and simplifies the calculation as far as time and efficiency that we've created that I don't think, I believe it to be proprietary, that

if another person had it, they would be getting the benefit of our labor in creating that macro for doing net present value calculations.

Q. You would agree with me these macros though are simply you're using the inputs that are generally known to you as a forensic economist or any kind of economist and it's simply populating it for multiple years instead of a single year; is that correct?

A. Well, the inputs are disclosed in the reports.

Q. Right.

A. So there's no, I'm not trying to be secret about those, because even, I believe, in many cases, Ms. Yount and other -- the other, Brod and Tosic agree with my inputs as being within reason. The macro is a, similar to a production line, like someone has created instead of having to fill a bottle of water one at a time with one production worker --

Q. Right.

A. -- they're able to create a production line and send through in a system; likewise, that's what this macro has done for us, it creates a production line of calculations that instead of having to do things by hand, we've spent the time and labor to create a system within Excel that allows us to do these calculations in a streamlined fashion that if it was shared with others, they would be getting the benefit of our labor and time on the back end that created a present value macro that while the inputs are commonly known, and I imagine other end users of Excel could create such a macro, our office has kept that as a proprietary protection of our time and sweat equity to streamline calculations of net present value.

Q. That was going to be -- I think you hit on part of my next question, which is, you would agree with me that another economist could recreate the same macro to populate the same information, correct?

A. True, they could spend their time and effort to do that.

Q. Okay. All right. I want to turn back to your CV just for a moment.

A. Sure.

Q. And it's Exhibit 1. And Exhibit 1 identified as your résumé or CV, just first off, has this been updated since October 29, 2025, when it was produced to us?

A. Yes.

Q. Okay. What has changed or been updated aside from the testimony list that we previously discussed?

A. Sure. So testimony list would be updated for the passage of time. Non-substantive, but relevant, new address in the banner, we moved from October 29.

Q. Okay.

A. So you're in our current office, so the updated version has 30 Washington Avenue. As far as substantive, since October, the only substantive change, I testified in an additional state, so on

the page that lists where I've testified in various jurisdictions, to add to the state courts would be Indiana.

Q. Okay. Anything else?

A. No.

Q. Just for the record, I think your subpoena requested a CV, I know this had been produced previously, but if you would, I would appreciate sending whatever your most current version of the CV in response to the subpoena?

A. At a break, we could print, that I have readily accessible, so I could print this out at break.

Q. Perfectly fine. Any other substantive changes that you know of that have been -- that would be made to this version of your CV?

A. No, not that I'm aware of.

Q. Your CV lists your education, background; is that correct?

A. Yes.

Q. You have your law degree, and you received that in 2001; is that right?

A. Yes.
Q. Did you practice law after graduating in 2001?
A. Yes.
Q. Where did you practice?
A. Initially, I clerked, so I don't know if that's the definition of practiced law, but I clerked for the first 13 months or so, down in the Circuit Court of Montgomery County, Maryland, for Judge S. Michael Pincus. After that clerkship, I returned to Philadelphia where I began a civil practice for a firm called McCandless, M-C-C-A-N-D-L-E-S-S, Law Associates.
Q. And your civil practice, what did that consist of, what practice areas did you practice in?
A. So primary, so when I say, "primary," I would say that's probably 60 percent of my time, but not exclusive, it would have been in coverage disputes, so a lot of dec actions, declaratory judgment actions between two insurance companies

competing for -- well, trying to determine who had first layer of coverage in typically a tractor trailer event, whether it was an MVA or a loading or unloading event.

Q. How long did you work at that law firm?

A. Fall '02 to winter '05, so I probably left there February, March of '05.

Q. Okay. You received your MBA in 2005; is that correct?

A. Yes.

Q. Were you going to school at the same time you were practicing?

A. For a portion of it, yes.

Q. Okay. Why did you decide to get your MBA?

A. I mean, if you ever did dec work, you would leave it too. I mean, it was so horribly boring.

Q. Sorry.

A. But, I mean, so just one of those things, when you're a young attorney, to be honest, I'm under oath, you get into

a law practice and they put you in this department and they say do this and I'm, like, I'll do this and it was horribly boring. I mean it was just -- oh, sorry, Tammy -- it was just, it was just so very trite to me. There was a lot of interpretation of insurance contracts that I didn't find mentally stimulating and I sat there and I said I couldn't do this for five years, let alone 30 years. My father had started this company, so I was aware of the work of forensic economists, so knowing that and knowing that I couldn't continue to practice law and just learning more about the business of law, I felt that I was better suited as a forensic economist, so that's when I went back at night to get my MBA.

Q. Got it. When you're getting your MBA, oftentimes, there are different concentrations you can have, did you have a particular concentration?

A. So doing it at night, I was -- so Temple, I was at Temple

University, their main campus is on North Broad Street, I was at their Center City campus, it made it a little more restrictive of concentrations --

Q. Okay.

A. -- so I have to self-create one which was economics, informally. The formal concentration I did have, I think, it was just in business management, because of the selection of courses that were available to Center City students at night. But I was able to gear that towards economics.

Q. Okay. Did you ever consider getting your master's or PhD in economics?

A. I did, yes.

Q. Why did you not pursue that avenue?

A. Ultimately, so I went back after my MBA and I got a master's in accounting. After that, I considered going back, but then I spoke to a professor at Temple and I wasn't going into academics, so I didn't need my PhD. Typically, the

most critical point for a PhD is to teach and to publish, and that wasn't my goal with my career. So the professor that I became friendly with from the MBA program said at best maybe a master's, but then they said what are you going to do with that? And I said I'm already in my career as a forensic economist, and they said, well, you could spend the next two years doing a master's or you're very well credentialed for what you wanted and after talking it out with that professor, I just said it wasn't going to further my professional goals.

Q. When you were getting your MBA, was it your intention to be a forensic economist? Was that your ultimate goal?

A. At that point, yes.

Q. Okay. All right. And you indicated that your father started this practice; is that correct?

A. Yes.

Q. When did he start this practice?

A. 1980.
Q. Okay. Does he still work for this group or --
A. No, unfortunately, he passed sometime ago in '08.
Q. My apologies. On your CV, you list a set of publications. Do you mind turning to those? It's on the third page of Exhibit 1. And you have, I counted about 17 publications; is that right?
A. Yes, that sounds about right.
Q. Are any of them peer reviewed?
A. Peer reviewed meaning within a traditional definition of an academic journal?
Q. Yes.
A. No, peer reviewed within prior to publication, there were review boards and editorial boards reviewing the articles. But as I understand your question, peer reviewed, typically, means within an academic journal, these are not academic journals.

Q. Understood. You have an article from the U.S. Law Magazine spring/summer 2012 entitled, "Personal Injury Damages Roadmap."

Do you see that?

A. Yes.

Q. And were you the only author on this particular publication?

A. I think so, it has been a bit of time. I think I was.

Q. Okay. Do you have a copy of this publication, electronic or in hard copy?

A. Not electronic, hard copy, I don't think so either, I would have to look again, but that's a common question, I have not found them in my -- recently.

Q. Okay. Same question with regards to the second to the last article, you have an article entitled, "Economic Damages 101."

Do you see that line?

A. Yes.

Q. And are you the only author

on this particular publication?
A. To my recollection, yes.
Q. Can you tell me what that article was about, if you know or recall?
A. Nineteen years ago.
Q. Sure.
A. So that was for the AAJ, so that, I believe, is probably an overview of the typical damage categories in personal injury cases. I don't think we talk about wrongful death or I didn't talk about wrongful death. It would have been related to loss of earnings/earning capacity, probably present value. I imagine household services and probably life care valuation. That's kind of the typical roadmap when I was writing about those topics that I would cover.
Q. Similar topics to what you're offering opinions on in this case; is that correct?
A. Similar topics, yes.
Q. Do you have a copy of this publication, electronic or in hard copy

anywhere?

A. No, I have not found that one in years.

Q. Okay. Okay. You can put this away. Thank you.

Mr. Staller, are you familiar with the Camp Lejeune Justice Act?

A. I only became familiar with it through this litigation.

Q. Have you read it?

A. Parts of it.

Q. Okay. Do you use or rely upon the language of that statute for formulating any of your opinions in this case?

A. No, I don't believe so.

Q. Okay. You would agree with me it's not cited anywhere in your reports, correct?

A. True.

Q. You are an attorney, correct?

A. Yes.

Q. Do you still hold an active bar license anywhere?

A. Yes.
Q. Where?
A. Maryland, New Jersey, and the Commonwealth of Pennsylvania.
Q. Would you agree with me you are not offering any legal opinions in this case?
A. Agreed.
Q. That's -- you're here as a forensic economist; is that correct?
A. Yes.
Q. Okay. And you are offering opinions regarding economic damages for individual Plaintiffs; is that right?
A. Yes.
Q. You are not, however, offering any opinions on past medical expenses incurred by any individual Plaintiff; is that right?
A. That's true.
Q. You understand there's a different expert that's opining on that topic?
A. Yes.

Q. Are you familiar with Marjorie Hackett-Wallace?
A. Just through this litigation.
Q. Have you read any of her reports in these cases?
A. No.
Q. Okay. You are also not offering any opinions regarding the reasonable value of past medical expenses incurred by any individual Plaintiff; is that correct?
A. That's true.
Q. And you're not offering any opinions on the amounts an individual Plaintiff actually paid for any of their medical expenses; is that correct?
A. True.
Q. You're also not offering any opinions on any past or future medical or disability payments made by the United States government to or on behalf of any individual Plaintiff; is that right?
A. True.
Q. And you're not offering any

opinions as to whether any amounts paid or to be paid by the United States should or should not be offset against any potential damages award a Plaintiff may receive in this litigation; is that correct?

A. Correct.

Q. You're also not offering any opinion regarding whether offsets are permitted under the Camp Lejeune Justice Act, correct?

A. Permitted, I would defer to the court interpretation --

Q. Okay.

A. -- of the act.

Q. If permitted, you're not offering any opinion regarding the amount that should be offset in any given case; is that correct?

A. Can I hear that, if --

Q. If offsets are permitted, because you just noted that's for the court to interpret --

A. Uh-huh.

Q. -- you're not offering any

opinion regarding the amount that should be offset in any given case; is that correct?

A. I haven't done such a calculation, if the court deems under the Camp Lejeune Act that such offsets should be considered for economic damages, I could update my reports with such deductions.

Q. As you sit here, you're not planning to do that though; is that correct?

A. Correct, I would have to be instructed by the court first interpreting the statute.

Q. Okay. Similarly, you are not offering any opinions on noneconomic damages any individual Plaintiff may be seeking in this litigation; is that correct?

A. True, I would leave that to the trier of fact, the court, to ascertain those values.

Q. You agree your estimates of economic loss do not, for instance, include any calculations with regards to pain and

suffering; is that right?

A. True, that would be for the court as the trier of fact to award.

Q. Okay. All right. I want to talk about some of the broad categories of economic damages that you're opining on in these cases. I'm going to start with life expectancy. You are offering a number of opinions about Plaintiffs that are at least in part based upon an individual Plaintiff's life expectancy as you've calculated it, correct?

A. Yes, for the individuals that have life care plans, they go out to a life expectancy. Individuals with no life care plan would not have calculations going out to life expectancies.

Q. What about those Plaintiffs where you're calculating future household services, lost household services, would you use their statistical life expectancy in those situations?

A. So just as an anchor point, not as a calculation anchor, the

calculation anchors goes out to something called healthy life expectancy, which is a data point period of time that is prior to life expectancy. So life expectancy in that context is only referenced as an anchor point to make sure that healthy life is below life expectancy.

Q. Are you saying that when you determine a person's future lost household services, you are only taking that -- taking those services out to their healthy life expectancy, is that what you're saying?

A. The damages calculation duration terminates at the respective individual's healthy life expectancy.

Q. Okay. In your award, can you define life expectancy for me?

A. We have to clarify, so statistical life expectancy would be the period of time that a population would have a mean survival rate, meaning a period of time under statistical life expectancy is the duration in which a population's period

of survival would be at 50 percent. So, statistically, after that point that we typically see in the United States life tables, so at birth right now, it's around age 77, general population. That's the mean survival rate at birth, that means there's many individuals that live beyond 77, but that population drops below 50 percent.

Q. Understood. You base your statistical life expectancy opinions on life tables created by the National Center for Health Statistics, which are provided by the CDC; is that correct?

A. Maintained by the CDC, yes.

Q. Or maintained --

A. Yes.

Q. Is this a source you typically rely upon as a forensic economist?

A. Yes, it's a generally accepted source, the U.S. Vital Statistics are generally accepted.

Q. And I think you noted before,

this is one of the areas in which United States experts tend to agree with your particular opinions on statistical life expectancy; is that correct?

A. They do, yes.

Q. Do you normally rely on statistical life expectancy tables when forming opinions in personal injury cases?

A. That would be my typical practice, yes.

Q. Is offering an opinion regarding statistical life expectancy part of your standard methodology as a forensic economist?

A. Yes.

Q. Do you know what factors go into creating these life expectancy tables, for instance, gender, race, age?

A. Those would be the demographic -- the data is cut, the tables are cut by gender, race, and age.

Q. Any other factors that allow the tables to be cut in different ways?

A. Not as published in the U.S.

Vital Statistics.

Q. Okay. And I think you mentioned it before, but you understand that life expectancy or statistical life expectancy is determined by taking the mean life expectancy for an identified segment of the general population, correct?

A. True.

Q. And in determining statistical life expectancy, you would agree that half of the people who fall into an identified segment of the general population die before the given statistical life expectancy, correct?

A. If you're using the life expectancy as a median, that -- if using not mean, mean is an average, so that could have tails, but from the median standpoint, that's true, half the population would not make it to that data point duration and another half would go beyond it.

Q. That's my next follow-up, you agree the other half would go beyond that particular point in time; is that correct?

A. Yes.
Q. So in offering your opinions about these individual Plaintiffs, you're aware that, for instance, an individual Plaintiff could die sooner than their statistical life expectancy, correct?
A. That's one possibility.
Q. And they could live beyond their statistical life expectancy, correct?
A. Another possibility.
Q. To the extent you are offering opinions that rely on these life expectancy tables, you would agree that, in the end, a person may be over or undercompensated depending on when they actually pass away, correct?
A. For the life care plans that use statistical life expectancy? Yeah, when using a data point, there's three ways the results can be when you're building a model, right, the person could fall below the estimated value, they could equal the estimated value, or they could exceed the estimated value, so --

Q. Those are all possibilities, right?

A. Yeah, which is why we go with the point of central tendency, which is go with the mean or median point of survival.

Q. Okay. Does the fact that individual Plaintiffs may die before their statistical life expectancy render your opinions unreasonable?

MR. RUZICKA: Objection to form.

THE WITNESS: No, not in any way. I don't have, Ms. Yount, Dr. Tosic, and Dr. Brod don't have crystal balls. If we had those, or if I had it, I know I wouldn't be doing this. So we've got to build models to a reasonable degree of economic certainty, not absolute certainty, that's not the legal standard, not professional standard, so the best we can do is use reliable data as published by the United States government on

life expectancy in the United States, use the relevant demographic cohort group to model it out and go with the mean duration. Again, we're building models, as we sit here today, going out 10, 15, 20 years, depending on the age of the Plaintiff, so it's not unreasonable or unreliable, it's reliable using reliable data, knowing that it's not to an absolute certainty, but to a reasonable degree.

BY MR. CROMWELL:

Q. Well, doesn't the fact that someone can die before or after their statistical life expectancy render any kind of calculations based upon those statistical life expectancies speculative?

MR. RUZICKA: Objection, form.

THE WITNESS: No, when you use the term, "speculative," to me that means, like, there's no foundation or no basis or just being

whimsical. That's speculative. A person is going to live to 82, a person is going to live to 94, we have a basis, we have life tables that have been studied by the Bureau of Labor Statistics for over probably 75 years, at least the last 50 years of survival patterns and that's what gives it relevance.

That's why insurance companies use it for doing insurance policies. That's why workers' comp companies use them for measuring workers' comp benefits, because workers' comp benefits go out to a certain period of time life expectancy. We use them all the time in society to build reasonable reliable models. We're not here to guarantee with absolute certainty what will happen in the future. We can't do that. But we could use reliable data that

has been peer reviewed, published by the statisticians at U.S. Vital Statistics to give us good proxies of life expectancy. And it makes it reliable for us for these purposes.

BY MR. CROMWELL:

Q. So the fact that a Plaintiff may die before or after their statistical life expectancy, in your opinion, does not render your opinions unreasonable or speculative, correct?

A. True.

Q. Okay. Did you account for the variability in life expectancy, statistical life expectancy for these individual Plaintiffs, the fact that they may die before or after?

A. No, my pattern, my practice and many other forensic economists, standard practice is to build models of future medical care out to life expectancy as published by the U.S. Vital Statistics, which is what I did here. And no, I didn't

deviate from my standard practice.

Q. Does the fact that you do not opine on this variability render your methods and conclusions unreliable?

MR. RUZICKA: Objection to form. Go ahead.

THE WITNESS: No, I think quite the opposite, using what's disclosed in my report, they're quite reliable. They're reliable because I'm using reliable data, using a reliable methodology, and a reliable practice of doing the calculations. My present value formula is a reliable method that's agreed upon by forensic economists and the government's economists in this case. Life expectancy data source, agreed upon by the government's economists in this case. The duration period and dataset are agreed upon by the government's economists in this case. So I think it's quite the

opposite for building a model to not to an absolute certainty, which we can't do, but to a reasonable degree of economic certainty using the sources I use and the methodology I employ creates a reliable model for the trier of fact to rely upon.

BY MR. CROMWELL:

Q. So is it fair to say that it is normal and the standard methodology as a forensic economist to rely on life expectancy tables in formulating your economic damages calculations?

A. That's true.

Q. You had indicated in an MCL in previous testimony that you reviewed and considered the expert report of Peter Rybolt; is that correct?

A. Reviewed and considered, yeah, those are a fair description of what I did with that report, yes.

Q. Prior to seeing his report, did you know who Peter Rybolt was?

A. No.
Q. Since you reviewed his report, you're familiar with his opinions in that case -- in this case?
A. I reviewed them generally, yes.
Q. Okay. Are you familiar with his opinion that it was an error for the United States experts to fail to acknowledge or account for variability in life expectancy?
A. I would have to take a look at that portion of his report, I don't recall the specific language.
Q. Sure.
A. You were ready for that response?
Q. Huh?
A. You have that readily available ready for that response.
Q. I'm going to go ahead and mark -- am I on 45?
MR. RUZICKA: 33.
MR. CROMWELL: No, 33, sorry.

MR. RUZICKA: Close.

MR. CROMWELL: Close, very close.

THE WITNESS: Thank you.

- - - - -

(Expert Report of Peter Rybolt dated 1/20/26 marked Staller Exhibit 33 for identification.)

- - - - -

BY MR. CROMWELL:

Q. Mr. Staller, we have marked as Exhibit 33 the expert report of Peter Rybolt dated January 20, 2026; is that correct?

A. Yes.

Q. And this is the report that you reviewed and considered in this case; is that correct?

A. Yes.

Q. And if you would, turn to page 20 of Exhibit 33. Is they're numbered paragraphs, but there's a subsection number 3.

Do you see that?

A. Yes, yes, page 20.

Q. And one of Mr. Rybolt's critiques is that, "The government's experts fail to acknowledge or account for variability in life expectancy."

Do you see that?

A. Yes.

Q. And according to, actually, let's go to page 4, if you don't mind, of Exhibit 33. There's a section entitled, "Summary of Opinions."

Do you see that?

A. Yes.

Q. And under paragraph 13, the second bullet point that says, "even assuming," do you see that?

A. Yes, yes.

Q. I'll just read it and then I'll ask you a few questions, "Even assuming the VBA disability benefit offsets proposed by the government were appropriate, the government's analyses are funded speculative, and in many cases

include material omissions that collectively render the government's methodology and conclusions unreliable. These include the failure to consider fluctuations in ratings for injuries attributed to Camp Lejeune exposure, fluctuations in ratings for injuries unrelated to Camp Lejeune exposure, fluctuations in life expectancy, fluctuations in amounts withheld from VBA benefits as a result of military pensions (or vice versa) and the inherent uncertainties of future VBA disability benefits themselves."

First of all, did I read that correctly?

A. Yes.

Q. Would you agree with me that according to Mr. Rybolt, failure to account for variability and life expectancy renders the government's analysis fundamentally speculative and renders the government's methodology and conclusions unreliable?

MR. RUZICKA: Objection, form.

THE WITNESS: He says that in a string cite as just read --

MR. CROMWELL: Right.

THE WITNESS: -- but that's one of his conclusions, I would have to go back and read page, where you initially started out, but from his summary point, that's what he's suggesting in a string cite with other things.

BY MR. CROMWELL:

Q. Sure. And we can go back to page 20 on Exhibit 4?

MR. RUZICKA: I think you meant to say Exhibit 33.

MR. CROMWELL: Sorry.

MR. RUZICKA: Not four.

MR. CROMWELL: Yes.

Exhibit 33, page 20. And we're looking at again subsection three there. And there's a paragraph 60 that follows.

Do you see that?

THE WITNESS: Yes.

BY MR. CROMWELL:

Q. And he says, "A second fundamental assumption in the government's experts' calculation of the proposed offsets concerns the life expectancy of the Plaintiffs. The calculation proposed by the government's experts is straightforward, the expected monthly VBA disability benefit multiplied by the expected remaining duration of each Plaintiff's life. For the latter, all three of the government's experts rely on unadjusted data on life expectancy from the U.S. Centers for Disease Control and Prevention, or CDC. As above, this assumption leads to estimates that are unduly speculative, leading to the potential under-compensation of many, if not most, Plaintiffs while creating a substantial windfall for the government."

First of all, did I read that correctly?

A. Yes, you did.

Q. Does the fact that there are

fluctuations in life expectancy render your opinions that rely on life expectancy tables fundamentally speculative?

MR. RUZICKA: Objection, form.

THE WITNESS: No.

BY MR. CROMWELL:

Q. Does it render your opinions unreliable?

A. No.

Q. Would you agree with me that according to Mr. Rybolt, your failure to account for the fluctuations in life expectancy would render your analysis relying on those life expectancy tables fundamentally speculative?

MR. RUZICKA: Objection, form.

THE WITNESS: I don't know how Mr. Rybolt would respond to that. He seems to be talking about the VBA disability benefits going up to life expectancy.

BY MR. CROMWELL:

Q. Right, but his critique here is the use of life expectancy tables and

the variability of some Plaintiffs and whether they may actually die at the moment of life expectancy, correct?

MR. RUZICKA: Objection, form.

THE WITNESS: That's how I'm interpreting his paragraph 60.

BY MR. CROMWELL:

Q. So putting aside the issue of VBA disability benefits, would you agree with me that according to Mr. Rybolt, your failure to account for fluctuations in life expectancy would render your analysis relying upon life expectancy tables fundamentally speculative?

MR. RUZICKA: Objection, form.

THE WITNESS: If one is applying his language, again, I can't speak for Mr. Rybolt, but if one is applying what he wrote in paragraph 60, it seems to me that Mr. Rybolt would have an issue with my calculations going to a statistical life expectancy. That's my interpretation of his

paragraph 60 that I still defer to his response to that.

BY MR. CROMWELL:

Q. Would you agree that according to what Mr. Rybolt has written here, your failure to account for fluctuations in life expectancy would render your methodology and conclusions unreliable?

MR. RUZICKA: Objection, form.

THE WITNESS: I believe that's what -- it appears that's what Mr. Rybolt would suggest, I disagree with that for the reasons that I've already stated, but it appears what Mr. Rybolt would suggest about a calculation to statistical life expectancy.

BY MR. CROMWELL:

Q. That's my next question. Do you disagree with Mr. Rybolt's assessment with regards to the use of statistical life expectancy tables?

MR. RUZICKA: Objection, form.

THE WITNESS: I disagree with his conclusions, yes.

BY MR. CROMWELL:

Q. For few of the Plaintiffs, you are offering opinions about a reduced life expectancy; is that correct?

A. Yes.

Q. And your opinions in those cases are essentially you would expect on average of a patient of a certain age and gender to live to a particular age, but because of some medical condition, you are expecting that person to live some period of time shorter; is that correct?

A. True, based on other medical foundation, yes.

Q. Right. And when you opine on a reduced life expectancy, are you relying upon the opinions of other experts or are you formulating your own opinion about the Plaintiff's reduced life expectancy?

A. Other experts, other medical or medically trained experts.

Q. Okay. If for any of the

Plaintiffs you're offering an opinion on you do not offer a reduced life expectancy opinion, is it fair to assume you are expecting them to live to their statistical life expectancy?

A. Yes.

Q. In other words, unless you have expressly noted their reduced life expectancy in your reports, the Plaintiffs present medical conditions have not altered your opinions regarding their statistical life expectancy?

A. Reduced life expectancy present medical conditions, I'm just --

Q. Yes, as you know it at the time.

A. Right, so I mean many of the Plaintiffs or many of the people in the U.S. life tables have things going on as 65-year-olds, 70-year-olds, so in the population of the U.S. life tables, they might have bladder cancer, they might have heart conditions. So as a population for the Plaintiffs, I've done life care plan

present value calculations for being aware of their health outlook or current conditions where it doesn't cause me to deviate from the life tables.

Q. Okay.

A. Absent the ones that have specific life expectancy opinions.

Q. I think we're saying the same thing, that's what I'm trying to get at.

A. Sure.

Q. In other words, unless you have noted in your reports that a person has a reduced life expectancy based off of a medical condition, you would agree that the Plaintiff's current medical conditions regardless of what it is have not altered your opinions regarding their statistical life expectancy?

A. Correct.

Q. You are also, we touched on this before, you're also offering a number of opinions about these Plaintiffs that are based in part on the individual's healthy life expectancy, correct?

A. Yes.

Q. And you define healthy life expectancy as the age to which an individual has a full range of functional capacity; is that correct?

A. That's how the study defines it and I'm relaying the study's definition. So it's just not my definition, but the accepted definition of healthy life expectancy from the healthy life expectancy tables.

Q. Okay. In your own words, can you just define for me what you mean by functional capacity?

A. The way I would define it and the way it's generally defined by forensic economists would be, functional capacity is commonly referred to as the ability to maintain one's self, so that would include the ability to dress, bathe, prepare meals. It would be the ability to maintain one's abode, or their house, maintain their living structure, so it would be to do the cooking, cleaning, shopping.

Q. And this is why you use healthy life expectancy as part of your calculations for lost household services, future lost household services; is that correct?

A. The duration period for future lost household services, correct.

Q. Besides future lost household services, are there other categories of damages in which you rely upon a person's healthy life expectancy?

A. In the Camp Lejeune cases?

Q. Yes, sorry, I should have been more specific.

A. I don't believe so, no.

Q. Okay. I apologize, I meant to ask, when we're talking about statistical life expectancy rather than healthy life expectancy, you mentioned before, statistical life expectancy tables are not specific to a particular disease that somebody may have, that's correct?

A. That's true.

Q. The data is not cut based off

of a person having bladder cancer, kidney cancer, leukemia, NHL, or Parkinson's disease; is that correct?

A. True, it's all of those diseases.

Q. The tables that you rely upon, the healthy life expectancy tables that you rely upon for your opinions, do you know, again, what factors go into creating the healthy life expectancy tables?

A. Gender, age, and there might be -- there might be a small cut for race. Not as many cuts within the United States life tables, but to my recollection, I believe there's an African -- there's an all and there's a white Caucasian and then an African-American population.

Q. And these tables, similar to the statistical life expectancy tables, they're built upon mean determinations; is that correct?

A. True.

Q. Which means half the people

have a healthy life expectancy that ends before the calculated date and half have a healthy life expectancy that ends after the calculated date; is that correct?

A. Well, from a median, so the median in statistics, right --

Q. Yeah, sorry.

A. -- two points of central tendency --

Q. Yeah.

A. -- not to give a lecture, sorry, but the median would definitely be a population of half below, half above, the mean could be skewed a little bit because it's the sum of all responses divided by the population which gives another point of central tendency.

Q. Understood, and my apologies.

A. That's okay.

Q. I took economics at one point. It has been a while.

A. Right. That's the part of the lecture when everyone falls asleep, yes.

Q. Is it speculative to suggest that a Plaintiff's healthy life expectancy would be -- strike that.

Is it speculative to rely upon the healthy life expectancy tables for any of the individual Plaintiffs when calculating their future lost household services?

MR. RUZICKA: Objection to form.

THE WITNESS: Could I hear that question again, please?

BY MR. CROMWELL:

Q. Sure. Let me just take a step back.

A. Okay.

Q. Because a given Plaintiff's healthy life expectancy may end before or after their healthy life expectancy, does that in and of itself render any opinions based upon that healthy life expectancy speculative or unreliable?

MR. RUZICKA: Objection, form.

THE WITNESS: No.

BY MR. CROMWELL:

Q. You mentioned factors like ability to maintain one's self by dressing, bathing, cooking meals, and maintaining their house as factors you consider when determining their functional capacity; is that correct?

A. Yes.

Q. And you looked at these same factors when assessing the Plaintiffs', in these cases, healthy life expectancy; is that correct?

A. So it's the definition of healthy life expectancy. When you say examined it for these Plaintiffs in the Camp Lejeune cases, I use that as a data point of when we would expect their healthy life expectancy to exist to. I don't want to suggest on the record that I made sure everyone could tie their shoes or made sure everyone could -- to a certain period. That's the definition of healthy life, that we expect people to maintain such activities to a certain point in time.

Q. But did you evaluate those kinds of activities for the individual Plaintiffs when determining what kind of lost household services they may have incurred?

A. I mean, I'm confused by that question, because, for example, on household services, we don't value dressing oneself, a certain part of household services would be the cooking, cleaning, but certain activities would just be bathing oneself. Where in certain life care plans, Mr. Fryar has provided an allowance for a home health aide to assist with such tasks, but I didn't do a pre-assessment of that because I used the healthy life as an anchor endpoint to which one would statistically expect this population or this individual based upon the demographics that we've discussed to have such functionality until.

Q. We'll talk about this more in a minute, but is that, you mentioned that Mr. Fryar has life care plans for certain

future care. Am I correct in assuming that to the extent there is a life care plan provided for a given Plaintiff, you did not include a separate calculation for future household, lost household services in your damages opinions?

A. Correct. So if -- for the some of the Plaintiffs that had a life care plan that had an allocation for household -- housekeeping services, I did not do a future loss of household service model for those individuals.

Q. Understood. Okay. Okay. You're also offering a number of opinions about these individual Plaintiffs that are based, in part, upon the individual Plaintiff's work-life expectancy; is that correct?

A. The individuals that have wage claims, yes.

Q. That was a follow-up, which is, you use work-life expectancy when determining any kind of lost earning capacity; is that correct?

A. Yes.
Q. Okay. Same would be true for -- do you use work-life expectancy when calculating any kind of taxes that may be paid at the same time, retirement that may be paid or obtained at the same time, same thing?
A. So the work-life would be an anchor point for the duration of which income taxes would be deducted, because income taxes are associated with the generation of income, so that only goes on until the work-life period. And then depending if someone individuals had access to a pension, defined benefit plan, the defined benefit plan would commence at retirement age, work-life period. So that's probably where work-life is the anchor point for those topics.
Q. Okay. For work-life expectancy, you're simply projecting how long you would expect someone to work into the future; is that correct?
A. Work-life expectancy would be

defined as the period of consecutive years of full-time labor force participation.

Q. And when you say full-time labor force participation, this is a little academic, you're not necessarily saying the person is employed, you're saying they could be employed; is that right? They're in the labor force looking for a position; is that right?

A. You do remember your labor economics class.

Q. I'm trying.

A. So the definition of being in the labor force is seeking work or actively working.

Q. Actively working. Understood. Okay. Did you look at case-specific information for these individuals in the Camp Lejeune cases to determine how long they expected to work?

A. A Plaintiff stated intention of work-life?

Q. Yes.

A. No, I generally don't do

that, because, again, forecasting or building economic models, we use the data for that reason. Towards your life expectancy questions, I'm sure most people want to live to 100, that's their intention, most people don't, unfortunately, achieve that intention, so, likewise, with work-life asking someone how long I wanted to work for before a diagnosis in the '90s or mid 2000s, no, because it just wouldn't create a reliable basis.

Q. Wouldn't that change the -- if someone only expected to work until, say, 65, but they're work-life expectancy was until 67, wouldn't any calculations based upon 67 years overcompensate a given Plaintiff for their lost earning capacity?

A. So I don't think it overcompensates them, but in a couple of the cases, I did do that. The Plaintiff, I forget the Plaintiff now that worked with Upjohn, but the individual that was working for Upjohn, said -- stated intention was

absent his diagnosis, he was going to work for 18 more months, so I did the calculation for 18 more months at Upjohn. I know he had ancillary work as a teacher, professor, but I think from a calculations standpoint, no, to go to their work-life, even if their work-life extends beyond their intention, depending on the facts and circumstance, because, again, they're making a projection of what they would have done in a different universe, a different world, like, had I not had cancer, had I not had Parkinson's, this was what I was going to do. So a lot of that is a contemporaneous look here in the 2023, 2024, 2025, when they're being deposed compared to when they were dealing with the illness and their work-life, so I can't say necessarily that would overstate it, we would need more specific information on it.

Q. Sure. But I guess in a vacuum, you generally did not consider a Plaintiff's intentionality as to when they plan to retire as part of your calculations

of lost earning capacity?

A. I can't say never. So, you know, having done thousands of personal injury cases, it's going to depend on the facts and circumstances, so, for example, if someone testified in their deposition I wanted to make it to 70, I have a second marriage and I have a young kid and I wanted to get to at least through high school for that child, so even though the work-life might, statistical work-life might be two years earlier, there might be a foundation or basis to take that person to age 70 --

Q. Okay.

A. -- or earlier, depending on the facts and circumstances, so I can't say I never consider it, it's going to depend on the facts and circumstances of the case, generally, I do focus on work-life as the duration period from the statistical standpoint.

Q. So there are situations though in which you do consider someone's

intentionality?

A. Yes, but if someone says, I wanted to work to 80, and that's ten years beyond work-life, I'm likely -- very unlikely to do such a calculation or if they're ten years under work-life, that might be, you know, a reason to consider. But, again, if they had a pension or something, I would be considering -- I would need more facts and information on a specific case before I'd say I don't consider intention. But you have to be mindful of intention, intention is not a guarantee of outcome in building models.

MR. CROMWELL: We can go off the record.

THE VIDEOGRAPHER: We're going to go off the record 11:37 a.m.

- - - - -

(Discussion was held off the record.)

- - - - -

THE VIDEOGRAPHER: Back on the record at 11:38 a.m.

BY MR. CROMWELL:

Q. Okay. I want to switch topics, Mr. Staller. In many of your reports, you're offering opinions what you're calling lost past medical and related care; is that correct?

A. Yes.

Q. When you use the term, "past medical care," how is that different than past medical expenses? How are you differentiating those?

A. So, as discussed earlier, past medical expenses I didn't tabulate, again, there's really nothing for an economist to do except summation, get bills and add them up, and I believe Plaintiffs have other individuals to provide that summation for the respective Plaintiffs.

Past medical care, how I'm using it is not for the actual therapies and treatments received by medical professionals. This would be tantamount to that of a home health aide, the medical care. Another term I could have used would

have been the home care provided by a spouse, typically, a spouse for individuals when they were in a convalescent period either actively getting treatment, recovering from surgery, or some aspect of their journey with their unfortunate illness and recoveries that they needed assistance for tasks that would be equivalent to those tasks of a home health aide.

Q. Okay. And what is it you mean by related care, aside from what you've already described as a home health aide? Is there anything in addition you would include there?

A. I think my definition would cover medical related, medical, being that of a home health aide, a primary care assistant, those terms are synonymous, but those chores associated with caring for someone when they're sick and helping them out when they need assistance.

Q. Okay. Do you identify anywhere in your reports what kind of

services that go into providing home healthcare or being a personal aide?

A. Off the top of my head, without a specific reference point, it would probably be generally spousal care, it's probably coming from deposition testimony of either the claimant talking about their medical treatments, post-treatments, being convalescent, and then just needing general assistance and then overlaying with that my familiarity with the definition of a home health aide and the general job description of a home health aide or a PCA, primary care assistant, within the definition of the occupational employment statistics that talks about the tasks those individuals are typically charged with when caring for an infirm individual.

Q. Did you look at any of the medical -- or sorry, did you look at any of the kinds of medical or personal care services that any of the Plaintiffs required in these cases?

MR. RUZICKA: Objection, form.
THE WITNESS: Required, you're saying the past tense?
BY MR. CROMWELL:
Q. Sure. When you were looking at lost past medical and related care, is it fair to assume that that's referring to care that has already been provided up through December 31, 2025, I think that's the date you use, right?
A. That is the date, yes.
Q. Okay. So did you look at any of the kinds, either in deposition testimony or records you received, of kinds of medical or personal aide services that an individual Plaintiff actually required in the past?
A. So it wouldn't have come from the medical records, it would have come more from the discovery, the deposition testimony, of the Plaintiffs that I had surgery, my spouse drove me around, drove me to appointments, or post-medical treatment, chemotherapy, or depending on

the Plaintiff and the care, I had significant fatigue. Obviously, when one suffers significant fatigue, they need assistance. So it would be taking the basis typically of the Plaintiff's testimony, because medical records, again, I just generally use those as a general context, but they don't typically say a person needs a home health aide. The medical records will describe had X procedure, come back and see me, procedure was successful, further treatments, take this, it doesn't say they need help cooking or they're really, really tired. So it would have been more of the fact-specific testimony from the Plaintiffs.

Q. Okay. In the reports for the Plaintiffs in which you're offering an opinion on this topic, you provide calculations of losses based on hourly wages of home health or personal care aides; is that correct?

A. Yes.

Q. Essentially, this is the

equivalent of costs of having a home nurse or personal caretaker in the home providing similar services; is that right?

A. So we can't use the term, "nurse," because --

Q. My apologies, yeah, that's -- I'll rephrase that.

A. Okay.

Q. This would be the equivalent of, this wage is equivalent to having a personal care aide or home health assistant helping a person with tasks that they are no longer able to to perform due to their injury; is that correct, or diagnosis?

A. Yes, but, again I think, as put in my footnotes, that's correct, but we're being a conservative wage rate, because we're only using the wage rate, right, that's identified by the Bureau of Labor Statistics, which, generally, depending on where the Plaintiff's geographic locale was, is between probably 15 to $20 per hour, depending on the year, but it's important to note, and I say that

in my footnote, that that does not represent probably the true cost of acquisition of the service. If they were to actually acquire the service from Mr. Smith's Home Care Company, they're not -- Mr. Smith's Home Care is not charging 15 bucks an hour to bring someone out, they're going to charge $30 or more to cover their operational overhead, profit margin, business expenses, and general markup. So the rate I use, everything you said is yes, but I just wanted to make sure that caveat is on the record.

Q. Understood. But you would agree with me that you're not planning to offer any kind of opinion as to the actual cost or amount for acquiring such home healthcare in these cases; is that correct?

A. That's true, what I would tell the court as the gatekeeper and as trier of fact exactly what I just said here, that the number I've presented in these reports is a conservative number for the reason I just stated, that it doesn't

account for true marketplace purchasing of the service.

Q. Are you aware of any of the Plaintiffs which you're offering opinions in these cases of having acquired a personal care or home health aide?

A. I don't recall off the top of my head.

Q. Okay. So, as you sit here, you're not aware of any of the Plaintiffs having acquired such care?

A. I did reports for 19, off the top of my head, I don't recall.

Q. And just for clarification, your opinions about the value of past medical and related care are based on historical hourly wages of home health personal care aides in the geographic state where the Plaintiff resides; is that right?

A. Yes.

Q. You do not, however, opine on the number of hours a Plaintiff needed home healthcare or a personal care aide; is that correct?

A. That's true.
Q. Is it fair to say you are assuming -- or well, let me step back, are you opining though, that even though you're not opining on the number of hours a person may need, you are opining that they do in fact need some level of past home -- or past medical or related care?
A. So I would have to just change the tense, right, they needed at some point from the date of diagnosis, the commencement of treatment up through December 31 of 2025, that they needed some type of care associated with their illness from the Camp Lejeune exposure.
Q. And this would be based primarily on deposition testimony that you reviewed for these individual Plaintiffs?
A. The primary source collectively, yes, for the individuals that have that calculation would have been from deposition testimony of the Plaintiffs talking about illness, treatment, general recovery that would trigger the need for

someone to help them.

Q. Generally speaking, your opinions about the value of past medical and related care are based upon the Plaintiff's spouse or partner taking care of the Plaintiff since their date of diagnosis; is that right?

A. Generally, yeah, taking care of helping out is a broad term, yes.

Q. Can you explain to me how personal care or home healthcare provided by a Plaintiff's partner or spouse is an economic loss to the Plaintiff?

MR. RUZICKA: Objection, form.

THE WITNESS: To the Plaintiff, the spouse or just the injured Plaintiff?

BY MR. CROMWELL:

Q. The injured Plaintiff.

MR. RUZICKA: Objection, form.

THE WITNESS: To me, that would be specific to the Plaintiff, either to the extent that they testify that they incurred costs

for individuals, that should be compensable. To the extent that they needed assistance, to me, that is an expense that they should be compensated for.

BY MR. CROMWELL:

Q. Well, putting the incurred costs aside, because we'll talk about whether they actually incurred that momentarily, but the idea of needing assistance, I'm trying to understand in economic loss terms how services provided by a Plaintiff's partner or spouse amounts to an economic loss to the injured Plaintiff.

MR. RUZICKA: Objection, form.

THE WITNESS: In my mind, this is care that they needed to incur because of their illness. So the way I see it as an injury to the Plaintiff is it's similar to me of replacement value of household services that I'm sure we'll talk about, but I get injured, so now I

can't cook for myself. I can't clean. I can't get to my doctor's appointments. I have fatigue, so now I need the assistance, I've borne the cost of having assistance from somebody else that creates economic value to me that I need to expend either dollars or time to get someone to help me.

BY MR. CROMWELL:

Q. What dollar -- what additional dollars are out the door though when a spouse is taking on those services?

A. For the spouse, the additional dollars can either be their lost leisure time, lost work time, to the extent that they have to take sabbatical, leave a job, so there could be lost wages to the spouse, or forgone leisure time of the spouse.

Q. It sounds like that's referring to, like, an opportunity kind of cost to the spouse though, right? They're forgoing doing particular leisure or work

to take care of their injured spouse or partner, right?

A. Well, for the forgone leisure, not for the wages, the wages would be a diminishment of income to the house.

Q. Sure.

A. So that's an economic loss for the household.

Q. Are you aware of any spouse that had to forgo work for taking care of their -- the injured Plaintiff in any of these cases?

A. I don't recall.

Q. Just, so I'm clear, is the valuation of personal care based on the assumption that because of a Plaintiff's diagnosis, the spouse had to perform certain care which they did not have to perform prior to the Plaintiff's diagnosis?

A. That's a general overview, I would say that's a fair summary.

Q. Okay. Do you have any evidence that a Plaintiff's partner or spouse forewent anything or because they

were taking care of their partner or spouse for the issues caused by their Track 1 disease?

MR. RUZICKA: Objection, form.

THE STENOGRAPHER: For their what disease?

MR. CROMWELL: Their Track 1 disease, sorry.

THE WITNESS: I don't recall off the top of my head. It's 19 Plaintiffs. I don't know.

BY MR. CROMWELL:

Q. No, I understand, but this is my opportunity to ask, so if --

A. Okay. Yeah, sure.

Q. I'm trying to understand if there's any Plaintiff out there whose spouse actually had to forgo work, leisure, et cetera, because of they were taking care of their injured spouse or partner?

A. Yeah, as I sit here, I don't have a specific recollection of the testimony of all relevant spouses or the injured parties that may have described it.

Q. The rate that you use for a personal care aide is for -- well, so the rate you use is for a personal care aide who is performing a whole host of services for an individual, right?

A. Within the definition of what a home health aide would be, there's multiple services they perform, yes.

Q. And we've discussed some of those services already; is that right?

A. We did.

Q. Do you have anything else -- let me just generically, what kind of services would you expect a home health aide or personal care aide to provide to justify the hourly wage that you're offering?

A. General services associated with home health aides would be -- or personal care assistants would be dressing, bathing, providing meal prep, transfers, helping with mobility, assist with medication that's non-intravenous. That would probably be the general categories of

home health aide that I recall. There might be more to it within the definition, but that's what I recall.

Q. Okay. Did you make any attempt to determine which of these services a specific partner of a Plaintiff was actually having to perform due to the Plaintiff's injury or diagnosis?

A. No, that's why I give the one hour a week. That question to me just underlies a factual determination from hearing from the Plaintiff or the Plaintiff's partner or spouse and the court would apply an hours per week per year per Plaintiff, because to me that would just -- that's pure factual.

Q. Okay. So your opinions essentially presume that a Plaintiff needed personal care aide or home healthcare aide; is that correct?

A. My analysis presumes that as a result of their illness, there was some period of time in the past that they needed convalescent assistance, I'll use that

term, for the assistance of another. And then the ultimate number of that would be based upon the court listening to the testimony of the relevant individuals providing evidence on that topic and the court would then have the tool from my one hour a week to divide it if it's less or multiply it if it's more.

Q. But as you sit here, you don't know if an individual Plaintiff actually needed a personal aide or home health services --

MR. RUZICKA: Object to form.

MR. CROMWELL: -- correct?

THE WITNESS: As I sit here today when we talk collectively about the 19 Plaintiffs, I recall general testimony within the Plaintiffs' depositions talking about specific treatments where they were convalescent and recovering, ongoing therapies that were debilitating to them that would trigger the need for

assistance.

As far as specific date and time, I don't recall, but I do recall broadly within all of the Plaintiffs' depositions talking about their respective illnesses, therapies, and how those treatments created periods of time that they could not fully function without assistance.

BY MR. CROMWELL:

Q. You start your past medical and related care calculations on the date of diagnosis; is that correct?

A. Yes.

Q. How is it you decided to start those calculations on the date of diagnosis?

A. A defined anchor point of when to me the parties would agree treatment would commence, right, reasonably therein. I imagine by the date of diagnosis, they were probably feeling debilitated or physically impacted before

that, which probably led them to get evaluated by medical professionals, so a date of diagnosis might be a late period in time, but it's a point in my mind that's an anchor of that commencement date that everyone agreed upon that something changed for all these Plaintiffs on that date at least.

Q. Well, did you do anything to determine whether any of the Plaintiffs did in fact need home health or personal care aide starting on the date of diagnosis?

A. To me, from my general recollection of the deposition testimony, it generally went back, depending on what was asked by the Plaintiffs, but what led you to get medical evaluation and a medical test to determine you had an active disease or one of the five diseases we're talking about, so it was feeling unwell before their official dates of diagnosis, so, to me, my general recollection of the testimony was that the illnesses were already clearly functioning or active in a

person before the date of diagnosis that caused them to get medical care. I don't recall if anyone said, I'm just looking here at Ms. Amsler's case, that she was diagnosed with leukemia on December 12, 2020, that they got care on 2020. I imagine she got medical report from a biopsy or some medical test that said she had leukemia. I imagine, and I don't have her deposition testimony in front of me, that that was probably feeling unwell before September 12th that may have required assistance from a partner or spouse to help her do daily tasks that eventually, I believe, a court would listen to that testimony to say she needed home care, but as conservatively measured, we started from the date of her diagnosis, which was on September 12.

Q. Is it your testimony that each of the individual Plaintiffs was experiencing symptoms before -- of their disease prior to their date of diagnosis?

MR. RUZICKA: Objection, form.

THE WITNESS: I can't speak from a medical perspective, obviously, I'm not a medical doctor and I don't recall the specific deposition testimony for all 19, so I can't say yes or no here.

BY MR. CROMWELL:

Q. Okay. I guess I'm trying to understand the methodology of how you went about determining whether any of the Plaintiffs in fact needed personal home healthcare aides starting on the date of diagnosis versus when their disease may have actually caused some sort of limitation, as you put it, in their daily life?

A. Could I hear that question again? Could you repeat it?

Q. Sure. Could you repeat the question, Madam Court Reporter?

- - - - -

(Whereupon, the reporter read back as requested.)

- - - - -

MR. RUZICKA: Objection, form.
THE WITNESS: Methodology would have been reading the deposition testimony of the respective Plaintiffs or other discovery records to talk about how they were feeling and then the discovery of the illness or disease and then looking at the discovery records available.

BY MR. CROMWELL:

Q. Okay. And you do this for each individual Plaintiff?

A. Yes.

Q. Okay. You understand that the date of diagnosis, right, is in the past, right, and so this information would be available to you, whether a Plaintiff actually needed home healthcare aide on the date of diagnosis is something that could be determined at this point in time, correct?

A. Depending on the evidence, yes.

THE STENOGRAPHER: Depending on the what?

THE WITNESS: Oh, I'm sorry, depending on the evidence, yes.

BY MR. CROMWELL:

Q. Did you make any effort to contact Plaintiffs to determine whether they in fact needed personal home healthcare, personal aide care on the date of diagnosis?

A. I didn't contact them, no.

Q. Would you agree with me on the general principle that simply because somebody is diagnosed with a disease does not mean that they need home health or personal aide care; is that correct?

MR. RUZICKA: Objection, form.

THE WITNESS: On a specific date, are you saying, so I just have Amsler in front of me, that's why I just keeping using her as example, so are you saying Ms. Amsler was diagnosed on September 12 of 2020, are you

saying because she got leukemia or because she got the diagnosis on September 12?

BY MR. CROMWELL:

Q. So we'll break it apart. Simply because somebody is diagnosed with, say, leukemia on a given day, it does not necessarily follow that that person needs home healthcare or personal aide care on that same day; is that correct?

A. I imagine when they're diagnosed with a tragic illness, they're going to need a lot of support on that day of diagnosis. So, again, I can't say they wouldn't need the assistance of a home health aide to provide them comfort and support when they get terrible news. I wouldn't say -- I couldn't say no to that, they probably need a home health aide on that day.

Q. Well, wouldn't the type and severity of the illness play a role as to whether a person needed home healthcare or personal aide care or does that play no

role in your calculations?

A. So I'm not a medical expert, but the five diseases that we're dealing with that I have written reports in, to me, all of these five diseases are significant for me as a layperson that would trigger the need for a home health aide definitely on the date of diagnosis, just merely for the comfort impact of receiving unfortunate news. And then the subsequent frequency of home care, that's going to vary on the disease and the progression of the disease and the treatment program, but they're all going to need assistance from these five diseases. And I think they talk about various periods of time in their respective 19 depositions of treatments and frequency of visits, medical visits, and then medical care.

Q. You mentioned that what kind of care they need going into -- well, the kind of care they may need after their date of diagnosis may depend upon the type and severity of their illness, am I capturing

what you just said correctly?

A. Yes, again, talking as a layperson, I'm not a medical expert, but just common sense, there's going to be a range of treatments depending on multiple factors.

Q. You, in your calculations of past medical and related care, have ended those calculations on the same date for each of the Plaintiffs, December 31, 2025; is that correct?

A. The last day of last year, yes.

Q. Okay. And what is the basis for -- well, strike that.

You did not differentiate between the individual Plaintiffs needed care or home healthcare if you ended all of their related care on the same day; is that correct?

MR. RUZICKA: Objection to form.

THE WITNESS: I don't understand that question.

BY MR. CROMWELL:

Q. Yeah. Because it was a poor question. If you, as you've testified that you did, ended each of these individual Plaintiffs' home health and personal aide care on the same date, how did you account for the differentiation in the type and severity of their illness that may have been different from Plaintiff to Plaintiff?

A. So the 12/31 is selected as a demarcation line from when the life care plans would start for Mr. Fryar. So I used, at that point in time, when I wrote my reports in essence November 1st of 2025, I finished the calendar year for past medical expenses because then the life care plans start January 1st of 2026. So there's a demarcation there.

As far as the frequency of care needed, that's going to have to be based upon the testimony presented at trial that the court will make the determination. Again, just using Ms. Amsler, alphabetically at the top of the reports

for Exhibit 7, I'll imagine she'll testify given her leukemia, she needed assistance through 2023 possibly and then, you know, when possible treatments subsided, then that went away, so the court could take my numbers and stop it in 2023 or if she was getting care or getting assistance from family members or a spouse through 2025, they would have that data for the court to determine based upon what she testifies to at trial, as far as needing someone to help her get to medical appointments, someone to help her after medical appointments, someone to help her prepare her meals, someone to help her after she was tired after leukemia treatments just to put a blanket over her, to help her with, to get her upstairs to take a shower. I'll imagine she'll testify how she will from her recollection of the cancer over the last five years and the court will take that information, have the tool that I have presented the court with to then make any final calculations.

Q. Just to clarify, you're not offering any sort of opinion as to the amount of care that an individual Plaintiff needed as far as home healthcare, personal aide care?

A. Frequency of how much, correct, I am not.

Q. Okay. So are your opinions with regards to past medical and related care limited to the hourly wage rate for a home health or personal aide care for these individual Plaintiffs?

MR. RUZICKA: Objection, form.

THE WITNESS: My opinion would be that the inclusion of such a calculation based upon the records I reviewed as set forth in the respective Roman numeral I of my reports and then presenting the court with, correct, the one hour per week multiplied out per year. There is no present values or in the past, so I would be adjusting that rate for just historical

inflation.

BY MR. CROMWELL:

Q. Okay. So the Plaintiff-specific information that you reviewed and have relied upon go to your first point, which is whether to include past medical or related care as a measure -- as a category of economic damages at all; is that correct?

A. Yes.

Q. Okay. Would you agree with me that the amount of care, if at all, a person needed with regards to home health or personal aide care would affect the overall calculations you would make for any such damages, the frequency, as you put it?

A. Yes, it would change the amount. So if one Plaintiff needed ten hours in the past, that would take my numbers and multiply by ten. If someone is only at two, that would be a lower value, yes.

Q. In many of your reports, you are offering economic damage opinions

regarding lost household services, correct?
A. Yes.
Q. And can you, in your own words, define what you mean by lost household services?
A. Yes. Household services is typically defined as the upkeep and maintenance of one's home, so that would include everything from caring for household members to the physical structure itself. So, maintenance, cooking, cleaning, interior, exterior upkeep, food shopping, that's going to include going to the food store to buy food for the home, so everything it takes to upkeep and maintain an orderly household.
Q. Do you define anywhere in your reports what services go into lost household services?
A. I don't know if I ever define it.
Q. Okay. What -- what do you consider in the calculation of lost household services for a given Plaintiff?

What are your inputs?

A. It would be hours per week of loss multiplied by a replacement value of those services to attempt to purchase those services in the marketplace with the same caveat that I just used, the hourly rate for a collection of occupations commonly associated with household production and that hourly rate would be far below the market cost of purchasing outdoor maintenance services or if you wanted to actually purchase the service of a maid, these are just the direct hourly rates.

Q. You said you include the hourly wages for the occupations of providing the service that you listed previously, correct?

A. Yes.

Q. What did you do, if anything, to determine whether a given Plaintiff needed each and every one of those occupational services?

A. So I didn't do an individual inquiry for those 15 or so occupations that

are cited within my respective footnote for household services. In my experience, household services is a true hodgepodge or collection of household production. So if you take an individual with a minor child, they might be an Uber driver for ten minutes taking the kid to an activity and then they're doing meal prep or they might then be going outside and raking leaves for 15 minutes or unless the winter, shoveling or adding salt to the blacktop.

So having looked at the data and the 15 jobs I've selected, what you find out is the hourly wage is very tightly banded together, meaning you don't have jobs at 7.25 per hour for federal minimum wage and then other jobs at $42 an hour that would create a very wide variance and could distort an average.

All of the occupations having looked at the data for the last 20 years, they tend to be within a dollar to $2 of each other for these selected occupations in the respected geographic area. So

knowing that they're centrally bound to each other and knowing just in human nature what we do to upkeep our home, we wear many different hats at many different times.

Q. Sure. But you would agree with me that the services needed for any particular individual Plaintiff, household services, is unique to that Plaintiff. What one Plaintiff may need is not necessarily going to be the same as what another Plaintiff may need?

A. Possibly, some could have the same limitations, but there could be variances in the Plaintiffs.

Q. Did you make any effort to make any kind of determination as to the variances between the individual Plaintiffs that you're offering opinions about in this case?

A. No, because that's why I give the one hour per week, which ultimately, I think, that's a -- the question you just asked is a pure question of fact of what does Ms. Amsler's limitations create

compared to Mr. Connard's.

Q. I'm not necessarily talking about the frequency, I'm talking about the kinds of services, the hourly wage input that you do calculate is made up of various occupations that an individual Plaintiff may or may not need, depending on that Plaintiff's situation, correct?

A. Possibly.

Q. And I'm asking, based off of that, did you make any determinations as to the services provided by the occupations you listed as to whether these individual Plaintiffs in these cases did or did not need those kinds of services?

A. No, for the reasons that I've stated with regard to my experience with the wage rates and the occupations I selected and, again, just with my experience of household production that many hats are worn sometimes simultaneously.

Q. To calculate the number of hours an individual spends performing

household services, you use data from the 2023 American Time Use Survey; is that correct?

A. In some cases, mostly cases have one hour per week, but, yes, otherwise, if I'm showing what the average production is, it's coming from the American Time Use Survey.

Q. Okay. It wasn't clear to me, are you using the American Time Use Survey to calculate both past and future lost household services or only lost future household services?

A. It's going to depend on the Plaintiff.

Q. Okay.

A. Some of them, I think, a couple of them, three of them are death cases, I believe, where there's probably a past calculation of the average hours, especially in a death case, you know, it's permanent.

With regard to the injury cases, that would have all been

prospective.

Q. Okay. I guess I am trying to figure out, how did you determine whether to use ATUS data for past lost household services for a given Plaintiff?

A. So I typically show the ATUS hours --

Q. Yes.

A. -- as an illustration for the trier of fact, for the court. So should the court make the determination that, let's just switch names, if Connard, Mr. Connard could not do the full complement of household production, the court then is instructed on what that multiplier should be. Thirteen hours per week is the typical average for working males, retired males, on average, it goes up to around 21, but that would be based upon the testimony presented at trial.

Q. No, I understand, I'm trying to understand taking a step back, how you decide whether to give this second scenario for a past -- or past lost household

services and whether to provide that scenario that relies upon ATUS data or not.

A. To my recollection, the past would only be for the death cases.

Q. Okay.

A. To my recollection, the other individuals' past calculations would not include an ATUS calculation. It's probably highlighted in there to show the court here's the hours per week for disclosure, but I don't think I did a calculation to the ATUS --

Q. Okay.

A. -- in the past, for a non-death case.

Q. Okay. Why would you include it for death cases versus those that were not?

A. The household production, the average household production has been lost in a death case, where in an injury case it could be a marginal loss in the past that, you know, because of the treatments and therapies, I used to do ten hours a week of

care, but now I -- or household production, but now I can only do five hours per week of household production. In a death case, unfortunately, a hundred percent of production is lost.

MR. CROMWELL: We have been going for a decent amount, if you guys want to take a break. I don't know what time it is. I'm sorry.

MR. RUZICKA: 12:24, do you want to take a 30-, 45-minute break to eat some lunch.

THE VIDEOGRAPHER: All right. We're going to go off the record at 12:22 p.m.

- - - - -

(A recess was taken at this time.)

- - - - -

THE VIDEOGRAPHER: Back on the record at 1:08 p.m.

BY MR. CROMWELL:

Q. Mr. Staller, before we broke, we were discussing your general calculations with regards to lost household

services.

Do you recall that testimony?

A. Yes.

Q. I want to specifically look at past lost household services. You estimate the value of past lost household services using two scenarios, depending on the individual case; is that correct?

A. Two scenarios either being one hour per week or the ATUS hours, yes.

Q. Correct. For each of the scenarios you presume that a Plaintiff had economic damages for the value of lost household services from the date of their diagnosis until December 31, 2025; is that correct?

A. For past, yes.

Q. Okay. And as you just mentioned, first, your first scenario you provided an illustrative calculation of one weekly hour of lost household services; is that right?

A. Yes.

Q. And as part of that

calculation, you determined the hourly rate for the lost household services and provided an estimate for that one hour; is that right?

A. Yes.

Q. Okay. And to determine the hourly rate for household services, you rely upon specific occupations; is that correct?

A. Yes.

Q. And you looked at a group of occupations and in your report you entitled this group, household service occupational groups; is that right?

A. I think that's the term I used, some term like that, yes.

Q. Okay. And this includes healthcare support, food preparation and serving, building and grounds cleaning and maintenance, personal care and service, sales and related office and administrative support, installation, maintenance and repair, and transportation and material moving; is that correct?

A. So those are not the specific occupations, but those would be the broader category. If you go up within the Bureau of Labor Statistics, yeah, those would be the job classification codes within where you'll find the specific occupations identified.

Q. So these are the general broad categories that will contain the actual occupations of which you rely on in forming that hourly wage rate; is that correct?

A. Yes.

Q. Okay. And the occupations you're referring to, you identify them as, quote, "the representative occupations;" is that right?

A. Yes.

Q. I think you just explained it to me, but the representative occupations are essentially subsumed within these larger broad categories of occupations and you use these grouped together to determine the hourly wage rate that you're relying

upon; is that right?
A. Yes, so just for some specificity --
Q. Sure.
A. -- so looking, I'm just looking by illustration on Ms. Amsler's case again, the broad grouping categories are coming from footnote 26, right, where then in footnote 25 is going to have the specific occupations, but where you just read from, it's going to have the broader categorization which I used really for the wage growth.
Q. Understood. And so just for the clarity of the record, you're referring to Exhibit 7, which is Ms. Amsler's report; is that correct?
A. Yes.
Q. Okay. When looking at Ms. Amsler's report specifically footnote 26, the -- well, my apologies, looking at footnote 25, the representative occupations, did you select which occupations to include in this

representative group?

A. Yeah, so footnote 25 would be a standard footnote that I use for the last 15 years or so to model out a replacement value of household services.

Q. But you're the one who selected the occupations that go into your hourly wage calculation; is that correct?

A. True.

Q. Do you have anywhere in your report a description of the methodology as to how you determine which occupations you do or do not include in your calculation?

A. What I do include is set forth in footnote 25, as far as a narrative describing it, it would've -- I believe you asked me a question about it before lunch where I narratively described it in today's deposition, but not in the report.

Q. Okay. Were there other -- are there other occupations that could have been included within this representative occupational group that you rely upon?

A. There are other occupations

for sure, yes.

Q. For instance, in other personal injury cases, are there other occupations that sometimes you include in your --

A. Oh.

Q. -- say that again, I'm sorry?

A. I just said, "oh."

Q. In other personal injury cases, are there other occupations you rely upon in formulating your hourly wage rate?

A. The only additional job that I include would be childcare workers, but here with this population, I removed childcare workers.

Q. Okay. And I think if I'm understanding your testimony from before lunch, would you agree with me that you did not make any attempt to compare the occupations that you did select for the representative occupations based upon what the individual Plaintiffs in these cases needed or will need in the future?

MR. RUZICKA: Objection, form.

MR. CROMWELL: -- is that correct?

MR. RUZICKA: Objection, form.

THE WITNESS: Agreed, my list, I didn't specifically tailor to a specific Plaintiff. In my experience, just knowing, and from personal experience of what household production is, it's a collection of occupations all at once or at different times throughout a day or an hour, so I did not limit one Plaintiff's hourly rate replacement value to one specific occupation.

BY MR. CROMWELL:

Q. Just to break that apart a little, do you know whether any individual Plaintiff for which you've rendered a report will need, for instance, assistance with food preparation?

A. So I don't recall, and, again, there's 19 depositions or more, but 19 are Plaintiffs, I don't recall a

specific person off the top of my head saying, I can't cook, but I do recall people saying there's many things I can't do, so and I don't know if it was explored further in the depositions by you or your colleagues.

Q. Did you evaluate whether any individual Plaintiff will need help or did need help washing dishes as a result of their diagnosis?

A. I have personal facts about that, again, in the depositions that I recall, generally, I think there was general discussion in many of the depositions about fatigue, limitations, general limitations, but I don't know if the specific task was Q and A questioned and answered about dishwashing.

Q. Okay. So, as you sit here, you don't know whether any individual Plaintiff will need help washing dishes; is that right, or did need help with washing dishes?

A. So, in the past, I don't

recall someone specifically enumerating saying they could not wash dishes. I do recall from their deposition testimony limitations from their illness and treatment and sequelae, which may include washing dishes, which I imagine would be developed further at testimony, trial testimony, but as far as a record of that being stated explicitly, I don't have a recollection of that explicit statement.

Q. Okay. Did you evaluate based off the records you did have available to you whether any individual Plaintiff will need help cleaning their house?

A. It would be the same answer, I don't -- just to answer that, I don't have a specific recollection of the testimony saying I didn't clean my house or I couldn't clean my house. I do have a recollection of the testimony saying, a common theme was recovering from treatments, fatigue, tiredness, limitations moving around for periods of time. But not that specific verbiage, I don't recall.

Q. Right. So, as you sit here, you don't recall any evidence that showed an individual Plaintiff will need help cleaning their house or did need help cleaning their house?

MR. RUZICKA: Objection, form.

THE WITNESS: Well, I don't know about that question, because evidence to me, there's evidence that they had illnesses and they had illnesses that created physical limitations that would necessitate them to have assistance. As far as the specific statement, cleaning your house, I don't, sitting here today, recall that specific statement, but there is evidence of limitations and there's evidence of illness and that required treatment and the treatments created care periods or limitation periods, you know, given the either chemical cocktails one was taking, surgeries, or therapies, but as far

as that statement, I don't recall that statement off the top of my head.

BY MR. CROMWELL:

Q. Okay.

A. And the statement being, for the record, housecleaning.

Q. Right. So I understand you're referring to testimony generally speaking about limitations in someone being diagnosed, but I'm asking pretty specific questions as to based off of the evidence that you have available to you and the evidence you've reviewed, do you have any information that an individual Plaintiff needed help cleaning their house?

A. I don't know off the top of my head.

Q. Okay. Do you have any evidence, sitting here, that an individual Plaintiff needed help keeping up their landscaping?

MR. RUZICKA: Objection, form.

THE WITNESS: I don't know off

the top of my head.
BY MR. CROMWELL:
Q. Do you have any evidence whether any individual Plaintiff needed help with performing maintenance and repairs around their house?
A. I don't know off the top of my head.
Q. Do you have any evidence whether any individual Plaintiff could perform maintenance and repairs around their house but eventually could not because of their diagnosis?
A. I don't know off the top of my head.
Q. Did you or anyone on your team interview anyone, including the Plaintiffs, regarding what household services the individual Plaintiffs could perform prior to their diagnosis?
A. No.
Q. Did you or anyone on your team interview any of the -- anyone, including Plaintiffs, regarding the

household services they -- well, strike that.

Would you agree with me that the idea of lost household services is to replace the services that a Plaintiff would need help with or did need help with?

MR. RUZICKA: Objection, form.

THE WITNESS: I guess, generally, in my mind, I don't know if we're saying the same thing, but in my mind, household services replacement is someone used to be able to maintain their household and can no longer do certain activities. So, no, I think we're saying the same thing, but --

MR. CROMWELL: Okay.

THE WITNESS: -- that's how I look at it in my lens that I used to be able to cook, clean, shop --

MR. CROMWELL: Right.

THE WITNESS: -- I can't do some of those activities, I need help.

BY MR. CROMWELL:

Q. For the basis of you determining your hourly wage rate, you are presuming that a Plaintiff needs help with each of the services offered by the occupations you've included in your hourly wage rate, correct?

MR. RUZICKA: Objection to form.

THE WITNESS: I don't view it that way. I view my hourly rate as, again, an average of the 15 or so occupations that represent general household production. As mentioned earlier, the household hourly rate when you look at those 15 wages are tightly banded together, so there's not much distinction between the hourly rate right now for an Uber driver and a fast-food cook or for a short-order cook or a dishwasher or janitor, they're all within a dollar to two at most, typically, in the

geographic area.

BY MR. CROMWELL:

Q. Right, but inherently if you're including the wages of those occupations, you are presuming that the services offered by those occupations will be something that the individual Plaintiff needs, correct?

A. Or can no longer perform, that there's some level of limitation across the board of those hodgepodge collection of occupations, yes.

Q. Okay. In your general practice as a forensic economist, do you typically obtain information from the individual Plaintiffs regarding the household services they were able to perform prior to their diagnosis and unable to perform after their diagnosis?

MR. RUZICKA: Objection, form.

THE WITNESS: Generally, no, just because having used that damages checklist where we have a pre and post, I tend to find when

you ask those questions, people's memory of hour estimates are not very reliable, which is why we reference and which I reference the American Time Use Survey, just because what people remember from a year ago about their cooking habits or cleaning habits, it's not very reliable on just time just because we're not forced to keep time records, so.

BY MR. CROMWELL:

Q. Just to clarify, because the damages checklists that were provided to the Plaintiffs in this case do include a section of household services asking for pre-injury services and post-injury services, correct?

A. That's our standard checklist that does have that delineation, yes.

Q. Why do you include that in your checklist if you as a general rule don't rely upon it for offering your opinions?

A. It's a standard form that we've had for 20 years, I have been here 22 years. It's kind of interesting to see what someone may respond, but having looked at that form for 22 years, I've learned when comparing that to the American Time Use Survey, which is a time diary that people do have to keep track of their time, and just knowing how I personally keep track of time, unless I have a time diary, sense of reliability on those estimates are very reliable for time, meaning they'll be housecleaning, pre or post. The pre number isn't very reliable, the post number is not very reliable, because these individuals, like all of us, don't keep track of our time of, in 1999, I can't tell you how long I spent per hour cleaning my kitchen. I can't tell you in 2017 how long I spent cleaning my kitchen. I know the task got done. I know I completed the task. So I don't like to use those as proxies of marginal loss of time just knowing the inherent lack of reliability when there's

not a contemporaneous timekeeping metric.

Q. I'm going to strike it as not responsive.

Your forms don't say anything about time, correct? You're not asking for someone's allocation of time. Your forms ask about whether certain services were performed prior to their injury and whether those certain services were performed after their injury, correct?

A. Not to my recollection, I think they have a --

Q. Sure.

A. -- I think it says hours per week or per day in the pre and post.

Q. Let's -- I grabbed the right one -- enter this as Exhibit 34.

Mr. Staller, what has been marked as Exhibit 34 is what we have been referring to as a damages checklist and this is in particular with regards to Plaintiff Amsler, Bates number 1 through 11; is that correct?

A. Yes.

- - - - -

(Damages Checklist/Injury/Adult for Amsler Bates PLG-EXPERT__STALLER__AMSLER__ 0000000001 to 11 marked Staller Exhibit 34 for identification.)

- - - - -

BY MR. CROMWELL:

Q. And if you would turn to the page ending in Bates number 8. This section is entitled at the top, "Household Services;" is that correct?

A. Yes.

Q. And it lists a number of household services on the left, is that right, including housework, cooking, pets, vehicle maintenance, et cetera?

A. Yes.

Q. And you have two columns, pre-injury services and post-injury services; is that right?

A. Yes.

Q. And as you sit here, is it

your testimony that you don't rely on this particular -- these particular answers in formulating opinions in personal injury cases?

A. It's my testimony that typically what I'll see is individuals will assign hours either per day or per week under the two headers, pre-injury and post-injury. And my testimony is I would not rely upon that hour differential in my analysis.

Q. If they included the hours that they did it, wouldn't that also indicate which services they did or did not do prior to their injury and after their injury, right? Inherently within providing a time, they're suggesting that they performed the service to begin with, correct?

A. Possibly.

Q. Are you aware of this particular section being completed for any of the Plaintiffs that completed the damages checklist?

A. I don't know off the top of my head.

Q. Okay. If you can go back to Exhibit 7, which is your Amsler report. If you look at page 5, we were talking about footnote 25 previously, the representative occupations.

A. Yes.

Q. And in that you include home health and personal care -- you include these hourly wage rate for home health and personal care aides; is that correct?

A. Yes.

Q. In a number of your reports, you have already accounted for the home health and personal care aide wages for past medical care; is that correct?

A. In some of the reports, yes.

Q. To the extent that your reports have both a calculation for household services and past medical and related care, would you agree that it's duplicative to include that particular wage when calculating household services?

A. I could see the rationale for excluding the home health aide. It's, again, not going to do anything to change the average wage rate represented, but that's fair that it could be removed.

Q. You offer a second scenario, we already talked about, for calculating lost, past household services and you utilize the ATUS rates you found applicable for a given Plaintiff; is that correct?

A. Yes.

Q. And the ATUS rate is simply an estimate of the hours per week, is that what you mean by ATUS rate?

A. That's what I'm representing in my respective table when it's presented, that's going to be hours per week depending on the specific demographic cut.

Q. Okay. Do you know whether the ATUS rates are empirically tested?

A. The hours per week?

Q. The ATUS rates, and specifically the hours per week that you rely upon?

A. It's vetted published data from the Bureau of Labor Statistics American Time Use Survey. I would have to look at their technical footnotes again to look at their review process, but it's coming from published data from the Bureau of Labor Statistics.

Q. Okay. And it's common practice for you to rely on statistics from those government agencies?

A. Yes.

Q. And these rates offered by ATUS -- included in the ATUS tables, these are based upon employment status, presence or absence of dependents in the household and the age of the youngest child; is that correct?

A. Yes.

Q. Okay. How do you know whether the hours per week proposed by the ATUS are the same number of hours an individual Plaintiff needed for their past household services?

A. It's a statistical average,

which has been peer reviewed and vetted by the Bureau of Labor Statistics as an average figure, the same way we have average expectancy, average work-life expectancy --

Q. Right?

A. -- it's a statistical average.

Q. But you would agree it's not specific to the Plaintiff, right?

A. Agreed for the reason I have mentioned a few minutes ago that individuals without having a contemporaneous time diary are not going to be accurate historians of their time spent doing any task, whether it's a work task or a household production task, which is why we use the American Time Use Survey, because it gives reliability to the calculations, because these individuals, around 12 to 13,000 Americans every year, are asked to use a 24-hour time diary where they account for every minute of their day, bathing, toileting, commuting, working,

shopping, cleaning, interior, exterior, meal preparation, helping people in the household. Every one of those tasks is delineated in a time diary, which gives it reliability that my questionnaire provided to Ms. Amsler in 2025 for when she gets ill in 2020, lacks the reliability of time allocation, not general production, but of time allocation, which is the very reason we use the ATUS.

Q. Just I'm trying to understand, so you use the ATUS because the information you would receive from the individual is based off faulty, oftentimes, based off faulty recollection or what's the -- sorry. I'm going to withdraw that.

I'm still trying to understand the use of the ATUS numbers. Is it because that, and I think you alluded to it in Ms. Amsler's damages checklist is that these are not going to be accurate numbers or a recollection of what a Plaintiff would have performed?

A. Yeah, so, for example, and I

don't mean this pejoratively, if I asked you in 2022, today, in 2022, in March how long did you spend cooking dinner each night? And I imagine you would likely say I don't know. Dinner was made and prepared, whether it was by me, my spouse, somebody else, but I don't know how long on March 10 in 2022, it took me to cook dinner. I know dinner got cooked. How long did it take to clean up dinner in 2022? I don't know, apparently, the dishes got put away either by me hand washing them or putting them into a dishwasher, but I don't know if that took ten minutes or 25 minutes. So you knew the task, you can say, I have made a meal, I cleaned up a meal in 2022, but you cannot say reliably how long it took you to do such a task.

Q. Okay.

A. Which is the very reason we use the American Time Use Survey, because that question has been answered by those 12 to 13,000 Americans that are blindly selected and then they're given this time

diary that said, hey, in 2023, when I took this diary, meal prep took me 30 minutes a day and then to get a week, you multiply it by seven, but that's the very nature of why this data is so great, because it keeps a time diary of the questions that we don't track. How long did you walk the dog in 2024? Was it a nice winter? Was a cold winter, a lot of rain, lack of rain, I don't know, but the dog, hopefully, didn't go outside and went inside. But these people keep maintaining pets, they are asked that question. The individuals, obviously, that don't have pets, they put a zero, they're excluded. People with pets respond to that question with the time. I walked the dog for 12 minutes a day, so then we know, on average, the household would spend 12 minutes a day, multiply that by seven, you get a little over an hour of a week of dog care, just not dogs, there are other pets, but pet care, which is exactly why I don't use individuals, going back to my bifurcation in my survey, I'm

generally looking for a flavor of service. Did they do stuff? Do they talk about stuff, either in my checklist or deposition testimony, Answers to Interrogatories, other damages assessment forms, is there some other basis for it? Once I have basis, I then go to either to the one hour per week or the ATUS. In the death cases, we see we do the ATUS, because on average, we expect that that has been lost to the household.

Q. Okay. Okay. So you don't -- you don't use individual estimates as to amounts of time, because they are, in your experience, unreliable?

A. Well, poor historians for good reason. We're not meant -- we don't keep track of our time doing these tasks.

Q. Understood. And so a person may say, for instance, I think I spent two hours, you know, cleaning, you know, a week, but in your experience, that doesn't -- isn't necessarily a reliable estimate and so you rely on something like

the ATUS to provide those kind of calculations?

A. Correct. So working with this form and many cases over 22 years, I would see wacky numbers. There's 168 hours in a week, 24 times seven, and sometimes I've seen household production of, you know, 140 hours, which seems really, really high to me or it was a family of three kids and she was a mother that's injured, unfortunately, and she had, like, three hours. I'm, like, that doesn't seem right either --

Q. Yeah.

A. -- it doesn't make sense. So just we're just, from my experience, I like the form for context of household activity, not for specific hours per week, just given that I know that people are not keeping time diaries, which then brings you to, okay, where can we find such a survey? Well, there is such a survey that exists that gives us the reliability question to be checkmarked. We have a reliable source

where people are doing household tasks on an everyday nature where they were keeping a 24-hour time diary, very similar to that of a defense attorney, an accountant, anyone that bills by hours or quarter or tenths of an hour.

Q. So just to bring this all together, so for you to calculate lost household services, aside from the wage rate, you would rely upon empirically tested information like the ATUS to give you the estimated amount of hours an individual would have been spending on a particular task; is that right?

A. Correct.

Q. Okay. A number of your -- the Plaintiffs for which you offer lost household service opinions simply provide the hourly wage rate, correct? They don't offer necessarily the frequency that the individual performed.

A. Is your question some of my reports I don't give an ATUS column?

Q. Yes.

A. I just do -- but I do one hour per week, so it's 52 weeks -- 52 hours per year.

Q. Right, with that caveat, but you do have a number of reports where your lost household service calculations are simply for one hour per week and you leave it up to the fact finder to determine the frequency; is that correct?

A. That is correct.

Q. If individuals are faulty historians, as you've testified, then how would a fact finder come up with a reliable number of hours that a person performed for household services?

MR. RUZICKA: Objection, form.

THE WITNESS: So I'm not the fact finder in this case --

BY MR. CROMWELL:

Q. I understand.

A. -- but if I was to answer that question, the way I would describe it as an economist is I would give reference to the ATUS that if we're talking about,

for example, a working professional with no children, so looking at Ms. Amsler, that's rounded out to 19 hours per week. So one assumes she can't do everything, there would be a loss of 19 hours per week on average.

I would imagine Ms. Amsler will testify and then she would testify to the court that pre-diagnosis, I used to do a full complement of things and then post-diagnosis, there was a period of time, and I'm hypothetical what her testimony will be, I'm just giving the illustration, that during my treatment and everything else, there was a period of time I couldn't do anything. So then the court would say, in my mind as a finder of fact, I would say, hey, for a period of time, Mr. Staller's number should be multiplied by $19 -- or $19 per a week, his hourly rate for those years, 2020, 2021, '22.

Then she might testify, hypothetically, I got a little better but I have residuals. I still have a hard time

picking up heavy things. I get fatigued easily, so I really can't do mopping, household cleaning, or cooking. Okay. So the finder of fact would then say, well, if the entire complement of household production is 19 hours for a working person, and it sounds like from the testimony I heard from Ms. Amsler, it sounds like she can't do half of it, there's going to have to be some assessment made by the trier of fact, that's their role, so they might come up with a ten-hour loss for the remaining period of time, because she might describe, hypothetically, that I have lingering effects from the medications or I have lingering effects from the leukemia, and here's what I can't -- it's just going in the future, this is the way it is. I suffer, I always get tired more easily compared to what I used to do, and the court would say, all right, if we know on average a working woman does 19 hours, I think, in my judgment as the fact finder, there has been

a loss of half and then they would have the tool to do both, complete loss, 19 hours for those years of aggressive treatment and care for those first four years, and then that's an average, and then afterwards, based upon her testimony, some modification to that number and they would be guided by the American Time Use Survey and then the testimony presented by the respective witness.

Q. But in your experience and in your opinion, the fact finder would be relying upon testimony of what you call a poor historian; is that correct?

MR. RUZICKA: Objection, form.

THE WITNESS: So I think the fact finder would possibly run into trouble if they listen or accepted the hours per week from the witness. If they said, I used to do it 22 hours a week and now I can only do it four. I would agree, in my experience, I'm not here to weigh the credibility of that

witness, but in my experience, those hours might tend to be inaccurate, whether over or under, but inaccurate. The trier of fact here, for good reason, might find those numbers to be accurate.

Should they not find those hours to be accurate, I'm not concerned with that, because what I use it for is more of the context. I used to do all these tasks and now it's been reduced by some level, partially or completely, and then the fact finder will have to make some interpretation of what does that mean to that fact finder, to that judge, in this case, does that mean a 25 percent loss? Okay, there's a 25 percent loss on 20 hours, right? That's going to be five hours lost. And that gives them the tool. There will have to be some fact-finding personal

assessment of the evidence presented.

I'm talking fast, I'm sorry. I get excited about this stuff.

BY MR. CROMWELL:

Q. For each Plaintiff, to estimate the value of lost household services -- scratch that.

Would you agree that the data you rely upon from the ATUS does not apply exclusively to any of the individual Plaintiffs' diseases?

A. Right, it's not household production for individuals that did not have --

Q. That had bladder cancer.

A. Right, or that didn't have it or then got bladder cancer, it's -- no, it's a population, in this population to get to an average figure, there will be people with various comorbidities.

Q. The data that you rely upon applies to people in the Plaintiff's, in your opinion, the Plaintiff's demographic

range, right, gender, marital status, retired or not; is that correct?

A. Correct, so the demographics cuts, right, would generally be male, female, age, children in the household, and their cut based upon age brackets for the children.

Q. Okay. Did you perform any kind of independent analysis regarding what household services were performed by any Plaintiff prior to their disease diagnosis?

A. I did not do an individual reassessment of a respective Plaintiff, no.

Q. Is it true you don't know what household services any Plaintiff was able to to perform that they already -- that they did prior to their diagnosis, correct?

A. Can I hear that one more time?

Q. Yeah. If you didn't identify what kind of services an individual Plaintiff performed prior to their diagnosis, you don't have a way to compare

and determine what household services they were unable to do because of their diagnosis, correct?

MR. RUZICKA: Objection, form.

THE WITNESS: True, I would defer to testimony on that, which would be a factual determination.

BY MR. CROMWELL:

Q. All right. To estimate the value of future lost household services, you again provide two scenarios; is that correct?

A. In most of the cases, yes.

Q. Okay. And the first is an illustrative calculation of one hour, one weekly hour of future lost household services; is that right?

A. Yes.

Q. And the second scenario you utilize, again, the ATUS rates -- ATUS rates, based upon the representative occupations and the corresponding geographic state; is that right?

A. Yes.

Q. If you would get out your Connard report, which is Exhibit 8.

A. Eight.

Q. And if you would, if you would turn to page 5, it starts at the top, household services.

A. Yes.

Q. And under, in table B, you provide two rows of information for the type of household, one is working, no dependent children, and retired, age 65 to 74; is that correct?

A. Yes.

Q. Okay. If you look at the Table 4, which is your -- which is on page 11 of Exhibit 8, this is your calculation of lost household services from January 1, 2026, to age 73.5; is that right?

A. Yes.

Q. Okay. Can you tell me where the two rates, the hours per week that you identify in table B, can you tell me which rows used those individual rates or did you

only simply use one of the rates?

A. So if you are looking at his age, so in the future, it's all 21.98, because he was already going to be retired in all future years.

Q. Okay. Understood. So what is -- what part or relevance, I guess, does the working no dependent children rate have to your opinions?

A. That would have been for Table 3, I didn't do an ATUS, but it gives --

Q. Right?

A. -- context to the trier of fact that if they want to award during the working years, he, unfortunately, passed away very young, the $10,067, which is the total number of one hour per week would be multiplied by 13.

Q. Got it. So if you wanted to rely on the ATUS data, you would multiply the 13.02 times the 10,067 from Table 3; is that right?

A. That's true.

Q. Okay. If you would get out Exhibit 22, which is your rebuttal report.

A. Sure.

Q. First of all, would you agree with me that, as you sit here, the diminished number of hours of household production can't be ascertained from empirically tested sources -- from an empirically tested source?

A. True, that's going to be a case-by-case factual inquiry.

Q. Okay. In your rebuttal report, Exhibit 22, you state, "Given that the diminished number of hours of household production can't be ascertained from an empirically tested source, our illustrative calculation of one weekly hour of lost household services allows the trier of fact to decide what number is reasonable based upon the evidence presented at trial."

First of all, did I read that correctly?

A. Yes.

Q. What do you mean by,

"empirically tested source"?

A. So I don't recall which of the three government economists, it was either Tosic or Brod, I don't think it was Ms. Yount, but they have attempted to do a specific reduction in services based upon some of the testimony that existed in the record and they attempted to ascribe certain hour reductions, which to me, those experts are then sitting in the seat of the judge who is the trier of fact in this case. As economists, as experts, we're not the trier of fact to interpret factual determinations, that's not our role as economist expert witnesses. So the numbers that they've selected, Brod and Tosic, I believe those are the two that did it, can't be tested. There's no way to measure their accuracy and they're simply supplanting their opinions for the judge in this case as the trier of fact, which is the one hour a week is a better metric, because if I read testimony, then I'm giving weight to testimony, I'm giving

weight to the credibility and then weight to how much, because I don't recall any Plaintiff or any spouse providing a time allotment. They said I used to cook or clean, they did say some things of household production, but they didn't really give --

Q. Right.

A. -- hours per week and then there has been an interpretation by that economist, Tosic or Brod, to that narrative, to that testimony, which is outside our expertise as economists. So that's how I'm referring to as empirically tested.

The numbers they've selected arbitrarily for the testimony, I can't test it to any source or it can't be peer reviewed, it can't be tested by other economists, so I find it to be an unreliable measure to offer an alleged opinion to a reasonable degree of economic certainty of the loss of household services when that's purely a fact-finding inquiry.

Q. So if a Plaintiff were to testify about the amount of time they spent on certain household services, you would agree that you would be unable to, within a reasonable degree of economic certainty, reach a conclusion as to the actual amount of hours that person spent on the service?

A. So, yeah, I would be concerned about the reliability sitting here at deposition in 2025 for things that occurred either in 2010, 2023, whenever, I would be concerned about their reliability. But that could be tested, if they gave specific hours, that could be tested across the American time use data, the average production. So if they said they did cooking for X hours, we do have average data for what a male or female would be expected to spend on cooking tasks, cleaning, likewise.

Q. Right, but for a number of the Plaintiffs, you don't provide the amount of hours from the ATUS for household services, correct, so you wouldn't be able

to compare those rates?

A. I would need a different, I don't understand that question for --

Q. Sure. There are a number of reports in which you do not offer the amount of hours from the ATUS for Plaintiffs past household services, correct?

A. Past, I do not do an ATUS calculation for past, correct.

Q. So in those cases where you don't have a calculation based off the ATUS, you would agree with me, you can't make a comparison between the ATUS hours and what the person may or may not testify to as to the actual hours they say they spent on a given service?

A. So, in my report, I probably -- it depends which report but, I likely gave a table that set forth for the future the average hours for working, retired, which of these individuals fit in one of those two categories, so that data is within each respective report that the

trier of fact, as I just gave the illustration --

Q. I just want to make sure, I'm talking about past lost household services, not future.

A. No, agreed, but is it just in Mr. Connard's case -- yes, in Mr. Connard's case, I just gave the illustration of how the court would do that. I went to page 5 where it was the 13 hours rounded and then I used that data and applied it to Table 3, which is the past loss of household services at one hour per week, so I just gave the illustration of how the court would use that using the average data from the American Time Use Survey for the one hour per week illustration.

If the court made the determination that in the past, based on the totality of the evidence they received on a particular Plaintiff, that 50 percent of production was lost, then they would take that and for Mr. Connard's case, they would take six and a half and multiply that

by the $10,067.

Q. Okay. Let's move on to another one of your opinions, lost earning capacity. In your reports for certain Plaintiffs, you have sections entitled, "Lost Earning Capacity;" is that correct?

A. Yes.

Q. And can you just briefly define for me what lost earning capacity means?

A. As I use it, it's the diminished marginal loss in the ability to generate a wage or income in the labor market.

Q. Okay. And you would agree with me that a person's expected earnings or wages plays a fairly pivotal role in how you determine a person's lost earning capacity?

MR. RUZICKA: Objection, form.

THE WITNESS: It would definitely be a factor, yes.

BY MR. CROMWELL:

Q. Well, in fact, in your

reports -- in your reports calculating lost earning capacity, you consider the Plaintiffs lost earnings or wages every time, correct?

A. I don't understand that question.

Q. Sure. So you have sections -- well, let's walk through an example, if you can pull out Exhibit 7, which is your Amsler report.

A. Yes.

Q. And if you look at page 3, the bottom, you have a Section 6 entitled, "Lost Earning Capacity," correct?

A. Yes.

Q. And if you flip to page 4, you have two sections, one entitled, "Past Lost Earnings" and the second one is "Future Lost Earnings;" is that right?

A. Yes.

Q. To estimate the Plaintiff's earning capacity, absent the incident, you utilize Ms. Amsler's, for instance, annual earnings at the time of their diagnosis,

correct?

A. Yes.

Q. And to estimate a Plaintiff like Ms. Amsler's potential future lost earnings, you utilized the annual earnings the Plaintiff had at the time of the injury or their premature retirement, right?

A. Or passing, one of the three, yes.

Q. Okay. Or passing. So, in short, you are relying on the Plaintiff's -- strike that.

In offering opinions on lost earning capacity in these cases, you are relying upon the Plaintiff's annual earnings to formulate your opinions; is that correct?

MR. RUZICKA: Objection, form.

THE WITNESS: Historical annual earnings?

BY MR. CROMWELL:

Q. Yes.

A. In most of the cases, yes, to measure the past or future loss of

earnings, as to get a benchmark of that loss, it will typically be looking at their historical earnings in these cases, yes.

Q. Right. And is that generally true for the other personal injury cases you testify in?

A. Generally, not always. It's going to vary on the plaintiff's age, if you have a minor plaintiff, obviously, you can't use historical earnings, because they don't have labor force history. If an individual transfers into a new occupation or gets retrained, there will be reasons why you don't use historical earnings, but in a fair number of cases, I'll use their historical earnings, yes.

Q. Okay. And you've done that here, correct?

A. Yes.

Q. What is the difference between lost earnings and lost earning capacity?

A. That's going to vary on state definition or statutory definition.

Each -- various states have various definitions for those two topics, those two labels.

Q. In an economic sense, how do those compare?

A. In an economic sense, holding at bay any legal definition from a statute or case law, generally, lost earning capacity is more potential energy versus kinetic energy. What I mean by potential energy, that is the ability to generate a wage in the labor market based upon background, training, and experience, physical and cognitive abilities. And when I use the term, "potential," versus kinetic energy from science, right, that doesn't actually have to mean that the person per se did generate that specific amount of money. It's their potential given their occupation, training, et cetera.

Lost earnings, typically, is a more kinetic measure where it has been specific to -- it's more frequently used in employment cases where it would be an

employer/employee relationship or in personal injury cases that have that specific definition in a specific statute or state, it would be more limited to, typically, some historical performance in the labor market.

Q. Okay. But for the lost earning capacity opinions you're offering for these individual Plaintiffs, you agree that you are relying specifically on their past or future earnings, correct?

MR. RUZICKA: Objection, form.

THE WITNESS: I would agree to measure their past loss or future loss. In most all of these cases, just given the age of these Plaintiffs and their labor force access, to measure that, I use their historical earnings --

MR. CROMWELL: Okay.

THE WITNESS: -- pre-diagnosis, pre-incident earnings, yes.

BY MR. CROMWELL:

Q. Understood. Okay. So for purposes of your report, a person's lost earning capacity is simply based upon the historical earnings, aside from one case, of the individual Plaintiff; is that correct?

MR. RUZICKA: Objection, form.

THE WITNESS: For the majority of the Plaintiffs in the Camp Lejeune cases that I measured, loss of earning capacity from diagnosis, so there would be some past period and future period, yes, the guidepost, the benchmark I use is coming from their historical earning performance.

BY MR. CROMWELL:

Q. Okay. Are lost wages different from lost earnings?

MR. RUZICKA: Objection to form.

BY MR. CROMWELL:

Q. Do you treat them the same?

A. I treat them the same.
Q. Okay. Same question, are lost wages and lost earnings different from the term, "lost income," or do you treat them the same?
A. Absent a specific statute or other legal definition, I treat loss of income and loss of earning capacity the same, yeah.
Q. All right. You have certain sections with regards to earning growth in some of your reports; is that correct?
A. Yes.
Q. And earning growth is simply how much particular wages have changed over time, correct, or will change over time?
A. Correct.
Q. And when looking at past growth, you're starting from the time of injury or what you can classify as premature retirement to the present for a given Plaintiff; is that right?
A. Yes.
Q. And then for future growth,

you're estimating what the future growth might be per year for the Plaintiff's remaining work-life expectancy, correct?

A. True.

Q. And future growth is based upon, for instance, the specific occupation the person may have; is that correct?

A. That's true.

Q. And it may be based upon where they work geographically, correct?

A. True.

Q. So is it fair to say your calculations for future earning growth assumes, for instance, that a person's job will remain the same through their life expectancy or work-life expectancy?

A. The job would remain the same industry through their work-life period, yes.

Q. And it also assumes that the person would be living in the same place for the remainder of their work-life --

A. True.

Q. -- expectancy?

So it would follow that if a person changed jobs and into a different industry and they moved, their future wages would also inherently change, correct?

A. Future wages may change. If you see, the growth rates tend to be within the future, you know, I did multiple Plaintiffs' earnings here, they tend to be very close between, like, two three and two nine in future wage growth, but it may change, that's true.

Q. Okay. Does the fact that someone could change jobs in the future or move to a different market add reliability to your projections of future earnings for an individual Plaintiff?

MR. RUZICKA: Objection, form.

THE WITNESS: No, I mean, that's a common question to me, that's a kitchen sink question, I mean --

BY MR. CROMWELL: --

Q. It's meant to be.

A. -- yeah, I mean, anything

could happen, right, and that's why I don't testify to an absolute certainty, I testify to a reasonable degree of economic certainty. That's the legal standard under the federal rules, almost every state rule, because we don't have the crystal ball, but especially with these individuals, for that specific question, they're mostly older and more advanced in their career, they're, on average, are likely to be less transient, they're likely to be more established in their geographic area and their occupations. You can see from the number of years of future calculations, there's not a lot of work-life left for these individuals on average compared to a 25-year-old or a 30-year-old that's injured in some event, so, no, just anything could happen to anybody at any time, but to build a model, I can say to a reasonable degree of economic certainty, my model meets that standard using this data and this presentation that is commonly presented by forensic economists.

Q. To offer your opinions in this case or any cases, you agree that absolute certainty is not required, correct?

A. True.

Q. Absolute certainty about the future is not required; is that correct?

A. We do not have that ability.

Q. Right. The fact that events in the future may change some of the variables you rely upon does not render your opinions unreliable or speculative, correct?

MR. RUZICKA: Objection, form.

THE WITNESS: Well, it's going to depend on what opinions are being offered, but for the opinions of lost earnings and future medical care and household services, and agreed, it wouldn't make them unreliable.

BY MR. CROMWELL:

Q. Okay. Would you agree with me that it's common practice for a forensic

economists like yourself to make certain assumptions about what may occur in the future?

A. On certain topics, we have to make certain assumptions. I don't think we're making assumptions about political outcomes or something or Powerball numbers, but there are certain assumptions that we have to make into the future.

Q. Okay. All right. In many of your reports, you have a section entitled, "Present Value," correct?

A. Yes.

Q. And this provides the value for future values that are essentially discounted to their present value in recognition that a lump sum will be awarded in the present year and the recipient will be able to invest that -- this principal amount received; is that correct?

A. Yes.

Q. Okay. As part of your opinion, you make a distinction between the rate of return on the principal and that

received on reinvested interest; is that right?

A. Yes.

Q. What is the basis for using different discount rates for the principal and the reinvested interest?

A. We -- I would agree and we do know that interest rates change daily. So to account for the fluctuation in interest rates, I use those two rates, because the principal amount is the rate you would initially start with, that's why it gets the currently available municipal bond rate, which I'm just looking at Connard -- I'm looking at the at Amsler, they should be the same, but I'm looking at the September 6 rate of 4.88 percent, because that was what was immediately available for the principal. We see do know these calculations where there's future medical care, loss of household services, the wages are a little more limited in duration and time, just given the age of the Plaintiffs, but for household services and future

medical care, they go out many years into the future. So to account for rate variability, that's what the reinvested rate gets at 3.78 percent.

Q. Okay. So you're using, for each of your reports, 4.88 percent to identify -- as the rate of return on the principal and 3.78 percent for the reinvested interest; is that right?

A. Correct, because what we know in all these calculations are called self-depleting funds. At the end of each person's either work-life, there should be no wages left over or for a life care plan, at the last year of life, there should be nothing left over that there would be reinvested interest. So you have a principal amount, the first 50 grand gets pulled out, the balance remains and that would get interest on that amount. That interest payment would technically be the last payment to the Plaintiff so they could get a different rate of return.

Q. Okay. Just briefly, in your

reports, have sections entitled, "Personal Maintenance Expenditures." And you reduced your estimate of lost earnings in order to reflect these expenditures which the Plaintiff may have incurred. What do you -- what are you referring to as -- how do you define personal maintenance expenditures?

A. So that term is applicable only to the three death cases.

Q. Okay.

A. Personal maintenance, and that is a concept in forensic economics to put decedents on the same footing as personal injury plaintiffs and what I mean by personal maintenance is that's the amount of money the decedent would have spent on him or herself for their everyday expenditures, so topics would include clothing, transportation, food, healthcare, entertainment, things of everyday life that they would have to spend themselves on. So if a plaintiff in a personal injury award gets $100,000, from that $100,000, the next

month they're paying for their car payment, they're paying for their healthcare, they're paying for their sneakers, whatever they may do. So to put the decedent, if the decedents were awarded $100,000, if we don't make that deduction, then, technically, there could be an overpayment to a decedent in a wrongful death case, so it puts them on the same footing as a personal injury plaintiff.

Q. Got it. So you only provide personal maintenance expenditure opinions in cases where the plaintiff has passed away?

A. Correct, because the personal -- in the personal injury case, those claimants, those plaintiffs will have those expenditures. They're going to have a pay for Chick-fil-A. They're going to have to pay for their new Nikes. But in the death case, obviously, because of the passing, those actual outlays in the real world won't occur, so to do that in a death case, we account for their expenditures.

Q. Okay. I want to talk about your calculations for future medical care based upon life care plans. In cases in which there is a life care plan for a Plaintiff, you are offering an opinion as to the present value of the Plaintiff's future medical care; is that correct?

A. Yes.

Q. And for those opinions, you are relying on expert reports by Plaintiffs' life care planners, Mr. Fryar and Ms. Hairston; is that right?

A. Yes.

Q. And these life care plans set out what they opine is the type of course or treatment a Plaintiff will need in the future and the amounts of those individual treatments, correct?

A. Yes.

Q. You do not make any of your own determinations as to which medical procedures are or are not likely to be needed for a given Plaintiff; is that correct?

A. True.
Q. You're relying entirely on the Plaintiffs' life care planners for that part of your opinion, correct?
A. Yes.
Q. You also did not make any of your own determinations as to the costs of those medical procedures or care; is that correct?
A. Base year cost, that's correct.
Q. Okay. And you're relying upon the life care planners' opinions regarding those amounts; is that right?
A. Yes.
Q. And you are simply adding them up and providing a present value calculation for those particular life care plans; is that right?
A. Yes.
Q. You I think you previously testified you did not look at the life care plans by Dr. Shahnasarian or Ms. Navarro, the United States life care planner

experts; is that correct?
A. True.
Q. Okay. So, fair to say, you have not placed any particular values based upon their proposed life care plans; is that right?
A. That's correct.
Q. Okay. All right. How long have we been going?
MR. VanSLYKE: About an hour.
MR. CROMWELL: Do you want to take a five-minute break?
THE WITNESS: Yeah, that's good. It's getting warm in here.
MR. CROMWELL: Yeah, I was going to say, it is getting a little warm, I noticed the temperature.
THE WITNESS: Strategy, my new strategy.
MR. CROMWELL: They call it a hotbox for a reason.
THE VIDEOGRAPHER: All right. Going off the record at 2:16.

- - - - -

(A recess was taken at this time.)

- - - - -

THE VIDEOGRAPHER: We're back on the record at 2:27 p.m.

BY MR. CROMWELL:

Q. Okay. Mr. Staller, I want to turn and talk about your individual reports that you you've prepared in this case. So if we can start with your report for Ms. Amsler, which has been identified as Exhibit 7. You assessed the economic loss suffered by Karen Amsler as a result of her leukemia diagnosis that occurred in September of 2020; is that correct?

A. Yes.

Q. Okay. And based off of your report you agree that Ms. Amsler's statistical life expectancy calculated from her age is to an age of 85.1 in the year 2045; is that right?

A. Yes.

Q. Okay. You're familiar with Ms. Amsler's previous employment?

A. Yes.
Q. You're aware she worked for Johnson & Johnson from 2003 to 2019?
A. Yes.
Q. And is it your understanding that she retired from Johnson & Johnson in 2019?
A. Yes.
Q. Okay. And you're aware -- are you aware that the next year Ms. Amsler was found disabled by the Social Security Administration as of September 12, 2020; is that correct?
A. Yes.
Q. And this was resulting from her leukemia diagnosis; is that right?
A. That's my understanding, yes.
Q. Okay. And Ms. Amsler was deemed no longer disabled as of April 1st of 2022, approximately one and a half years later; is that correct?
A. Yes.
Q. And her benefits for that disability ended in June -- on June 30,

2022; is that right?
A. Yes.
Q. You opined that Mrs. Amsler's husband has taken care of her since her diagnosis, leukemia diagnosis, on September 12 of 2020; is that correct?
A. Yes.
Q. Did you investigate anything about what Mrs. Amsler -- strike that.
Did you determine what, if anything, her husband in fact did to take care of Mrs. Amsler after her diagnosis in September 12, 2020?
A. I didn't personally, as I mentioned earlier in some questions, I didn't personally interview her or her husband, so it would have just been from what she describes in her testimony.
Q. Okay. What activities, based off her testimony, what activities did Mr. Amsler perform for Mrs. Amsler due to her diagnosis?
A. One that comes to mind and, again, I don't have all of the 19

deposition transcripts memorized, but one that comes to mind, I believe, he was helping her drive to and from appointments.

Q. Anything else?

A. That's what I recall. There could be others in the testimony, but from what rings -- what triggers my mind is that testimony.

Q. You would agree with me that you have not listed any specific activities that Mr. Amsler performed for Mrs. Amsler due to her diagnosis in your report; is that correct?

A. That's true.

Q. Do you have any idea how long Mr. Amsler was helping Mrs. Amsler drive due to her diagnosis?

A. I don't know off the top of my head.

Q. As part of your opinions, you value the services that her husband is providing her from the date of her diagnosis through December 31, 2025; is that right?

A. The medical, the medical-related care, yes.

Q. And that's true even though she was no longer considered disabled as of April 2022; is that correct?

A. Disabled through the Social Security Administration, which has their own standard for disability. That doesn't mean she doesn't have sequelae from her leukemia.

Q. What word are you saying, I'm sorry?

A. Sequelae, S-E-Q-U-E-L-A-E. I think it's -- it might be too big of a word even for me, but it's usually related to or as a consequence of --

Q. Got it?

A. It might be, you see it in medical records, like, sequelae.

Q. Yes.

A. Okay.

Q. Got it.

A. I can change the word, maybe I'm using the wrong.

Q. No, I just want to make sure we understand each other so I can follow up.

So her being no longer disabled plays no role with whether she would need home health or personal aide care between April 2022 and December of 2025; is that correct?

MR. RUZICKA: Objection, form.

THE WITNESS: To me, that's a factual question. Again, there's a specific standard within Social Security to be deemed disabled and they use a standard called SGA, substantial gainful activity, where they have a certain definition of what that meets, so under their lens, she might not meet the criteria of being disabled under the SGA standard, but continuing to need assistance after '22, to me, is a factual question that ultimately the judge will have to resolve based upon what Mrs. Amsler

and Mr. Amsler discuss in testimony with regard to after going into remission, do you have any residuals? That's how I was using the term sequelae, like, residuals, lingering effects, that's how I was using that term.

BY MR. CROMWELL:

Q. Okay. You concluded that Mrs. Amsler would have been able to to return to the labor market without restrictions approximately two years after her bone marrow implant in October of 2020; is that correct?

A. After her transplant in October 2020, by the end of the year 2022.

Q. Right.

A. Yes.

Q. Right.

A. Yes.

Q. So you would agree with me though that you did not stop your calculations for past human health personal care aide in December of 2022; is that

correct?

A. I don't terminate it in December of 2022, correct, I run out the one hour per week through '25.

Q. Okay. Did you do anything to verify that Ms. Amsler needed human health or personal care aide?

A. Home health.

Q. Home health.

A. It would have just come from what was described in her deposition testimony.

Q. Okay. And what testimony are you recalling that she needed besides driving assistance?

A. That's one that just rings a bell in my mind. I don't recall if she -- the specifics, what she talked about in time periods, like, in '23, '24, I don't recall that Q and A in the deposition.

Q. Okay. As we sit here, the only home health and personal care aide that Mrs. Amsler needed was assistance with driving to certain appointments; is that

your recollection?

MR. RUZICKA: Objection, form.

THE WITNESS: That's what I can recall from the testimony with regard to after the leukemia diagnosis, that's the one that stands out in my mind. That's doesn't mean it's exhaustive, but that's what I can recall.

BY MR. CROMWELL:

Q. Sure, but you understand this is my opportunity to ask and I don't know that we have time to read all 19 depositions, so I'm asking based off the recollection that you have as you're sitting here, are you aware of any home health or personal care aide services that Mrs. Amsler needed aside from her husband driving for her?

MR. RUZICKA: Objection, form.

THE WITNESS: That's what I recall off the top of my head. Again, no, we're not reading the depositions and knowing my memory

is not exhaustive on 19 Plaintiffs, but yes, that's what I recall.

BY MR. CROMWELL:

Q. Okay. You estimate Ms. Amsler's potential future lost earnings, assuming Ms. Amsler will suffer a medical recurrence and will be unable to work as of January 1st of each year beginning in 2026 through 2028; is that correct?

A. As a potential recurrence, yes, so there's a -- it gives where there is no recurrence and that's presented on Table 3, page 10 --

Q. Right.

A. -- to the extent that there is a recurrence, yes.

Q. As you sit here today, do you know whether there has been a recurrence of Mrs. Amsler's leukemia?

A. My understanding as of today, March of 2026, I don't think there has been a recurrence.

Q. Okay. So if true, if she has

not had a recurrence as of today, you would agree that her future lost earning capacity would be zero dollars in your opinion?

MR. RUZICKA: Objection, form.

THE WITNESS: Well, not as of today, that just means then if you look at Table 3, if there would be a recurrence in '27, the loss then would be $106,783. If there's a recurrence that doesn't occur until the year 2028, the loss would be $40,011. If there is no recurrence through her work-life period, which is to her age, 68.3, then it would be zero.

BY MR. CROMWELL:

Q. So just to clarify, if there is no recurrence through her work-life period --

A. Yes.

Q. -- you would agree with me that her lost, her future lost earning capacity is zero dollars?

A. Yes.

Q. Do you have -- do you know the likelihood of a recurrence for Ms. Amsler?

MR. RUZICKA: Objection, form.

THE WITNESS: No, not off the top of my head.

BY MR. CROMWELL:

Q. Does likelihood or probability of recurrence play any part of economic calculations for future damages?

A. Possibly with the chance of recurrence, because it's going to be the recurrence and what the impact of recurrence has on labor market assess. So recurrence with treatment may force Mrs. Amsler or anybody to withdraw from the labor market, so I would need more information to give a more specific answer, if that answers it nay.

Q. Okay. Just to be clear, the likelihood or the probability of recurrence is not a factor you include in calculating future lost earning capacity, correct?

A. It's not a factor I include,

because to me, that seems more of a weight determination that the court may want to consider as the trier of fact depending on the likelihood of recurrence for Ms. Amsler.

Q. Okay. All right. You evaluated Ms. Amsler's lost household services from September 12, 2020, through the December 31, 2025; is that correct?

A. Past, yes.

Q. And that is true even though Ms. Amsler was treated for her disease and no longer considered disabled -- well, never mind. Strike that.

Did you perform any independent analysis regarding the household services performed by Mrs. Amsler prior to her leukemia diagnosis?

A. No.

Q. Okay. So you don't know what household services Ms. Amsler did or did not perform as a result of her diagnosis, correct?

A. What she could or could not

do or which she formerly performed, true.

Q. And similar, you calculated future lost household services from January 1, 2026; is that right?

A. Yes.

Q. And as we've discussed before, you provided two scenarios consistent with your methodology for future lost earning capacity; is that correct?

A. Yes.

Q. Sorry, consistent with future lost household services. I'm sorry, I got tangled up in my own language.

A. Consistent with future loss of household services, yes.

Q. Okay. All right. Let us look at your report for Mr. Stephen Connard, Exhibit 8, please.

Mr. Connard was diagnosed with leukemia in March 2001; is that correct?

A. Yes.

Q. And he passed away in May 2010; is that correct?

A. Yes.
Q. You estimate that Mr. Connard would have worked an additional 14.9 years and retired sometime in 2025; is that right?
A. Yes.
Q. Part of your opinions, you estimated Mr. Connard's lost earning capacity; is that right?
A. Yes.
Q. And to do that, you utilized Mr. Connard's 2008 annual earnings; is that right?
A. Yes.
Q. Did you look at anything else to determine his lost earning capacity?
A. Not for the exact calculation, but as you see, I had historical earnings for Mr. Connard going back to 2004. There was clearly a demonstrated trend of increasing earnings. So as far as the actual calculation, just his 2008, but as far as context and looking at trends, I did have other historical

earnings.

Q. Okay. But either way, you relied on Mr. Connard's historical earnings and wages to estimate his lost earning capacity; is that correct?

MR. RUZICKA: Objection to form.

THE WITNESS: True.

BY MR. CROMWELL:

Q. You also have a section of retirement benefits and specifically you estimated the marginal loss of FERS pension benefits; is that right?

A. Yes.

Q. Are you familiar with the FERS system?

A. Yes.

Q. What is your understanding of it?

A. It's the Federal Employee Retirement System that allows for a defined benefit plan after vesting in the plan. I thought my recollection was it's 1 percent per year for the first 20 years and then

the multiplier increases to 1.1 for years over 20.

Q. Is that where that 1.1 percent comes from in your calculation?

A. Yes, below 20 years of service, it's a 1 percent multiplier and then anything above 20 years of service gets a 1.1 percent.

Q. Okay. And what is that -- what source is that based off of?

A. I imagine the OPM, Office of Personnel Management, website for FERS. Oh, yeah, right there, footnote 13.

Q. Yup. I was just about to ask, is that what footnote 13 is referring to --

A. Yes.

Q. -- and 14?

A. Yes. The computation. The one was the schedule, 13 is the schedule, 14 is the computation.

Q. Understood. What do you mean by marginal loss in the first system?

A. So Mr. Connard had already

accrued certain years of service in federal service, so I'm only doing, when I do my calculator, my calculation, I'm doing all the lost years, so the 15 years of lost employment. So instead of doing the pension at 30 years, you know, where the first 20 would be multiplied by 1 percent, I'm just doing what has been lost to him given his untimely passing, so it's 15 years of lost service, so --

Q. You're calculating from 2010 to 2025?

A. Yes, so when it says, so for example, just the formula, it's 1.1 percent multiplied by years of service. The years of service I'm using as 15, not 30 as an illustration.

Q. Understood. Part of your calculation it's multiplied by the high-3 average salary. What does that mean?

A. That's within the OPM's definition, it's your three highest years of earnings with the federal government. I forget right now if it has to be

consecutive. Typically, it will be consecutive, especially when they're on the GS scale, so it would typically be your last three years of earnings --

Q. Of earnings?

A. -- you get an average.

Q. You've totaled the marginal loss of FERS pension benefits at $18,513; is that right?

A. Yes.

Q. In the simplest of terms can you explain what that number represents?

A. Yup, that's the marginal loss benefit to the Connards given his untimely passing, that but for his passing in 2010, he would have been expected to receive as of 2025 an additional pension benefit, monthly benefit of -- well, it's annual, so an annual benefit of an additional $18,513. And then you would divide that out by 12 to get an additional monthly benefit.

Q. Okay. Your Table 2, which is on page 9 of Exhibit 8 lists the kind of annual lost FERS benefit from 2025 to 2038.

How is that different than the $18,513 we were just discussing?

A. The $12,403 is the 18,513, but is prorated. That 18,513 is for a 12-month period, but this would start May 1st, so your -- May 1st is .33 percent of the year, so the 12,000 represents 67 percent of the year.

Q. Okay. So your opinion is these portions of lost FERS benefit that Mr. Connard would have attained had he worked until 2025; is that right?

A. Yes, so had he worked until April of 2025, he would have 15 more years of service, that would have created that additional benefit of 18,000 which would commence upon his retirement, it's typically one month after your retirement, so that puts him into May 1st of 2025. And he would have been expected to receive an additional $18,000 per year through his life expectancy.

Q. Okay. In your calculations of lost FERS benefits, do you take into

account the amount that Ms. Connard has been receiving from his FERS pension?

A. No, because that goes towards your earlier question, this is just the margin --

Q. Okay.

A. -- so that -- so the answer would be one should do that, if my multiplier was all his years of service, so if I did it of 30 years to get the entire pension amount, then you should deduct out her survivor benefit, but since I'm only doing it on the margin, his lost years, it's not necessary to deduct the survivor benefit.

Q. Okay. Are you aware that there is a congressional pension formula that's different from the regular FERS pension formula?

A. Yes.

Q. Did you take into account the formula used by the congressional pension in your calculations given his occupation?

A. So I didn't know if he would

be eligible for it given his status, because he wasn't a congressman, I didn't consider it, but it's -- this is a more conservative approach, it's a richer pension, go figure, the people that make the laws get the -- but nonetheless, it's a greater multiplier.

Q. Okay.

A. I have done that in other cases and it's not 1.1 percent.

Q. But it's not something you took into account here?

A. No, I didn't know if he would be eligible for it given his status within Congress, but I didn't do it. So I went with the more conservative measure, which is the 1.1 percent.

Q. Okay. You're also opining on lost household services for Mr. Connard; is that correct?

A. Yes.

Q. And you are calculating lost, past lost household services from the date of his passing, May 14, 2010, through

December 31, 2025; is that right?

A. Yes.

Q. Just stepping back, lost household services represent the type of care he would have needed but for his illness, right?

A. No, that's typically the home care. This is maintaining his household for his wife and caring for the general household, cooking, cleaning, shopping.

Q. Well, why not commence the household services on the date of his diagnosis, which was 2001 like you've done for other Plaintiffs?

A. I could have, and again, that goes back to the marginal loss of those services from 2001 through 2010, I could have started then.

Q. What do you mean, "marginal loss"?

A. So we kind of been talking a lot about the household services for the injury Plaintiffs, that some of your questions today have been what were they

doing before diagnosis and what would they do after diagnosis, so that middle area, right, is the marginal loss that I used to do A, B, and C, post diagnosis, I could only do A, so what has been lost is B and C in my illustration, that's the marginal loss. So I could have done that while he was ill getting treatment in the '01, '02, maybe he was able to take out the trash, but not mow the lawn, so there would be a marginal loss. I didn't include it just for conservatism given that he passed some subsequent years later, but I could have included it.

Q. That would be, you could make that determination -- well, strike that.

You started lost household services calculation on the day he passed away, correct?

A. Yes.

Q. And you've continued it through December 31, 2025, I guess to bring it up to current date, correct?

A. For past, yes.

Q. Why would you continue past -- lost past household services beyond when Mr. Connard passed away?

A. Why would I do household services from 2010 to 2025?

Q. Right.

A. Or just 2010 to whenever?

Q. Sure.

A. Because that's what has been lost to the household, that's what has been lost to, I believe, his wife is Vivian. She's missed, given his passing that she would have expected to have the benefit of her husband doing chores around the house, exterior maintenance, cooking steaks on the barbecue, food shopping, whatever it is, but she's now lost out on that household production from his passing through his healthy life expectancy.

Q. You would agree, though, that's a loss to her, correct, economic loss to her rather than to him, correct?

A. So in a death case the loss in household services tends to be a loss to

the survivor, unlike an injury case where it is a loss to the individual.

Q. Do you know one way or the other whether Ms. Connard would be entitled to an economic loss damages in this case?

MR. RUZICKA: Objection, form.

THE WITNESS: I don't know.

BY MR. CROMWELL:

Q. But you would agree with me that this is not an economic loss to the Plaintiff, correct, this is an economic loss to his spouse, Ms. Connard?

MR. RUZICKA: Objection, form.

THE WITNESS: In a death case, the loss of household production is the loss to the survivor.

MR. CROMWELL: Okay.

MR. RUZICKA: Beneficiary, survivor, technically, I think is the decedent.

BY MR. CROMWELL:

Q. When evaluating and calculating lost household services, did you take into account any deposition

testimony that identified any household services Mr. Connard performed before being diagnosed?

A. I don't recall.

Q. Did you obtain any information from Ms. Connard regarding household services she now has to do because of Mr. Connard's illness and eventual passing?

A. I didn't speak to her, so I didn't get a specific enumerated list from her.

Q. Okay. You're not aware of any sort of list of services?

A. It would just be common sense to me, but I don't have an enumerated list from her, no.

Q. If you look at page 5, you, this is with regards to household services you calculated, you chose an hourly wage rate for representative occupations in the state of North Carolina; is that correct?

A. Yes.

Q. You did not use a

representative wage rate where Plaintiff lived at the time of his death, which is Maryland; is that correct?

A. True.

Q. And is that because you're valuing future lost household services as it pertains to Ms. Connard rather than Mr. Connard?

A. Correct, so I believe that when he was alive, they lived in Crofton, Maryland, he passes, she relocates to North Carolina. So if we were to give her the monies to buy the household production where she's residing now, it should be North Carolina wages.

Q. Understood. All right. We can put Connard away. Let's look at Ms. Dyer, which is Exhibit 9.

All right. Ms. Dyer was diagnosed with bladder cancer at the age of 52; is that correct?

A. Yes.

Q. And she is currently 68 years old; is that right?

A. Yes, yes.
Q. You have calculated past lost household services for her; is that right?
A. Yes.
Q. And in doing so, you have provided ATUS hours per week for a working woman; is that right?
A. For a period of time, yes.
Q. Okay. And then you've moved it from to retired age 65 to 74 and then retired at 75 and above; is that right?
A. Yes.
Q. Okay. Does her marriage status have any role with regards to these rates?
A. Marital status will, yes.
Q. Have you factored it in for Mrs. Dyer though?
A. Yes.
Q. Which rate on Table B refers to her status as being married?
A. The three do, that's a woman with a dependent -- or a spouse.
Q. So each of these rates

factors in the fact that she's married?
A. Correct.
Q. Okay. Just curious, where does it, where in your report does it say that?
A. Well, in the background section it says is she's married to John. As far as in the data source in set Roman numeral number V, I don't think it specifies where those rates are coming from, a working married individual with no dependent, a married retired female, married retired, it doesn't say the word, "married," before those categories.
Q. Okay. Have you made any determination as to what household services Ms. Dyer was able to perform prior to her bladder cancer diagnosis?
MR. RUZICKA: Objection, form.
THE WITNESS: Perform before, no.
BY MR. CROMWELL:
Q. Look at page 2. You've opined that Mrs. Dyer's husband has taken

care of her since her diagnosis on May 20, 2009; is that correct?

A. Yes.

Q. And you also note in your background section that she -- Mrs. Dyer worked until she was -- until 2010; is that correct?

A. Yes.

Q. All right. Do you know one way or the other whether she required any past medical and related care from her husband while she was working full time?

A. While she was working, I don't know off the top of my head.

Q. Okay. You did not include this category of damages, past medical and related care, for Ms. Dyer in your original report from February 2025; is that correct?

A. I think that's correct, yes.

Q. What additional information do you now have that necessitated you including -- what new information do you have now that necessitated including it in your October 2025 report?

MR. RUZICKA: Objection, form. And to the extent that it calls for any communication with counsel, refrain from disclosing those communications.

THE WITNESS: I can't answer that based upon conversations with counsel between the two reports.

BY MR. CROMWELL:

Q. Okay. Previously, you testified that you had certain cases in which you didn't provide an expert report in February 2025 that you're now offering reports for or new opinions for based off of new information that was provided to you.

So to the extent there is new data or information that you're relying upon to offer such opinions, can you explain to me why you're now offering a past medical and related care opinion for Mrs. Dyer?

MR. RUZICKA: Same objection.

THE WITNESS: To my

recollection with Mrs. Dyer's case, I don't think there was any new information, I think it was going to be based upon conversations with counsel for the additional calculation.

BY MR. CROMWELL:

Q. You have valued household services from May 9 -- or May 2009 through December 31, 2025; is that correct?

A. Yes.

Q. And that's based upon average hourly wages for home health and personal care --

A. Yes.

Q. Personal care from 2020 to 2024; is that right?

Let me step back, with regards to your lost -- your household, lost household services calculations, we discussed previously that you include a number of wage rates from various occupations, correct?

A. Yes.

Q. Do you average the average wages of each of those occupations, is that how you come up with your average hourly wage rate?

A. Yes, so if we look here in Mrs. Dyer's case, footnote 15 has the first one is a home health and personal care aide and that average wage rate for that is, hypothetically, $15.25. The next one by illustration would be cooks, fast-food, cooks, that might be $13.75. Going down, I get an average wage for each of those occupations and I take an average of all those average wages.

Q. Got it. And that's true for each Plaintiff in this case?

A. That I do household services for, yes.

Q. Okay. Do you know as we're looking at footnote 15 for Mrs. Dyer, do you know what services or household tasks she was unable to perform due to her bladder cancer diagnosis?

A. Not off the top of my head,

no.

Q. You are not offering an opinion about future lost household services for Mrs. Dyer; is that correct?

A. True.

Q. And is that because she has a life care plan --

A. Correct.

Q. -- currently offered?

A. True.

Q. You are offering an opinion on the future cost of medical and related care; is that correct?

A. Yes.

Q. And this is based upon the life care plan of Mr. Michael Fryar?

A. Yes.

Q. Okay. Conceptually speaking, you would agree that if the court were to disagree with the medical procedures or the cost of those procedures offered by Mr. Fryar, that your calculations for future medical care would be impacted, correct?

A. True.
Q. Okay. Let's move on to Mr. Gleesing, Exhibit 10. Mr. Gleesing was diagnosed with leukemia in September of 2015 at age 56; is that correct?
A. Yes.
Q. You note in here that Mr. Gleesing began receiving VA disability benefits at a 100 percent disability rating in 2016 related to his leukemia diagnosis; is that right?
A. Yes.
Q. What relevance, if any, does his VA disability benefits have with regards to your opinions in this case?
A. Basis to establish no residual earning ability.
Q. Okay. So you're relying upon to suggest he's unable to work?
A. Correct.
Q. Okay. Are you familiar with the requirements for obtaining VA disability benefits?
A. I've reviewed them over the

years, but I don't have them memorized as far as the criteria to get VA benefits.

Q. Do you know whether the VA considers a person's ability to work or not as part of the criteria for awarding disability benefits?

A. I don't recall off the top of my head.

Q. Now, according to you, Mr. Gleesing opted to take an earlier severance payout and retire in 2016; is that correct?

A. Yes.

Q. Okay. And you note his severance payout was 18 months' worth of salary; is that right?

A. Yes.

Q. Okay. And you assumed that absent the diagnosis, Mr. Gleesing would have remained employed for an additional year; is that right?

A. Eighteen months, yes.

Q. Okay. Just if we look at page 3, if you look in Section V, 1, under Upjohn employment, halfway through that

paragraph, you note, "Accordingly, absent the diagnosis, we assume Mr. Gleesing would have remained employed for an additional year and then he would have taken his severance payout."

First of all, did I read that correctly?

A. You did.

Q. And so where is the 18 months coming from when you say an additional year?

A. Oh, I misspoke, I think that what I wrote is correct, one year.

Q. Okay. So you're calculating his lost earning capacity for a salary of one year that he forewent; is that right?

A. Yes.

Q. Okay.

A. From Upjohn.

Q. From Upjohn, correct. And you determined that was $107,055; is that correct?

A. Yes.

Q. Okay. If you turn to

Table 1, which is page 8 of Exhibit 10, Table 1 is entitled, "Gleesing Value of Lost Earning Capacity Assuming Worklife to Age 67;" is that correct?

A. Yes.

Q. Under the column, "Earnings Absent Upjohn/Pfizer," you have noted earnings -- or lost earnings of $107,055 for the year 2018; is that correct?

A. Yes.

Q. You have also included $54,956 for the year 2019; is that correct?

A. Yes.

Q. Simply put, where does that number come from?

A. That's half of 107,000 with one year of inflation.

Q. So I just need to make sure I understand, are you calculating an additional year of working at Upjohn or are you calculating an additional 18 months of working at Upjohn?

A. No, one year, because if you look at, I back out in the three columns

over earnings given from Upjohn, I back out the 40,655, so.

Q. Got it. So, essentially, it's kind of halfway through 2018 --

A. Exactly.

Q. -- 2019?

A. Exactly, so --

Q. Okay.

A. -- he worked a portion of the year in 2018, so I back out that so if it was to be a straight 118 months, it would be 107 plus 54,000 with no deduction, but since I'm doing the deduction, it's one year of loss from Upjohn.

Q. Okay. I'm still struggling, give me second, because on page 3, we're back at the same section we were talking about before, you note, "We value this loss from January 1, 2018 through July 1, 2019."

A. Uh-huh.

Q. Eighteen months. And so you're simply -- I'm trying to rectify -- or reconcile that with what we just discussed. Simply put, what time period

are you evaluating a lost earning capacity for Mr. Gleesing?

A. So that's a fair question. The time period set forth is right, 18 months of time, so it's January 1 to December 31 of '18 is 12 months --

Q. Right.

A. -- right? Then there's additional six months, 1/1/19 through 7/1/19. I started 1/1/18 for the 107,000, but the last sentence, right --

Q. You deduct?

A. Because he worked slightly less than a half a year --

Q. Okay.

A. -- in -- so that's how you get a year's worth of loss, because he, I calculated for 18 months of earnings, but then I deduct out the year that -- or he did slightly less than a half a year, so this now becomes a little over a year's worth of loss. He made 41,000 rounded in '18. He would have been expected to make a little more than 41,000.

Q. Understood. Okay. I think I'm with you. So, just to be clear, the lost earning capacity for Mr. Gleesing specific to his work at Upjohn Pfizer would be the $162,011 minus the $40,655?

A. Correct.

Q. Is that correct?

A. Uh-huh.

Q. Thank you for the clarification.

A. Yup. Thank you.

Q. And is it fair to say you're using his severance payout, the value of his severance payout as the measure of lost earning capacity, rather than his wages or are they in intricately tied together since his severance is tied to his wages?

A. I'm not really using his severance.

Q. Okay.

A. And I think you said intrinsically, I think they measure, Upjohn determined his severance by using a year and a half of salary --

Q. Right.
A. -- but I don't use his severance, I think I saw that comment by Ms. Yount, I don't use his severance at all. I use his historical earnings from '16 and '17 to measure '18's performance --
Q. Okay.
A. -- and then just do it for the year.
Q. You are also offering an opinion about his lost earning capacity for his time as an educator; is that correct?
A. Yes.
Q. Okay. And as part of your opinions and calculations, you're assuming that Mr. Gleesing would have continued working as an educator until his work-life expectancy in 2026; is that correct?
A. Yes.
Q. Okay. Why did you conclude that Mr. Gleesing was working an additional year at Upjohn, but an additional ten more years as an educator? What information are you basing that distinction on?

A. From my recollection, it would have come from his deposition testimony.

Q. If you don't mind, do you know, can you point in your report where you cite to the particular deposition testimony?

A. Footnotes one through -- one through ten and then footnote 17.

Q. Just for clarification, you're pinpointing the times you have cited to Mr. Gleesing's deposition testimony. Do you know where in his deposition Mr. Gleesing indicated he was continuing to work or he was going to continue working as an educator for ten more years?

MR. RUZICKA: Objection, form.

THE WITNESS: It probably would have been around pages 41 to 55 from I'm looking at my footnotes, but I don't specifically recall the testimony just looking from my footnotes and what they're referring to.

BY MR. CROMWELL:
Q. Okay. How much certainty is there that he would have continued working as an educator for another ten years?
MR. RUZICKA: Objection, form.
THE WITNESS: Enough certainty to a reasonable degree of economic certainty.
BY MR. CROMWELL:
Q. Well, you testified earlier that people projecting when they were going to retire was an uncertainty, so I'm trying to understand in this scenario, you decided to indicate, using his deposition testimony, that he would work for another ten years?
MR. RUZICKA: Objection, form.
BY MR. CROMWELL:
Q. Does that question make sense?
A. No.
Q. Earlier you testified that you did not rely upon -- sorry -- you did not rely upon an individual's testimony to

tell you when they would retire in the future.

Do you recall that testimony?

MR. RUZICKA: Objection, form.

THE WITNESS: I said yes, in most cases, yes.

BY MR. CROMWELL:

Q. And am I correct in understanding that you are relying upon Mr. Gleesing's deposition testimony to support your calculation that he would have worked as an educator for another ten years after his diagnosis?

A. To my recollection, I think his testimony gave more on the Upjohn that he was going to retire anyways from Upjohn and that my recollection, generally, of his testimony is that he was just going to continue to work generally. But I think it's not so much the educator earnings going on through a work-life period, it's more so that he was planning on ending the Upjohn career anyways within an 18-month window.

Q. Right. Okay. Would you agree with me, generally speaking, that workers experience some likelihood that they will not be employed each year until their work-life expectancy?

MR. RUZICKA: Objection to form.

THE WITNESS: There's a chance of that. I saw that criticism of Ms. Yount about an unemployment percentage. There's a chance that a person might be unemployed at a period of time in the future.

BY MR. CROMWELL:

Q. I mean, you understand the work-life expectancy considers the probability of being in the workforce, right?

A. Yes, the work-life tables account for survival, chance of disability, or withdraw from the labor force, but not for a chance of unemployment, yes.

Q. Okay. That's -- I want to make sure we're on the same page.

A. Yup.
Q. You prepared a calculation for lost household services for Mr. Gleesing; is that correct?
A. Yes.
Q. As I've asked for other individuals, did you evaluate and make any kind of determination as to what particular household services Mr. Gleesing performed prior to his diagnosis?
A. No.
Q. You said you evaluated Mr. Gleesing's deposition testimony; is that correct?
A. I have.
Q. Did you take into account Mr. Gleesing's deposition testimony that he continues to perform certain household tasks following his diagnosis?
A. Yes.
Q. Did you factor that in?
A. Yes.
Q. Okay. And how does that come into your opinions in this case?

A. That comes into what we observe discussing for a significant period of time today, the one hour per week, so that allows the trier of fact to do that marginal analysis, if you look at page 10, Table 3, there's that one-hour calculation of $10,288 of one hour per week. So, again, that allows the court as the trier of fact to capture the marginal loss. So, again, using the guidepost of the ATUS hours, which is on page 5, Table B, the 13 hours per week for a working married individual, if the court determines complete disability is right, 13 hours, testimony that I can do some stuff, the court determines that to be I can do some stuff and they ascribe five hours to that, hypothetically, right, so then the loss has been seven hours. So then that gives, my calculation gives the tool to the court to take $10,288 and multiply by seven, the lost amount, considering a full loss would be 13, able to do some, hypothetically, for our answer here is five hours, the loss is

seven, multiply seven by 10,288, you get 79,000, approximately, as a loss.

Q. But as you sit here today, you're, again, you're not offering an opinion as to the amount of hours Mr. Gleesing did or did not need household services, correct?

A. True.

Q. Okay. All right. Let's look at Mr. Hill. All right. Mr. Hill's report is identified as Exhibit 11. And Mr. Hill was diagnosed with leukemia in 2004 at the age of 52; is that right?

A. Yes.

Q. And you understand that Mr. Hill continued working after his diagnosis in 2004; is that correct?

A. Yes.

Q. He was employed by the state of Florida from 2004 through 2012; is that right?

A. Yes.

Q. You have stated that Mr. Hill prematurely retired; is that correct?

A. Yes.
Q. And that's -- is it your opinion he prematurely retired based off his leukemia diagnosis?
A. Yes.
Q. Even though his diagnosis was eight years prior to his retirement; is that correct?
A. Yes.
Q. Do you know what issues Mr. Hill was having in 2012 that caused him to retire?
A. I don't know off the top of my head.
Q. You aren't offering an opinion on the future cost of medical care -- medical related medical care for Mr. Hill; is that correct?
A. Yes.
Q. And, again, this is based off of Mr. Fryar's life care plan?
A. Yes.
Q. Okay. Sorry, I didn't mean to -- you have a section in here with

regards to retirement and fringe benefits; is that correct?

A. Yes.

Q. And what type of retirement benefits do you consider in your calculation of lost retirement benefits?

A. That would be coming from the Department of Labor site that's set forth in footnote 17, but for a public employee, I went to the department of Florida's correction website and that would include a 403(b) contribution and I do believe they have some form of a defined benefit. I don't recall the specifics of it.

Q. Do you know what percent of government employers offer both a defined benefit and defined contribution plan with an employer match?

A. I don't know what percent of public employees do that, no.

Q. Did you adjust any of your figures by the probability that Mr. Hill would have had access to both types of retirement plans throughout his employment?

A. No, because it's either A plus B or A or B, but what we're seeing is that I would expect on average between those three scenarios to be roughly 21 percent of earnings.

Q. Okay. You had at your disposal, well, the expert report by Mr. Fryar, correct?

A. Yes.

Q. And he's a vocational expert as well, you understand that?

A. I believe he has a designation as a rehabilitation counselor, yes.

Q. You would agree with me, you did not rely upon Mr. Fryar's report in calculating past household service losses for Mr. Hill; is that correct?

A. True.

Q. And you did not use his report to develop an estimate of the value of Mr. Hill's potential past lost household services; is that right?

A. True.

Q. Instead, you relied, again, on what we have been discussing, the representative occupations?
A. Yes.
Q. Did you make any determination or evaluation as to what household services Mr. Hill was able to perform prior to his diagnosis?
A. No.
Q. And did you make any review or evaluation of the kinds of household services that Mr. Hill was able to perform after his diagnosis?
A. No.
Q. You did not calculate any future lost household services in your report for Mr. Hill; is that correct?
A. True.
Q. And is that, again, solely due to the existence of a life care plan?
A. Correct.
Q. Okay. You also did not offer an opinion for Mr. Hill for past medical or related care; is that right?

A. Yes.
Q. Is that simply because he did not have a spouse at the time or what is the basis for not providing a category of damages for him?
A. I know he's a widower. It would be primarily because of his status as a widower.
Q. Okay. Does the fact that he's a widower mean that he wouldn't need past medical or personal aide care though?
MR. RUZICKA: Objection to form.
THE WITNESS: No, he wouldn't need it, but as similar to what we were talking about in, I think, Mr. Connard's case, the services that have been lost here, it is the person providing the service. So here it would have been the decedent providing, hypothetically, the care to Mr. Hill.
BY MR. CROMWELL:
Q. Okay. And you're not aware

of Mr. Hill actually engaging or acquiring a home health aide or a personal care aide, correct?

A. I'm not aware of direct expenditures, but that would be a measure, if during that time period of his convalescent period, that would be a measure, if he had to hire an aide or if a family member had to do such services besides his late wife.

Q. But as you sit here, you're not aware of that actually happening, correct?

A. I'm not aware of that happening.

Q. Let's look at Mr. Howard. This is Exhibit 12. You submitted an expert report for Mr. Allan Howard; is that correct?

A. Yes.

Q. And you assessed the economic loss for Mr. Howard as a result of his kidney cancer diagnosis in December 2008 and his NHL diagnosis in September of 2023;

is that right?
A. Yes.
Q. Now, you understand Mr. Howard worked for the U.S. Marshals Service from 2008 through approximately 2016?
A. Yes.
Q. He was also a security guard at Sinclair College from 2016 to 2017?
A. Yes.
Q. Okay. Aside from any conversations with counsel, can you tell me why you did not issue a report for Mr. Howard in February 2025?
A. I don't know off the top of my head.
Q. Okay. You have prepared a calculation with regards to Mr. Howard's lost earning capacity; is that correct?
A. Yes.
Q. And as we have been discussing lost earning capacity is meant to compensate, right, an injured party who cannot work or has to leave their work

early due to their injury; is that right?
MR. RUZICKA: Objection, form.
THE WITNESS: Or work at a reduced level, yes.
BY MR. CROMWELL:
Q. Okay. To estimate Mr. Howard's earning capacity, absent the diagnosis, you utilized Mr. Howard's annualized regular earnings at the time of his retirement in 2008; is that correct?
MR. RUZICKA: Objection, form.
THE WITNESS: Yes.
BY MR. CROMWELL:
Q. And you commence that calculation starting in 2008 when he, according to your report, prematurely retired from the Ohio Police Department; is that right?
A. Yes.
Q. And based off your citation, you learned that his retirement was premature as expressed to you by counsel; is that right?
A. Yes.

Q. What were you informed about Mr. Howard's retirement from counsel?

MR. RUZICKA: Objection, form. To the extent that it calls for any communications between counsel and yourself, please refrain from disclosing those communications. Otherwise, you can answer in terms of facts or assumptions that was provided to you.

THE WITNESS: It would have been an assumption that Mr. Howard left the police department because of his cancer diagnosis.

BY MR. CROMWELL:

Q. When you say, "cancer diagnosis," he left the police department because of his kidney cancer diagnosis?

A. That's my recollection of the assumption being provided.

Q. Okay. Because it was information provided by counsel, did you do anything to verify that information?

A. I don't recall.

Q. How is it that Mr. Howard was -- had to prematurely retire from the Ohio Police Department because of his kidney cancer diagnosis, but was able to work for the U.S. Marshals from 2008 through 2016?

MR. RUZICKA: Objection, form, to the extent that it calls for any communications provided to you by counsel. You can answer regarding any facts or assumptions.

THE WITNESS: From a medical standpoint, I don't know.

BY MR. CROMWELL:

Q. Okay. But from a work and earning capacity standpoint, what distinction -- well, let me back up.

Is it fair to say that part of your opinion that he would have continued working at the Ohio Police Department if not for his kidney cancer diagnosis?

MR. RUZICKA: Objection, form.

THE WITNESS: Yes, my

understanding was he wanted to enter into the DROP program, which is a special pension program that is a fixed period in duration, so he would have at max had an additional eight years. Yes, so it's my understanding that he wanted to enter into the DROP and he would have had a fixed set of time of eight additional years.

BY MR. CROMWELL:

Q. And it's your opinion that he would have worked those additional eight years with the Ohio Police Department?

MR. RUZICKA: Objection, form.

THE WITNESS: Yes.

BY MR. CROMWELL:

Q. Just to be clear, your report does state that Mr. Howard prematurely retired -- well, strike that.

You note that Mr. Howard entered into the Ohio Police and Fireman's Fund Deferred Retirement Option Plan known as DROP in July 2007; is that correct?

A. Yes.
Q. And you indicated that you learned that he entered into the DROP in July 2007 as expressed to you by counsel; is that right?
A. Yes.
Q. Okay. Again, because this was expressed by counsel, did you do anything to verify that Mr. Howard entered into the DROP and intended to continue in the program?
MR. RUZICKA: Objection, form.
THE WITNESS: Can I hear that question again?
BY MR. CROMWELL:
Q. Sure. Did you do anything to verify that Mr. Howard entered into the DROP in July 2007?
MR. RUZICKA: Objection, form.
THE WITNESS: Not outside of the representations from counsel.
BY MR. CROMWELL:
Q. Did you do anything to verify that Mr. Howard intended to continue in the

Deferred Retirement Option Plan for eight years?

MR. RUZICKA: Objection, form.

THE WITNESS: Nothing beyond the representations from counsel.

BY MR. CROMWELL:

Q. And you say on page 4 under Section VIII titled, "DROP Accumulation," that in that first paragraph, "Due to Mr. Howard's diagnosis, he left the DROP and forfeited his interest accumulations and began receiving his pension benefit."

First of all, did I read that correctly?

A. Yes.

Q. And it's your understanding that Mr. Howard left the DROP and forfeited his interest accumulations due to his kidney cancer diagnosis; is that correct?

A. That's my understanding, yes.

Q. Okay. So for both your opinions regarding lost earning capacity and DROP accumulation, you are relying upon the assumption that Mr. Howard's kidney

cancer caused him to prematurely retire; is that correct?

A. Yes.

Q. You agree, you had access to and relied upon Mr. Howard's deposition; is that correct?

A. Yes.

Q. Did you evaluate Mr. Howard's testimony about when he retired from the Ohio Police Department?

A. I don't recall that specific provision or that part of the deposition.

Q. Am I on 35? Do you want to mark that?

- - - - -

(Deposition Transcript of Allan Wayne Howard taken 2/16/24 marked Staller Exhibit 35 for identification.)

- - - - -

BY MR. CROMWELL:

Q. Mr. Staller, we have marked as Exhibit 35 as Mr. Allan Howard's deposition dated February 16, 2024; is that

correct?

A. Yes.

Q. This is the same deposition you've identified as a document you relied upon in formulating your opinions in this case?

A. Yes.

Q. If you would turn to page 55 and this is a condensed version, so it's technically page 15 with pages 55 and 56 on it.

A. Okay.

Q. Now, on page 55, line 11, "QUESTION: Why did you decide to retire?

"ANSWER: I was one year past my retirement date. And I had a great job, and I -- you know, I mean, something came over me, and it just told me that I needed to retire right now, and to this day, I can't -- I can't explain it. But I had applied for a job here at the federal building, and the guys in the blue coats, they're contractors, contract employees to the marshal service.

"And so I decided I was gonna retire, and then so we got my replacement and I retired. And shortly after I retired, they called, the marshal's office called and asked if I was still interested in that position, and I said I would, and I took a physical, and that's when they found out I had cancer.

"Do you remember how long before your cancer diagnosis you had retired?

"ANSWER: I retired in April of 2008. I was diagnosed in October of 2008. I would never have taken a physical had I --" and then it continues.

First of all, did I read that testimony correctly?

A. Yes.

Q. Would you agree with me that according to Mr. Howard's own testimony, he planned to and did retire in April of 2008?

A. Yes.

Q. You agree with me that, according to Mr. Howard's own testimony, he

was not diagnosed with kidney cancer until October 2008?

A. True.

Q. And, in fact, he discovered his cancer during a physical applying for his subsequent job at the U.S. Marshal's office; is that correct?

A. That's what Mr. Howard testified to.

Q. Okay. Would you agree that from Mr. Howard's testimony that it was not his intention to stay with the Ohio Police Department and in fact planned to retire in April 2008 prior to his kidney cancer diagnosis?

A. Yes.

Q. And, in fact, you agree he did retire prior to being diagnosed with kidney cancer?

A. Yes.

Q. Given that, you would agree that he would not be entitled to lost earning capacity damages, as his disease did not prevent him from continuing on at

the Ohio Police Department, correct?

MR. RUZICKA: Objection, form.

THE WITNESS: Well, the disease once he discovered it six months later might have in '9, '10 and '11 prevented him from continuing to work at the Ohio Police given the requirements of a police officer, but it wasn't the cause of his retirement, I would agree with that.

BY MR. CROMWELL:

Q. Okay. You agree that despite his diagnosis, he went to and did work for the U.S. Marshals Service from 2008 through 2016, correct?

A. True.

Q. Nothing about his diagnosis kept him from performing that position, correct?

A. That's true.

Q. Do you agree with me that because Mr. Howard intended and did retire prior to his kidney cancer diagnosis, he

did not leave the DROP plan because of his kidney cancer diagnosis?

MR. RUZICKA: Objection, form.

THE WITNESS: That appears to be the testimony of Mr. Howard.

BY MR. CROMWELL:

Q. And given that, would you not agree that the lost DROP interest accumulations would actually be zero dollars for him?

A. Based upon his testimony on pages 55 and 56 if he was going to leave the Ohio Police Department regardless and not enter the DROP and had nothing to do with his cancer, that would be a true statement.

Q. All right. You would agree with me that your current opinions with regards to his lost earning capacity are based on the notion that he retired from the Ohio Police Department due to his kidney cancer diagnosis; is that correct?

A. That is true.

Q. All right. Let's look at

Mr. Laramore.

A. Let's take a little bit of a break, I need a refresher.

Q. That's fine. You are the witness.

THE VIDEOGRAPHER: All right. We're going off the record at 3:45 p.m.

- - - - -

(A recess was taken at this time.)

- - - - -

THE VIDEOGRAPHER: We're back on the record at 4:04 p.m.

BY MR. CROMWELL:

Q. All right. Mr. Staller, we are going to discuss just for a moment your opinions in Mr. Laramore's case. All right. If you can get Exhibit 13 out, which is your report for Mr. Laramore.

You would agree with me that what you have done is essentially take Mr. Fryar's medical recommendations and applied the present value to those particular numbers and scenarios; is that

correct?

A. For Mr. Laramore?

Q. Yes.

A. I don't know if it's present value, I think I just repeated what Mr. Fryar outlined as the cost to be incurred in the first year, so I didn't do any present value.

Q. Okay. So you're simply restating the amounts that Mr. Fryar is opining are potential options for certain procedures that Mr. Laramore may or may not undergo; is that correct?

A. Yes.

Q. Okay. And you have not done any other calculations or prepared any other opinions with regards to economic damages incurred by Mr. Laramore; is that correct?

A. No, correct.

Q. Okay. Do you understand that Mr. Laramore was retired at the time of his bladder cancer diagnosis?

A. That's my recollection.

Q. And is it your understanding that he had no plans to return to the workforce at the time of his bladder cancer diagnosis?

A. That's my understanding.

Q. Is it your understanding that Mr. Laramore was medically retired before his bladder cancer diagnosis?

A. I don't know what you mean by the term, "medically retired."

Q. I don't know what I mean either, so let's find out. I am going to introduce Exhibit 36. This is one of the damages checklists specifically for Mr. Laramore Bates labeled PLG-EXPERT__STALLER__LARAMORE__1 through 11; is that correct?

A. Yes.

- - - - -

(Damages Checklist Injury/Adult for Laramore Bates 0000000001 to 11 marked Staller Exhibit 36 for identification.)

- - - - -

BY MR. CROMWELL:

Q. And if you would on Exhibit 36, look at the page ending in Bates number 008. And under the -- do you see the section entitled, "Health and Medical"?

A. Yes.

Q. And in bold, and just for context, the language in bold, is that the language provided by the person who filled out this particular checklist?

A. Yes.

Q. It states, "Plaintiff was medically retired before the bladder cancer diagnosis. The injuries contributing to his medical retirement include the following: One, neck injury from loading a flatbed when he was a truck driver; two, PTSD; and three, back injury in 2009 when Plaintiff was working as a government contractor truck driver in Iraq."

First of all, did I read that correctly?

A. Yes.

Q. Is it your understanding that Mr. Laramore was retired for reasons unrelated to his bladder cancer diagnosis?

A. Yes.

Q. If you would, we're going to look at your omnibus report, which we've identified as Exhibit 21. And in your omnibus report, you have identified past and future loss of household services for Keller, Carter, Criswell, and Davis; is that correct?

A. Yes.

Q. And you identified past medical and related care services for Keller, Carter, and Fancher; is that correct?

A. Yes.

Q. Okay. Let's start with Mr. Keller. Mr. Keller was diagnosed with non-Hodgkin's lymphoma in 1998; is that correct?

A. Yes.

Q. And he's currently 59 years old; is that right?

A. He was as of October 29.

Q. Okay. And you calculated household services for, past lost household services for Mr. Keller from February 2, 1998, through December 31, 2025; is that right?

A. Yes.

Q. And you valued future lost household services for Mr. Keller from January 31, 2026, to his healthy life expectancy of 76 years of age in the year 2042; is that correct?

A. Yes.

Q. Okay. If you look at Table 2 on page 14 of this exhibit, this table is entitled, "Keller Value of Future Lost Household Services from January 1, 2026 to age 76.2;" is that correct?

A. Yes.

Q. And if you would look with me between the lines or rows 2033 and 2034, and for 2033, your projected annual loss based off ATUS weekly hour rates was $13,160; is that right?

A. Yes.
Q. And for 2034, your projected annual loss ATUS weekly hour rate is $21,946; is that correct?
A. Yes.
Q. Can you help me understand the difference between these two -- what -- can you help me understand what, different rate, you're using to calculate the annual loss for 2034 through 2042?
A. Retirement age, it goes up from those 13 hours to 22 hours, so that's why you see the jump up.
Q. Okay.
A. Or just to be specific, it goes, it's 22 hours, 21.98 hours.
Q. Okay. Do you have any information that you see reviewed to suggest that any household services needed by Mr. Keller would have changed in 2034?
A. It's more so what we've seen from the dataset that indicates individuals, once they separate from the labor market, their household production

goes up given they've now freed up 40 to 60 hours of time by the time of work, commuting, et cetera, so the switch is given his separation from the labor force.

Q. Got it. It has to do with him being home more, not at work?

A. It's the accruing or now it's the time to pay the honey-do list.

Q. Understood. But you would agree with me that doesn't have anything to do with his particular diagnosis though, correct?

A. No. The switch in 2033 and 2034 for the increased value, increased time from the ATUS hours is his transition from separating from the labor market.

Q. Right. But do you have any evidence that between 2033 and 2034, his diagnosis, the household services he needed because of his diagnosis would have changed?

A. Well, this isn't the household services because his diagnosis more so, this is more so because of his

diagnosis, now he can't perform at the same level of household production, so there's going to be a diminishment in household services. There's a loss in production, not a consequence of his diagnosis that he's going to incur hours, he's going to lose hours.

Q. I thought you were suggesting that when he retires, he will have more time at home to perform those services; is that correct?

A. Holding at bay illness or any events --

Q. Yes.

A. -- that the pattern we see from the American Time Use Survey is working individuals tend to spend, with no dependent kids, tend to spend 13 hours per week in household production. That same individual upon a retirement from the labor force goes up to 22 hours, for a male goes up to 22 hours per week.

Now, he has been diagnosed, now what we're talking about is if his

diagnosis, that's what this column represents, if his diagnosis completely forces his withdraw from household production, he's out 22 hours per week of household production.

Q. Just to be clear, you've used this as the year between 2033 and 2034 -- strike that.

Are you suggesting that he will retire because of his diagnosis in 2033?

A. No, so for Mr. Keller, I don't have a lost earning capacity --

Q. Right.

A. -- but still to get the right hours of household production using the American Time Use Survey, we still need to have a work-life period for him, that his work-life period would have been to his age 67, which creates that transition in household production, so from his medical diagnosis now, if one assumes he can't do any household services, when he turns 67, he would have done more household, in the

pre-diagnosis world, he would have been expected to do 22 hours per week of household services as he retired. When he was working, 13 hours, when he's retired, it moves up to 22. Now, in his diagnosis world, we kind of have to see where the trier of fact lands. If the trier of fact determines because of his diagnosis and his -- the evidence received at trial, he can't do anything, then it would be the $21,000 rounded, because he can't do any of the complement of household services a retiree would be expected to perform.

Q. Got it. As you sit here though, you're not aware of any particular household services Mr. Keller could perform prior to his diagnosis; is that correct?

A. Any specific one that he could perform?

Q. Yes.

A. I don't recall from his deposition.

Q. Okay.

A. So, as I sit here, I don't

recall a specific what he said he used to do, I don't recall.

Q. And you did not evaluate or put in your report anywhere any particular household services that he was unable to perform after his diagnosis, correct?

A. Correct. My recollection, similar to the others, was with Mr. Keller that he talks about fatigue, that would be the big one, lack of energy. Those are the ones I recall, but I don't think there were specific elements that were Q and Aed in his deposition.

Q. Did you review the deposition testimony of Mr. Keller?

A. Yes.

Q. Did you review the testimony of Mrs. Keller?

A. I don't believe so.

Q. Are you familiar or aware that Mrs. Keller works as a caregiver for her sister who lived -- lives with Mr. and Mrs. Keller?

A. I don't know if I knew that.

Q. Okay. Fair to say then that you did not consider any kind of hourly wage rate that Mrs. Keller is paid as a caretaker when you were performing your evaluation of personal care that she has been providing to Mr. Keller; is that correct?

A. Personal care, correct.

Q. Is it fair to say you don't know how many hours Mrs. Keller spent as a personal care aide to her sister; is that correct?

A. Oh, I don't know.

Q. Okay. Converse to that, if you don't know the amount of hours that Mrs. Keller spent as a personal aide to her sister, you would agree with me though that how many hours she spent as a personal aide to her sister would impact the number of hours she would be a personal care aide to her husband, correct?

A. No, for that question to be correct, you're assuming that she would be giving 168 hours of care, some full

capacity level of care to her sister. If her sister getting some care of some increment that's 20 to 30 hours a week, that wouldn't impact the care hours to Mr. Keller.

Q. What information or data do you have to assume that Mrs. Keller has been providing medical or personal care to Mr. Keller each and every year up through 2025?

A. It would have come from -- from my recollection of what was discussed in Mr. Keller's deposition.

Q. Okay. Are you aware of Mr. Keller's -- well, let me back up. Are you aware that Mr. Keller completed his treatment for NHL in June 1998?

A. I believe I recall that.

Q. Oh, that's not it, I'm sorry. This is 37.

- - - - -

(Providence St. Mary Medical Center Record for Keller Bates 01501__KELLER__0000000143 to 152

marked Staller Exhibit 37 for identification.)

- - - - -

BY MR. CROMWELL:

Q. Mr. Staller, I've handed you what we've marked as Exhibit 37. This is a medical record for Mr. Keller Bates labeled 01501__KELLER__143 through 152; is that correct?

A. Yes.

Q. And if you would, we're going to look at the last page, 152, starting there with an entry from St. Mary Regional Cancer Center dated February 17, 1999. It's on the very back page.

A. Oh, the last page?

Q. Yup. The history box notes that he, being Mr. Keller, "is active and feeling well. He is working 70 hours a week. He is traveling mostly when he works."

First off, did I read that correctly?

A. Yes.

Q. Were you aware that by February 1999, Mr. Keller reported to his oncologist that he resumed working 70 hours a week and traveling?

A. No.

Q. If you look at Exhibit 37, Bates number 147, this is an entry from the St. Mary Regional Cancer Center dated April 20, 2001 for Mr. Keller. Under the history, it states, "He is doing great. He is traveling less. The pain in his feet is mostly gone. He walked for hours and hours throughout Amsterdam without any difficulty."

First of all, did I read that correctly?

A. What page are you on, I don't --

Q. I'm sorry, 147.

A. Oh. I see that, yes.

Q. Okay.

A. You read that correctly.

Q. Were you aware prior to today that in April 2001, Mr. Keller reported to

his oncologist that he was able to walk for hours and hours through Amsterdam without any difficulty?

A. No.

Q. If you would look at Bates number 145, there's a medical record entry from St. Mary Regional Cancer Center from July 25, 2003 for Mr. Keller. And there's a box entitled, "Chief Complaint." Do you see where I'm looking?

A. Yes.

Q. There's a highlighted portion that says, "Scott returns to the clinic for follow up following recent travel to Asia and Africa. His activity and energy level are excellent."

First off, did I read that correctly?

A. Yes.

Q. Are you aware that in July 2003, Mr. Keller reported to his oncologist team that his activity and energy level were excellent and had recently traveled to Asia and Africa?

A. I was not aware of that.
Q. What information do you have about whether Mr. Keller's medical condition impaired his ability to engage in household services in the 2000s?
A. It would have been his deposition testimony.
Q. Okay. Does the fact that any of these comments from Mr. Keller himself to his treating oncologist indicate to you that Mr. Keller would not have been in need of household service assistance?
MR. RUZICKA: Objection, form.
THE WITNESS: From his highlighted portions, it would appear that he has general functionality. Again, I haven't seen every medical record, but from the red highlighted portions of these ten pages, it appears that he was able to maintain work and have general functionality.
BY MR. CROMWELL:
Q. Would it be fair to conclude

then that he also would be able to -- if able to perform these functions, he would also be able to perform household services?

MR. RUZICKA: Objection, form.

THE WITNESS: From the highlighted sections, again, I don't have every medical record for Mr. Keller, but from the highlighted section, it sounds like he's working and traveling in the early 2000s.

BY MR. CROMWELL:

Q. Okay. I understand what you're saying, not necessarily my question though, I'm asking based off of his ability to travel and work and his energy level, as noted by himself to his doctors, would you agree that it seems unlikely that he would need household services or personal -- household services?

MR. RUZICKA: Objection, form.

BY MR. CROMWELL:

Q. Or was unable to perform household services?

MR. RUZICKA: Objection, form.
THE WITNESS: From these ten pages, it would suggest that he was working fully, which would allow him to do household services. Again, I haven't seen every medical record, but from these ten pages.
BY MR. CROMWELL:
Q. Understood. I understand. In your report, are you using average hourly wage rates of home health aides for each year up through 2025?
A. In Table B?
Q. Yes.
A. Yes.
Q. Okay. Okay. If we can go back to your omnibus report, I want to look at just for a moment Mr. Carter. Would you agree with me that Mr. Carter was diagnosed with NHL in 2011; is that correct?
A. Yes.
Q. And he was 62 years of age at the time?

A. Yes.
Q. And Mr. Carter passed away in 2022 at 73 years of age; is that right?
A. Yes.
Q. Now, you valued Mr. Carter's past lost household services from November 23, 2011, through December 31, 2025; is that right?
A. Yes.
Q. And, similarly, you valued Mr. Carter's future lost household services from January 1, 2026, to his healthy life expectancy in the year 2030; is that right?
A. Yes.
Q. And consistent with your approach for lost household services for other Plaintiffs, you utilized the average hourly wage for representative occupations; is that correct?
A. Yes.
Q. And you agree with me, you did not evaluate or make any determination as to what, if any, household services Mr. Carter was performing before his

diagnosis in 2011; is that right?

A. Before his diagnosis, not a specific inquiry, true.

Q. Okay. And you did not determine -- or sorry, you did not evaluate or determine what, if any, household services Mr. Carter could not perform after his diagnosis; is that correct?

MR. RUZICKA: Objection, form.

THE WITNESS: So for Mr. Carter, unfortunately, he passed in '22, so it would have been what was examined in Mrs. Carter's deposition, I don't recall the specifics, what she described, not off the top of my head.

BY MR. CROMWELL:

Q. Okay. You opine though that Mr. Carter's spouse took care of him from the date of his diagnosis through his passing; is that correct?

A. Yes, for home care, yes.

Q. What information are you

relying upon to conclude that Mr. Carter's spouse took care of him from his diagnosis on November 23, 2011?

A. To my recollection, it would have come from Mrs. Carter's deposition.

Q. And what kind of services do you understand from her deposition that she provided to him?

A. My recollection would have been general home health aide care post-diagnosis, which would be assisting him after therapies and treatments, assisting him as needed as he was fatigued, couldn't perform general household -- generally activities of daily living.

Q. Do you cite specifically in this report what testimony you're relying upon to suggest the specific services that she was providing?

A. No, I don't think I provide a specific summary of those services.

Q. Just to refresh your recollection, do you know if she -- well, I guess, how do you know what services she

was providing to Mr. Carter that she was already not providing to him before his diagnosis?

A. I don't recall her specific testimony, I would have to look at it to see if she -- if that was asked and explained in her testimony, I don't recall.

Q. Let's look at Mr. Criswell. Mr. Criswell was diagnosed with bladder cancer in 1997; is that correct?

A. Yes.

Q. And you did not originally prepare a report for Mr. Criswell in February 2025; is that right?

A. Agreed.

Q. Can you tell me what new information, if any, resulted in you preparing a report for Mr. Criswell aside from conversations you've had with counsel?

A. No.

Q. Okay. You value Mr. Criswell's lost past household services from October 1997 through December 31, 2025; is that right?

A. Yes.
Q. And you value Mr. Criswell's lost future household services from January 1, 2026, to his healthy life expectancy in 2036; is that right?
A. Yes.
Q. Have you made any determination as to what particular services Mr. Criswell was performing prior to his diagnosis in 1997?
A. Prior to specific ones, no.
Q. Did you make any kind of determination as to what specific household services Mr. Criswell was unable to perform after his diagnosis in 1997?
A. It would have been similar to the other Plaintiffs, as described as from his Q and A in his deposition.
Q. Okay. Do you cite anywhere in your report the specific services that he was unable to perform after his diagnosis in 1997?
A. I don't think I enumerate specific items.

Q. Okay. You're aware Mr. Criswell was a PE teacher for middle schoolers through 2004; is that correct?

A. That is my recollection of his occupation at that time.

Q. In particular, for the time period between 1997 and 2004, do you have any idea what kind of household services Mr. Criswell was unable to perform as he worked as a PE teacher?

A. Not off of the top of my head, no.

Q. You value Mr. Criswell's future lost -- well, never mind.

For Mr. Criswell, you -- the statistical data you presented for him and other Plaintiffs has household services for men and you list some hours and just so I can direct you, it's page 3 of your omnibus report. Under Section III, you refer to data from the 2023 American Time Use Survey; is that correct?

A. Yes.

Q. In your footnote, you refer

to the 2021 American Time Use Survey. I'm just trying to understand if the data in Table A is from 2023 or 2021?

A. 2023, the footnote just happened to be updated to say 2023.

Q. Understood. For Mr. Criswell, can you tell me which hours per week rate you're using for your opinions with regards to his household services.

A. So on page 19, it's just one hour per week --

Q. Right.

A. -- so Table A says on page 20, it's going to always be -- well, it changed a little bit, it starts out at 21.98 hours and then it drops down to the 20 hours rounded at 75.

Q. And where does that change, between 2030 and 2031?

A. Yes, you see the drop more precipitously besides just discounting, you see it go down by $2,000.

Q. Did you review -- sorry, in reviewing materials in this case, did you

review the deposition of Mr. Criswell's wife, Deana Criswell?

A. I don't believe I did.

Q. Okay. If Ms. Criswell testified that Mr. Criswell as a form of household services -- well, it's a terrible question.

I'm going to hand you deposition testimony of Ms. Deana Criswell dated August 6, 2024. This is what we've marked as Exhibit 38; is that correct?

A. Yes.

- - - - -

(Deposition Transcript of Deana Criswell taken 8/6/24 marked Staller Exhibit 38 for identification.)

- - - - -

BY MR. CROMWELL:

Q. And it's your testimony you've never seen this testimony before?

A. That's my testimony.

Q. Okay. If you would turn to page 59 which is page 16 of the document,

deposition page 59. And on line 4, there's a question, "Okay. In terms of family household responsibilities, could you describe who contributes to those responsibilities?

"ANSWER: Mike puts up the dishwasher. I do everything else."

Nine, "QUESTION: Okay. And has that always been the case?

"ANSWER: Well, yes. He has never been one to -- I mean, once in a while, he would've helped me cut grass, but he definitely wouldn't have helped me weed or pull the weeds. He just didn't like to do that."

First of all, did I read that testimony correctly?

A. Yes.

Q. You understand that Mr. Criswell -- or according to Mrs. Criswell, Mr. Criswell helped put up the dishes and would once in a while cut the grass, but she did everything else around the house?

MR. RUZICKA: Objection, form.

THE WITNESS: Can I hear the question again, please?

BY MR. CROMWELL:

Q. Sure. Can you repeat the question, please?

- - - - -

(Whereupon, the reporter read back as requested.)

- - - - -

THE WITNESS: That appears to be a summary from what she testified to on page 59.

BY MR. CROMWELL:

Q. Okay. She also testifies that that has always been the case, correct?

MR. RUZICKA: Objection, form.

THE WITNESS: Yes.

BY MR. CROMWELL:

Q. Did you make any kind of evaluation as to what Mr. Criswell could or could not do in 1997 as regards to household services?

A. No.

Q. All right. Let's talk about Mr. Cometto Davis. Mr. Davis was diagnosed with NHL in 2021; is that correct?

A. Yes.

Q. And you valued Mr. Davis's lost past household services from November 17, 2021, through December 31, 2025; is that correct?

A. Yes.

Q. And you valued Mr. Davis's lost future household services from January 1, 2026, to his healthy life expectancy in 2038; is that correct?

A. Yes.

Q. And, again, consistent with your approach in other -- with other Plaintiffs, you utilized the average hourly wage for representative occupations; is that right?

A. Yes.

Q. You would agree that you did not evaluate or determine what, if any, household services Mr. Davis was performing before his NHL diagnosis; is that correct?

A. True.
Q. And, similarly, you did not evaluate or determine what, if any, household services Mr. Davis was unable to perform because of his diagnosis; is that correct?
A. True.
Q. Are you aware that Mr. Davis completed his NHL treatment in June of 2022?
A. I don't know if I knew that.
Q. Okay. Did you see any medical record with regards to Mr. Davis presenting with symptoms of neuropathy as early as 2005?
A. I don't think I saw those medical records.
Q. Okay. Do you know one way or the other whether Mr. Davis tested positive for genetic neuropathy entitled, "hereditary neuropathy with liability to pressure palsy" or HNPP?
A. I'm not aware of that diagnosis.

Q. Okay. Assuming those things were true, would the fact that Mr. Davis had -- having hereditary neuropathy, could that have impacted his ability to perform household services well before his NHL diagnosis?

A. Possibly.

Q. Did you consider the fact that Mr. Davis may have had other medical conditions that impacted his ability to perform household services?

A. Yes.

Q. You did?

A. Yes.

Q. What did you consider when determining whether there were other issues that impacted his ability to perform household services?

A. Partly, one of the very reasons I present my tables on a one hour per week, because that allows the trier of fact to determine how many hours are lost to the medical diagnosis and residual effects of that diagnosis in this case. So

again, for example, a working person is 13 hours per week. If, let's say, the underlying health conditions, this neuropathy, for example, limited him to seven hours, that he could do some, let's say seven hours remaining, but then his NHL took that remaining portion of seven hours and brought it to zero, then he's lost out because of the NHL diagnosis of seven hours per week, which is the tool of the one hour per week. If the court as the trier of fact determines that the NHL limited him to a loss of three hours per week, then they multiply the one hour per week column by three. So the one hour per week is a fantastic tool for the very purpose, which you're suggesting is a marginal loss analysis, because of the specific ailment, so it gives the tool the resources -- the court the resources to do that calculation.

Q. Okay. And that would be true for each of the Plaintiffs you're offering an opinion on; is that correct, for household services?

A. For household services, correct. There's always one hour per week, which allows the court the tool to come to a specific number because of the specific medical issue at issue in this case for the respective Plaintiff that with any underlying health condition, the court has been instructed from my reports, I imagine my testimony, here's the average for this cohort group, working person, retired person, male, female, and then they'll have that as a guidepost of the hours per week collectively and then they're able to start to cut and mend to the right hours because of this specific ailment and residual effects.

Q. Okay. So it's fair to say that you're not offering an opinion about whether there's other medical conditions that are or are not impacting a Plaintiff's ability to perform household services, correct?

MR. RUZICKA: Objection, form.

THE WITNESS: True.

BY MR. CROMWELL:

Q. Okay. All right. I think the last one in this report is Mr. Fancher. Mr. Fancher was diagnosed with kidney cancer in 1997; is that correct?

A. Yes.

Q. And, again, you did not issue a report for Mr. Fancher in February of 2025; is that right?

A. I did not.

Q. Outside of conversations with counsel, what additional information did you receive that led you to preparing a report in October of '25?

A. It would have been conversations with counsel.

Q. All right. Okay. If you look at page 8, do you see your section entitled David Fancher. You state or opine that Mr. Fancher's spouse took care of him from the date of diagnosis on December 12, 1997; is that correct?

A. Yes.

Q. And you valued these services

from the date of diagnosis through December 31, 2025; is that right?

A. Yes.

Q. What are you basing your statement on to say that Mr. Fancher's spouse took care of him since his diagnosis on December 12, 1997?

A. I believe that was coming from representations from counsel.

Q. Did you do anything to verify those representations to you provided by counsel?

A. I don't recall.

Q. Did you make any kind of determination as to what services Mrs. Fancher provided to Mr. Fancher because of his diagnosis?

A. No.

Q. Did you look at any of the available information or testimony to evaluate or determine what services Mr. Fancher required from Mrs. Fancher?

A. No.

Q. Did you review Mr. Fancher's

testimony in this case?

A. I did not.

Q. You have testified and indicated in other places that you have reviewed the Plaintiff's deposition testimony; is that correct?

A. Yes.

Q. Do you recall -- do you know -- can you explain why you did not review Mr. Fancher's testimony in this case?

A. No.

Q. This is going to be 39. Again, my apologies, I have one copy of this.

Mr. Staller, I've handed you what we've marked as Exhibit 39. This is the deposition testimony of David William Fancher dated January 22, 2024; is that correct?

A. Yes.

Q. Okay.

A. January 22?

Q. Yes.

A. Yes.

- - - - -

(Deposition Transcript of David William Fancher dated 1/22/24 marked Staller Exhibit 39 for identification.)

- - - - -

BY MR. CROMWELL:

Q. Okay. And if you would turn to page 108 of the deposition testimony, which is PDF page 28. And if you look at page 108 and we'll read through 109, there's a question on line 20 of 108 and it starts, "Okay. What do you do in your free time? Do you watch TV, read books, go for walks?

"ANSWER: I go for walks when I can, when the weather permits and my physical health is well enough that I can do it. And I do watch YouTube. I'm a YouTube school of college. And I take care of my wife. She's essentially at the point in her life and her physical condition that she can no longer walk. So I'm her

caretaker now.

"QUESTION: What kind of care do you provide your wife?

"ANSWER: Everywhere that she needs to go, every doctor's appointment she needs to go to. I drive her to those. I make meals, do the dishes, you know, make sure the house doesn't get too messy, you know, do laundry which I like to do. Not the laundry part, but the folding part."

First of all, did I read that correctly?

A. Yes.

Q. You would agree that according to Mr. Fancher's own testimony, that he was his wife's caregiver; is that correct?

MR. RUZICKA: Objection, form.

THE WITNESS: As of January 2024, yes.

BY MR. CROMWELL:

Q. Okay. Is it reasonable to assume that to the extent he was his wife's caregiver that she in turn was not his

caregiver?

A. That is probably a reasonable assumption as of January 2024.

Q. Okay. And to the extent that he was her caregiver, rather than her being his caregiver, you would agree that you would not have a calculation for a lost household services, whenever that may have occurred?

MR. RUZICKA: Objection, form.

THE WITNESS: From the time he became her caregiver, that's probably within reason.

BY MR. CROMWELL:

Q. Okay. Did you make any kind of determination as to what Mr. Fancher was unable to do for himself after his diagnosis as far as household services?

A. Not specific elements, no.

Q. You understand Mr. Fancher was diagnosed with kidney cancer in 1997; is that right?

A. Yes.

Q. If you would, turn to page 69

of Mr. Fancher's deposition testimony, which is on PDF page 18.

And starting on line 20 of page 69, the question is, "Okay. Were you able to work until retirement, um -- were you able to work until retirement? Were you -- I guess, did you have severe symptoms or impaired from working until your retirement date?

"ANSWER: I could still work, yeah."

If you turn to the next page, "QUESTION: Did you have to reduce your hours prior to retiring.

"ANSWER: No."

First of all, did I read that correctly?

A. Yes.

Q. You understand that, according to Mr. Fancher's own testimony, he did not retire until 2019; is that correct?

A. True.

Q. And would you agree that he

did not have to reduce his hours prior to retiring due to his illness according to his own testimony?

A. True.

Q. Okay. I think we are done with your omnibus report for the moment.

If you would get out Exhibit 14, which we marked as your Gary McElhiney report.

You'd agree, Mr. Staller, Mr. McElhiney was diagnosed with Parkinson's disease in July of 2018 at the age of 63; is that right?

A. Yes.

Q. And you valued his lost earning capacity at $288,000 -- $288,361; is that correct, based off your Table 1 on page 7?

A. Yes.

Q. Okay. And did you start calculating lost earning capacity in 2015; is that right?

A. Yes.

Q. You are aware, because you

noted in your report, that Mr. McElhiney retired in 2016; is that correct?

A. Yes.

Q. And is the basis for including 2015, does this have to do with symptoms Mr. McElhiney was experiencing that you attribute to his Parkinson's disease?

A. That's what he testified to, yes.

Q. Okay. Are you aware in June 2016, Mr. McElhiney applied for Social Security Disability benefits?

A. I don't recall if I knew that.

Q. Okay. This is 39 -- this is 40, I apologize. This is 40. Mr. Staller, what we have handed and marked as Exhibit 40 is a Disability Report Form SSA-3368, Bates labeled 01368__MCELHINEY__SSA__0000000034 through 39; is that correct?

A. Yes.

- - - - -

(Disability Report Form SSA-3368, Bates labeled 01368__MCELHINEY__SSA__0000000034 through 39 marked Staller Exhibit 40 for identification.)

- - - - -

BY MR. CROMWELL:

Q. Have you ever seen this document before?

A. No.

Q. If you would look at the page ending in Bates number 38, please. No, I don't know why I said that, 35. And there's a Section 3 in the middle of the page titled, "Medical Conditions." And it says, "List all the physical or mental conditions (including emotional or learning problems) that limit your ability to work. If you have cancer, please indicate the stage and type. List each condition separately."

First of all, did I read that correctly?

A. Yes.

Q. And you understand that Mr. McElhiney goes on to list paralysis of fifth cranial nerve, eczema, knee condition, tinnitus, paralysis of sciatic nerve right side, paralysis of sciatica nerve left side, and intervertebral disc syndrome.

First of all, did I read that correctly?

A. Yes.

Q. You understand that these are the conditions that Mr. McElhiney listed in his disability form in June 2016?

A. Yes.

Q. You mentioned deposition testimony that you referred to as being symptoms related to his Parkinson's disease. Are these the same conditions that you're referring to that he testified about?

A. I would have to look at his deposition to see if they're the same. I don't recall off the top of my head.

Q. Okay. Either way, would you

agree that Parkinson's disease is not presented or listed on this disability form?

A. Under 3A, there is no mention of Parkinson's.

Q. Okay. And you've concluded though that he was forced to separate due to symptoms related to his Parkinson's disease; is that correct?

MR. RUZICKA: Objection, form.

THE WITNESS: I don't know if I made that conclusion or reading that from his deposition testimony on pages 137 and 138.

BY MR. CROMWELL:

Q. What evidence are you relying upon to determine that his particular symptoms that he's identifying here were related to his Parkinson's disease?

A. I don't know if I made any interpretation of the record I was just presented with today. My basis for starting the calculation of lost earnings for Mr. McElhiney is based upon his

deposition on pages 137 and 138.

Q. Did you do anything besides reading his deposition testimony to investigate how long Mr. McElhiney had been suffering from the particular conditions that we listed and identified in Exhibit 40?

A. Forty, no, I wasn't aware of those conditions --

Q. Okay.

A. -- for my report.

Q. Were you aware that Mr. McElhiney was approved for Social Security benefits in September of 2016?

A. I don't know if I knew that at the time of my report.

Q. Okay. Hypothetically, if these conditions are unrelated to his Parkinson's disease, you would agree with me that Mr. McElhiney retired in 2016 prior to his Parkinson's disease diagnosis in 2018?

MR. RUZICKA: Objection, form.

THE WITNESS: So from a

chronology standpoint, right, if he withdrew from the labor market in '16 and then his formal diagnosis of Parkinson's would have been in '18, I agree with that chronology, yes.

BY MR. CROMWELL:

Q. And, again, hypothetically, if that were true, you would not have concluded that he was entitled to lost earning capacity damages; is that correct?

MR. RUZICKA: Objection, form.

THE WITNESS: From '16 or from --

BY MR. CROMWELL:

Q. Well, he would have been out of the labor market in 2016, correct, so based off the fact if he had retired in 2016, you would not have concluded that he was entitled to lost earning capacity damages, correct, if, hypothetically, those conditions were unrelated to his Parkinson's disease?

MR. RUZICKA: Objection, form.

THE WITNESS: Right, I think we would have to learn more of that hypothetical or flesh it out that if he's unable to work for conditions unrelated to Parkinson's, and he already withdrew from the labor market, in that hypothetical, that would be true if he has no conditions as set forth in McElhiney starting on Bates 35, but also had Parkinson's and symptoms of Parkinson's, then I think there would be a question for the trier of fact to ascertain what's keeping him out of -- or as of sixteen four, what's keeping him out of the labor market, symptoms associated with Parkinson's or these other symptoms, so that would be a question of fact.

BY MR. CROMWELL:

Q. No, I understand. Just in this hypothetical, if we assume for purposes of this hypothetical that the

medical conditions listed in Exhibit 40 are found to be unrelated to his Parkinson's disease, you would agree with me that you would not have concluded that he was entitled to lost earning capacity damages, correct?

MR. RUZICKA: Form, objection to form.

THE WITNESS: If only these elements from McElhiney 35 existed?

BY MR. CROMWELL:

Q. For purposes of this hypothetical, yes.

A. Sure, that hypothetical, if it's just the elements from question 3A and there's no mention of Parkinson's in '15 or '16 or underlying factors associated with Parkinson's, then yes, correct, then there would be no earning capacity associated with subsequent diagnosis.

Q. Okay.

A. Well, that would depend though, because to the extent that I think, as we saw with Mrs. Amsler, or Social

Security is a moving target meaning, people do recover and they kind of reenter the labor force, so the extent that elements one through seven were mitigated in a sufficient fashion, that would allow him to reenter the labor force and then the Parkinson's, unfortunately, takes him out permanently, that's another scenario that could be played out, and I just don't have enough information to. But these items in 3A, one through seven themselves, do not suggest lifetime loss of earning capacity, just as presented in this document.

Q. No, I understand, but you're presuming that the conditions that he was experiencing in 2016 were related to his Parkinson's disease; is that correct?

MR. RUZICKA: Objection, form.

THE WITNESS: I'm assuming that the symptoms and physical effects were associated with Parkinson's and those physical effects from Parkinson's forced him to stop being a truck driver.

BY MR. CROMWELL:

Q. Okay. Your report for Mr. McElhiney presents a value of loss of household services from July 10, 2018, through December 31, 2025; is that correct?

A. Yes.

Q. And you value Mr. McElhiney's average hourly wage for representative occupations in the state of Tennessee, which you valued at $15.59 in 2024?

A. Yes.

Q. Table B on page 4 of your McElhiney report, this, this includes data from the ATUS, right?

A. Yes.

Q. And, again, this data does not apply exclusively to someone diagnosed, for instance, with Parkinson's disease; is that correct?

A. True.

Q. It applies to all men who were of Mr. McElhiney's age and retired; is that right?

A. Yes.

Q. What, if anything, did you do to evaluate and determine the household services performed by Mr. McElhiney prior to his Parkinson's disease diagnosis?

MR. RUZICKA: Objection, form.

THE WITNESS: I don't know if I had information prior to his Parkinson's diagnosis in '16.

BY MR. CROMWELL:

Q. Given that, would you agree with me that you would not be able to compare what Mr. McElhiney did or did not perform after his diagnosis and compare it to what he did prior to his diagnosis?

MR. RUZICKA: Objection, form.

THE WITNESS: Agreed, and kind of as we've talked about, that's exactly why we do the one hour, because that marginal loss isn't required when you have a one hour, it's learning about his limitations with the Parkinson's and then ascribing an hourly value to that diminished ability because of that

disease.

BY MR. CROMWELL:

Q. Okay. You prepared a value of future medical care for Mr. McElhiney; is that right?

A. Yes.

Q. And you've based this upon the report of Kay Hairston; is that right?

A. Yes.

Q. Okay. And have you evaluated Ms. Hairston's deposition in this case?

A. I don't know, I didn't know it was taken, no.

Q. Okay. I guess the answer to that question is no?

A. Correct.

Q. Okay. Are you aware of Mr. McElhiney receiving deep brain stimulation to treat his Parkinson's disease?

A. No, I wasn't aware of that, no.

Q. Okay. Do you know whether such treatment would change his future care needs?

A. I don't know.
Q. Okay. Hypothetically, if it does, would you agree that you would also need to change the values that you've currently calculated for his future medical care?
A. Yes, I don't know how it changed Table 3, but to the extent it creates changes, adds, subtractions, yes, I would need to see how that plays out with her plan.
Q. All right. Let's look at Mr. Mousser, this is previously marked as Exhibit 15. All right. Mr. Mousser was diagnosed with kidney cancer in September of 2020; is that right?
A. Yes.
Q. And you have under life expectancy -- and this is on -- oh, sorry, on page 3 of your Mousser report, you have a section entitled, "Worklife and Life Expectancy;" is that correct?
A. Yes.
Q. You have offered two

different work-life expectancy estimates for Mr. Mousser; is that correct?

A. Yes.

Q. Would you agree with me that this is the only case in which you have done that in any of the Plaintiffs that you're offering opinions for?

A. Yes.

Q. Okay. Can you tell me which estimate is the accurate estimate or the one that you're relying upon for your calculations?

A. Accurate, accuracy would have to be determined by the trier of fact. The difference between the two I can state and I can explain the differences. The first, 65.6.6 is a statistical work-life expectancy based upon the same tables we've talked about several times from the Journal of Forensic Economics. The one to 67 is Mr. Mousser's Social Security normal retirement age based upon the Social Security Administration.

With regard to the 1.4 year

difference and staying active in the labor force, that would have to be ultimately selected by the trier of fact based upon their court's selection for how long they think Mr. Mousser would have stayed in the labor force.

Q. As you sit here now, you don't have an opinion whether Mr. Mousser would have stayed in the labor force until 67 as opposed to 55.6 years of age?

A. No, because that's ultimately a determination of which data point the court finds to be more appropriate. I would just say the 65.6, again, is statistical data published in the Journal of Forensic Economics used in other cases. 67 does consider his Social Security retirement age, which, again, is 1.4 years additional years, so it just becomes a question then what he wanted, did he have incentive to continue in those working years to get a normal retirement age which increases your normal retirement benefit.

Q. Why the two different

work-life estimates in this case?

A. To my recollection, the other Plaintiffs, one, we did earnings for the two that are deceased, and then I would have to look at the other ages of how they associate with age 67. You know, sometimes if they're well below 67, I'll throw in a second estimate for the trier of fact's consideration. 1.4 years, it's not so much lower. It might have just been that he was slightly younger than some of the other Plaintiffs.

Q. Okay. Any other reasons?

A. For the inclusion that would have probably been the reason for the inclusion of the second work-life estimate.

Q. Did you review Mr. Mousser's testimony in this case?

A. Yes. Mr.'s?

Q. Mister.

A. Mister, yes.

Q. Do you recall Mr. Mousser's testimony that he only planned on working until he was 65 years old?

A. I don't recall that specific testimony.

Q. If he did testify to that, would you not -- would you rely upon that number rather than work-life expectancy calculations that you have in Section IV?

A. If there was his testimony, I think that's a great example of the statistical work-life coinciding with his stated intentions. If he said 65, then statistical work-life of 65.6, so to me, that seems to coincide perfectly. If this was his stated intention, that's a good example of where an intention matches the statistical data.

Q. So is that yes, you would rely upon his testimony or you wouldn't?

A. To me, if that's his testimony, I would just describe to the trier of fact that's a great example of an illustration of where testimony is coinciding with the statistical data, as I just mentioned. That wouldn't cause me to do an earlier calculation of a half year, a

little over a year, I would keep with my statistical work-life table.

Q. So you've got 65.6, but what about compared to him being 67 years old, if he's saying he would retire at 65, would you agree you wouldn't use 67 as the year that his work-life would be over?

MR. RUZICKA: Objection, form.

THE WITNESS: So I would have to get reacquainted with his deposition testimony. Is that him talking in 2024 or is that him through the lens when he's diagnosed in 2020? Because what we're measuring is work-life from 2020, the date of diagnosis, not the date of deposition testimony. So I would have to kind of read and get reoriented with his testimony of the context in which he's talking about 65. Is he talking about it now when he's 61 years of age? Hey, I only wanted to work one or two more years, as he sits

there as a 61-year-old or back when he's diagnosed at 57, was he talking about that lens, which is the whole reason when we're doing these models, we're projecting from date of diagnosis, what the but-for world would have been from his diagnosis, not from another arbitrary date of deposition or Answers to Interrogatories, or some other random date.

BY MR. CROMWELL:

Q. Okay. You have opined that Mr. Mousser's statistical life expectancy is to the age of 85.8 in the year 2049; is that correct?

A. Yes.

Q. And then you've noted that due to Mr. Mousser's current prognosis, he's expected to have a reduced life expectancy; is that correct?

A. Yes.

Q. And you're basing this upon the information you have from Mr. Fryar

regarding Mr. Mousser; is that right?
A. Yes.
Q. And is this the life expectancy that you're using to make your -- to formulate your opinions in this case?
A. The 75.
Q. Okay. In your report, you opine that Mr. Mousser was forced to retire from Mercer Motor Company in October of 2023; is that right?
A. Yes.
Q. What do you mean by, "forced to retire"?
A. That was described by Mr. Mousser in his deposition.
Q. When you say, it was discussed in his deposition, are you referring to footnote -- what footnote are you referring to here?
A. Six.
Q. Page 288? You know what, this is the one that didn't print, this is 287?

A. Darn.
Q. Do you -- I'm going to do something I don't usually endorse is maybe just show you his deposition testimony.
But as you sit here, do you recall what specifically Mr. Mousser testified to -- or strike that.
Is it your understanding that from Mr. Mousser's testimony that he was forced to retire due to his kidney cancer diagnosis?
MR. RUZICKA: Objection, form.
THE WITNESS: Or symptoms associated with it, that's my understanding, yes.
BY MR. CROMWELL:
Q. Okay. It's all right. We'll come back to it. Did you review the deposition testimony of Mr. Mousser's treating physicians in this case?
A. I don't believe I did.
Q. Are you familiar at all with what his treating physicians, the prognosis given for Mr. Mousser was by his treating

physicians?

A. No.

Q. Okay. Would that information be relevant to your determination as to whether Mr. Mousser was forced to retire?

A. I couldn't say one way, without seeing it, one way or the other.

Q. Okay. You would agree that to estimate Mr. Mousser's earning capacity, you utilized -- you utilized his 2023 annualized earnings from Mercer Motor Company; is that right?

A. Yes.

Q. All right. Okay. We may come back to that, but we can move on from Mr. Mousser.

Let's look at Mr. Peterson. This is Exhibit 16. Mr. Staller, Mr. Peterson was diagnosed with Parkinson's disease in May 2001 at the age of 52; is that right?

A. Yes.

Q. And you have provided a value of lost household services for Mr. Peterson

from January 1, 2004, through December 31, 2025; is that correct?

A. Yes.

Q. You've noted that he was diagnosed on -- in May 2001, right?

A. Yes.

Q. Why the difference in this case of identifying January 1, 2004, rather than the date of Mr. Peterson's diagnosis?

A. For earnings and for household services, I believe, it's just when the progression of the disease became debilitating.

Q. Okay. You understand that Mr. Peterson was terminated December 31, 2003, from his job?

A. Yes.

Q. Okay. You value Mr. Peterson's average hourly wage for representative occupations in the state of Tennessee, which was $15.59 in 2024; is that right?

A. Yes.

Q. And would you agree that you

did not perform or you did not evaluate and determine what kind of household services Mr. Peterson performed prior to his Parkinson's disease diagnosis; is that right?

MR. RUZICKA: Objection, form.

THE WITNESS: Correct.

BY MR. CROMWELL:

Q. And you did not evaluate and determine what household services Mr. Peterson did or did not perform after his diagnosis; is that correct?

MR. RUZICKA: I'm sorry, objection, form.

THE WITNESS: Correct.

MR. CROMWELL: All right.

MR. RUZICKA: Can we take a quick five minutes?

MR. CROMWELL: Yeah, of course, of course.

THE VIDEOGRAPHER: We're going to go off the record at 5:26 p.m.

- - - - -

(A recess was taken at this time.)

- - - - -

THE VIDEOGRAPHER: Back on the records, the time is 5:37 p.m.

BY MR. CROMWELL:

Q. All right, Mr. Staller, we're going to look at your Rothchild report, which is Exhibit 17. Ms. Rothchild was diagnosed with Parkinson's disease in approximately 2014; is that right?

A. Yes.

Q. According to you, Ms. Rothchild began experiencing Parkinson's symptoms in 1993 or 21 years prior to her diagnosis; is that correct?

A. That's according to Ms. Rothchild and her deposition.

Q. Okay. And you've opined that Ms. Rothchild's lost earning capacity is $406,660; is that right?

A. Yes.

Q. And this is from 2009 through 2016; is that correct?

A. Yes.

Q. Okay. You wrote that she was

forced to prematurely retire in 2009; is that right?

A. Yes.

Q. And you recall that she was a school teacher; is that correct?

A. Yes.

Q. What is your understanding that she was required or forced to prematurely retire, what's your basis for that opinion?

A. Ms. Rothchild's deposition testimony.

Q. Okay. Do you recall part of the testimony where she indicated that the school itself did not make her quit, they made accommodations for her?

A. I don't recall that portion.

Q. Okay. Do you recall even after quitting that she actually still subbed as a substitute teacher for a few years?

A. She did, I believe, until 2012.

Q. Okay. Did you perform any

analysis to determine if Ms. Rothchild, Ms. Rothchild's transferable skills would have qualified her for employment in other positions at the time of her retirement in 2009?

A. No, transferable skills sounds to me like a vocational assessment. I'm not qualified to perform vocational assessments.

Q. I want to look at Mr. Sparks just for a moment. This is Exhibit 18. Do you have that in front of you, Sparks?

A. So we're done with Rothchild?

Q. Yes.

A. Okay. Sparks, yes.

Q. Okay. Mr. Sparks was diagnosed with Parkinson's disease in December of 2013 at the age of 60; is that right?

A. Yes.

Q. And you calculated Mr. Sparks lost earning capacity to be $414,970; is that right?

A. Yes.

Q. And you calculated a lost earning capacity from 2017 through 2020; is that correct?

A. Yes.

Q. And Mr. Sparks retired from his employment as a Customs and Border Protection officer on April 12, 2017; is that right?

A. True.

Q. And you have indicated that it was a premature retirement; is that right?

A. I indicate that based upon his deposition testimony, yes.

Q. So it is not based upon the DHS document you cite with regards to that statement?

A. It's kind of a string site, so it's both. It's his testimony along with the following document as set forth in footnote 3.

Q. Okay. We're marking Exhibit 41, this is a copy of the DHS document that you cite.

- - - - -

(Notification of Personnel Action Bates 00682__SPARKS__DHS__0000000003 marked Staller Exhibit 41 for identification.)

- - - - -

BY MR. CROMWELL:

Q. This is the same document you referred to in your report; is that correct?

A. Yes.

Q. Okay. And under first action box, 5-B, it says, "Nature of the Action." Do you see that?

A. 5-B.

Q. On the top left-hand side.

A. Yes.

Q. And there it identifies his retirement as voluntary; is that right?

A. Yes.

Q. Is there anything in this document that indicates that his retirement was premature or forced?

A. From this record, there's no notation that says forced retirement.

Q. Okay. And then you said it was a string cite, you said you cited to pages 74 and 75 of Mr. Sparks' deposition; is that correct?

A. Yes.

Q. I'm marking as Exhibit 70 -- I'm sorry, 42, an excerpt of Mr. Sparks' deposition from January 26, 2024. And it's simply the pages you cited. Obviously, we can produce the entire thing if you want to see it. But these are the pages you're referring to for support?

A. Yes.

- - - - -

(Excerpt of Deposition of Richard Douglas Sparks taken 1/26/25 marked Staller Exhibit 42 for identification.)

- - - - -

BY MR. CROMWELL:

Q. If you don't mind looking at the testimony and letting me know where

exactly -- what exactly you're relying upon to reach a conclusion that his retirement was premature due to his diagnosis.

A. It discusses his retirement on pages 74 and 75. I would have to take a look at page 83 of his deposition testimony too.

Q. Okay. Well, to the extent this is the information you've cited and relied upon for this particular statement in your report, you will agree with me that nothing about these particular statements say anything about Mr. Sparks having to retire due to his Parkinson's disease diagnosis; is that correct?

A. Just to be fair, right, the sentence that's cited in footnote 3, it says, "Mr. Sparks was employed by the federal government from approximately 1990 until his premature retirement on April 12, 2017."

Q. Yes.

A. So that cites to pages 74, 75, which is, I think, is an accurate

citation, then it goes on to cite, "Absent the diagnosis, Mr. Sparks had no plans on retirement from employment as he enjoyed his line of work," that's citing to footnote 4, which would be page 83. And then, so it's in conjunction with 74, 75, and 83.

Q. Understood.

A. So I think what I cited there is accurately reflected in my background section.

Q. This is page 83 of the -- his deposition, you said?

A. That talks about his no plans for retirement and that he had enjoyed his line of work with Homeland Security.

Q. Okay. All right. Still on Mr. Sparks, you have a calculation for present value here like a lot of your other reports and it is, you identified two rates, as I think we've talked about before. You have an average yield of high grade municipal bonds as of September 6, 2025, as being 4.88 percent was used to

estimate the return on the principal investment. That's consistent with what you've done in the other reports; is that correct?

A. Yes.

Q. And then you note the average yield on these bonds from 2015 to 2024, 3.36 percent per year was used to estimate the return on the reinvested interest; is that correct?

A. Yes.

Q. And you would agree with me that the percentage used for the average yield is different than what you use in your other reports, am I correct?

A. Yes, that's a 10-year rate compared to the 20-year rate.

Q. Okay. Is there -- sorry, go ahead, I didn't mean to interrupt you.

A. I was going to say, the other ones was using 20-year average rates.

Q. Okay. And what's the reason for the difference, the different uses in rates?

A. Duration, so Mr. Sparks was a little older, so he was 60 when he was diagnosed in 2013. Yes, so as of now, he's 73 this year. So just given the shorter duration of the future calculation, I used the ten-year average rate given he has -- if my calculations tend to be ten years or beyond, I take the 20-year average, if they're ten years or less, I tend to take the ten-year average.

Q. Understood. All right. Looking at Ms. Tukes just briefly, Ms. Tukes was diagnosed -- this is Exhibit 19, Ms. Tukes was diagnosed with kidney cancer in June 2010; is that correct?

A. Yes.

Q. You have prepared calculations with regards to her lost household services; is that correct?

A. Yes.

Q. What -- you would agree with me that you have not evaluated or determined what household services

Ms. Tukes was able to perform prior to her kidney cancer diagnosis in June 2010, am I correct?

MR. RUZICKA: Objection, form.

THE WITNESS: True.

BY MR. CROMWELL:

Q. And you have not evaluated or determined what household services Mrs. Tukes was able to or unable to perform after her kidney cancer diagnosis in June 2010; is that correct?

A. True.

Q. You have opined that Mrs. Tukes' husband has taken care of her since her diagnosis in June 2010; is that correct?

A. Yes.

Q. And is this based, again, off of the deposition testimony that you have been reviewing for Ms. Tukes?

A. Yes.

Q. Okay. All right. All right. Last, but not least, I'm bringing up Mr. Welch, this is Exhibit 20. Mr. Welch

was diagnosed with Parkinson's disease in November of 2021; is that right?

A. Yes.

Q. He was retired at the time?

A. Yes.

Q. And you evaluated Mr. Welch's lost household services from November 16, 2021, through December 31, 2025; is that correct?

A. Yes.

Q. And you agree with me that you did not evaluate or determine what household services Mr. Welch was able to perform prior to his Parkinson's disease diagnosis; is that correct?

MR. RUZICKA: Object to form.

THE WITNESS: True.

BY MR. CROMWELL:

Q. And you would agree that you did not evaluate or determine what household services Mr. Welch was able or unable to perform after his Parkinson's disease diagnosis; is that correct?

A. True.

MR. CROMWELL: Okay. I think I'm at my seven hours.

THE WITNESS: You're at your seven hours, a good place to stop.

MR. CROMWELL: So I will -- well, first thank you for your time, obviously, counsel may have questions for you, but I appreciate your answers and your time today.

THE WITNESS: Absolutely.

BY MR. RUZICKA:

Q. I have a few questions Mr. Staller. Thank you for your time today. I wanted to follow up on some of the questions that counsel asked you today regarding the evaluation or determinations you made regarding household services for these various Plaintiffs.

Do you recall those questions?

A. In general, yes.

Q. And in response to those questions, you were asked if you specifically made any determinations of

what specific services they were able to perform before or after their various diagnoses?

A. Yes.

Q. And, in general, did you review documents and deposition testimony that led you to the foundation of facts that established there was a loss of household services for these Plaintiffs?

A. Yes, that there was a performed household services and then there were limitations from their illnesses.

Q. And that's based, not only on their deposition testimony, but on their medical diagnoses, which in this case are life-threatening cancers and Parkinson's disease; is that true?

A. Correct, yes.

Q. And many of these Plaintiffs testified to limitations that they have as a result of their various illnesses and those limitations are what form your foundation for loss of household services or for past or present?

A. Yes, it's going to be the illness, the medical, physical conditions leading up to the diagnosis of the illness, the treatment of the illness, and then the residual effects of either the illness or the residual effects possibly of the treatment.

Q. And it's your opinion that it's not necessary to specifically determine line by line which exact service or which exact household service was not performed before or after diagnosis, like lawn mowing or doing the dishes or removing the dishes from the dishwasher?

MR. CROMWELL: Object to form.

THE WITNESS: No, that's, as we discussed with the U.S. attorneys or the Department of Justice attorneys, that's why I do the one hour a week. You don't have to do all the A minus the B, the trier of fact can just ascertain or determine what they find to be the lost hours from the

specific illness in question and multiply my one hour per week by that number they determine and that's the loss specific to the illness we're discussing.

BY MR. RUZICKA:

Q. And that's also true because the services that are performed vary at varying stages in life and various stages in the treatment that these Plaintiffs are receiving?

A. Yes, it's going to change as shown by the ATUS hours, it will change from working to retired, so the total hours one performed changes and then it's going to change in the stages of life and the stages of their medical journey.

Q. And that's why you provide your opinions as to the ranges in which those services could be evaluated at, whether it's by an hour or by using the ATUS survey average; is that true?

A. That's true.

Q. And based on your opinions,

you're providing the trier of fact to make those determinations after they hear all the evidence that comes in at trial and evaluating what percentage or what hour of loss of household use there was?

A. Correct.

Q. And is that generally true with your opinions regarding home care, the same analysis applies?

A. Yes, that's why it's one hour a week in the past for the home care for the trier of fact to listen to the evidence of what services a spouse or family member provided to the Plaintiff when they're in convalescent or getting treatment or recovering from treatment. Those will be the factual inquiry of the trier of fact.

Q. But your review of the documents that you have listed in your materials considered and in your reports including, the Plaintiffs' depositions that you did review, led you to a foundation of facts that they did have home health provided provided by spouses or family

members?

A. Services equal to that of a home health aide, yes, so, again, that's the spouse driving them to appointments, that was just discussed on a recent, one of the more recent ones, driving to appointments, caring for them after medical events, helping them recover from medical treatment, yes.

Q. So, like, for instance, do you recall Ms. Dyer's testimony about her husband having to change her stoma bags daily?

A. Generally, yes.

Q. And sometimes that can be five to six bags a day and that he would have to leave work to change those bags?

A. That's my general recollection of what he testified to.

Q. And so based on these general facts, you have a foundation of factual information that led you to the opinion that there was at least some loss of or some home care need that was provided by

other spouses or family members?
A. Some home care need based upon the records I had, yes.
Q. And a lot of these and the same with the home healthcare, a lot of these needs have changed over time depending on the treatment and outcome of the treatment for the various Plaintiffs?
A. Sure. Yeah, I imagine, hopefully, it's -- was more intense around specific treatments and, hopefully, through recovery and rehabilitation, it would taper, but there would be a less frequency, but that's why it's year by year presented for the trier of fact could say for the first five years, here's that annual figure that should be multiplied and then maybe there's nothing in the more recent years.
Q. Or, unfortunately, for the Parkinson's Plaintiffs, it may be the opposite, where it increasingly needs more care, because their tremors and body movements continue progressively to get worse requiring more home care from spouses

or loved ones in the home?

MR. CROMWELL: Object to form.

THE WITNESS: Sure, right, unfortunately, with the progression of Parkinson's, from what I understand, likely to become worse in more recent years, yes.

BY MR. RUZICKA:

Q. Kind of on a different note could home care include CNA care?

A. Yes, so HHAs, CNAs, the types of services that they each respectively, or PCAs, those are the three titles that they -- aides get for helping patients.

Q. Okay. What about RNs?

A. RN would be typically a higher rate of care providing more medical care. My understanding is CNAs, PCAs, and HHAs are technically not medical professionals. They're in the medical community, but they're not licensed as medical professionals.

Q. Okay. And going back to household services, the datasets that you

use were not criticized by the defense experts, were they?

A. No, they were not criticized.

Q. And that's also true with the home care datasets that you used?

A. The hourly rates for the home care was not criticized.

Q. Okay. And so the only criticism was a lack of specific findings of hours that were -- either missing or that were -- strike that. I don't think I have any other questions.

BY MR. CROMWELL:

Q. I just have one follow-up question with regards to household services. Are you offering an opinion to the court as to whether to use the one-hour option that you have opined on versus the ATUS rates that you have opined on or are you leaving that to the court to decide?

A. Leaving that more to the court. I use the ATUS for most of the Plaintiffs truly as guideposts of, to illustrate what the collective average we'd

expect for someone doing household production when they're working or retired, so the court is instructed, hey, we would expect it to be if they're completely disabled or in the death cases, that's the number to be using in a death case, but for these injury cases where they've had treatment and they get better or maybe get worse, use as a guidepost, but then they can work off of that to come to, as a tool to help them form their opinions with the one hour per week metric.

MR. CROMWELL: That's all I have.

MR. RUZICKA: No more. Thank you.

THE VIDEOGRAPHER: This ends today's deposition. We're going to go off the record at 6:03 p.m.

MR. VanSLYKE: Can you just put your copy order on the record?

MR. RUZICKA: A standard order.

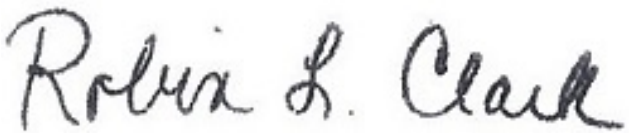
- - - - -

(Whereupon, the deposition was concluded at 6:03 p.m.)

- - - - -

C E R T I F I C A T I O N

I HEREBY CERTIFY that the proceedings and evidence are contained fully and accurately in the stenographic notes taken by me upon the foregoing matter on March 10, 2026, and that this is a correct transcript of same.



_____

Robin L. Clark
Registered Professional Reporter

(The foregoing certification of this transcript does not apply to any reproduction of the same by any means unless under the direct control and/or supervision of the certifying reporter.)

INSTRUCTIONS TO WITNESS

Please read your deposition over carefully and make any necessary corrections. You should state the reason in the appropriate space on the errata sheet for any corrections that are made.

After doing so, please sign the errata sheet and date it.

You are signing same subject to the changes you have noted on the errata sheet, which will be attached to your deposition.

It is imperative that you return the original errata sheet to the deposing attorney within thirty (30) days of receipt of the deposition transcript by you. If you fail to do so, the deposition transcript may be deemed to be accurate and may be used in court.

- - - - -

E R R A T A

- - - - -

PAGE	LINE	CHANGE

ACKNOWLEDGMENT OF DEPONENT

I, CHAD STALLER, do hereby certify that I have read the foregoing pages and that the same is a correct transcription of the answers given by me to the questions therein propounded, except for the corrections or changes in form or substance, if any, noted in the attached Errata Sheet.

DATE SIGNATURE

Subscribed and sworn to before me this

day of ,

2026.

My commission expires:

Notary Public

&

& 2:2,7 249:3,6

0

0000 6:11
0000000 6:13
0000000001 5:21 6:2 200:6 319:22
0000000003 388:4
0000000024 5:15 64:10
0000000034 360:21 361:3
0000000042 5:17 69:3
0000000143 6:5 330:24
000034 6:11
003 6:14
00682 6:13 388:4
008 320:4
00897 1:4
01 271:8
01368 6:11 360:21 361:3
01501 6:5 330:24 331:8
02 93:8 271:8
05 93:8,9
08 97:5

1

1 3:9 11:11,15 30:20 36:24 37:1,18,21 53:17 73:22 77:2 78:14 90:6 90:7 97:9 156:2 156:7 199:22 220:18 261:4 263:23 264:6 265:7 284:23 286:1,2 287:19 287:19 288:5 319:16 322:17 337:12 341:4 347:12 359:17 382:1,8
1,092 59:24
1.1 264:1,4,8 265:14 269:10 269:17
1.4 373:24 374:18 375:9
1/1/18 288:10
1/1/19 288:9
1/1/1950 79:2
1/16/2026 3:10 13:23
1/20/26 5:18 118:7
1/22/24 6:9 355:5
1/26/25 6:16 389:19
1/30/26 4:19 51:21
10 1:11 3:24 8:5 44:23 45:21 46:2 112:7 207:8 257:14 283:3 286:1 296:5 315:5 369:4 392:16 407:7
10,067 221:17 221:22 228:1
10,288 296:7,21 297:1
10/29/25 3:20 3:21,23,24 4:2 4:3,5,6,8,9,11 4:12,14,15 44:11,19 45:17 46:1,9,17 47:1 47:9,17 48:1,9 48:17 49:1,9
100 13:3 139:5 283:9
100,000 243:24 243:24 244:5
101 98:21
106,783 258:9
107 287:12
107,000 286:16 288:10
107,055 285:21 286:8
108 355:10,12 355:13
109 355:12
10:29 84:19
10:41 84:24
10th 60:18
11 3:9 4:1 5:21 6:2 46:5,10 199:23 200:6 220:16 297:11 312:13 315:6 319:16,22
1100 2:3
118 5:18 287:11
11:37 142:18
11:38 142:23
12 4:3 46:14,18 162:5,19 165:24 166:3 205:21 207:22 208:17,19 249:12 250:6 250:13 260:8 266:20 267:5 288:6 303:17 352:21 353:7 387:7 390:20
12,000 267:7
12,403 267:3
12/31 169:10
12:22 181:15
12:24 181:10
12th 162:12

13 3:10 4:4 46:22 47:2 92:9 119:15 221:19 227:10 264:13 264:15,20 296:11,14,23 317:18 323:12 325:18 327:4 350:1
13,000 205:21 207:23
13,160 322:24
13.02 221:22
13.75. 281:11
137 363:14 364:1
138 363:14 364:1
14 3:11 4:6 44:2 47:6,10 49:14 264:18,21 269:24 322:15 359:8
14.9 262:3
140 210:8
143 331:8
145 333:6
147 332:7,19
15 4:7 12:18,19 47:14,18 112:7 148:23 149:7 174:24 175:10 175:13 186:4 195:12,17 265:4,9,16 267:14 281:6 281:20 312:10 367:16 372:14
15.25. 281:9
15.59 369:10 382:21
152 6:5 330:24 331:8,12
16 3:13 4:9 14:5 47:22 48:2 52:17 290:6 311:24 344:24 365:3,13 367:17 370:8 381:18 395:7
162,011 289:5
168 210:5 329:24
17 4:10 48:6,10 72:24 97:10 290:6 291:9 299:9 331:14 347:7 384:7
18 4:12 14:9 48:14,18 140:2 140:3 284:14 285:9 286:21 288:4,6,18,23 293:23 358:2 365:5 386:11
18's 290:6
18,000 267:16 267:21
18,513 266:8,19 267:1,3,4
19 4:13 37:21 48:22 49:2 76:8 80:11 150:12 156:10 159:17 163:5 167:17 188:23,24 213:3,5,20,20 214:6,23 215:2 250:24 256:13 257:1 343:10 393:14
1980 97:1
1990 390:19
1993 384:13
1997 340:10,23 341:10,15,22 342:7 346:22 352:5,22 353:7 357:21
1998 321:20 322:5 330:17
1999 198:17 331:14 332:2
1:08 181:20
1st 169:14,17 249:19 257:8 267:6,6,19

2

2 3:10 13:24 16:16 175:22 266:22 277:23 322:4,14
2,000 343:22
2,600 65:15
2/16/24 5:23 311:17
2/18/2026 3:12 14:13
2/5/26 5:10 57:6
20 4:15 12:9,17 49:6,10 57:13 112:7 118:14 118:22 119:2 121:13,19 148:23 175:21 198:2 216:20 263:24 264:2,5 264:7 265:7 278:1 330:3 332:9 343:14 343:17 355:13 358:3 392:17 392:21 393:8 394:24
200 5:19
2000s 34:2 139:10 334:5 335:11
2001 91:24 92:3 261:20 270:13 270:17 332:9 332:24 381:20 382:5
2003 249:3 333:8,21 382:16

2004 262:20 297:12,17,20 342:3,7 382:1,8
2005 93:11 348:15
2007 308:24 309:4,18
2008 262:12,23 303:23 304:5 305:10,15 307:5 313:13 313:14,21 314:2,14 315:15
2009 278:2 280:9 320:19 384:21 385:1 386:5
2010 225:11 261:24 265:11 266:15 269:24 270:17 272:5,7 278:6 393:15 394:2,11,15
2011 336:20 337:7 338:1 339:3
2012 98:3 297:20 298:11 385:23
2013 386:18 393:3
2014 384:9
2015 283:5 359:21 360:5 392:7
2016 14:5 283:10 284:11 304:6,9 307:6 315:16 360:2 360:12 362:13 364:14,20 365:17,19 368:16 384:22
2017 198:19 304:9 387:2,7 390:21
2018 13:9 14:9 286:9 287:4,10 287:19 359:12 364:22 369:4
2019 249:3,7 286:12 287:6 287:19 358:21
202-514-2000 2:15
2020 162:6,6 165:24 206:7 213:21 248:15 249:12 250:6 250:13 254:13 254:16 260:8 280:16 372:16 377:14,16 387:2
2021 213:21 343:1,3 347:3,7 395:2,8
2022 207:2,2,8 207:11,17 249:20 250:1 252:5 253:7 254:16,24 255:3 337:3 348:10
2023 140:15 170:3,6 178:2 208:1 225:11 303:24 342:21 343:3,4,5 379:11 381:10
2024 64:18 65:11,14 66:21 140:16 208:8 280:17 311:24 344:10 354:19 356:20 357:3 369:10 377:12 382:21 389:10 392:7
2025 12:2,8 29:23 35:2,16 35:23 36:10,19 38:24 39:2 42:15,20 43:13 44:7,16,24 45:21 46:5,13 46:21 47:5,13 47:21 48:5,13 48:21 49:5 90:9 140:16 146:9 151:13 168:10 169:14 170:8 182:15 206:6 225:10 251:23 253:8 260:9 262:4 265:12 266:17,24 267:12,14,19 270:1 271:22 272:5 278:18 278:24 279:13 280:10 304:14 322:5 330:10 336:12 337:8 340:14,24 347:8 352:9 353:2 369:5 382:2 391:24 395:8
2026 1:11 8:5 16:17 56:22 57:13 58:16 118:14 169:17 220:18 257:9 257:22 261:4 290:18 322:10 322:17 337:12 341:4 347:12 407:7 410:14
2028 257:9 258:11
2030 337:13 343:19

2031 343:19
2033 322:21,22 324:13,18 326:7,11
2034 322:21 323:2,10,20 324:14,18 326:7
2036 341:5
2038 266:24 347:13
2042 322:12 323:10
2045 248:21
2049 378:15
20530 2:14
21 4:16 49:24 50:4,13 179:19 300:5 321:7 384:13
21,000 327:11
21,946 323:4
21.98 221:3 323:16 343:16
22 4:18 51:18 51:22 52:3 63:7 63:8 198:2,5 210:4 213:21 215:21 222:2 222:13 253:21 323:12,16 325:21,22 326:4 327:2,5 338:12 354:19 354:23
23 4:20 7:9 53:22 54:3 62:18 63:13 255:19 337:7 339:3
24 4:22 33:15 33:16 54:8,15 64:5 205:22 210:6 211:3 255:19
24th 2:9
25 5:1 36:24 37:8,14 39:11 39:11 43:6 55:2 55:7 66:6 185:9 185:22 186:2 186:15 202:6 207:14 216:19 216:20 238:17 255:4 333:8 352:14
2500 64:23 65:7
26 5:3 7:10 55:14,20 73:1 185:8,20 389:10
27 5:6 56:4,8 258:8
2700 65:19
28 5:8 56:12,17 63:16 67:18 355:11
287 379:24
288 379:22
288,000 359:16
288,361 359:16
29 5:9 36:9 57:2 57:6,11 62:19 90:9,18 322:1
2930 2:3
2:16 247:24
2:27 248:5

3

3 3:11 7:11 14:8 14:14 16:17 118:24 221:11 221:22 227:11 229:12 257:14 258:7 265:19 284:23 287:16 296:6 342:19 361:14 372:8 372:20 387:21 390:17
3.36 392:8
3.78 242:4,8
3/5/26 5:12 58:24
30 1:16 5:11 12:9,16,18 58:20,24 62:21 63:14 90:21 94:10 149:8 181:11 208:2 238:17 249:24 265:6,16 268:10 330:3 408:15
3011 2:8
31 5:13 64:6,12 66:4 67:16,16 67:17 146:9 151:13 168:10 182:15 251:23 260:9 270:1 271:22 280:10 288:6 322:5,10 337:7 340:23 347:7 353:2 369:5 382:1,15 395:8
311 5:22
313-800-4170 2:10
319 6:1
32 5:16 68:23 69:4
33 5:18 117:23 117:24 118:8 118:13,22 119:11 121:15 121:19 267:6
330 6:3
3368 6:10 360:20 361:2
34 5:19 199:17 199:19 200:7
344 6:6
35 3:15 5:22 311:13,18,23

361:13 366:11 367:10
355 6:8
36 3:17 6:1 319:13,23 320:3
361 6:10
37 6:3 330:20 331:1,6 332:6
38 6:6 344:11 344:16 361:12
385 65:10
388 6:12
389 6:15
39 6:8,11 354:13,17 355:5 360:16 360:22 361:4
396 3:4
3:45 317:8
3a 363:4 367:15 368:11

4

4 3:13 7:10 15:23 16:4 19:18 20:5,17 21:5 23:4 119:10 121:13 220:15 229:16 310:7 345:1 369:12 391:5
4.88 241:17 242:6 391:24
40 6:10 324:1 360:17,17,19 361:5 364:7 367:1
40,011 258:12
40,655 287:2 289:5
400 13:10
403 299:12
404 3:3
406,660 384:19
41 5:15 6:12 64:5,11 291:19 387:23 388:5
41,000 288:22 288:24
414,970 386:22
42 6:15 68:22 175:17 389:9 389:19
425 65:13
44 3:19,21
45 3:22,24 117:22 181:11
46 4:1,3,4
47 4:6,7,9
48 4:10,12,13
48202 2:9
49 4:15
4:04 317:13

5

5 3:15 21:20 22:17,24 23:4 35:5,10,14
56:22 58:16 202:5 220:5 227:9 274:18 296:11 388:14 388:16
50 4:16 107:1,9 113:8 227:21 242:18
51 4:18
52 212:2,2 275:21 297:13 381:20
53 4:20
54 4:22
54,000 287:12
54,956 286:12
5400 65:23
55 5:1,3 291:20 312:8,10,13 316:12
55.6 374:10
56 5:6,8 283:5 312:10 316:12
57 5:9 378:2
58 5:11
59 321:23 344:24 345:1 346:12
5:26 383:22
5:37 384:3

6

6 3:17 7:9,12 36:6,15 229:13 241:17 344:10
391:23
60 92:21 121:21 124:6,20 125:1 324:1 386:18 393:2
61 377:22 378:1
62 336:23
63 359:12
64 5:13
64105 2:4
65 127:20 139:15 220:11 276:10 375:24 376:10 377:5 377:21
65.6 374:14 376:11 377:3
65.6.6 373:17
67 139:16,17 267:8 286:4 326:20,23 373:20 374:10 374:17 375:6,7 377:4,6
68 275:23
68.3 258:14
69 5:16 357:24 358:4
6:03 405:19 406:2

7

7 3:19 19:17 20:3 21:21 35:16 44:6,11

52:3 170:1 185:16 202:4 229:9 248:12 359:18
7.25 175:16
7/1/19 288:10
70 127:20 141:7 141:14 331:19 332:3 389:8
73 337:3 393:4
73.5 220:18
74 220:12 276:10 389:5 390:5,23 391:6
75 113:7 276:11 343:17 379:7 389:5 390:5,24 391:6
76 322:11
76.2 322:18
77 7:11 107:5,8
79,000 297:2
7:23 1:4

8

8 3:21 21:22 44:15,19 200:11 220:2 220:16 261:18 266:23 286:1 352:18
8/6/24 6:7 344:15
80 142:3
816-421-1600 2:4
82 113:2
83 390:6 391:5 391:7,12
85.1 248:20
85.8 378:15

9

9 3:3,22 45:6,17 266:23 275:18 280:9 315:5
908 407:13
90s 139:10
91 5:17 7:12 68:22 69:3
94 113:3
950 2:14
9:12 1:18 8:6
9:28 27:11
9:29 27:16

a

a.m. 1:18 8:6 27:11,16 84:24 142:18,23
aaj 99:7
abc 81:8
abilities 232:14
ability 129:18 129:20,21 134:3 228:12 232:11 239:8 283:17 284:4 334:4 335:15 349:4,10,17 351:21 361:18 370:24
able 26:23 81:8 84:7 89:1 95:12 148:13 194:13 194:20 196:17 218:16 225:24 240:19 254:10 271:9 277:17 296:23 301:7 301:12 307:4 333:1 334:21 335:1,2,3 351:13 358:5,6 370:11 394:1,9 395:13,21 397:1
abode 129:22
above 122:15 132:13 264:7 276:11
absence 204:15
absent 128:6 140:1 229:22 235:6 284:18 285:1 286:7 305:7 391:1
absolute 111:19 112:12 113:21 116:2 238:2 239:3,6
absolutely 396:10
academic 97:15 97:23,24 138:5
academics 95:23
accepted 107:22,23 129:9 215:18
access 137:14 233:18 299:23 311:4
accessible 91:13
accommodati... 385:16
account 114:14 117:10 119:5 120:19 123:12 124:11 125:6 150:1 169:6 205:23 241:9 242:2 244:24 268:1,21 269:12 273:24 294:20 295:16
accountant 211:4
accounted 202:15
accounting 95:21
accrued 265:1
accruing 324:7
accumulation 310:8,23

accumulations 310:11,18 316:9
accuracy 223:19 373:13
accurate 50:24 205:15 206:21 216:6,8 373:10 373:13 390:24 408:17
accurately 391:10 407:5
achieve 139:7
acknowledge 117:10 119:5
acknowledg... 410:1
acquire 149:4
acquired 150:5 150:11
acquiring 149:17 303:1
acquisition 149:3
act 34:15 100:7 103:10,14 104:5
action 6:13 388:3,13,14
actions 92:23 92:24
active 100:23 161:18,24 331:18 374:1
actively 138:14 138:16 144:4
activities 134:24 135:2 135:11 194:15 194:23 250:19 250:20 251:10 339:15
activity 175:7 210:17 253:15 333:15,22
actual 25:24 26:1 61:14 63:13 143:20 149:16 184:10 225:6 226:16 244:22 262:22
actually 65:1,6 102:15 110:16 119:9 124:2 146:16 149:4 153:9 156:18 158:7 159:11 163:14 164:19 174:12 232:17 303:1,12 316:9 385:19
adam 32:7
add 91:2 143:16 237:14
adding 175:11 246:16
addition 40:22 144:14
additional 29:18 43:7 52:23 53:2 58:7 61:7 90:24 154:12,15 187:12 262:3 266:17,19,21 267:16,21 278:20 280:5 284:19 285:3 285:10 286:20 286:21 288:9 290:21,22 308:6,10,13 352:12 374:19
additionally 50:19
address 90:17
addressed 23:20
adds 372:9
adjust 61:15 299:21
adjusting 171:23
adjustment 59:23 60:7
administration 249:12 252:7 373:23
administrative 183:21
adult 5:20 6:2 75:15,16 200:3 319:21
advanced 238:9
advertising 34:4
aed 328:12
affect 172:14
africa 333:15 333:24
african 131:16 131:18
age 107:5 108:18,21 112:8 126:10 126:11 129:3 131:12 137:17 141:14 204:16 218:5,6 220:11 220:18 221:3 231:8 233:16 241:23 248:20 248:20 258:14 275:20 276:10 283:5 286:4 297:13 322:11 322:18 323:11 326:19 336:23 337:3 359:12 369:22 373:22 374:10,18,22 375:6 377:23 378:15 381:20 386:18
agencies 204:10

ages 375:5
aggressive 215:3
ago 97:5 99:5 197:7 205:12
agree 23:2 24:20 37:15 42:16 88:5,18 89:21 100:17 101:5 104:22 108:2 109:11 109:23 110:13 120:18 123:10 124:9 125:4 128:14 149:15 160:20 165:12 172:11 176:5 187:18 194:3 202:22 205:9 215:22 217:9 222:4 225:4 226:13 228:15 233:9,13 239:2 239:23 241:7 248:18 251:9 254:21 258:2 258:21 272:20 273:9 282:19 294:2 300:15 311:4 313:19 313:23 314:10 314:17,21 315:11,13,22 316:8,17 317:20 324:10 329:17 335:18 336:19 337:21 347:21 356:14 357:6 358:24 359:10 363:1 364:19 365:5 367:3 370:10 372:3 373:4 377:6 381:8 382:24 390:11 392:12 393:22 395:11,19
agreed 101:8 115:16,19,22 161:6 188:4 205:11 227:6 239:20 340:15 370:16
agreement 23:14
agreements 68:9
ahead 11:10 15:21 17:18 35:5 36:5 41:12 43:21 44:1,5 51:17 66:20 82:9 115:6 117:21 392:19
aide 49:20 59:24 135:14 143:23 144:10 144:14,18 145:2,12,14 146:15 147:9 148:11 150:6 150:23 157:2,3 157:7,15,15 158:1,19,19 159:11 161:12 164:19 165:9 165:16 166:9 166:16,19,24 167:7 169:5 171:5,11 172:14 202:16 203:2 253:6 254:24 255:7 255:22 256:17 281:7 302:11 303:2,2,8 329:11,16,18 329:20 339:10 401:3
aides 147:22 150:18 157:19 163:12 202:12 336:12 403:14
ailment 350:18 351:15
alerts 18:17
alive 275:10
allan 5:23 303:18 311:17 311:23
alleged 224:21
allocation 136:9 199:6 206:8,9
allotment 224:4
allow 86:1,12 108:22 336:4 368:5
allowance 135:14
allowed 43:8
allows 87:2 89:8 222:18 263:21 296:4,8 349:21 351:3
alluded 206:19
alphabetically 169:24
altered 127:10 128:16
amended 16:21 40:3 59:5
american 131:18 178:2,8 178:10 197:5 198:6 204:3 205:18 207:21 215:8 225:15 227:16 325:16 326:17 342:21 343:1
americans 205:21 207:23
amount 39:14 62:15 103:16

104:1 149:17 171:3 172:12 172:18 181:7 211:12 225:2,6 225:23 226:6 232:18 240:20 241:11 242:18 242:20 243:17 268:1,11 296:22 297:5 329:15
amounts 102:14 103:1 120:10 153:13 209:14 245:17 246:14 318:10
amsler 3:19 5:2 5:20,21 38:1 44:7,10 55:1,5 165:20,23 169:23 199:22 200:3,5 202:4 206:6 213:2,7 214:8 229:10 241:15 248:11 248:13 249:10 249:18 250:9 250:12,21,21 251:11,11,16 251:16 253:24 254:1,10 255:6 255:23 256:18 257:6 259:3,16 260:5,12,17,21 367:24
amsler's 162:4 176:24 185:6 185:16,20 206:20 229:23 230:4 248:18 248:24 250:3 257:5,20 260:7
amsterdam 332:13 333:2
analyses 119:23
analysis 59:6 120:21 123:13 124:12 158:21 201:11 218:9 260:16 296:5 350:18 386:1 400:9
anchor 105:23 105:24 106:6 135:17 137:9 137:19 160:19 161:5
anchors 106:1
ancillary 140:4
andrew 28:16
annual 229:23 230:5,15,20 262:12 266:18 266:19,24 322:22 323:3,9 402:16
annualized 305:9 381:11
answer 7:4 10:13,18 17:17 39:7 41:12 58:4 61:11 66:19 190:15,16 212:21 259:18 268:7 279:6 296:24 306:8 307:10 312:15 313:12 345:6 345:10 355:17 356:4 358:10 358:15 371:14
answered 189:18 207:22
answers 10:6 77:22 201:2 209:4 259:19 378:10 396:9 410:5
anticipation 20:20
anybody 87:9 87:13 238:19 259:16
anyways 54:23 293:16,23
apart 166:5 188:17
apologies 62:21 66:6 74:23 97:6 132:18 148:6 185:21 354:14
apologize 45:9 54:9 130:16 360:17
apparently 207:11
appear 69:8 334:16
appearances 2:1,20
appears 37:14 69:13 125:12 125:15 316:4 334:20 346:10
applicable 203:9 243:9
applied 227:11 312:21 317:23 360:12
applies 217:23 369:21 400:9
apply 158:14 217:10 369:17 407:22
applying 124:17,19 314:5
appointment 356:5
appointments 146:23 154:3 170:12,13 251:3 255:24 401:4,7

appreciate 91:9 396:8
approach 269:4 337:16 347:16
appropriate 119:23 374:13 408:5
approve 17:11 17:20,24
approved 17:23 364:13
approximate 12:9,18
approximately 31:11 249:20 254:12 297:2 304:5 384:9 390:19
approximation 12:18
april 249:19 252:5 253:7 267:14 313:12 313:21 314:14 332:9,24 387:7 390:20
arbitrarily 224:17
arbitrary 378:9
area 175:24 196:1 238:12 271:2
areas 92:17 108:1
arrive 19:2
article 98:2,19 98:20 99:4
articles 97:21
artwork 17:24
ascertain 104:20 366:14 398:23
ascertained 222:7,15
ascribe 223:8 296:17
ascribing 370:23
asia 333:14,24
aside 17:1 22:4 61:1 67:21 90:13 124:8 144:12 153:8 211:9 234:5 256:18 304:11 340:18
asked 58:8 66:12,22 85:4 161:16 176:23 186:17 205:22 207:1 208:13 295:6 313:5 340:6 396:15 396:23
asking 10:4 139:8 177:10 192:11 197:16 199:5 256:14 335:15
asks 19:19 21:22 22:14 76:7
asleep 132:23
aspect 144:5
assess 50:19 259:14
assessed 248:12 303:21
assessing 134:10
assessment 39:20 125:21 135:16 209:5 214:10 217:1 386:7
assessments 386:9
assign 201:7
assist 72:9 135:14 157:22
assistance 144:8,22 145:10 147:4 153:3,11 154:4 154:5 158:24 159:1 160:1,10 162:13 166:15 167:14 170:2,7 188:20 191:13 253:21 255:15 255:23 334:12
assistant 144:19 145:15 148:11
assistants 157:20
assisting 17:9 339:11,13
associate 375:6
associated 68:6 137:11 144:20 151:14 157:18 174:8 366:18 367:17,19 368:21 380:14
associates 92:15
assume 10:18 127:3 146:7 285:2 330:7 356:23 366:23
assumed 284:17
assumes 213:4 236:14,20 326:22
assuming 119:17,21 136:1 151:3 257:6 286:3 290:15 329:23 349:1 368:19
assumption 122:3,16 155:16 306:12

306:20 310:24 357:3
assumptions 73:2,16,20 240:2,5,6,8 306:9 307:11
attached 24:15 408:12 410:8
attained 267:11
attempt 158:5 174:4 187:19
attempted 223:5,8
attorney 9:14 15:17 93:23 100:21 211:4 408:14
attorneys 398:18,19
attribute 360:7
attributed 120:6
atus 179:4,6 180:2,8,12 182:10 203:9 203:12,14,20 203:22 204:13 204:13,21 206:10,12,18 209:8,9 210:1 211:11,23 212:24 217:10 219:20,20 221:11,21 225:23 226:6,9 226:13,14 276:6 296:10 322:23 323:3 324:15 369:14 399:13,22 404:19,22
august 344:10
author 98:7,24
availability 71:9
available 70:24 71:5,13 95:11 117:20 164:10 164:18 190:12 192:13 241:13 241:18 353:20
avenue 1:16 2:14 90:22 95:18
average 109:17 126:10 175:19 178:6,20 179:17,18 180:20 195:12 203:4 204:24 205:3,4,4,8 208:18 209:9 213:6 214:22 215:5 217:20 225:15,17 226:21 227:15 238:10,16 265:20 266:6 280:12 281:1,1 281:3,8,12,13 281:14 300:3 336:11 337:17 347:17 351:9 369:8 382:19 391:22 392:6 392:13,21 393:6,8,10 399:22 404:24
award 103:4 105:3 106:17 221:15 243:23
awarded 240:17 244:5
awarding 284:5
aware 15:11,15 21:15 33:12 38:9 91:19 94:11 110:4 128:1 150:3,10 155:9 201:21 249:2,9,10 256:16 268:16 274:13 302:24 303:4,12,14 327:15 328:20 330:14,16 332:1,23 333:20 334:1 342:1 348:8,23 359:24 360:11 364:8,12 371:17,20

b

b 2:13 3:6 220:8 220:23 271:4,5 276:20 296:11 299:12 300:2,2 336:13 369:12 388:14,16 398:21
b2 1:17
back 27:15 29:17 31:24 76:1,16 84:23 89:11 90:4 94:17 95:19,22 121:6,12 133:15 142:22 147:11 151:3 161:15 163:23 179:22 181:19 202:3 208:24 248:4 262:20 270:3,16 280:18 286:24 287:1,10,17 307:17 317:12 320:19 330:15 331:15 336:17 346:8 378:1 380:18 381:15 384:2 403:23
background 40:20 77:14 91:21 232:13 277:6 278:5

391:10
bags 401:12,16 401:17
balance 242:19
ball 238:6
balls 111:15
banded 175:15 195:17
banner 90:18
bar 100:24
barbecue 272:16
base 81:12 107:10 246:10
based 13:2 24:17 37:16 43:3 73:7 105:10 112:18 126:15 128:13 128:23 130:24 133:21 135:19 136:16 139:17 147:20 150:16 151:16 152:4 155:15 159:3 169:21 170:10 171:16 177:10 179:19 187:21 190:11 192:12 204:14 206:14 206:15 215:6 218:6 219:21 222:19 223:6 226:12 227:19 232:12 234:4 236:5,9 245:3 247:4 248:17 250:19 253:24 256:14 264:10 279:7,14 280:4 280:12 282:15 298:3,20 305:20 316:11 316:20 322:23 335:15 359:17 363:24 365:18 371:7 373:18 373:22 374:3 387:13,15 394:18 397:13 399:24 401:20 402:2
basically 39:22
basing 290:24 353:4 378:23
basis 24:12 25:11 68:4 71:7 112:24 113:4 139:12 141:13 147:5 168:14 195:2 209:6,7 241:4 283:16 302:4 360:4 363:22 385:9
bates 5:14,16 5:20 6:2,4,10 6:13 64:4,9 66:3,5 67:16,17 68:21 69:2 199:22 200:4 200:11 319:15 319:21 320:4 330:23 331:7 332:7 333:5 360:20 361:2 361:12 366:11 388:3
bathe 129:20
bathing 134:4 135:12 157:21 205:24
bay 232:7 325:12
beeping 18:6,7
began 92:12 283:8 310:12 384:12
beginning 257:9
behalf 8:16 34:20 71:9 102:21
believe 15:19 29:8,9,11,16 33:15 34:12 59:22,24 68:11 79:23 87:24 88:17 99:8 100:16 125:11 130:15 131:16 143:16 162:15 178:19 186:16 223:17 251:2 272:11 275:9 299:12 300:12 328:19 330:18 344:3 353:8 380:21 382:11 385:22
bell 255:17
belt 70:22
ben 8:21
benchmark 231:1 234:15
beneficiary 273:18
benefit 88:2 89:11 119:21 122:9 137:15 137:16 263:22 266:14,17,18 266:19,21,24 267:10,16 268:12,15 272:13 299:13 299:17 310:12 374:23
benefits 113:15 113:16 120:11 120:14 123:20 124:9 249:23 263:11,13 266:8 267:24 283:9,14,23 284:2,6 299:1,5 299:6 360:13

364:14
benjamin 2:7
best 10:5 96:5 111:22
bethune 2:2
better 94:16 213:23 223:22 405:8
beyond 107:7 109:21,23 110:8 140:7 142:4 272:2 310:4 393:8
bifurcation 208:24
big 252:14 328:10
billed 69:19
billing 39:19 65:3
bills 143:15 211:5
biographical 77:20
biopsy 162:8
birth 79:2,4 107:4,6
bit 81:18 98:9 132:14 317:2 343:15
blacktop 175:11
bladder 4:20 34:21 53:20 54:1 81:9 127:22 131:1 217:16,18 275:20 277:18 281:23 318:23 319:3,8 320:14 321:3 340:9
blanket 170:17
blindly 207:23
blue 312:22
board 196:11
boards 97:20 97:20
body 402:22
bold 320:8,9
bond 241:13
bonds 391:23 392:7
bone 254:13
books 355:15
border 387:6
boring 93:20 94:4
borne 154:5
bottle 88:22
bottom 21:21 229:13
boulevard 2:8
bound 176:1
box 331:17 333:9 388:14
brackets 218:6
brain 371:18
break 84:6,14 91:12,14 166:5 181:8,11 188:17 247:12 317:3
breaks 84:4
briefly 228:8 242:24 393:12
bring 60:3 149:7 211:7 271:22
bringing 394:23
brings 210:20
broad 20:17 95:2 105:5 152:9 184:9,22 185:7
broader 184:2 185:11
broadly 160:4
brod 28:16 63:12 88:18 111:14 223:4 223:16 224:11
broke 181:22
brought 350:8
bruce 55:2
bucks 149:7
build 111:17 113:19 114:21 238:19
building 2:8 110:20 112:5 116:1 139:2 142:14 183:19 312:22
built 131:21
bullet 119:16
burdensome 20:17
bureau 113:6 148:19 184:3 204:2,6 205:2
business 94:15 95:9 149:10
butler 2:21
button 27:3
buy 173:14 275:13
bvanslyke 2:10

c

c 9:12 92:14,14 271:4,5 407:1,1
cagiano 38:12 66:3,10,24 67:9
cagiano's 66:13
calculate 177:5 177:23 178:11 211:8 301:15 323:9
calculated 105:12 132:2,4 248:19 261:2 274:20 276:2 288:18 322:2 372:5 386:21 387:1

calculating
105:19 133:7
137:4 202:24
203:7 229:1
259:22 265:11
269:22 273:23
285:14 286:19
286:21 300:17
359:21
calculation
43:8 67:10
86:15 87:5,10
87:14,19,21,22
104:4 105:24
106:1,14 122:4
122:6 125:17
136:4 140:3
142:5 151:21
171:16 173:23
178:20 180:8
180:11 182:20
183:1 186:8,13
202:20 219:15
220:17 222:17
226:10,12
246:18 262:18
262:22 264:4
265:3,19
271:18 280:6
293:11 295:2
296:6,20 299:6
304:18 305:15
350:20 357:7
363:23 376:24
391:18 393:5
calculations
19:2,20 21:9,24
22:18 24:13,15
25:10 32:20
59:21 85:17
86:2,13 87:20
88:4 89:5,8,18
104:24 105:16
112:18 115:14
116:14 124:22
128:1 130:3
139:16 140:5
140:24 147:20
160:13,17
167:1 168:7,9
170:24 172:15
180:7 181:24
205:20 210:2
212:6 236:13
238:14 241:20
242:11 245:2
254:23 259:10
267:23 268:23
280:20 282:22
290:15 318:16
373:12 376:6
393:7,19
calculator
265:3
calendar
169:15
call 36:24 53:17
215:13 247:21
called 92:13
106:2 242:11
253:14 313:4,5
calling 143:5
calls 17:14 39:4
58:1 66:17
72:22 279:2
306:4 307:8
cametto 51:3
camp 1:5 8:9
9:17 19:22 33:5
33:12,19,23
34:11,15 36:2
52:5 64:17
69:11 100:7
103:9 104:5
120:6,8 130:12
134:16 138:19
151:15 234:10
campus 95:1,3
cancer 4:20,23
34:20,21 53:21
54:1,7,13 81:9
127:22 131:1,2
140:12 170:20
217:16,18
275:20 277:18
281:23 303:23
306:14,16,18
307:4,21
310:19 311:1
313:8,10 314:1
314:5,14,19
315:24 316:2
316:15,22
318:23 319:3,8
320:14 321:3
331:14 332:8
333:7 340:10
352:5 357:21
361:19 372:15
380:10 393:15
394:2,10
cancers 397:16
capacity 67:12
99:13 129:5,14
129:17 134:6
136:24 139:18
141:1 228:4,6,9
228:19 229:2
229:14,22
230:14 231:22
232:9 233:8
234:4,12 235:8
258:2,23
259:23 261:9
262:9,16 263:5
285:15 286:3
288:1 289:3,15
290:11 304:19
304:22 305:7
307:16 310:22
314:23 316:19
326:13 330:1
359:16,21
365:11,20
367:5,19
368:12 381:9

384:18 386:22 387:2
caption 37:10 37:13 77:18
capture 296:9
capturing 167:24
car 244:1
care 4:17 39:17 40:16,17,19 41:8,15,19,23 42:3,7 50:3,20 59:19 61:8,11 61:18 67:11 80:24 99:15 105:14,15 110:17 114:22 127:24 135:13 135:24 136:1,2 136:8 143:6,9 143:19,24 144:1,12,18 145:5,14,22 146:6,8 147:1 147:21 148:11 149:5,6 150:6 150:11,16,18 150:23 151:8 151:14 152:4,5 152:8,11 153:18 155:1 155:10,15,18 156:1,19 157:2 157:3,15,20 158:19 160:13 161:11 162:2,6 162:17 165:9 165:16 166:9 166:24 167:11 167:19,21,22 168:8,18,19 169:6,11,16,20 170:7 171:3,5 171:10,11 172:7,12,14 181:1 183:20 191:20 202:10 202:12,16,17 202:22 208:21 208:22 215:4 239:19 241:21 242:1,14 245:2 245:3,4,7,11,14 246:3,8,13,18 246:22,24 247:5 250:4,12 252:2 253:7 254:24 255:7 255:22 256:17 270:5,8 278:1 278:11,17 279:21 280:14 280:16 281:7 282:7,13,16,23 298:16,17,21 301:20,24 302:11,22 303:2 321:14 329:5,8,11,20 329:24 330:1,2 330:4,8 338:20 338:23 339:2 339:10 352:20 353:6 355:21 356:2 371:4,23 372:6 394:14 400:8,11 401:24 402:2 402:22,24 403:10,10,17 403:18 404:5,7
career 96:3,7 238:9 293:23
carefully 408:3
caregiver 328:21 356:16 356:24 357:1,5 357:6,12
caretaker 148:2 329:4 356:1
caring 144:20 145:18 173:9 270:9 401:7
carolina 1:1 21:18 274:22 275:12,15
carry 87:4
carter 38:1 50:16,22 51:2 68:9 321:10,15 336:18,20 337:2,24 338:7 338:11 340:1
carter's 337:5 337:11 338:14 338:20 339:1,5
case 11:21 24:6 27:24 28:4 32:24 37:9 39:23 40:11 41:3 44:8,16,24 57:20 58:13 63:22 64:22 66:3 71:18 72:18 73:19 77:17 79:10 85:6,18 87:15 99:20 100:15 101:7 103:17 104:2 115:18 115:21,24 117:4,4 118:18 138:18 141:19 142:11 162:4 176:19 178:21 180:15,21,21 181:3 182:8 185:7 197:15 212:18 216:18 222:11,11 223:12,21 227:7,8,23 232:8 234:5 239:2 244:8,16 244:21,24

248:9 272:23 273:1,5,14 280:1 281:6,16 283:15 295:24 302:17 312:6 317:17 343:24 345:9 346:15 349:24 351:5 354:1,11 371:11 373:5 375:1,18 379:6 380:20 382:8 397:15 405:6
cases 1:8 19:3 19:12,23 21:9 32:3 33:18 34:8 37:6,18,22 42:17 49:16 51:5 52:5,10,14 52:20,23 53:14 58:13 59:14 60:17,22 61:4,8 61:12 62:17 63:1,5 64:17 69:10,15,20 70:8,13 71:15 72:20 74:11 75:8 78:9,11 81:3 88:17 99:10 102:5 105:7 108:8 119:24 126:9 130:12 134:11 134:16 138:19 139:21 141:4 145:24 149:18 150:5 155:12 177:14 178:4,4 178:19,24 180:4,17 187:3 187:10,22 201:4 209:8 210:4 219:13 226:11 230:14 230:23 231:3,5 231:15 232:24 233:2,15 234:11 239:2 243:10 244:13 245:3 269:10 279:11 293:6 374:16 405:5,7
casual 34:3
categories 68:5 99:9 105:5 130:9 157:24 184:9,22 185:7 226:23 277:14
categorization 185:12
category 172:8 184:3 278:16 302:4
caucasian 131:17
cause 128:3 315:10 376:23
caused 156:2 162:2 163:14 298:11 311:1
caveat 149:13 174:6 212:4
cdc 107:14,15 122:15
cell 25:14 26:1 26:3
center 1:15 6:4 95:2,11 107:12 330:23 331:14 332:8 333:7
centers 122:14
central 111:4 132:8,17
centrally 176:1
centuries 25:5
certain 25:3 43:9 63:22 78:4 83:19 87:19 113:16 126:10 134:21,24 135:9,11,12,24 155:18 194:14 199:7,9 223:9 225:3 228:4 235:10 240:1,4 240:5,8 253:16 255:24 265:1 279:11 295:18 318:11
certainty 111:19,20 112:12 113:22 116:2,4 224:23 225:5 238:2,4 238:21 239:3,6 292:2,6,8
certification 407:21
certify 407:4 410:3
certifying 407:24
cetera 21:24 156:19 200:18 232:20 324:3
chad 1:14 3:3 3:14 8:11 9:4 9:11 16:3,11 20:8 21:2 22:21 410:2
chance 259:11 294:8,11,20,22
change 17:1 42:11 57:20 59:13,16,21 90:23 139:13 151:10 172:17 203:3 235:16 237:4,5,11,13 239:10 241:8 252:23 343:18 371:23 372:4 399:12,13,16 401:12,17 409:4

changed 16:21 90:12 161:6 235:15 237:2 323:20 324:21 343:15 372:8 402:6
changes 37:13 60:23 62:1 91:16 372:9 399:15 408:11 410:7
charge 65:2,6 149:8
charged 65:14 145:18
charging 149:7
charts 19:21
check 72:6,7
checklist 5:20 6:1 74:20 75:7 78:13,18 79:3,5 79:15,20,20 80:10 196:23 197:19,22 199:20 200:3 201:24 206:20 209:3 319:20 320:11
checklists 75:3 78:20 79:8,16 80:5,15 197:14 319:14
checkmarked 210:24
chemical 191:22
chemotherapy 146:24
chick 244:19
chief 333:9
child 141:10 175:5 204:16
childcare 187:13,15
children 213:2 218:5,7 220:11 221:8
chores 144:20 272:14
chose 274:20
chronology 365:1,5
circuit 21:17 92:9
circumstance 140:9
circumstances 141:5,17,19
citation 305:20 391:1
cite 30:13 78:20 79:2 121:2,10 291:6 339:16 341:19 387:16 387:24 389:4 391:1
cited 73:23 100:18 175:1 291:11 389:4 389:11 390:9 390:17 391:9
cites 390:23
citing 391:4
city 2:4 95:2,11
civil 92:13,16
claimant 145:7
claimants 244:17
claiming 36:1
claims 136:20
clarification 16:13 150:14 289:10 291:10
clarified 61:11
clarify 32:22 106:19 171:1 197:13 258:17
clarity 29:20 185:15
clark 1:18 9:1 407:15
class 138:11
classification 184:5
classify 235:20
clean 154:2 190:18,19 194:20 207:10 224:5
cleaned 207:16
cleaning 129:24 135:10 173:12 183:19 190:14 191:4,5,14 192:16 197:8 198:18,20 206:1 209:21 214:3 225:20 270:10
clear 10:3 25:19 38:10 155:14 178:9 259:20 289:2 308:18 326:6
clearly 161:24 262:20
clerked 92:6,8
clerkship 92:11
client 15:17
clinic 333:13
close 118:1,2,3 237:9
clothing 84:5 243:20
cmo 72:24
cna 403:10
cnas 403:11,18
coats 312:22
cocktails 191:23
codes 184:5
cognitive 81:2 232:14
cohort 112:3 351:10

coincide 376:12
coinciding 376:9,22
cold 208:8
collaborated 72:10
colleagues 32:2 189:6
collection 5:13 5:16 62:13 64:3 64:8 68:19 69:1 69:9 174:7 175:4 188:10 196:12
collective 404:24
collectively 62:8 79:18 82:24 120:2 151:20 159:16 351:13
college 304:9 355:21
column 211:23 286:6 326:1 350:14
columns 200:20 286:24
combined 49:19
come 146:18,19 147:11 212:13 214:12 255:10 281:3 286:15 291:2 295:23 330:11 339:5 351:3 380:18 381:15 405:10
comes 18:16 250:23 251:2 264:4 296:1 400:3
cometto 50:16 68:10 347:2
comfort 166:16 167:9
comfortable 72:3
coming 145:6 178:7 185:8 204:6 234:16 277:10 285:10 299:7 353:8
commence 137:16 160:21 267:17 270:11 305:14
commencem... 151:12 161:5
commencing 1:17
comment 53:7 290:3
comments 334:9
commercials 34:1
commission 410:16
common 98:16 168:4 190:21 204:8 237:19 239:24 274:15
commonly 50:10 89:13 129:18 174:7 238:23
commonwealth 101:4
communication 33:8 66:17 279:3
communicati... 17:15 31:19 33:4 39:5 58:2 72:23 73:5 279:5 306:5,7 307:9
community 403:21
commuting 205:24 324:3
comorbidities 217:21
comp 113:13,14 113:15
companies 92:24 113:11 113:13
company 94:11 149:5 379:10 381:12
company's 74:16
compare 187:19 218:24 226:1 232:5 370:12,13
compared 140:17 177:1 214:20 238:16 377:4 392:17
comparing 198:6
comparison 226:14
compensable 153:2
compensate 304:23
compensated 83:9 153:5
compensation 122:18
competent 70:23 71:15
competing 93:1
complaint 333:9
complement 179:14 213:10 214:5 327:12
complete 10:6 10:7 69:9 75:8 81:22 215:2

296:14
completed 74:17 75:24 76:1,5,7,11,18 79:18 83:13 198:21 201:22 201:23 330:16 348:9
completely 216:14 326:2 405:4
completeness 16:14
compositions 53:13
computation 264:19,21
concentration 94:22 95:8
concentrations 94:21 95:4
concept 243:13
conceptually 282:18
concerned 216:9 225:9,12
concerns 122:5
conclude 290:20 334:24 339:1
concluded 254:9 363:6 365:10,19 367:4 406:2
conclusion 225:6 363:12 390:2
conclusions 32:21 41:5 115:4 120:3,23 121:5 125:8 126:2
conclusive 79:24
condensed 312:9
condition 126:12 128:14 334:4 351:7 355:23 361:20 362:4
conditions 127:10,14,23 128:3,15 349:10 350:3 351:19 361:15 361:17 362:12 362:18 364:5,9 364:18 365:22 366:5,9 367:1 368:15 398:2
confused 135:6
congress 269:15
congressional 268:17,22
congressman 269:2
conjunction 391:6
connard 3:21 5:2 38:1 44:16 44:18 55:1,6 179:12,13 220:2 241:14 261:18,19 262:2,19 264:24 267:11 268:1 269:19 272:3 273:4,12 274:2,6 275:7,8 275:17
connard's 177:1 227:7,7 227:23 262:8 262:12 263:3 274:8 302:17
connards 266:14
connection 19:22
consecutive 138:1 266:1,2
consequence 252:16 325:5
conservatism 271:12
conservative 148:17 149:23 269:4,16
conservatively 162:17
consider 66:22 75:2 95:14 120:4 134:5 140:22 141:18 141:24 142:7 142:12 173:23 229:2 260:3 269:3 299:5 329:2 349:8,15 374:17
consideration 375:9
considered 4:20,22 5:1,3,6 5:8,10,12 22:6 29:3 30:15 53:13,24 54:12 55:4,16 56:6,15 57:5 58:23 62:16,23 95:21 104:6 116:18 116:20 118:18 252:4 260:13 400:20
considering 142:9 296:22
considers 284:4 294:16
consist 26:13 92:17
consistent 62:6 261:8,11,14 337:15 347:15 392:2

contact 33:16 165:7,11
contacted 33:18
contain 19:1 21:8 23:11 62:14,22 76:22 184:9
contained 14:23 51:1 63:4 407:5
contains 85:10
contamination 19:23
contemporan... 140:15 199:1 205:14
content 17:21
context 40:12 40:14 106:5 147:8 210:17 216:11 221:14 262:23 320:9 377:20
continuances 71:3
continue 94:13 272:1 291:15 293:19 309:10 309:24 374:21 402:23
continued 83:15 271:21 290:16 292:3 297:16 307:20
continues 295:18 313:15
continuing 253:20 291:14 314:24 315:7
contract 312:23
contracting 63:22
contractor 320:21
contractors 312:23
contracts 94:7
contributes 345:4
contributing 320:15
contribution 299:12,17
control 122:14 407:23
convalescent 144:3 145:9 158:24 159:21 303:7 400:15
conversation 32:16
conversations 67:6,22 70:17 72:14 73:10 279:7 280:4 304:12 340:19 352:11,16
converse 329:14
cook 154:1 189:2 194:20 195:21,22 207:8 224:4
cooked 207:9
cooking 129:24 134:4 135:10 147:13 173:11 197:7 200:17 207:3 214:3 225:17,19 270:10 272:15
cooks 281:10 281:11
copy 11:20 54:9 98:11,13,14 99:23,24 354:14 387:23 405:21
correct 9:18,21 11:8,22 13:3,10 13:15 14:5,9 15:5,9 16:11 19:24 20:12 21:5,10 22:7 24:24 34:16,23 35:22 36:3,21 37:19,20,22 38:5,12,16,20 40:8 42:19 43:7 44:3 45:10 49:16,21 50:17 50:22 51:6,8,15 52:6 56:1,23 57:17 58:17 59:7 63:24 64:23 65:16 68:13,17 70:3 74:14 75:10 81:24 85:12 88:11 89:24 91:21 93:11 96:21 99:21 100:19,21 101:10 102:11 102:16 103:5,6 103:10,18 104:2,10,11,18 105:12 107:14 108:4 109:7,14 109:24 110:6,9 110:16 114:12 116:19 118:15 118:19 124:3 126:6,14 128:19,24 129:5 130:5,7 130:22 131:3 131:22 132:4 134:7,12 136:1 136:7,18,24 137:23 143:6 147:22 148:14 148:16 149:18 150:24 158:20 159:14 160:14

164:22 165:16
166:10 168:11
168:20 171:7
171:20 172:9
173:1 174:17
177:8 178:3
182:8,11,16
183:9,24
184:12 185:17
186:8 188:2
195:7 196:8
197:18 199:5
199:10,23
200:13 201:19
202:12,17
203:10 204:17
210:3 211:15
211:19 212:9
212:10 215:14
218:2,3,18
219:3,12
220:12 225:24
226:8,10 228:6
229:4,14 230:1
230:17 231:18
233:11 234:7
235:12,16,17
236:3,7,10
237:4 239:4,7
239:13 240:12
240:20 242:10
244:15 245:7
245:18,24
246:4,9,11
247:1,7 248:15
249:13,21
250:6 251:13
252:5 253:8
254:14 255:1,3
257:10 259:23
260:9,23 261:9
261:21,24
263:5 269:20
271:19,23
272:21,22
273:11 274:22
275:3,9,21
277:2 278:2,7
278:18,19
280:10,23
282:4,8,13,24
283:5,20
284:11 285:13
285:20,22
286:4,9,12
289:6,7 290:12
290:18 293:8
295:4,14 297:7
297:17,24
298:8,18 299:2
300:8,18
301:17,21
303:3,13,19
304:19 305:10
308:24 310:19
311:2,6 312:1
314:7 315:1,16
315:20 316:22
318:1,13,19,20
319:17 321:11
321:16,21
322:12,18
323:4 324:12
325:11 327:17
328:6,7 329:7,8
329:12,21,23
331:9 336:21
337:19 338:8
338:22 340:10
342:3,22
344:11 346:16
347:3,8,13,24
348:6 350:23
351:2,22 352:5
352:22 354:6
354:20 356:17
358:22 359:17
360:2,22 363:9
365:11,17,21
367:6,18
368:17 369:5
369:19 371:16
372:22 373:2
378:16,21
382:2 383:7,12
383:15 384:14
384:22 385:5
387:3 388:11
389:6 390:15
392:4,10,15
393:16,20
394:3,11,16
395:9,15,23
397:18 400:6
407:7 410:4
correction
299:11
corrections
408:4,6 410:7
correctly
120:16 122:22
168:1 222:22
285:7 310:14
313:17 320:23
331:23 332:16
332:22 333:18
345:17 356:12
358:17 361:23
362:9
corresponding
31:17 219:22
corroborated
78:13
corroborating
78:23
cosign 70:21
71:16
cosigning 72:3
72:17
cost 59:6,16
84:11 149:2,17
154:5,23
174:10 246:10
282:12,21
298:16 318:6

costs 148:1 152:24 153:8 246:7
counsel 8:12 10:10 17:7,16 23:20 31:2,3,13 31:20 39:6 58:2 58:6 66:18 67:6 67:22,23 70:18 74:17 75:12,18 279:3,8 280:5 304:12 305:22 306:2,5,22 307:10 309:4,8 309:21 310:5 340:19 352:12 352:16 353:9 353:12 396:7 396:15
counselor 300:13
counted 97:9
county 92:10
couple 139:20 178:18
course 245:15 383:20,20
courses 95:10
court 1:1 8:24 11:4 21:15 92:9 103:12,21 104:4,12,20 105:3 149:20 158:13 159:3,6 162:15 163:20 169:22 170:5,9 170:21,23 171:20 179:10 179:11,15 180:9 213:9,16 214:21 227:9 227:14,18 260:2 282:19 296:8,13,16,20 350:11,20 351:3,7 374:13 404:17,20,22 405:3 408:18
court's 374:4
courts 91:3
cover 99:18 144:17 149:9
coverage 92:22 93:2
cranial 362:3
create 86:11 87:18 89:1,7,15 95:6 139:11 175:18 176:24
created 19:22 52:4 86:4 87:1 87:20,23 88:21 89:12 107:12 160:8 191:11 191:20 267:15
creates 89:4 116:6 154:6 326:20 372:9
creating 52:13 88:3 108:17 122:19 131:10
credentialed 96:11
credibility 215:24 224:1
criswell 6:7 38:1 42:17 50:16 51:3 321:10 340:8,9 340:13,18 341:9,14 342:2 342:9,15 343:7 344:2,4,5,9,15 345:20,20,21 346:21
criswell's 340:22 341:2 342:13 344:1
criteria 253:19 284:2,5
critical 96:1
criticism 294:9 404:9
criticized 404:1 404:3,7
critique 123:23
critiques 119:4
crofton 275:10
cromwell 2:13 3:3 8:15,16 9:8 9:14 11:18 14:3 14:17 16:7 18:3 18:22 23:6 24:3 27:6,17 35:12 36:17 39:12 41:17,21 44:14 44:22 45:4,9,20 46:4,12,20 47:4 47:12,20 48:4 48:12,20 49:4 49:12 50:7 52:1 54:5,20 55:10 55:23 56:10,20 57:9 58:10 59:3 64:14 67:3 69:7 73:11,14 82:10 83:1 84:12 85:1 112:14 114:7 116:9 117:24 118:2,11 121:3 121:11,16,18 122:1 123:6,22 124:7 125:3,19 126:3 133:13 134:1 142:15 143:1 146:4 152:18 153:6 154:10 156:7 156:12 159:14 160:11 163:7 164:11 165:5 166:4 169:1 172:2 181:6,21 188:1,16 192:4 193:2 194:17 194:21 195:1

196:2 197:12
200:9 212:19
217:5 219:8
228:23 230:21
233:20 234:1
234:18,23
237:22 239:22
247:11,15,21
248:6 254:8
256:10 257:3
258:16 259:7
263:9 273:8,17
273:21 277:22
279:9 280:7
292:1,9,18
293:7 294:14
302:23 305:5
305:13 306:15
307:14 308:11
308:17 309:15
309:22 310:6
311:21 315:12
316:6 317:14
320:1 331:4
334:23 335:12
335:22 336:8
338:18 344:19
346:3,13,19
352:1 355:8
356:21 357:14
361:7 363:15
365:7,15
366:21 367:11
369:1 370:9
371:2 378:12
380:16 383:8
383:16,19
384:4 388:8
389:22 394:6
395:18 396:1,5
398:15 403:2
404:13 405:13

crystal 111:15
238:6

curious 277:3

current 61:15
61:16 62:3
90:20 91:10
128:2,15
271:23 316:18
378:19

currently 83:11
241:13 275:23
282:9 321:23
372:5

customs 387:6

cut 108:20,21
108:23 130:24
131:13 203:18
218:6 345:12
345:22 351:14

cuts 131:14
218:4

cv 1:4 90:4,7
91:7,10,18,20
97:6

cva 1:15

d

d 3:1 92:14

d.c. 2:14

daily 162:14
163:15 241:8
339:15 401:13

damage 29:24
36:8 76:5 99:9
172:24

damages 5:19
6:1 39:20 40:2
40:4 43:9 66:14
68:1,5 74:20
75:2,7 76:11,21
77:13 78:7,13
78:17,20 79:3,5
79:7,9 80:5
82:12,13 98:4
98:21 101:13
103:4 104:6,16
105:6 106:14
116:14 130:10
136:6 172:9,16
182:13 196:23
197:14 199:20
200:2 201:24
206:20 209:5
259:10 273:5
278:16 302:5
314:23 318:18
319:14,20
365:11,21
367:5

darn 380:1

data 21:16,24
22:18 62:1
73:16 78:17
106:3 108:20
109:20 110:19
111:23 112:10
113:24 115:11
115:18 122:13
130:24 134:16
139:2 170:9
175:12,21
178:1 179:4
180:2 204:1,6
208:5 217:9,22
221:21 225:15
225:18 226:23
227:11,15
238:22 277:8
279:18 330:6
342:16,21
343:2 369:13
369:16 374:12
374:15 376:15
376:22

dataset 115:22
323:22

datasets 403:24
404:5

date 8:4 16:20
17:1 79:2,4
132:2,4 146:10
146:11 151:11
152:6 160:2,13

160:17,22
161:3,5,7,12
162:1,18,23
163:12 164:16
164:20 165:9
165:19 167:8
167:22 168:9
169:6 182:14
251:22 269:23
270:12 271:23
312:16 338:21
352:21 353:1
358:9 377:16
377:17 378:6,9
378:11 382:9
408:9 410:11
dated 3:10,12
3:19,21,22,24
4:1,3,5,6,7,9,11
4:12,13,15,19
5:10,12,18 6:8
13:23 14:4,8,13
16:17,17 35:16
36:9 44:10,18
45:16 46:1,8,16
47:1,9,16 48:1
48:9,16,24 49:8
51:21 56:22
57:5,13 58:16
58:23 118:7,14
311:24 331:14
332:8 344:10
354:19 355:4
dates 161:21
david 2:19 6:8
8:2 38:15 50:22
67:14 68:10
352:19 354:18
355:4
davis 2:2 38:1
42:18 50:17
51:3,4 68:10
321:10 347:2,2
347:23 348:4,8
348:13,19
349:2,9
davis's 347:5
347:10
day 32:18 65:15
65:20 166:7,10
166:13,20
168:12,19
188:12 199:15
201:7 205:23
208:3,17,19
271:18 312:19
401:16 410:13
days 71:2
408:15
dbjlaw.com 2:5
dealing 140:17
167:3
deana 6:7 344:2
344:9,15
death 75:15
99:11,12
178:18,21
180:4,15,17,21
181:3 209:8
243:10 244:8
244:21,23
272:23 273:14
275:2 405:5,6
debilitated
160:24
debilitating
159:23 382:13
dec 92:23 93:18
deceased 375:4
decedent
243:17 244:4,8
273:20 302:21
decedents
243:14 244:5
december
146:9 151:13
162:5 168:10
182:15 251:23
253:7 254:24
255:3 260:9
270:1 271:22
280:10 288:6
303:23 322:5
337:7 340:23
347:7 352:21
353:2,7 369:5
382:1,15
386:18 395:8
decent 181:7
decide 93:16
179:23 222:19
312:14 404:20
decided 160:16
292:13 313:1
decisions 21:15
declaratory
92:23
deduct 268:11
268:14 288:12
288:19
deducted
137:10
deduction
244:6 287:12
287:13
deductions
104:7
deemed 249:19
253:13 408:17
deems 104:4
deep 371:18
defendant 2:16
defendant's
3:13 16:2,10
defense 26:14
26:19 28:3,9,23
29:2 31:17 53:6
211:4 404:1
defer 103:11
125:1 219:6
deferred
308:23 310:1
define 106:18
129:2,13,15
173:4,17,20

228:9 243:7
defined 129:16 137:15,16 138:1 160:19 173:7 263:21 299:13,16,17
defines 129:6
definitely 132:12 167:7 228:22 345:13
definition 92:7 97:15 129:7,8,9 134:13,22 138:13 144:16 145:12,15 157:6 158:2 231:24,24 232:7 233:3 235:7 253:16 265:22
definitions 232:2
degree 91:23 111:18 112:13 116:4 224:22 225:5 238:3,20 292:7
delineated 206:4
delineation 197:20
demarcation 169:11,18
demographic 108:20 112:3 203:18 217:24
demographics 135:20 218:3
demonstrated 262:21
denominator 25:8
department 2:12 9:15 94:2 299:8,10 305:17 306:13 306:17 307:3 307:21 308:14 311:10 314:13 315:1 316:13 316:21 398:18
depend 79:14 82:22 141:4,18 167:23 178:14 239:16 367:22
dependent 220:11 221:8 276:23 277:12 325:18
dependents 204:15
depending 61:21 75:16 110:15 112:7 137:14 140:8 141:16 146:24 148:21,23 161:15 164:23 165:1,4 168:5 177:7 182:7 203:17 260:3 402:7
depends 226:19
depleting 242:12
deponent 8:11 410:1
deposed 9:21 11:7 13:3 140:16
deposing 408:14
deposition 1:14 3:10,11,14 5:22 6:6,8,15 7:1 8:7 12:1 13:14,22 14:12 16:3,10 24:2 26:10 27:22 29:6 30:10 31:5,21 32:18 39:17 40:23 80:20 141:6 145:6 146:13,20 151:17,22 161:14 162:10 163:5 164:4 186:19 190:3 209:3 225:10 251:1 255:11 255:20 273:24 291:2,6,12,13 292:14 293:10 295:13,17 311:5,12,16,24 312:3 327:22 328:13,14 330:13 334:7 338:14 339:5,7 341:18 344:1,9 344:14 345:1 354:5,18 355:3 355:10 358:1 362:15,22 363:13 364:1,3 371:11 377:11 377:17 378:9 379:16,18 380:4,19 384:16 385:11 387:14 389:5 389:10,17 390:6 391:13 394:19 397:6 397:14 405:18 406:1 408:3,12 408:15,17
depositions 9:24 12:11,14 12:19 13:10 77:22 159:19 160:5 167:17 188:23 189:5 189:12,15 256:14,24

400:21
describe 39:23 147:10 212:22 214:14 345:4 376:19
described 144:13 156:24 186:18 255:11 338:16 341:17 379:15
describes 250:18
describing 186:16
description 3:7 116:21 145:13 186:11
designation 3:15,17 35:7,14 36:7,12 300:13
despite 315:13
detail 30:16,18 30:24
determination 79:11 81:21 158:11 169:22 176:16 179:11 219:7 227:19 260:2 271:16 277:16 295:8 301:6 337:22 341:8,13 353:15 357:16 374:12 381:4
determinations 131:21 177:11 223:14 245:21 246:7 396:16 396:24 400:2
determine 79:8 80:17 81:14 93:1 106:9 138:20 158:5 161:10,18 165:7 170:10 174:20 179:3 183:6 184:23 186:12 212:8 219:1 228:18 250:10 262:16 338:5,6 347:22 348:3 349:22 353:21 363:17 370:2 383:2,10 386:1 395:12 395:20 398:10 398:23 399:3
determined 109:5 164:21 183:1 285:21 289:23 373:14 393:24 394:8
determines 296:13,16 327:8 350:12
determining 109:9 134:6 135:3 136:23 163:10 195:3 349:16
detroit 2:9
develop 300:21
developed 190:7
developing 40:1 41:2
development 21:17
deviate 115:1 128:4
dhs 6:13 387:16 387:23 388:4
diagnosed 162:5 165:14 165:23 166:6 166:12 192:11 261:19 274:3 275:20 283:4 297:12 313:13 314:1,18 321:19 325:23 336:20 340:9 347:2 352:4 357:21 359:11 369:17 372:15 377:14 378:2 381:19 382:5 384:8 386:17 393:3,13,14 395:1
diagnoses 397:3 397:15
diagnosis 80:8 80:19 81:24 82:17 83:6,15 139:10 140:1 148:14 151:11 152:7 155:17 155:19 158:8 160:14,18,23 161:3,12,21 162:1,18,23 163:13 164:16 164:20 165:10 166:2,14 167:8 167:23 182:15 189:10 193:13 193:20 196:18 196:19 213:9 213:11 218:11 218:17,24 219:3 229:24 233:22 234:12 248:14 249:16 250:5,5,12,22 251:12,17,23 256:6 260:18 260:22 270:13 271:1,2,4 277:18 278:1 281:23 283:10 284:18 285:2 293:13 295:10 295:19 297:17 298:4,6 301:8 301:13 303:23

303:24 305:8
306:14,17,18
307:4,22
310:10,19
313:10 314:15
315:14,18,24
316:2,22
318:23 319:4,8
320:15 321:3
324:11,19,20
324:23 325:1,5
326:1,2,10,22
327:1,5,8,17
328:6 338:1,2,8
338:21 339:2
339:11 340:3
341:10,15,22
347:24 348:5
348:24 349:6
349:23,24
350:9 352:21
353:1,6,17
357:18 364:21
365:3 367:20
370:4,8,13,14
377:16 378:6,8
380:11 382:9
383:4,12
384:14 390:3
390:15 391:2
394:2,10,15
395:15,23
398:3,12

diaries 210:20
diary 198:7,10
205:14,22
206:4 208:1,2,6
211:3
die 109:13
110:5 111:7
112:16 114:9
114:18 124:2
difference
231:20 323:7
373:15 374:1
382:7 392:23
differences
373:16
different 17:2
94:20 101:22
108:23 140:11
140:11 143:9
169:9 176:4,4
188:11 226:2
234:20 235:3
237:2,14 241:5
242:23 267:1
268:18 323:8
373:1 374:24
392:14,23
403:9
differential
201:10
differentiate
168:16
differentiating
143:11

differentiation
169:7
difficulty
332:14 333:3
diligent 20:9
21:3 22:22
diminished
67:11 222:6,14
228:12 370:24
diminishment
155:5 325:3
dinner 207:3,5
207:9,9,10
direct 174:13
303:4 342:19
407:23
direction 7:4
directly 75:20
disability 6:10
102:20 119:21
120:13 122:9
123:20 124:9
249:24 252:8
283:8,9,14,23
284:6 294:20
296:14 360:13
360:19 361:1
362:13 363:2
disabled 249:11
249:19 252:4,6
253:5,13,19
260:13 405:5
disagree 13:6
13:12 125:13
125:21 126:1
282:20
disagreement
72:19
disc 362:6
disclose 73:4
disclosed 35:2
57:11 59:4
70:12,16 88:13
115:9
disclosing
279:4 306:7
disclosure 3:16
3:18 20:22
21:16 29:17
35:8,15 36:7,13
36:19 38:24
39:1 180:10
disclosures
29:24
discomfort
84:1
discount 25:7
61:16 62:4,9
86:5 87:3 241:5
discounted
240:16
discounting
343:21
discoverable
23:15,22
discovered
314:4 315:4

discovery 39:21 146:20 164:6,8 164:9
discuss 26:6 31:23 32:10,23 43:20 81:18 254:1 317:16
discussed 17:20 90:14 135:20 143:12 157:9 261:6 280:21 287:24 330:12 379:18 398:17 401:5
discusses 390:4
discussing 18:2 24:22 27:21 68:7 181:23 267:2 296:2 301:2 304:22 399:5
discussion 27:13 31:15 142:20 189:14
disease 5:4 53:18 55:12,17 122:14 130:21 131:3 156:3,6,8 161:18 162:23 163:13 164:8 165:14 167:12 167:12 218:11 260:12 314:23 315:4 359:12 360:8 362:18 363:1,9,19 364:19,21 365:23 367:3 368:17 369:18 370:4 371:1,19 381:20 382:12 383:4 384:8 386:17 390:14 395:1,14,23 397:17
diseases 35:20 36:20 68:6 131:5 161:19 167:3,5,15 217:12
dishes 189:9,21 189:23 190:2,6 207:11 345:21 356:7 398:13 398:14
dishwasher 195:22 207:13 345:7 398:14
dishwashing 189:18
displayed 25:17 26:3
disposal 300:7
dispute 23:21 69:24 70:2
disputes 92:22
distinction 42:9 195:19 240:23 290:24 307:17
distort 175:19
district 1:1,1
divide 159:7 266:20
divided 53:16 132:15
division 8:4
doctor 163:3
doctor's 154:2 356:5
doctors 335:17
doctrine 20:23
document 1:7 15:13 312:4 344:24 361:9 368:13 387:16 387:20,24 388:9,23
documents 7:7 14:21,23 15:3 15:12,16,18,20 19:1,6,21 20:11 21:4 22:23 26:18 30:21 31:2,13 39:8,10 39:15,15 62:23 63:23 64:21 73:22 75:18 78:14 397:6 400:19
dog 208:7,10,17 208:21
dogs 208:21
doing 40:21 83:5,7,19,23 88:3 94:23 96:10 111:17 113:11 115:13 154:24 175:8 205:16 209:18 211:1 265:2,3,5 265:8 268:13 271:1 272:14 276:5 287:13 332:10 378:4 398:13 405:1 408:8
doj 8:16
dollar 154:11 175:22 195:23
dollars 154:8 154:12,15 258:3,23 316:10
door 154:12
double 65:21
douglas 6:15 389:18
downs 38:16 67:14,15,20 68:1,3
dr 28:16 42:4 42:10 63:12,12 86:10 111:13 111:14 246:23

drapes 70:6
dress 129:20
dressing 134:3 135:8 157:20
dripps 32:9,12 70:6,11 71:18 72:1,13,16 73:6 73:13,16 74:2
drive 251:3,16 356:6
driver 175:6 195:20 320:18 320:21 368:24
driving 255:15 255:24 256:19 401:4,6
drop 308:2,8,24 309:3,10,18 310:8,10,17,23 316:1,8,14 343:20
drops 107:8 343:16
drove 146:22 146:22
due 81:23 148:13 158:7 250:21 251:12 251:17 281:22 301:20 305:1 310:9,18 316:21 359:2 363:7 378:19 380:10 390:3 390:14
duly 9:5
duplicative 202:23
duration 86:6 87:3,5 106:15 106:24 109:20 112:5 115:21 122:10 130:6 137:9 141:21 241:22 308:4 393:1,5
dyer 3:22 4:21 38:2 44:24 45:16 53:21 54:2 59:7 60:5 275:18,19 276:18 277:17 278:5,17 279:22 281:20 282:4
dyer's 45:11 277:24 280:1 281:6 401:11

e

e 3:1,6 9:12,12 92:14 252:13 252:13,13 407:1 409:2
earlier 141:12 141:16 143:12 195:15 250:15 268:4 284:10 292:10,22 376:24
early 29:18 34:2 64:18 305:1 335:11 348:15
earning 67:11 67:12 99:13 136:23 139:18 141:1 228:3,6,9 228:18 229:2 229:14,22 230:14 231:21 232:8 233:8 234:4,12,17 235:8,11,14 236:13 258:2 258:22 259:23 261:9 262:8,16 263:4 283:17 285:15 286:3 288:1 289:3,15 290:11 304:19 304:22 305:7 307:16 310:22 314:23 316:19 326:13 359:16 359:21 365:11 365:20 367:5 367:19 368:12 381:9 384:18 386:22 387:2
earnings 67:12 99:13 228:16 229:3,18,19,24 230:5,5,16,20 231:1,3,10,14 231:16,21 232:21 233:11 233:19,23 234:5,20 235:3 237:8,15 239:18 243:3 257:6 262:12 262:19,21 263:1,3 265:23 266:4,5 286:6,8 286:8 287:1 288:18 290:5 293:20 300:5 305:9 363:23 375:3 381:11 382:10
easier 87:13
easiest 87:15
easily 214:2,20
eastern 1:1
eat 181:12
economic 1:16 40:1 66:14 67:10 68:1,4,5 78:2 79:23 82:12,13 98:20 101:13 104:6 104:23 105:6 111:19 116:4 116:14 139:2 152:13 153:12 153:14 154:7

155:7 172:8,24 182:13 224:22 225:5 232:4,6 238:3,21 248:12 259:10 272:21 273:5 273:10,11 292:7 303:21 318:17
economics 95:7 95:13,15 132:20 138:11 243:13 373:20 374:16
economist 25:3 26:14 28:13 31:17 70:12 81:12 85:15,16 86:18 87:9 88:8 88:8 89:22 94:16 96:8,17 101:10 107:20 108:14 116:12 143:15 196:14 212:23 223:15 224:11
economists 24:17 53:6 70:20 71:7,14 94:12 114:20 115:16,17,20 115:23 129:17 223:3,12 224:13,20 238:24 240:1
eczema 362:3
editor 72:6
editorial 97:20
education 91:20
educator 290:12,17,23 291:16 292:4 293:12,20
effects 83:14 214:15,16 254:6 349:24 351:16 368:21 368:23 398:5,6
efficiency 86:7 86:13,22 87:23
efficient 86:3
effort 90:2 165:6 176:15
eight 220:3 298:7 308:6,10 308:13 310:1
eighteen 284:21 287:21
either 32:11 40:14 53:3 67:10 75:15 81:9 83:16,18 98:15 144:4 145:7 146:13 152:23 154:8 154:15 182:9 191:22 201:7 207:12 209:3,7 210:13 223:4 225:11 242:13 263:2 300:1 319:12 362:24 398:5 404:10
elapsed 61:20
electronic 98:12,14 99:24
elements 328:12 357:19 367:10,15 368:3
eligible 269:1 269:14
eliminate 61:20
emotional 361:17
empirically 203:20 211:10 222:8,9,16 223:1 224:14
employ 116:6
employed 138:6,7 284:19 285:3 294:4 297:19 390:18
employee 233:1 263:20 299:9
employees 299:20 312:23
employer 233:1 299:18
employers 299:16
employment 145:16 204:14 232:24 248:24 265:5 284:24 299:24 386:3 387:6 391:3
ended 168:8,18 169:4 249:24
endorse 380:3
endpoint 135:17
ends 132:1,3 405:17
energy 232:9 232:10,11,16 328:10 333:15 333:23 335:16
engage 334:4
engaged 34:7 64:17
engaging 303:1
enjoyed 391:3 391:15
entailed 72:4
enter 11:11 15:22 35:5 43:22 199:17 308:2,8 316:14
entered 308:22 309:3,9,17
entertainment 243:21

entire 214:5 268:10 389:12
entirely 246:2
entitled 98:3,20 119:11 183:12 200:12 228:5 229:13,17 240:11 243:1 273:4 286:2 314:22 320:5 322:16 333:9 348:20 352:19 365:10,20 367:5 372:21
entry 331:13 332:7 333:6
enumerate 341:23
enumerated 274:11,16
enumerating 190:1
equal 110:22 401:2
equals 25:14
equity 89:17
equivalent 144:9 148:1,9 148:10
errata 408:6,8 408:11,14 410:9
error 117:8
especially 21:17 23:23 178:21 238:7 266:2
esq 2:3,7,13,13 2:19,21,22,23
essence 169:14
essentially 126:9 147:24 158:18 184:21 240:15 287:3 317:21 355:22
establish 283:16
established 25:4,11 66:9 238:11 397:8
establishing 87:6
estimate 12:16 13:7,12 69:19 182:6 183:3 203:13 209:24 217:7 219:9 229:21 230:3 243:3 257:4 262:2 263:4 300:21 305:6 373:10,10 375:8,16 381:9 392:1,8
estimated 110:22,23,24 211:12 262:8 263:12
estimates 104:22 122:16 197:2 198:11 209:13 373:1 375:1
estimating 236:1
et 21:24 156:19 200:18 232:20 324:3
evaluate 135:1 189:7 190:11 295:7 311:8 328:3 337:22 338:5 347:22 348:3 353:21 370:2 383:1,9 395:12,20
evaluated 161:2 260:7 295:12 371:10 393:23 394:7 395:6 399:20
evaluating 273:22 288:1 400:4
evaluation 161:17 301:6 301:11 329:5 346:21 396:16
event 93:3,5 238:18
events 34:6 239:9 325:13 401:8
eventual 274:9
eventually 43:23 162:15 193:12
everyday 211:2 243:18,21
evidence 78:23 81:7 155:23 159:5 164:23 165:4 191:2,9,9 191:17,18 192:12,14,20 193:3,9 217:1 222:20 227:20 324:18 327:9 363:16 400:3 400:12 407:5
exact 262:17 398:10,11
exactly 60:10 149:21 208:23 287:5,7 370:18 390:1,1
examinations 22:10
examined 9:5 134:15 338:13
example 83:4 84:3 87:8 135:7 141:5 165:22 206:24 213:1

229:9 265:14
350:1,4 376:8
376:14,20
exceed 110:23
excel 18:24
19:7,12 21:8,12
21:13 23:9 24:5
24:13,14,22
25:13,24 30:9
85:4,24 86:12
86:22,24 87:1,7
87:17,17 89:7
89:14
excellent
333:16,23
excels 24:11
except 35:20
143:15 410:6
excerpt 6:15
389:9,17
excited 217:4
excluded
208:15
excluding 67:5
203:2
exclusive 92:21
exclusively
217:11 369:17
excuse 63:20
exhaustive
256:8 257:1
exhibit 3:9,10
3:11,13,15,17
3:19,21,22,24
4:1,3,4,6,7,9,10
4:12,13,15,16
4:18,20,22 5:1
5:3,6,8,9,11,13
5:16,18,19,22
6:1,3,6,8,10,12
6:15 11:11,15
13:24 14:8,14
15:23 16:4,16
19:18 20:5 35:5
35:9,14 36:6,14
44:6,11,15,19
44:23 45:6,11
45:12,17,21
46:2,5,9,14,17
46:22 47:2,6,10
47:14,17,22
48:2,6,10,14,17
48:22 49:1,6,9
49:24 50:4,13
51:18,22 53:22
54:3,8,15 55:2
55:7,14,20 56:4
56:8,12,17 57:2
57:6,11 58:20
58:24 62:18,19
63:7,8,16 64:6
64:11 67:17
68:23 69:4 90:6
90:7 97:9 118:8
118:13,22
119:11 121:13
121:15,19
170:1 185:16
199:17,19
200:7 202:4
220:2,16 222:2
222:13 229:9
248:12 261:18
266:23 275:18
283:3 286:1
297:11 303:17
311:18,23
317:18 319:13
319:23 320:3
321:7 322:15
331:1,6 332:6
344:11,16
354:17 355:5
359:8 360:19
361:4 364:7
367:1 372:14
381:18 384:7
386:11 387:23
388:5 389:8,19
393:14 394:24
exhibits 52:3
exist 19:9 23:11
77:5 134:18
existed 223:7
367:10
existence
301:20
exists 83:17
210:22
expect 126:9
134:17,23
135:18 137:22
157:14 209:10
300:3 405:1,4
expectancies
105:17 112:19
expectancy
105:8,11,15,21
106:2,4,4,7,12
106:16,18,20
106:23 107:11
108:4,7,12,17
109:4,5,6,10,14
109:16 110:6,9
110:13,18
111:8 112:1,17
113:17 114:4
114:10,15,16
114:22 115:18
116:13 117:11
119:6 120:9,20
122:5,13 123:1
123:2,13,14,21
123:24 124:3
124:12,13,23
125:7,18,23
126:6,18,21
127:2,5,9,12,13
128:7,13,18,24
129:3,10,10
130:2,11,18,19
130:20 131:7
131:10,20
132:1,3 133:2,5
133:18,19,21
134:11,14,18

136:17,22 137:3,21,24 139:4,15 205:4 205:5 236:3,16 236:16,24 248:19 267:22 272:19 290:18 294:5,16 322:11 337:13 341:5 347:13 372:19,22 373:1,18 376:5 378:14,21 379:4
expected 122:8 122:10 138:20 139:14 225:19 228:16 266:16 267:20 272:13 288:23 327:2 327:13 378:20
expecting 126:13 127:4
expend 154:8
expenditure 244:12
expenditures 243:2,4,8,19 244:18,24 303:5
expense 153:4
expenses 101:18 102:9 102:16 143:10 143:13 149:10 169:16
experience 175:2 177:17 177:20 188:7,8 209:15,22 210:16 215:11 215:23 216:1 232:13 294:3
experiencing 162:22 360:6 368:16 384:12
expert 3:16,18 3:19,21,22,24 4:1,3,4,6,7,9,10 4:12,13,15 5:14 5:16,18,21 28:3 28:23 29:2,24 34:16,19 35:8 35:15,20 36:8 36:13,20 37:17 37:21 38:11,15 38:19 42:6,11 44:6,10,15,18 44:23 45:16,24 46:8,16,24 47:8 47:16,24 48:8 48:16,24 49:8 57:12 58:7 60:21 64:4,10 68:22 69:2 70:12,16 101:22 116:18 118:6,13 167:2 168:3 200:5 223:15 245:10 279:12 300:7 300:10 303:18 319:15
expertise 224:13
experts 28:8,9 42:4 63:3 72:23 86:21 108:2 117:9 119:5 122:4,7,12 126:19,22,23 223:10,12 247:1 404:2
expires 410:16
explain 152:10 266:12 279:20 312:20 354:9 373:16
explained 184:19 340:7
explicit 190:10
explicitly 190:9
explored 189:4
exposure 120:6 120:8 151:15
expressed 305:22 309:4,8
expressly 127:8
extends 140:7
extent 17:14,16 39:4 53:1 58:1 66:16,18 72:22 77:4 78:19 110:11 136:2 152:23 153:2 154:16 202:19 257:16 279:2 279:17 306:4 307:8 356:23 357:4 367:23 368:3 372:8 390:8
exterior 173:12 206:1 272:15

f

f 407:1
fact 32:17 67:8 81:14 104:20 105:3 111:6 112:15 114:8 114:17 115:2 116:8 122:24 147:15 149:21 151:7 161:11 163:11 165:8 176:23 179:10 212:8,13,18 213:17 214:4 214:11,24 215:12,17 216:4,14,17,24 221:15 222:18 223:11,13,21 224:24 227:1 228:24 237:12 239:9 250:11

260:3 277:1 296:4,9 302:9 314:4,13,17 327:7,7 334:8 349:2,8,22 350:12 365:18 366:14,20 373:14 374:3 376:20 398:22 400:1,12,17 402:15
fact's 375:8
factor 25:7 228:22 259:22 259:24 295:21
factored 276:17
factors 108:16 108:22 131:9 134:2,5,10 168:6 277:1 367:17
facts 73:2 140:8 141:5,17,19 142:10 189:11 306:9 307:11 397:7 400:23 401:21
factual 21:23 81:6 158:11,16 219:7 222:11 223:13 253:11 253:22 400:17 401:21
fail 117:9 119:5 408:16
failure 120:4 120:19 123:11 124:11 125:6
fair 10:8,13,19 40:24 70:1 73:11 82:4,7,17 116:10,21 127:3 146:7 151:2 155:21 203:5 231:15 236:12 247:3 288:3 289:12 307:18 329:1,9 334:24 351:17 390:16
fairly 228:17
fall 29:18 93:8 109:11 110:21
falls 132:23
familiar 9:23 36:23 37:1 74:8 74:22 75:6 100:6,8 102:1 117:3,7 248:23 263:15 283:21 328:20 380:22
familiarity 145:11
family 170:8 210:9 303:9 345:2 400:13 400:24 402:1
fancher 6:8 38:2 50:22 68:10 321:15 352:3,4,8,19 353:16,16,22 353:22 354:19 355:4 357:16 357:20
fancher's 352:20 353:5 353:24 354:10 356:15 358:1 358:20
fantastic 350:16
far 86:8 87:22 90:22 160:2 169:19 170:11 171:4 174:9 186:15 190:8 191:13,24 262:22,23 277:8 284:2 357:18
fashion 83:24 89:9 368:5
fast 195:21 217:3 281:10
father 94:10 96:20
fatigue 81:4 147:2,3 154:3 189:15 190:22 328:9
fatigued 214:1 339:13
fault 45:11
faulty 206:14 206:15 212:11
feasible 71:13
february 12:23 12:24 14:9 16:17 35:2,16 35:23 38:24 39:10 42:15,20 43:6,13 56:22 93:9 278:18 279:13 304:14 311:24 322:4 331:14 332:2 340:14 352:8
federal 21:15 175:16 238:5 263:20 265:1 265:23 312:21 390:19
feeling 160:23 161:20 162:11 164:7 331:19
feet 332:11
felt 94:15
female 218:5 225:18 277:12 351:11
fers 263:12,16 264:12 266:8 266:24 267:10 267:24 268:2

268:18
fifth 362:3
figure 179:3 205:3 217:20 269:5 402:16
figures 299:22
fil 244:19
file 39:23
files 19:1 21:8 21:12,13 23:9 24:5,22 26:12 26:12,16 30:9 85:4
fill 88:22
filled 320:10
final 17:22 72:2 170:24
financial 83:11
find 94:8 175:14 184:6 196:24 210:21 216:5,7 224:20 319:12 398:24
finder 212:8,13 212:18 213:17 214:4,24 215:12,17 216:15,17
finding 216:24 224:24
findings 404:9
finds 374:13
fine 91:15 317:4
finished 169:15
fireman's 308:22
firm 92:13 93:7
first 5:9 11:12 14:4 31:2 33:11 33:19,22 36:24 56:21 57:4 59:5 90:8 92:8 93:2 104:12 120:15 122:21 172:6 182:19,19 215:4 219:14 222:4,21 242:18 263:24 264:23 265:7 281:6 285:6 310:9,13 313:16 318:7 320:22 331:22 332:15 333:17 345:16 356:11 358:16 361:22 362:8 373:16 388:13 396:6 402:16
fisher 2:8
fit 226:22
five 22:16 36:20 84:4 94:10 161:19 167:3,5 167:14 170:21 181:2 216:22 247:12 296:17 296:24 383:18 401:16 402:16
fixed 308:4,9
flatbed 320:18
flavor 209:1
flesh 366:3
flip 229:16
floor 2:9
florida 297:20
florida's 299:10
fluctuation 241:9
fluctuations 120:5,7,9,10 123:1,12 124:11 125:7
focus 141:20
fold 84:4
folding 356:10
follow 109:22 136:21 166:8 237:1 253:2 333:14 396:14 404:14
following 295:19 320:17 333:14 387:20
follows 9:6 121:22
food 173:12,14 173:14 183:18 188:21 195:21 243:20 272:16 281:10
footing 243:14 244:9
footnote 78:19 149:1 175:1 185:8,9,20,22 186:2,3,15 202:6 264:13 264:15 281:6 281:20 291:9 299:9 342:24 343:4 379:19 379:19 387:21 390:17 391:5
footnoted 78:10
footnotes 73:23 148:16 204:4 291:8,21,23
force 138:2,4,8 138:14 231:11 233:17 259:15 294:21 324:4 325:21 368:3,6 374:2,6,9
forced 197:10 363:7 368:23 379:9,13 380:10 381:5 385:1,8 388:24 389:2
forces 326:3
forecasting 139:1
foregoing 21:1 407:6,21 410:3

forensic 1:16 88:8 94:12,16 96:8,16 101:10 107:19 108:13 114:20 115:16 116:12 129:16 196:14 238:24 239:24 243:13 373:20 374:16
forewent 155:24 285:16
forfeited 310:11,17
forget 139:22 265:24
forgive 42:15 43:16
forgo 155:10 156:18
forgoing 154:24
forgone 154:19 155:3
form 6:10 25:23 41:4,11 52:22 65:3,5 75:15,16 76:7 76:21,21 77:24 82:8,19 111:11 112:20 115:6 120:24 123:4 123:16 124:4 124:15 125:10 125:24 133:10 133:23 146:1 152:14,20 153:16 156:4 159:13 162:24 164:1 165:17 168:22 171:13 187:24 188:3 191:6 192:23 194:7 195:9 196:20 198:1,5 210:4,17 212:16 215:15 219:4 228:20 230:18 233:12 234:8,22 237:17 239:14 253:9 256:2,20 258:4 259:4 263:7 273:6,13 277:19 279:1 291:17 292:5 292:17 293:4 294:7 299:13 302:13 305:2 305:11 306:3 307:7,23 308:15 309:12 309:19 310:3 315:2 316:3 334:13 335:4 335:21 336:1 338:9 344:5 345:24 346:17 351:23 356:18 357:10 360:19 361:1 362:13 363:3,10 364:23 365:12 365:24 367:7,8 368:18 370:5 370:15 377:8 380:12 383:6 383:14 394:4 395:16 397:22 398:15 403:2 405:11 410:7
formal 95:8 365:3
formerly 261:1
forming 108:8 184:11
forms 39:20 40:3,4 74:9,12 74:13,15 75:12 75:14 76:1,5,11 77:4,13 78:8 199:4,6 209:5
formula 25:4 86:20 87:6 115:15 265:14 268:17,19,22
formulas 19:1 21:8 23:11,14 24:21 25:20 85:11,21,22
formulate 230:16 379:5
formulating 17:4 24:6 60:16 63:18 100:14 116:13 126:20 187:11 201:3 312:5
forth 24:13 25:9 78:14 171:17 186:15 226:20 288:4 299:8 366:10 387:20
forty 364:8
found 98:17 100:2 203:9 249:11 313:7 367:2
foundation 81:13 112:23 126:16 141:13 397:7,23 400:22 401:21
foundational 79:13
four 19:16 20:8 20:12,13 26:1 121:17 215:4 215:22 366:16
free 355:14
freed 324:1
frequency 167:10,17 169:19 171:6 172:16 177:3

211:20 212:9 402:13
frequently 232:23
friendly 96:4
fringe 299:1
front 11:4 33:14 162:10 165:20 386:12
fryar 40:16 41:20 135:13 135:24 169:12 245:11 282:16 282:22 300:8 318:6,10 378:24
fryar's 59:5 80:23 298:21 300:16 317:22
full 65:20 129:4 138:2,3 179:13 213:10 278:12 296:22 329:24
fully 160:9 336:4 407:5
function 160:10
functional 129:4,14,17 134:6
functionality 135:21 334:17 334:22
functioning 161:24
functions 335:2
fund 308:23
fundamental 122:3
fundamentally 120:21 123:3 123:15 124:14
funded 119:24
funds 242:12
further 71:13 80:1 96:13 147:12 189:5 190:7
future 50:14 59:18 66:14 67:10 68:1 102:19 105:19 106:9 113:23 114:22 120:13 130:4,7,8 133:7 136:1,4,11 137:23 178:11 178:12 187:23 214:18 219:10 219:16 221:3,5 226:21 227:5 229:19 230:4 230:24 233:11 233:14 234:14 235:24 236:1,5 236:13 237:3,5 237:7,10,13,15 238:14 239:7 239:10,18 240:3,9,15 241:20,24 242:2 245:2,7 245:17 257:5 258:2,22 259:10,23 261:3,8,11,14 275:6 282:3,12 282:23 293:2 294:13 298:16 301:16 321:9 322:8,16 337:11 341:3 342:14 347:11 371:4,23 372:5 393:5

g

g 32:8
gainful 253:15
gary 359:8
gatekeeper 149:20
gear 95:12
gender 108:18 108:21 126:11 131:12 218:1
general 15:7 40:12 107:5 109:7,12 145:10,13 147:7 149:10 151:23 155:20 157:18,24 159:18 161:13 161:22 165:13 181:23 184:8 189:14,16 195:14 196:13 197:22 206:8 270:9 334:16 334:22 339:10 339:14 396:21 397:5 401:18 401:20
generally 22:13 23:13 26:15 57:11 59:4 71:7 80:23 82:20 88:7 107:21,23 117:5 129:16 138:24 140:22 141:20 145:5 147:7 148:20 152:2,8 161:15 189:13 192:9 194:9 196:21 209:1 218:4 231:4,7 232:8 293:17,19 294:2 339:15 400:7 401:14
generate 228:13 232:11 232:18
generation 137:12
generic 75:14 77:17

generically 157:13
genetic 348:20
geographic 148:22 150:18 175:24 196:1 219:23 238:12
geographically 236:10
getting 88:2 89:10 94:19 95:15 96:15 144:4 170:7,7 247:14,16 271:8 330:2 400:15
gilham 32:8,11 32:14 33:1 70:5 71:17 73:17 74:1
gilham's 72:8
give 25:5 40:14 40:19 78:24 79:13,24 114:3 132:11 158:9 176:20 179:23 211:11,23 212:23 224:7 259:18 275:12 287:16
given 13:9 79:10 103:17 104:2 109:13 133:17 136:3 139:17 166:7 170:2 173:24 174:20 179:5 191:22 203:10 207:24 210:18 222:13 226:17 232:19 233:16 235:22 241:23 245:23 265:9 266:14 268:23 269:1,14 271:12 272:12 287:1 314:21 315:8 316:7 324:1,4 370:10 380:24 393:4,6 410:5
gives 87:17 113:9 132:16 205:19 206:4 210:23 216:22 221:12 257:12 296:19,20 350:19
giving 213:13 223:24,24 329:24
gleesing 3:24 5:2 38:2 45:22 45:24 55:1,6 283:3,3,8 284:10,18 285:2 286:2 288:2 289:3 290:16,21 291:14 295:4,9 297:6
gleesing's 291:12 293:10 295:13,17
go 11:10 15:21 17:18 27:6 35:5 36:5 41:12 43:21 44:1,5 51:17 66:20 80:11 82:9 84:18 105:14 108:16 109:21 109:23 111:3,4 112:4 113:16 115:6 117:21 119:10 121:6 121:12 131:9 140:6 142:15 142:18 145:1 172:5 173:18 181:14 184:3 186:7 202:3 208:11 209:7 242:1 269:5 336:16 343:22 355:15,17 356:5,6 383:22 392:18 405:19
goal 71:12,14 96:2,17
goals 96:14
god 27:5
goes 21:6 22:18 77:19 106:1 137:12 179:18 268:3 270:16 323:11,16 324:1 325:21 325:21 362:2 391:1
going 10:18 11:10 13:18 15:21 17:6 18:11 24:10 32:18 35:4 36:5 39:3 43:21 66:15 72:21 73:1 79:14 81:1 82:22 84:13,16 84:18 86:18 89:19 93:13 95:21,23 96:6 96:13 105:7,16 112:6 113:2,3 117:21 123:20 124:22 127:19 140:1,14 141:4 141:18 142:17 149:8 166:13 167:11,14,21 168:4 169:20 173:13,13 175:9 176:10 178:14 181:7 181:14 185:9

185:11 199:2 203:3,17 205:14 206:16 206:21 208:23 214:10,18 216:21 221:4 222:10 231:8 231:23 239:15 244:18,19 247:9,16,24 254:2 259:12 262:19 280:3 281:11 291:15 292:11 293:16 293:18,21 316:12 317:7 317:16 319:12 321:5 325:3,6,6 331:11 343:14 344:8 354:13 380:2 383:21 384:6 392:20 398:1 399:12 399:15 403:23 405:18
golkow 8:3
gonna 313:1
good 9:9 114:3 209:17 216:5 247:14 376:13 396:4
government 85:16 102:21 111:24 119:22 122:20 204:10 223:3 265:23 299:16 320:20 390:19
government's 115:17,20,23 119:4,23 120:2 120:21,22 122:3,7,12
grabbed 199:16
grade 391:23
graduating 92:3
grand 2:8 242:18
graphs 19:20
grass 345:12,22
gratis 83:22
great 208:5 312:16 332:10 376:8,20
greater 269:7
grounds 20:19 183:19
group 8:20,23 97:3 112:3 183:11,13 186:1,23 351:10
grouped 184:23
grouping 185:7
groups 183:14
growth 25:7 87:2 185:13 235:11,14,19 235:24 236:1,5 236:13 237:6 237:10
gs 266:3
guarantee 113:21 142:14
guard 304:8
guess 69:21 87:15 140:21 163:8 179:2 194:8 221:7 271:22 339:24 358:7 371:14
guide 79:22
guided 215:7
guidepost 234:15 296:10 351:12 405:9
guideposts 404:23
guys 181:8 312:22

h

h 3:6 32:8
habits 197:7,8
hackett 102:2
haddonfield 1:17 8:8
hairston 41:23 245:12 371:8
hairston's 371:11
half 12:15 31:10 65:15 109:11,19,21 109:23 131:24 132:2,13,13 214:9 215:1 227:24 249:20 286:16 288:14 288:20 289:24 376:24
halfway 284:24 287:4
hand 89:6 207:12 344:8 388:17
handed 331:5 354:16 360:18
happen 113:22 238:1,19
happened 343:5
happening 303:12,15
happy 53:5
hard 56:13 98:12,14 99:24 213:24
hats 176:4 177:21
head 60:8,14 76:19,24 80:9 145:3 150:8,13 156:10 189:1 192:3,18 193:1

193:8,15 202:2 251:19 256:22 259:6 278:14 281:24 284:8 298:14 304:16 338:17 342:12 362:23
headers 201:8
health 4:17 49:20 50:3 59:23 107:13 128:2 135:14 143:23 144:9 144:13,18 145:12,14 147:9,21 148:11 150:6 150:17 157:7 157:14,19 158:1 159:12 161:11 165:15 166:16,19 167:7 169:5 171:11 172:13 202:10,11,16 203:2 253:6 254:23 255:6,8 255:9,22 256:17 280:13 281:7 303:2 320:5 336:11 339:10 350:3 351:7 355:19 400:23 401:3
healthcare 60:12 145:2 149:18 150:23 152:11 158:19 163:12 164:19 165:9 166:9,23 168:18 171:4 183:18 243:20 244:2 402:5
healthy 106:2,6 106:11,16 128:23 129:2,9 129:10 130:2 130:11,19 131:7,10 132:1 132:3 133:2,5 133:18,19,21 134:11,14,17 134:22 135:17 272:19 322:10 337:12 341:4 347:12
hear 10:22 18:13 103:19 133:11 163:17 218:19 309:13 346:1 400:2
heard 214:8
hearing 18:10 18:20 158:12
heart 127:23
heavy 214:1
held 8:8 27:13 142:20
help 24:9 71:13 71:22 79:8 147:13 152:1 154:9 162:14 170:11,13,14 170:15,17 189:8,9,21,22 190:14 191:3,4 192:16,21 193:5 194:6,6 194:24 195:4 323:6,8 405:11
helped 345:12 345:13,21
helping 32:2 144:21 148:12 152:9 157:22 206:2 251:3,16 401:8 403:14
helps 70:7
hereditary 348:21 349:3
hey 208:1 213:18 377:23 405:3
hhas 403:11,19
high 141:9 210:9 265:19 391:22
higher 83:3 403:17
highest 265:22
highlighted 180:9 333:12 334:15,19 335:6,9
hill 4:1 5:2 38:2 46:6,8 55:2,6 297:10,11,16 297:23 298:11 298:18 299:22 300:18 301:7 301:12,17,23 302:22 303:1
hill's 297:10 300:22
hire 83:11 303:8
historian 215:14
historians 205:15 209:16 212:12
historical 150:17 171:24 230:19 231:3 231:10,14,16 233:5,19 234:5 234:16 262:19 262:24 263:3 290:5
history 231:11 331:17 332:10
hit 27:3 89:20
hnpp 348:22
hodgepodge 175:3 196:11

hodgkin's
34:21 35:21
36:2 321:20
hold 51:5
100:23
holding 232:6
325:12
home 4:16
49:19 50:2
59:23 60:11
135:14 143:23
144:1,9,13,18
145:1,12,13
147:9,21 148:1
148:2,11 149:5
149:6,17 150:6
150:17,22
151:7 152:11
157:7,14,19
158:1,19
159:11 161:11
162:16 163:11
164:19 165:8
165:15 166:9
166:15,19,23
167:7,11
168:18 169:5
171:4,11
172:13 173:8
173:14 176:3
202:9,11,15
203:2 253:6
255:8,9,22
256:16 270:7
280:13 281:7
303:2 324:6
325:10 336:11
338:23 339:10
400:8,11,23
401:3,24 402:2
402:5,24 403:1
403:10 404:5,6
homeland
391:16
honest 93:24
honey 324:8
hopefully
208:10 402:10
402:11
horrible 78:6
horribly 93:20
94:3
host 157:4
hotbox 247:22
hour 65:10
81:17,20 84:13
148:23 149:7
158:10 159:7
171:20 175:16
175:17 176:21
178:5 182:10
182:21 183:3
188:12 197:2
198:18 201:10
205:22 208:20
209:7 211:3,6
212:2,7 214:12
219:15,16
221:18 222:17
223:9,22
227:13,17
247:10 255:4
296:3,6,7
322:23 323:3
343:11 349:20
350:10,14,15
351:2 370:18
370:20 398:20
399:2,21 400:4
400:10 404:17
405:12
hourly 147:20
150:17 157:16
171:10 174:6,9
174:13,15
175:14 177:4
183:1,7 184:11
184:24 186:8
187:11 188:14
195:3,6,11,16
195:19 202:11
211:19 213:20
274:20 280:13
281:3 329:2
336:11 337:18
347:17 369:8
370:23 382:19
404:6
hours 31:10
59:24 150:22
151:5 158:14
172:19 174:2
177:24 178:20
179:7,16
180:10,24
181:2 182:10
199:14 201:7
201:12 203:13
203:17,21,23
204:20,21
209:21 210:5,8
210:12,18
211:5,12 212:2
212:14 213:3,5
214:6,23 215:2
215:19,21
216:2,8,21,22
220:22 222:6
222:14 224:9
225:7,14,17,23
226:6,14,16,21
227:10 276:6
296:11,12,14
296:17,19,24
297:5 323:12
323:12,16,16
324:2,15 325:6
325:7,18,21,22
326:4,16 327:2
327:4 329:10
329:15,18,20
329:24 330:3,4
331:19 332:3
332:12,12
333:2,2 342:18
343:7,16,17

349:22 350:2,5
350:6,7,9,13
351:12,14
358:14 359:1
396:2,4 398:24
399:13,14
404:10
house 129:22
134:5 155:5
190:14,18,19
191:4,5,15
192:16 193:6
193:12 272:14
345:23 356:8
housecleaning
192:7 198:13
household 4:16
49:19 50:2,14
51:1 79:15 80:3
80:18 81:5 82:6
82:13,16 83:5
83:17,19 99:15
105:19,20
106:9 130:3,4,7
130:8 133:7
135:4,8,9 136:5
136:5,10,11
153:22 155:8
173:1,5,6,10,16
173:19,24
174:8 175:2,3,4
176:7 177:20
178:1,12,13
179:4,14,24
180:19,20
181:1,3,24
182:5,6,14,21
183:2,7,13
186:5 188:9
193:18 194:1,4
194:11,13
195:14,15
196:17 197:16
200:12,16
202:21,24
203:8 204:15
204:23 205:17
206:3 208:18
209:11 210:7
210:17 211:1,9
211:18 212:6
212:15 214:3,5
217:7,13 218:5
218:10,15
219:1,10,16
220:6,10,17
222:6,14,18
224:6,23 225:3
225:23 226:7
227:4,12
239:19 241:21
241:24 260:7
260:17,21
261:3,12,15
269:19,23
270:4,8,10,12
270:22 271:17
272:2,4,10,17
272:24 273:15
273:23 274:1,7
274:19 275:6
275:13 276:3
277:16 280:8
280:19,20
281:17,21
282:3 295:3,9
295:18 297:6
300:17,22
301:7,11,16
321:9 322:3,3,9
322:17 323:19
323:24 324:19
324:23 325:2,3
325:19 326:3,5
326:16,21,23
326:24 327:3
327:12,16
328:5 334:5,12
335:3,19,20,24
336:5 337:6,11
337:16,23
338:6 339:14
340:22 341:3
341:13 342:8
342:17 343:9
344:6 345:3
346:23 347:6
347:11,23
348:4 349:5,11
349:18 350:24
351:1,21 357:8
357:18 369:4
370:2 381:24
382:11 383:2
383:10 393:20
393:24 394:8
395:7,13,21
396:17 397:9
397:11,23
398:11 400:5
403:24 404:15
405:1
housekeeping
136:10
housework
200:17
howard 4:3,24
5:23 38:2 42:18
46:13,16 54:8
54:14 76:23
303:16,18,22
304:4,14
306:12 307:1
308:19,21
309:9,17,24
310:17 311:17
314:8 315:23
316:5
howard's
304:18 305:7,8
306:2 310:10
310:24 311:5,8
311:23 313:20
313:24 314:11
huh 54:21
103:23 117:18

287:20 289:8
human 176:2 254:23 255:6
hundred 181:4
husband 250:4 250:11,17 251:21 256:18 272:14 277:24 278:12 329:21 394:14 401:12
hypothetical 79:1 213:12 366:3,8,23,24 367:13,14
hypothetically 213:23 214:14 281:9 296:18 296:23 302:21 364:17 365:8 365:21 372:2

i

idea 69:21 153:10 194:4 251:15 342:8
identification 11:16 14:1,15 16:5 35:10 36:15 44:12,20 45:18 46:2,10 46:18 47:2,10 47:18 48:2,10 48:18 49:2,10 50:5 51:22 54:3 54:16 55:8,21 56:8,18 57:7 59:1 64:12 69:5 118:9 200:7 311:19 319:23 331:2 344:17 355:6 361:5 388:6 389:20
identified 22:5 24:23 29:1 57:10 80:5 90:7 109:6,12 148:19 184:7 248:11 274:1 297:11 312:4 321:7,8,13 364:6 391:20
identifies 63:10 388:19
identify 64:22 68:23 144:23 184:15 218:21 220:23 242:7
identifying 78:5 363:18 382:8
iii 3:16,18 35:8 35:15 36:8,13 342:20
illness 140:18 144:7 151:14 151:23 153:19 158:22 164:8 166:12,22 167:24 169:8 190:4 191:19 270:6 274:8 325:12 359:2 398:2,3,4,5 399:1,5
illnesses 160:6 161:23 191:10 191:11 397:12 397:21
illustrate 404:24
illustration 25:17 79:4 81:11 179:9 185:6 213:13 227:2,8,14,17 265:17 271:6 281:10 376:21
illustrative 182:20 219:15 222:16
imagine 37:11 77:16 83:8 89:14 99:14 160:22 162:7,9 166:11 170:1 170:19 190:6 207:4 213:7 264:11 351:8 402:9
immediately 241:18
impact 167:9 259:13 329:19 330:4
impacted 84:7 160:24 282:23 349:4,10,17
impacting 351:20
impaired 334:4 358:8
imperative 408:13
implant 254:13
important 148:24
inability 81:23 82:3,15
inaccurate 216:3,4
incentive 374:21
incident 79:21 229:22 233:22
include 22:9 104:23 120:1,4 129:19 136:4 144:15 172:6 173:9,13 174:14 180:8 180:16 185:24 186:13,14 187:4,13 190:5 197:15,21 202:9,10,23 243:19 259:22 259:24 271:11

278:15 280:21 299:11 320:16 403:10
included 186:22 195:6 201:12 204:13 271:14 286:11
includes 37:24 183:17 369:13
including 85:15 193:17,24 196:4 200:17 278:22,23 360:5 361:17 400:21
inclusion 171:15 375:14 375:16
inclusive 37:12
income 137:10 137:11,12 155:5 228:13 235:4,8
inconsistent 62:10
increased 324:14,14
increases 264:1 374:23
increasing 262:21
increasingly 402:21
increment 330:3
incur 153:18 325:6
incurred 50:15 50:21 101:18 102:10 135:5 152:24 153:7,9 243:5 318:7,18
independent 79:10 218:9 260:16
index 7:1
indiana 91:3
indicate 64:16 201:14 292:14 334:10 361:19 387:13
indicated 11:6 23:10 27:22 28:2 40:2,7 41:7 70:4 85:5 85:9 86:20 96:20 116:16 291:14 309:2 354:4 385:14 387:10
indicates 323:22 388:23
indicating 21:7
individual 33:4 33:8 37:5 41:1 75:20 76:12,17 80:6 83:23 101:14,18 102:10,14,22 104:16 105:10 110:3,4 111:7 114:17 129:4 133:6 135:2,19 136:15,16 139:23 145:19 146:16 151:18 157:5 159:10 162:21 164:13 168:17 169:4 171:3,12 174:23 175:5 176:7,17 177:6 177:13,24 182:8 187:22 188:18 189:8 189:20 190:13 191:3 192:15 192:20 193:4 193:10,19 196:7,16 204:22 206:14 209:13 211:13 211:21 217:11 218:12,22 220:24 231:12 233:9 234:6 237:16 245:17 248:8 273:2 277:11 296:13 325:20
individual's 106:16 128:23 292:24
individually 73:24
individuals 42:24 43:3 51:10 59:19 68:13 74:3 105:13,15 107:7 136:12 136:19 137:14 138:19 143:17 144:2 145:17 151:20 153:1 159:4 180:7 198:15 201:6 205:13,20 208:13,23 212:11 217:14 226:22 238:7 238:16 295:7 323:23 325:17
industry 236:18 237:3
infirm 145:19
inflation 61:16 86:4 172:1 286:17
inflationary 25:7
informally 95:7
information 21:23 22:5

38:22 40:20 43:4,7,12 53:2 53:8 73:15 74:4 76:22 77:14,20 77:21,24 78:4 78:12,21 79:14 80:4,15,16 85:11 89:23 138:18 140:20 142:10 164:17 170:22 172:4 192:15 196:15 206:13 211:11 220:9 259:18 274:6 278:20 278:22 279:15 279:18 280:3 290:23 306:22 306:23 323:18 330:6 334:2 338:24 340:17 352:12 353:20 368:10 370:7 378:24 381:3 390:9 401:22
informed 306:1
inherent 120:12 198:24
inherently 196:3 201:16 237:4
initial 29:10,17 29:24 30:2 33:15 38:24 62:7 67:2 68:2
initially 33:18 72:4 92:6 121:7 241:12
injured 152:17 152:19 153:14 153:24 155:1 155:11 156:20 156:24 210:10 238:17 304:23
injuries 120:5,7 320:15
injury 5:20 6:2 75:15 98:4 99:10 108:8 141:4 148:14 153:20 158:8 178:23 180:21 187:3,9 197:17 197:17 199:8 199:10 200:3 200:21,21 201:3,8,9,15,16 230:6 231:5 233:2 235:20 243:15,23 244:10,16 270:23 273:1 305:1 319:21 320:17,19 405:7
input 177:4
inputs 25:6,21 25:22,23 78:2 86:8,9 87:12 88:7,12,19 89:13 174:1
inquiry 174:24 222:11 224:24 338:3 400:17
inside 208:11
installation 183:22
instance 51:9 80:17 82:14 104:23 108:18 110:4 187:2 188:20 209:20 229:23 236:6 236:14 369:18 401:10
instructed 10:12 104:12 179:15 351:8 405:3
instructions 408:1
insurance 92:24 94:7 113:10,12
intake 74:9,12 74:13,15 77:4
intended 309:10,24 315:23
intense 402:10
intention 52:12 96:16 138:21 139:6,7,24 140:8 142:12 142:13,13 314:12 376:13 376:14
intentionality 140:23 142:1
intentions 376:10
interest 62:3,8 241:1,6,8,9 242:9,17,20,21 310:11,18 316:8 392:9
interested 313:5
interesting 198:3
interior 173:12 206:1
interpret 103:22 223:13
interpretation 94:7 103:12 124:24 216:16 224:10 363:21
interpreting 104:12 124:6
interrogatories 77:22 209:4 378:10
interrupt 392:19

intervertebral 362:6
interview 193:17,23 250:16
intravenous 157:23
intricately 289:16
intrinsically 289:22
introduce 8:12 36:6 319:13
invest 240:19
investigate 80:2 250:8 364:4
investment 392:2
invoices 5:16 15:8 68:17,20 69:1,9,14 70:1
involving 34:11
iraq 320:21
issue 23:19 53:6 124:8,21 304:13 351:5,5 352:7
issues 34:5 61:2 61:3 156:2 298:10 349:16
items 22:16 30:13 341:24 368:10
iteration 17:22
iv 376:6

j

j.t. 2:22
janitor 195:22
january 14:5 57:13 118:14 169:17 220:18 257:8 261:4 287:19 288:5 322:10,17 337:12 341:4 347:12 354:19 354:23 356:20 357:3 382:1,8 389:10
jefferson 50:16 51:3
jenna 2:21
jersey 1:17,20 8:9 101:3
job 145:13 154:18 184:5 187:12 236:14 236:17 312:16 312:21 314:6 382:16
jobs 175:13,16 175:17 237:2 237:13
john 277:7
johnson 249:3 249:3,6,6
jones 2:2
joseph 2:13 8:17
joseph.b.turner 2:16
journal 97:16 97:23 373:19 374:15
journals 97:24
journey 144:6 399:17
judge 92:10 216:18 223:11 223:20 253:23
judgment 92:23 214:24
july 64:18 66:21 287:19 308:24 309:4 309:18 333:8 333:21 359:12 369:4
jump 323:13
june 249:24,24 330:17 348:9 360:12 362:13 393:15 394:2 394:11,15
jurisdictions 91:2
justice 2:12 9:15 34:15 100:7 103:9 398:19
justify 157:16

k

kansas 2:4
karen 248:13
kay 371:8
keep 18:23 62:6 67:16 84:16 197:10 198:8,9 198:16 208:12 209:18 377:1
keeping 165:21 192:21 210:19 211:2 366:15 366:16
keeps 208:5
keller 6:4,5 38:3 42:18 50:15,21 51:2 68:9 321:10,15 321:19,19 322:4,9,16 323:20 326:12 327:16 328:8 328:15,18,21 328:23 329:3,6 329:10,16 330:5,7,9,16,23 330:24 331:7,8 331:18 332:2,9 332:24 333:8 333:21 334:9 334:11 335:8
keller's 330:13 330:15 334:3

kept 89:15 315:19
kid 141:8 175:7
kidd 38:20
kidney 4:23 34:20 54:6,13 131:1 303:23 306:18 307:4 307:21 310:19 310:24 314:1 314:14,19 315:24 316:2 316:22 352:4 357:21 372:15 380:10 393:15 394:2,10
kids 210:9 325:18
kind 34:10 40:20 69:18 78:23 79:8 80:15,17 81:12 81:20 82:23 88:8 99:16 112:17 135:3 136:23 137:4 144:24 149:16 154:22 157:13 167:20,22 176:16 198:3 210:1 218:9,22 266:23 270:21 287:4 295:8 327:6 329:2 339:6 341:12 342:8 346:20 353:14 356:2 357:15 368:2 370:16 377:18 383:2 387:18 403:9
kinds 135:2 145:22 146:13 146:14 177:4 177:15 301:11
kinetic 232:10 232:15,22
kitchen 198:18 198:20 237:20
knee 362:3
knew 207:15 328:24 348:11 360:14 364:15
know 10:17 17:20,21 18:10 19:5,8 24:7 29:1,4 34:2,3 37:8,11 50:11 59:21 60:10 61:21 63:2,6 70:15 76:4,9,10 76:14,19,20 77:7 84:15 91:7 91:16 92:7 99:4 108:16 111:16 116:24 123:17 127:15 131:9 140:4 141:3 142:7 156:11 159:10 170:3 173:20 178:21 180:23 181:9 188:18 189:4 189:16,20 191:8,22 192:17,24 193:7,14 194:9 198:20,21 202:1 203:19 204:19 207:5,7 207:9,11,14 208:10,18 209:21,21 210:8,19 214:22 218:14 237:7 241:8,19 242:10 251:18 256:12 257:19 259:1 260:20 265:6 268:24 269:13 273:3,7 278:9,14 281:19,21 284:3 291:5,13 298:10,13 299:15,19 302:6 304:15 307:13 312:17 318:4 319:9,11 328:24 329:10 329:13,15 339:23,24 348:11,18 354:9 356:7,9 361:13 363:11 363:20 364:15 370:6 371:12 371:12,22 372:1,7 375:6 379:22 389:24
knowing 94:12 94:13 112:11 176:1,2 188:7 198:9,23 256:24
known 88:7 89:13 308:23

l

l 1:18 9:12 32:8 92:14 252:13 407:15
labeled 6:10 319:15 331:7 360:20 361:2
labels 232:3
labor 88:2 89:7 89:11 113:6 138:2,4,8,10,14 148:20 184:4 204:2,7 205:2 228:13 231:11 232:12 233:6 233:17 254:11 259:14,17 294:21 299:8 323:24 324:4

324:16 325:20 365:2,17 366:7 366:17 368:3,6 374:1,6,9
lack 198:24 208:9 328:10 404:9
lacks 206:7
lamacchia 2:23
lands 327:7
landscaping 192:22
lane 2:19 8:3
language 100:13 117:14 124:17 261:13 320:9,10
laramore 4:4 4:21 6:2 38:3 46:22,24 53:21 54:2 317:1,19 318:2,12,18,22 319:7,15,16,21 321:2
laramore's 317:17
larger 184:22
late 161:3 303:10
laundry 22:15 83:13 84:3 356:9,10
law 91:23 92:2 92:8,14 93:7 94:1,14,15 98:2 232:8
lawn 271:10 398:13
lawrence 9:11 9:11
laws 269:6
lawyers 34:4
layer 93:2
layperson 167:6 168:3
leadership 8:20 8:22
leading 122:17 398:3
leads 122:16
learn 33:22 40:21 41:5 366:2
learned 33:19 198:5 305:21 309:3
learning 40:22 77:19 94:14 361:17 370:21
leave 81:14 93:19 104:19 154:17 212:7 304:24 316:1 316:12 401:17
leaves 175:9
leaving 404:20 404:21
lecture 132:11 132:23
led 161:1,16 352:13 397:7 400:22 401:22
left 38:8 93:9 200:16 238:15 242:14,16 306:13,17 310:10,17 362:6 388:17
legal 101:6 111:20 232:7 235:7 238:4
leisure 154:16 154:19,24 155:4 156:18
lejeune 1:5 8:10 9:17 19:23 33:5,12,20,23 34:11,15 36:2 52:5 64:17 69:12 100:7 103:9 104:5 120:6,8 130:12 134:16 138:19 151:15 234:11
lens 194:19 253:18 377:13 378:3
leslie 2:23
letter 33:14 66:2 67:15,20
letterhead 74:16
letters 5:14 15:8 63:23 64:3 64:9,16
letting 389:24
leukemia 5:1 34:22 54:24 55:5 131:2 162:5,9 166:1,7 170:2,16 214:17 248:14 249:16 250:5 252:10 256:5 257:20 260:18 261:20 283:4 283:10 297:12 298:4
level 83:3 151:7 196:10 216:13 305:4 325:2 330:1 333:15 333:23 335:16
liability 348:21
license 100:24
licensed 403:21
lied 54:10
life 39:17 40:16 40:17,19 41:8 41:15,19,23 42:3,7 61:8,11 61:17 80:23 99:15 105:7,11 105:14,14,15

105:17,21
106:2,4,4,6,7
106:12,16,18
106:20,23
107:3,11,12
108:3,7,12,17
109:4,4,6,10,14
109:15 110:6,9
110:12,17,18
111:8 112:1,17
112:19 113:4
113:17 114:4
114:10,15,16
114:22 115:18
116:12 117:11
119:6 120:9,20
122:5,11,13
123:1,2,12,14
123:21,24
124:3,11,13,23
125:7,17,22
126:6,18,21
127:2,5,8,12,13
127:19,21,24
128:4,7,13,18
128:24 129:2,9
129:10 130:2
130:11,18,19
130:20 131:7
131:10,15,20
132:1,3 133:2,5
133:18,19,21
134:11,14,18
134:22 135:12
135:17,24
136:2,8,17,22
137:3,8,13,17
137:18,20,24
138:22 139:3,8
139:15 140:6,7
140:18 141:11
141:11,20
142:4,6 163:16
169:11,16
205:4 236:3,15
236:16,18,22
238:15 242:13
242:14,15
243:21 245:3,4
245:11,14
246:3,13,18,22
246:24 247:5
248:19 258:13
258:18 267:22
272:19 282:7
282:16 290:17
293:21 294:5
294:16,19
298:21 301:20
322:10 326:18
326:19 337:12
341:4 347:12
355:23 372:18
372:21 373:1
373:17 375:1
375:16 376:5,9
376:11 377:2,7
377:15 378:14
378:20 379:3
397:16 399:9
399:16
lifetime 368:12
light 23:23
likelihood
259:2,8,21
260:4 294:3
likely 60:3
142:4 207:4
226:20 238:10
238:11 245:22
403:6
likewise 89:3
139:8 225:20
limit 188:13
361:18
limitation
80:22 81:13
83:18 163:15
191:21 196:10
limitations 81:1
81:4,22 82:3,15
176:13,24
189:15,16
190:4,22
191:12,18
192:10 370:21
397:12,20,22
limited 83:24
171:10 233:4
241:22 350:4
350:12
line 7:5,8,14
88:20 89:2,5
98:22 169:11
312:13 345:1
355:13 358:3
391:4,16
398:10,10
409:4
lines 322:21
lingering 83:14
214:15,16
254:6
list 3:9 5:6,8,10
5:12 11:14,20
12:1 13:2,6
22:15 56:6,15
57:5 58:23
90:13,15 97:7
188:4 274:11
274:14,16
324:8 342:18
361:16,20
362:2
listed 35:19
36:21 37:14
38:7 63:13
174:16 177:13
251:10 362:12
363:2 364:6
367:1 400:19
listen 162:15
215:18 400:12
listening 159:3

lists 4:20,22 5:1 5:3 22:6 29:3 30:15 53:13,24 54:12 55:4,16 63:16 91:1,20 200:15 266:23
litigation 1:6 8:10 9:17 20:21 22:4 23:13 33:5 33:12,20,23 34:10,15 100:9 102:3 103:5 104:17
little 95:3 132:14 138:4 188:18 208:20 213:23 241:22 247:17 288:21 288:24 317:2 343:15 377:1 393:2
live 70:24 71:12 107:7 110:8 113:2,3 126:11 126:13 127:4 139:5
lived 275:2,10 328:22
lives 328:22
living 129:23 236:21 339:15
llc 2:2
loading 93:4 320:17
locale 148:22
logistical 43:17
long 31:9 32:18 93:6 137:22 138:20 139:9 198:17,19 207:3,7,10,18 208:7 247:8 251:15 313:9 364:4 374:4
longer 84:1 148:13 194:14 196:9 249:19 252:4 253:4 260:13 355:24
look 19:16 21:19 53:7 58:8 60:6 63:15 77:10,16 81:12 98:15 117:12 138:17 140:15 145:20,21 146:12 182:4 194:19 195:16 202:5 204:4,5 220:14 229:12 246:22 258:7 261:17 262:15 274:18 275:17 277:23 281:5 284:22,23 286:24 296:5 297:9 303:16 316:24 320:3 321:6 322:14 322:20 331:12 332:6 333:5 336:17 340:5,8 352:18 353:19 355:11 361:11 362:21 372:12 375:5 381:17 384:6 386:10 390:6
looked 134:9 175:12,21 183:11 198:4
looking 13:2 26:15 121:20 138:8 146:5 162:3 164:9 185:5,6,19,21 209:1 213:2 221:2 231:2 235:18 241:14 241:15,16 262:23 281:20 291:20,22 333:10 389:23 393:12
lose 325:7
loss 40:1 50:14 67:10 68:4 78:2 79:24 99:13 104:23 136:11 152:13 153:12 153:14 155:7 174:3 180:22 198:23 213:5 214:13 215:1,2 216:19,20 224:23 227:12 228:12 230:24 231:2 233:14 233:15 234:11 235:7,8 241:21 248:12 258:8 258:11 261:14 263:12 264:23 266:8,13 270:16,20 271:3,7,11 272:21,22,23 272:24 273:2,5 273:10,12,15 273:16 287:14 287:18 288:17 288:22 296:9 296:18,22,24 297:2 303:22 321:9 322:22 323:3,10 325:4 350:13,17 368:12 369:3 370:19 397:8 397:23 399:4 400:5 401:23
losses 81:15 147:20 300:17
lost 82:6,13 105:20 106:9 130:3,4,7,8

133:7 135:4 136:5,23 139:18 141:1 143:5 146:6 154:15,16,18 173:1,4,18,23 178:11,12 179:4,24 180:20 181:5 181:24 182:5,6 182:13,21 183:2 194:4 203:8 209:10 211:8,17 212:6 216:22 217:7 219:10,16 220:17 222:17 227:4,22 228:3 228:6,9,18 229:1,3,14,18 229:19 230:4 230:13 231:21 231:21 232:8 232:21 233:7 234:3,19,20 235:3,3,4 239:18 243:3 257:5 258:2,22 258:22 259:23 260:7 261:3,9 261:12 262:8 262:16 263:4 265:4,4,8,10 266:24 267:10 267:24 268:13 269:19,22,23 270:3 271:5,17 272:2,10,11,17 273:23 275:6 276:2 280:19 280:20 282:3 285:15 286:3,8 288:1 289:3,14 290:11 295:3 296:22 299:6 300:22 301:16 302:18 304:19 304:22 310:22 314:22 316:8 316:19 322:3,8 322:16 326:13 337:6,11,16 340:22 341:3 342:14 347:6 347:11 349:22 350:8 357:7 359:15,21 363:23 365:10 365:20 367:5 381:24 384:18 386:22 387:1 393:19 395:7 398:24

lot 43:17,19 77:24 92:23 94:6 140:14 166:13 208:9 238:15 270:22 391:19 402:4,5

loved 403:1

lower 172:21 375:10

lump 240:17

lunch 181:12 186:17 187:18

luxenberg 2:7

lymphoma 34:22 35:21 36:2 321:20

m

m 32:8 92:14

mac 1:15

macro 87:1,6 87:16 88:3,20 89:3,12,15,23

macros 21:14 86:12 87:18 88:6

madam 163:20

made 20:9 21:2 22:1,21 81:21 91:17 95:3 102:20 134:19 134:20 177:5 207:5,16 214:11 227:18 277:15 288:22 341:7 363:12 363:20 385:16 396:17,24 408:7

magazine 98:2

maid 174:12

main 2:3 95:1

maintain 26:4 129:19,21,22 134:3,23 173:15 194:13 334:21

maintained 107:15,16

maintaining 134:4 208:12 270:8

maintenance 173:8,11 174:11 183:20 183:22 193:5 193:11 200:18 243:2,7,12,16 244:12 272:15

majority 234:9

make 18:23 23:8 61:9 70:22 72:2 79:11 86:18 87:13 106:6 109:20 141:7 149:12 158:4 165:6 169:22 170:23 172:15 176:15 176:16 177:11 179:11 187:19 210:15 216:15 226:14 227:3

239:20 240:1,5 240:9,23 244:6 245:20 246:6 253:1 269:5 271:15 286:18 288:23 292:19 294:24 295:7 301:5,10 337:22 341:12 346:20 353:14 356:7,7 357:15 379:4 385:15 400:1 408:4
makes 85:22 86:16,22 114:5
making 30:6 71:8 140:10 240:6
male 218:4 225:18 325:21 351:11
males 179:18 179:18
malone 2:22
management 95:9 264:12
manner 86:3
march 1:11 8:5 58:16 93:9 207:2,8 257:22 261:20 407:7
margin 149:10 268:5,13
marginal 180:22 198:23 228:12 263:12 264:23 266:7 266:13 270:16 270:19 271:3,6 271:11 296:5,9 350:17 370:19
marital 218:1 276:16
marjorie 102:2
mark 11:11 13:18 14:8 15:23 38:12 44:5,14,22 45:20 46:4,12 46:20 47:4,12 47:20 48:4,12 48:20 49:4,23 51:17 53:22 54:8 55:2,14 56:3,12 57:1 58:19 64:5 66:3 117:22 311:14
marked 3:7 7:13 11:15 13:23 14:13 16:4 35:9 36:14 44:11,19 45:17 46:1,9,17 47:1 47:9,17 48:1,9 48:17 49:1,9 50:4 51:21 54:2 54:14 55:7,19 56:7,16 57:6 58:24 64:11 69:3 118:7,12 199:19 200:6 311:18,22 319:22 331:1,6 344:11,16 354:17 355:5 359:8 360:18 361:4 372:13 388:5 389:19
market 174:10 228:14 232:12 233:6 237:14 254:11 259:14 259:17 323:24 324:16 365:2 365:17 366:7 366:17
marketplace 34:3 150:1 174:5
marking 387:22 389:8
markup 149:11
marriage 141:8 276:13
married 276:21 277:1,7,11,12 277:13,14 296:12
marrow 254:13
marshal 312:24
marshal's 313:4 314:6
marshals 304:4 307:5 315:15
mary 6:3 330:22 331:13 332:8 333:7
maryland 92:10 101:3 275:3,11
master's 95:15 95:20 96:5,10
match 299:18
matches 376:14
material 67:8 120:1 183:23
materials 4:20 4:22 5:1,3,6,8 5:10,12 20:19 20:21 22:6 26:16 29:3 30:13,15,19 39:23 42:12 53:13,24 54:12 55:4,16 56:6,15 57:5 58:23 62:15 66:22,23 67:2 68:3 71:18 72:11 78:16 343:24 400:20
matter 8:9 61:15 407:7
matters 22:4 65:6

max 308:5
mba 1:15 93:10 93:17 94:18,20 95:20 96:4,16
mccandless 92:14
mcelhiney 4:6 5:4 6:11 38:3 47:6,8 55:12,18 359:9,11 360:1 360:6,12,21 361:3 362:2,12 363:24 364:4 364:13,20 366:10 367:10 369:3,13 370:3 370:12 371:4 371:18
mcelhiney's 369:7,22
mcl 53:20 54:6 54:24 55:11,24 56:11,22 57:10 58:16 116:16
mcls 53:17 62:13 63:4
meal 157:21 175:8 206:2 207:16,17 208:2
meals 129:20 134:4 170:14 356:7
mean 17:19 77:15 79:12 93:18,19,22 94:4 106:22 107:6 109:5,17 109:17 111:5 112:4 127:17 129:13 131:21 132:14 135:6 144:12 165:15 173:4 203:14 207:1 216:17 216:19 222:24 232:10,17 237:18,21,24 243:15 252:9 256:8 264:22 265:20 270:19 294:15 298:23 302:10 312:17 319:9,11 345:11 379:13 392:19
meaning 25:3 83:24 97:14 106:22 175:15 198:12 368:1
means 79:3 97:22 107:6 112:23 131:24 228:10 258:6 407:23
meant 121:15 130:16 209:17 237:23 304:22
measure 172:8 223:18 224:21 230:24 232:22 233:14,18 269:16 289:14 289:22 290:6 303:5,8
measured 162:17 234:11
measurements 22:10
measuring 84:9 113:14 377:15
median 109:16 109:18 111:5 132:5,6,12
medical 6:3 10:22 39:19,19 40:7,10,18 41:1 41:4 50:20 59:19 67:11 77:23 80:22 101:17 102:9 102:16,19 114:22 126:12 126:15,22 127:10,14 128:14,15 143:5,9,10,13 143:19,21,23 144:17,17 145:8,21,22 146:6,15,19,23 147:6,10 150:16 151:8 152:3 160:12 161:2,17,17 162:2,7,8 163:2 163:3 167:2,18 167:18 168:3,8 169:16 170:12 170:13 171:9 172:7 202:17 202:21 239:18 241:20 242:1 245:2,7,21 246:8 252:1,2 252:19 257:7 278:11,16 279:21 282:12 282:20,23 298:16,17,17 301:23 302:11 307:12 317:22 320:6,16 321:14 326:21 330:8,22 331:7 333:6 334:3,18 335:7 336:6 348:13,17 349:9,23 351:5 351:19 361:15 367:1 371:4 372:5 397:15 398:2 399:17 401:7,8 403:17 403:19,20,22

medically 126:23 319:7 319:10 320:14
medication 157:23
medications 214:16
meet 31:3,7 253:18
meetings 31:14
meets 238:21 253:17
member 303:9 400:13
members 32:1 70:5 83:19 170:8 173:10 401:1 402:1
memorized 251:1 284:1
memory 197:2 256:24
memos 19:20
men 342:18 369:21
mend 351:14
mental 361:16
mentally 94:8
mention 363:4 367:16
mentioned 109:3 130:19 134:2 135:23 167:20 182:19 195:15 205:12 250:15 362:15 376:23
mercer 379:10 381:11
merely 167:8
messy 356:8
method 115:15
methodology 108:13 115:12 116:6,11 120:3 120:23 125:8 163:9 164:2 186:11 261:8
methods 115:4
metric 199:1 223:22 405:12
michael 2:13 8:15 9:14 40:16 41:19 59:5 80:23 92:11 282:16
michael.w.cr... 2:15
michigan 2:9
mid 139:10
middle 271:2 342:2 361:14
mike 345:6
military 120:11
mind 83:17 97:8 119:10 153:17 161:4 194:9,11 213:17 250:23 251:2,7 255:17 256:7 260:14 291:4 342:14 389:23
mindful 142:13
minimum 175:16
minor 175:5 231:9
minus 289:5 398:21
minute 135:23 181:11 205:23 247:12
minutes 175:7 175:10 205:12 207:14,15 208:2,17,19 383:18
missed 272:12
missing 404:10
missouri 2:4
misspoke 285:12
mister 375:20 375:21
mitigated 368:4
mobility 157:22
model 78:2 110:21 112:3 116:1,7 136:12 186:4 238:20 238:21
models 40:1 43:9 111:18 112:6 113:20 114:21 139:2 142:14 378:5
modification 215:6
modifying 53:4
moment 90:4 124:2 317:16 336:18 359:6 386:11
momentarily 153:10
money 232:19 243:17
monies 275:13
montgomery 92:10
month 244:1 267:5,18 293:23
monthly 122:8 266:18,21
months 61:20 92:9 140:2,3 284:14,21 285:9 286:21 287:11,21 288:5,6,9,18 315:5
mopping 214:2
morning 9:9

mother 210:10
motor 379:10 381:11
mousser 4:7,23 38:3 42:18 47:13,16 54:7 54:14 372:13 372:14,20 373:2 374:5,8 379:1,9,16 380:6,24 381:5 381:16
mousser's 373:21 375:17 375:22 378:14 378:19 380:9 380:19 381:9
move 228:2 237:14 283:2 381:15
moved 90:18 237:3 276:9
movements 402:23
moves 327:5
moving 183:24 190:23 368:1
mow 271:10
mowing 398:13
mr.'s 375:19
multiple 88:9 157:8 168:5 237:7
multiplied 122:9 171:21 174:3 213:19 221:19 265:7 265:15,19 402:17
multiplier 179:16 264:1,6 268:9 269:7
multiply 159:8 172:20 208:3 208:19 221:21 227:24 296:21 297:1 350:14 399:2
municipal 241:13 391:23
mute 18:19
mva 93:4

n

n 3:1 9:12 92:14 407:1
name 8:2 9:10 9:13 28:14,15
named 34:14 34:18 36:19 70:11,15
names 37:14 179:12
naming 71:7
narrative 24:14 24:18 25:23 186:15 224:12
narratively 186:18
national 107:12
nature 18:1 21:14 24:1 32:16 85:20,22 176:2 208:4 211:2 388:14
navarro 42:4,8 246:23
nay 259:19
necessarily 138:5 140:19 166:8 176:10 177:2 209:23 211:20 335:14
necessary 268:14 398:9 408:4
necessitate 59:17 191:12
necessitated 278:21,23
neck 320:17
need 53:7 67:9 73:4 84:15 95:24 140:20 142:10 144:22 147:3,13 151:6 151:7,24 154:4 154:7 159:24 161:11 165:15 166:13,15,19 167:7,14,21,22 176:9,11 177:7 177:15 187:23 188:20 189:8,9 189:21,22 190:14 191:3,4 194:6,6,23 226:2 245:16 253:6,21 259:17 286:18 297:6 302:10 302:15 317:3 326:17 334:11 335:19 372:4 372:10 401:24 402:2
needed 144:7 150:22 151:10 151:13 153:3 153:18 158:18 158:23 159:11 162:16 163:11 164:19 165:8 166:23 168:17 169:20 170:2 171:4 172:13 172:18 174:21 176:6 187:23 192:16,21 193:4 204:22 245:23 255:6 255:14,23 256:18 270:5 312:18 323:19 324:19 339:13

needing 145:10 153:10 170:11
needs 147:9 166:8 195:4 196:8 356:5,6 371:24 402:6 402:21
nerve 362:3,5,6
net 25:2 86:2 88:3 89:18
neuropathy 348:14,20,21 349:3 350:4
never 75:19 141:2,18 260:14 313:14 342:14 344:21 345:11
new 1:17,20 8:8 43:4 53:6 90:17 101:3 231:12 244:20 247:19 278:22 279:14 279:15,17 280:2 340:16
news 166:17 167:10
nhl 34:21 131:2 303:24 330:17 336:20 347:3 347:24 348:9 349:5 350:6,9 350:12
nice 77:23 208:8
night 31:8 94:17,23 95:11 207:4
nikes 244:20
nine 45:8,10,12 237:10 345:8
nineteen 99:5
nomenclature 74:24
non 34:21 35:21 36:2 90:17 157:23 180:15 321:20
noneconomic 104:15
nope 66:4
normal 116:11 373:21 374:22 374:23
normally 84:2 108:6
north 1:1 21:18 95:1 274:22 275:11,15
notary 1:19 410:20
notation 389:2
note 148:24 278:4 283:7 284:13 285:1 287:18 308:21 392:6 403:9
noted 22:17 103:21 107:24 127:8 128:12 286:7 335:17 360:1 378:18 382:4 408:11 410:8
notes 19:19 331:17 407:6
notice 3:10,11 3:14 13:14,22 14:12 16:2,10 16:22
noticed 247:17
notification 6:12 388:2
notifications 26:21
notion 316:20
november 169:14 337:7 339:3 347:7 395:2,7
npv 86:1 87:14
number 3:7 19:16 20:8,11 20:13,17 21:5 21:19 22:24 23:3,4 25:8 37:16 45:12,12 60:7 66:3,5 67:16,17 68:16 74:10 105:8 118:23 128:21 136:14 149:22 149:23 150:22 151:5 159:2 177:23 198:13 198:14 199:22 200:11,15 202:14 204:21 211:16 212:5 212:14 213:19 215:7 221:18 222:6,14,19 225:21 226:4 231:15 238:13 266:12 277:9 280:22 286:15 320:4 329:19 332:7 333:6 351:4 361:12 376:5 399:3 405:6
numbered 68:21 118:22
numbers 69:24 170:6 172:20 206:18,22 210:5 216:6 223:15 224:16 240:7 317:24
numeral 171:18 277:9
nurse 148:1,5
nw 2:14

o

o 407:1
oath 11:3 12:22 54:19,22 93:24
object 10:11 17:13 39:4 57:24 66:16 72:22 159:13 395:16 398:15 403:2
objection 26:4 41:11 82:8,18 111:10 112:20 115:5 120:24 123:4,16 124:4 124:15 125:10 125:24 133:9 133:23 146:1 152:14,20 153:16 156:4 162:24 164:1 165:17 168:21 171:13 187:24 188:3 191:6 192:23 194:7 195:8 196:20 212:16 215:15 219:4 228:20 230:18 233:12 234:8,21 237:17 239:14 253:9 256:2,20 258:4 259:4 263:6 273:6,13 277:19 279:1 279:23 291:17 292:5,17 293:4 294:6 302:12 305:2,11 306:3 307:7,23 308:15 309:12 309:19 310:3 315:2 316:3 334:13 335:4 335:21 336:1 338:9 345:24 346:17 351:23 356:18 357:10 363:10 364:23 365:12,24 367:7 368:18 370:5,15 377:8 380:12 383:6 383:14 394:4
objections 3:13 15:22 16:1,9,15 17:5 20:6 21:1 21:20 23:3
objects 20:16
observations 21:23
observe 296:2
obtain 196:15 274:5
obtained 137:6
obtaining 283:22
obviously 10:10 26:6 40:13 41:4 147:2 163:3 208:14 231:9 244:21 389:11 396:7
occupation 79:21 188:15 231:12 232:20 236:6 268:23 342:5
occupational 145:16 174:22 183:13 186:23
occupations 174:7,15,24 175:20,23 177:6,12,18 183:8,12 184:2 184:6,10,14,16 184:20,22 185:10,23,24 186:7,12,21,24 187:4,10,20,21 188:10 195:6 195:13 196:5,6 196:12 202:7 219:22 238:13 274:21 280:23 281:2,13 301:3 337:18 347:18 369:9 382:20
occur 240:2 244:23 258:10
occurred 225:11 248:14 357:9
occurs 61:21
october 12:2,7 36:9,19 39:1,11 42:14 44:7,16 44:24 45:21 46:5,13,21 47:5 47:13,21 48:5 48:13,21 49:5 90:9,18,23 254:13,16 278:24 313:13 314:2 322:1 340:23 352:14 379:10
offer 52:9,20 127:2 149:16 203:6 211:17 211:20 224:21 226:5 239:1 279:19 299:16 301:22
offered 71:10 72:20 195:5 196:6 204:12 239:17 282:9 282:21 372:24
offering 19:13 32:24 35:24 37:17,21 38:11 38:14,18 40:5 58:13 59:14

68:12 71:20,24
72:17 73:18
76:13 82:5
99:20 101:6,12
101:17 102:8
102:13,18,24
103:7,16,24
104:15 105:8
108:11 110:2
110:12 126:5
127:1 128:21
136:14 143:4
147:18 150:4
157:17 171:2
172:24 176:18
197:23 230:13
233:8 245:5
279:13,20
282:2,11
290:10 297:4
298:15 350:22
351:18 373:7
404:16
office 21:13
75:14 86:8
89:15 90:21
183:21 264:11
313:4 314:7
officer 315:9
387:7
official 161:21
offset 36:8
103:3,17 104:2
offsets 103:8,20
104:5 119:21
122:5
oftentimes
94:20 206:14
oh 27:4,5 94:4
165:3 187:6,8
264:13 285:12
329:13 330:19
331:16 332:20
372:19
ohio 305:17
307:3,20
308:14,22
311:10 314:12
315:1,7 316:13
316:21
okay 9:20 10:2
11:6,24 12:13
12:21 13:1,8,13
13:17 15:21
16:20 17:3,8
19:11,15 22:12
23:6 24:4,9
27:20 28:7,22
29:20 30:8
31:12 32:15,22
33:3,17 34:13
36:5 37:4,8,15
38:10,22 40:2
40:24 41:17,22
42:2,14 43:24
44:5 49:18 50:9
51:13 52:17
53:11 60:9,15
61:1 62:24
63:18 64:2 65:9
65:12,20,23
66:1 67:4,13,21
68:15 70:4
71:17 74:1,7
75:11,19,23
76:4,10,20 77:3
78:3 79:7 80:14
85:2 90:3,12,19
91:4 93:10,16
95:5,14 96:19
97:2 98:11,18
100:4,4,12,17
101:12 102:7
103:13 104:14
105:4 106:17
109:2 111:6
114:14 117:7
126:24 128:5
129:12 130:16
132:19 133:16
136:13,13
137:2,20
138:17 141:15
143:2 144:11
144:23 146:12
147:17 148:8
150:9 155:22
156:15 158:4
158:17 163:8
164:12,15
168:14 171:8
172:3,11
173:22 178:9
178:16 179:2
180:5,13,16
182:18 183:6
183:17 184:14
185:19 186:20
187:16 189:19
190:11 192:5
192:19 194:17
196:13 202:3
203:19 204:8
204:19 207:19
209:12,12
210:21 211:16
214:3 216:19
218:8 219:14
220:14,21
221:6 222:1,12
228:2,15
230:10 231:17
233:7,20 234:2
234:19 235:2
237:12 239:23
240:10,22
242:5,24
243:11 245:1
246:12 247:3,8
248:7,17,23
249:9,18
250:19 252:21
254:9 255:5,13
255:21 257:4
257:24 259:20

260:6,20
261:16 263:2
264:9 266:22
267:9,23 268:6
268:16 269:8
269:18 273:17
274:13 276:9
276:13 277:3
277:15 278:15
279:10 281:19
282:18 283:2
283:18,21
284:13,17,22
285:14,18,24
287:8,15
288:15 289:1
289:20 290:7
290:14,20
292:2 294:1,23
295:23 297:9
298:23 300:6
301:22 302:9
302:24 304:11
304:17 305:6
306:21 307:15
309:7 310:21
312:12 314:10
315:13 318:9
318:15,21
321:18 322:2
322:14 323:14
323:17 327:23
329:1,14
330:14 332:21
334:8 335:13
336:16,16
338:4,19
340:21 341:19
342:1 344:4,23
345:2,8 346:14
348:12,18
349:1 350:21
351:17 352:2
352:17 354:22
355:9,14
356:22 357:4
357:15 358:4
359:5,20
360:11,16
362:24 363:6
364:10,17
367:21 369:2
371:3,10,14,17
371:22 372:2
373:9 375:13
378:13 379:8
380:17 381:3,8
381:14 382:14
382:18 384:17
384:24 385:13
385:18,24
386:15,16
387:22 388:13
389:3 390:8
391:17 392:18
392:22 394:22
396:1 403:15
403:23 404:8
old 238:17,17
275:24 321:24
375:24 377:4
378:1
older 238:8
393:2
olds 127:20,20
omissions
120:1
omnibus 4:17
5:7 49:19 50:3
50:9 56:1,7
76:16 77:8
321:6,8 336:17
342:19 359:6
once 188:11
209:6 315:4
323:23 345:11
345:22
oncologist
332:3 333:1,22
334:10
one's 129:19,21
134:3 173:8
ones 10:17 30:3
77:8 128:6
328:11 341:11
392:21 401:6
403:1
oneself 135:9
135:12
ongoing 159:22
operational
149:9
opine 115:3
126:17 150:21
245:15 338:19
352:19 379:9
opined 250:3
277:24 378:13
384:17 394:13
404:18,19
opining 101:22
105:6 151:4,5,6
269:18 318:11
opinion 19:13
37:17,21 60:10
82:5 103:8,16
104:1 108:11
114:10 117:8
126:20 127:1,3
147:19 149:16
171:2,14
215:12 217:24
224:22 240:23
245:5 246:4
258:3 267:9
279:21 282:3
282:11 290:11
297:5 298:3,16
301:23 307:19
308:12 350:23
351:18 374:8
385:10 398:8
401:22 404:16
opinions 19:3
22:3 24:6 32:23
32:23 34:19

35:24 38:11,15 38:19 40:11 41:2 51:1,4 52:19,23 53:4 57:20 58:12 59:13 60:16,17 61:5 62:17 63:19 66:13 68:12 71:10,19 72:19 76:13 78:9 99:20 100:14 101:6 101:13,17 102:8,14,19 103:1 104:15 105:9 107:11 108:3,8 110:2 110:12 111:9 114:11 117:3 119:12 123:2,7 126:5,8,19 127:11 128:7 128:17,22 131:8 133:20 136:6,14 143:4 150:4,15 152:3 158:17 171:8 172:24 176:18 197:24 201:3 211:18 221:9 223:20 228:3 230:13,16 233:8 239:1,12 239:16,17 244:12 245:9 246:13 251:20 262:7 279:14 279:19 283:15 290:15 295:24 310:22 312:5 316:18 317:17 318:17 343:8 373:7 379:5 399:19,24 400:8 405:11

opm 264:11

opm's 265:21

opportunity 84:11 87:18 154:22 156:14 256:12

opposed 374:10

opposing 24:16 26:14

opposite 115:8 116:1 402:21

opted 284:10

option 308:23 310:1 404:18

options 318:11

oral 1:14

order 195:21 243:3 405:21 405:23

orderly 173:16

original 278:17 408:14

originally 16:16 35:1 37:5 64:16 70:11 340:12

outcome 142:14 402:7

outcomes 240:7

outdoor 174:10

outlays 244:22

outlined 318:6

outlook 128:2

output 24:18 25:24

outside 58:3 175:9 208:11 224:13 309:20 352:11

overall 172:15

overcompens... 139:17

overcompens... 139:20

overhead 149:9

overlap 71:1

overlaying 145:11

overly 20:17

overpayment 244:7

overstate 140:19

overview 99:8 155:20

own 74:3 126:20 129:12 173:3 245:21 246:7 252:8 261:13 313:20 313:24 356:15 358:20 359:3

p

p.m. 181:15,20 248:5 317:8,13 383:22 384:3 405:19 406:2

page 3:2 7:5,8 7:14 19:17 20:3 21:21,22 51:14 91:1 97:9 118:22 119:2 119:10 121:6 121:13,19 200:11 202:5 220:5,16 227:9 229:12,16 257:14 266:23 274:18 277:23 284:23 286:1 287:16 294:24 296:5,11 310:7 312:8,10,13 320:3 322:15 331:12,15,16 332:17 342:19 343:10,14 344:24,24 345:1 346:12

352:18 355:10 355:11,12 357:24 358:2,4 358:12 359:18 361:11,15 369:12 372:20 379:22 390:6 391:5,12 409:4
pages 291:19 312:10 316:12 334:20 336:3,7 363:14 364:1 389:5,11,13 390:5,23 410:3
paid 102:15 103:1,2 137:5,6 329:3
pain 80:22 81:4 81:10 83:10,24 104:24 332:11
painful 83:7
palsy 348:22
paragraph 119:15 121:21 124:6,20 125:1 285:1 310:9
paragraphs 25:12 118:23
paralysis 362:2 362:4,5
paraphrasing 22:8
parkinson's 5:4 34:22 55:12,17 131:2 140:13 359:11 360:7 362:17 363:1,5 363:8,19 364:19,21 365:4,23 366:6 366:11,12,18 367:2,16,18 368:7,17,22,23 369:18 370:4,8 370:22 371:19 381:19 383:4 384:8,13 386:17 390:14 395:1,14,22 397:16 402:20 403:5
part 41:2 56:13 86:22 89:20 105:10 108:12 128:23 130:2 132:22 135:9 136:16 140:24 182:24 221:7 240:22 246:4 251:20 259:9 262:7 265:18 284:5 290:14 307:18 311:12 356:10,10 385:13
partially 216:13
participation 138:2,4
particular 57:22 77:4 78:22 80:6 87:14 94:22 98:8 99:1 108:3 109:24 126:11 130:21 154:24 176:7 199:21 201:2,2,22 202:23 211:14 227:21 235:15 246:18 247:4 291:6 295:8 317:24 320:11 324:11 327:15 328:4 341:8 342:6 363:17 364:5 390:10 390:12
parties 23:12 83:20 156:24 160:20
partly 349:19
partner 152:5 152:12 153:13 155:2,23 156:1 156:20 158:6 158:13 162:13
parts 100:11
party 23:16 83:22 304:23
pass 110:16
passage 61:14 61:23 62:2 90:16
passed 97:4 221:16 244:13 261:23 271:12 271:18 272:3 337:2 338:12
passes 275:11
passing 230:8 230:10 244:22 265:9 266:15 266:15 269:24 272:12,18 274:9 338:22
past 50:14,20 61:20 66:13 68:1 101:17 102:9,19 143:5 143:8,10,13,19 146:3,6,17 150:15 151:7,8 152:3 158:23 160:12 164:17 168:8 169:15 171:9,23 172:7 172:19 178:11 178:20 179:4 179:24,24 180:3,7,14,22 182:5,6,17 189:24 202:17 202:21 203:8

204:22 226:7,9 226:10 227:4 227:12,19 229:17 230:24 233:11,14 234:13 235:18 254:23 260:10 269:23 271:24 272:2,2 276:2 278:11,16 279:21 300:17 300:22 301:23 302:11 312:15 321:8,13 322:3 337:6 340:22 347:6 397:24 400:11
patience 49:13
patient 126:10
patients 403:14
pattern 114:19 325:15
patterns 113:8
pay 244:19,20 324:8
paying 244:1,2 244:3
payment 83:22 242:21,22 244:1
payments 102:20
payout 284:11 284:14 285:5 289:13,14
pca 145:14
pcas 403:13,18
pdf 355:11 358:2
pe 342:2,10
peer 97:12,14 97:18,22 114:1 205:1 224:18
pejoratively 207:1
pennsylvania 2:14 101:4
pension 137:15 142:8 263:12 265:6 266:8,17 268:2,11,17,19 268:22 269:5 308:3 310:12
pensions 120:11
people 32:6 109:11 127:18 131:24 134:23 139:4,6 189:3 197:6 198:8 206:2 208:12 208:15 210:19 211:1 217:21 217:23 269:5 292:11 368:1
people's 197:1
percent 92:21 107:1,9 181:4 216:19,20 227:21 241:17 242:4,6,8 263:23 264:4,6 264:8 265:7,14 267:6,8 269:10 269:17 283:9 299:15,19 300:5 391:24 392:8
percentage 294:11 392:13 400:4
perfectly 91:15 376:12
perform 66:2 81:23 82:4,16 148:13 155:17 155:19 157:8 158:7 193:11 193:20 196:9 196:18,19 218:8,16 250:21 260:15 260:22 277:17 277:20 281:22 295:18 301:8 301:12 325:1 325:10 327:13 327:16,19 328:6 335:2,3 335:23 338:7 339:14 341:14 341:21 342:9 348:5 349:4,11 349:17 351:21 370:13 383:1 383:11 385:24 386:8 394:1,9 395:14,22 397:2
performance 233:5 234:17 290:6
performed 199:8,9 201:18 206:23 211:21 212:14 218:10 218:23 251:11 260:17 261:1 274:2 295:9 370:3 383:3 397:11 398:12 399:8,15
performing 157:4 177:24 193:5 315:19 329:4 337:24 341:9 347:23
period 84:8 86:7 87:4,5 106:3,21,22,24 113:17 115:21 126:13 130:6 134:21 137:13 137:17 138:1 141:21 144:3 158:23 161:3

213:11,15,18 214:13 234:13 234:14 236:18 258:13,19 267:5 276:8 287:24 288:4 293:21 294:13 296:2 303:6,7 308:4 326:18 326:19 342:7
periods 25:9 160:8 167:16 190:23 191:21 191:21 255:19
permanent 178:22
permanently 368:8
permits 355:18
permitted 103:9,11,15,20
person 34:3 80:18 81:22 88:1 110:14,21 113:2,3 126:13 128:12 131:1 138:6 141:13 147:9 148:12 151:5 162:1 166:8,23 172:13 189:1 209:19 212:14 214:7 225:7 226:15 232:17 236:7,21 237:2 294:12 302:19 320:10 350:1 351:10,11
person's 106:9 130:10 228:16 228:18 234:3 236:14 242:13 284:4
personal 71:2 98:3 99:9 108:8 141:3 145:2,22 146:15 147:21 148:2,11 150:6 150:18,23 152:11 155:15 157:2,3,15,20 158:19 159:11 161:11 163:11 165:8,9,16 166:9,24 169:5 171:4,11 172:14 183:20 187:3,9 188:8 189:11 201:3 202:10,12,16 216:24 231:5 233:2 243:1,7 243:12,15,16 243:23 244:10 244:12,16,16 253:6 254:23 255:7,22 256:17 280:13 280:16 281:7 302:11 303:2 329:5,8,11,16 329:18,20 330:8 335:19
personally 198:9 250:14 250:16
personnel 6:12 264:12 388:2
perspective 163:2
pertains 275:7
perused 30:22
pet 208:22
peter 5:18 57:12 116:18 116:24 118:6 118:13
peterson 4:9 5:5 38:4 47:22 47:24 55:13,18 381:17,19,24 382:15 383:3 383:11
peterson's 382:9,19
pets 200:17 208:12,14,15 208:22
pfizer 286:7 289:4
phase 3:16,18 35:8,15 36:8,13
phd 95:15,24 96:1
philadelphia 92:12
phone 18:10
physical 81:1,2 81:3,4 173:10 191:11 232:14 313:7,14 314:5 355:19,23 361:16 368:20 368:22 398:2
physically 160:24
physician 32:11 40:13
physicians 33:9 380:20,23 381:1
picking 83:20 83:21 214:1
piece 17:24
pieces 84:5
pincus 92:11
pinpointing 291:11
pivotal 228:17
place 236:21 396:4
placed 247:4
places 354:4
plaintiff 40:21 40:22 44:2 49:15 65:6 74:9

75:6,17 76:15
77:19 78:1,8
80:7,18 81:7
101:19 102:10
102:15,22
103:4 104:16
110:5 112:8
114:8 136:3
138:21 139:18
139:21,22
146:16 147:1
150:19,22
152:6,13,16,17
152:19,22
153:15,21
155:11 156:17
158:6,12,15,18
159:10 164:13
164:18 169:9,9
171:3 172:4,18
173:24 174:20
176:7,8,9,11
177:6 178:15
179:5 182:12
188:6,19 189:8
189:21 190:13
191:3 192:15
192:21 193:4
193:10 194:5
195:4 196:7
199:22 203:10
204:22 205:10
206:23 217:6
218:11,13,15
218:23 224:3
225:1 227:21
230:3,6 231:9
234:6 235:22
237:16 242:22
243:5,23
244:10,13
245:5,16,23
273:11 275:1
281:16 320:13
320:20 351:6
400:14

plaintiff's 3:13
15:22 16:1,9
17:7 19:18
31:20 33:9 41:1
53:17 58:5
70:17 74:17
75:18 105:11
122:11 126:21
128:15 133:2
133:17 136:17
140:23 147:5
148:21 152:5
152:12 153:13
155:16,19,23
158:8,13 177:8
188:13 217:23
217:24 229:21
230:12,15
231:8 236:2
245:6 351:20
354:5

plaintiffs 2:5
2:11 3:15,17
4:21,23 5:1,4
8:20,22 20:8
21:20 28:6
30:22,23 31:4
32:19 33:5 34:8
34:14,20 35:7
35:14 36:1,7,12
37:2,5,9,18,24
39:16,22,24
40:4,18 41:5
43:10,19 51:5,7
53:5,21 54:1,7
54:13 55:1,5,12
55:18 59:6,17
64:4 74:11,13
74:16 75:8,21
76:12,16,17
77:15 79:9,17
79:23 101:14
105:9,18 110:3
111:7 114:17
122:6,19 124:1
126:4 127:1,9
127:18,24
128:22 133:6
134:10,15
135:3 136:8,15
143:16,18
145:23 146:21
147:16,18
150:4,10
151:18,22
156:11 159:17
159:19 160:5
161:7,10,16
162:21 163:11
164:5 165:7
168:10,17
169:5 171:12
176:14,17
177:14 187:22
188:24 193:18
193:19,24
196:16 197:15
201:23 211:17
217:12 225:22
226:7 228:5
229:3 233:9,17
234:10 237:8
241:23 243:15
244:17 245:11
246:3 257:1
270:14,23
337:17 341:17
342:17 347:17
350:22 373:6
375:3,12
396:18 397:9
397:19 399:10
400:21 402:8
402:20 404:23

plan 40:17 42:7
52:9,19 60:15
61:4,8,12 80:24
105:16 127:24
136:2,9 137:15

137:16 140:24 242:14 245:4 263:22,22 282:7,16 298:21 299:17 301:20 308:23 310:1 316:1 372:11
planned 313:21 314:13 375:23
planner 40:16 246:24
planners 245:11 246:3 246:13
planning 52:22 104:9 149:15 293:22
plans 39:17 40:19 41:15,19 41:23 42:3 61:18 105:14 110:17 135:13 135:24 169:12 169:17 245:3 245:14 246:19 246:23 247:5 299:24 319:2 391:2,14
play 166:22,24 259:9
played 368:9
plays 228:17 253:5 372:10
please 8:12 9:10 10:17 133:12 261:18 306:6 346:2,5 361:12,19 408:3,8
plg 5:14,16,21 20:16 64:4,10 68:22 69:2 200:5 319:15
plus 25:16 26:2 26:3 287:12 300:2
point 62:1 80:1 96:1,18 105:23 106:3,6 107:2 109:20,24 110:19 111:4,5 119:16 121:8 132:16,21 134:17,24 137:9,19 145:4 151:11 160:19 161:4 164:21 169:13 172:6 291:5 355:22 374:12
points 78:17 132:8
police 305:17 306:13,17 307:3,20 308:14,22 311:10 314:12 315:1,8,9 316:13,21
policies 113:12
political 240:6
poor 10:17 169:2 209:16 215:14
populate 86:6 89:23
populating 88:9
population 106:21 107:5,8 109:7,13,19 127:21,23 131:18 132:13 132:16 135:19 187:14 217:19 217:19
population's 106:24
portion 93:15 117:13 287:9 333:12 350:7 385:17
portions 267:10 334:15,19
position 138:8 313:6 315:19
positions 386:4
positive 348:19
possibilities 111:1
possibility 110:7,10
possible 170:4
possibly 79:12 170:3 176:12 177:9 201:20 215:17 259:11 349:7 398:6
post 79:19 145:9 146:23 196:24 197:17 198:13,14 199:15 200:21 201:9 213:11 271:4 339:11
potential 103:3 122:18 230:4 232:9,10,15,19 257:5,11 300:22 318:11
powerball 240:7
practice 70:19 92:2,5,13,16,17 92:18 94:1,14 96:21,24 108:10 114:19 114:21 115:1 115:13 196:14 204:9 239:24
practiced 92:8
practices 65:3
practicing 93:14
pre 79:19 135:16 196:24

197:17 198:13 198:13 199:15 200:21 201:8 213:9 233:22 233:22 327:1
precipitously 343:21
premature 230:7 235:21 305:22 387:11 388:24 390:3 390:20
prematurely 297:24 298:3 305:16 307:2 308:19 311:1 385:1,9
prep 157:21 175:8 208:2
preparation 183:18 188:21 206:2
prepare 19:11 26:9 27:21 31:20 32:2 42:16 66:9,12 67:1,5,24 68:4 71:22 72:10 129:20 170:14 340:13
prepared 20:20 21:21 27:23 40:17 42:23 43:2 44:2 49:16 49:18 51:13 55:24 58:15 63:7 74:8,10 85:6 207:6 248:9 295:2 304:17 318:16 371:3 393:18
preparing 29:5 30:9 31:4 62:16 340:18 352:13
presence 204:14
present 2:18 25:2 59:18 60:3 60:11 86:2 88:3 89:12,18 99:14 115:14 127:10 127:14 128:1 171:22 235:21 240:12,16,18 245:6 246:17 317:23 318:4,8 349:20 391:19 397:24
presentation 238:23
presented 24:11,15 53:3 75:18 78:12 87:16 149:22 169:21 170:23 179:20 203:16 215:9 217:2 222:20 238:23 257:13 342:16 363:2,22 368:13 402:14
presenting 171:19 348:14
presents 369:3
pressure 348:22
presume 16:22 158:18 182:12
presumes 158:21
presuming 195:4 196:5 368:15
pretty 192:11
prevent 21:16 314:24
prevented 315:6
prevention 122:15
previous 116:17 248:24
previously 90:14 91:8 174:17 202:6 246:21 279:10 280:21 372:13
price 34:6
primarily 151:17 302:7
primary 92:19 92:20 144:18 145:14 151:19
principal 240:19,24 241:5,11,19 242:8,18 392:1
principle 165:13
print 91:12,14 379:23
prior 15:6 29:5 34:7 43:12 61:6 61:11 63:18 97:19 106:3 116:23 155:19 162:23 193:20 196:18 199:8 201:15 218:11 218:17,23 260:18 277:17 295:10 298:7 301:8 314:14 314:18 315:24 327:17 332:23 341:9,11 358:14 359:1 364:20 370:3,7 370:14 383:3 384:14 394:1 395:14
probability 259:9,21 294:17 299:22
probably 12:15 33:15 60:18

61:13 62:3 92:20 93:9 99:8 99:14,15 113:7 137:18 145:5,6 148:22 149:2 157:24 160:23 161:1 162:11 166:19 178:19 180:8 226:19 291:18 357:2 357:13 375:15
problems 361:18
procedure 147:11,11
procedures 9:24 245:22 246:8 282:20 282:21 318:12
proceedings 407:4
process 87:7 204:5
produce 389:12
produced 11:21 15:7,13 19:6,8 23:9,15 26:5 28:4 29:22 42:12 64:3 68:16,20 77:5,6 85:6 90:9 91:8
producing 60:20
product 15:17 20:22
production 7:7 88:20,23 89:2,4 174:8 175:4 177:20 178:7 179:14 180:19 180:20 181:1,3 181:5 188:9 195:14 205:17 206:8 210:7 214:6 217:14 222:7,15 224:6 225:16 227:22 272:18 273:15 275:13 323:24 325:2,4,19 326:4,5,16,21 405:2
professional 1:19 96:14 111:21 213:1 407:15
professionals 143:22 161:2 403:20,22
professor 95:22 96:3,12 140:5
profit 149:9
prognosis 378:19 380:23
program 96:4 167:13 308:2,3 309:11
progression 167:12 382:12 403:4
progressively 402:23
projected 322:22 323:2
projecting 137:21 292:11 378:5
projection 140:10
projections 237:15
promise 56:13
proposed 119:22 122:4,6 204:20 247:5
propounded 410:6
proprietary 21:14,16 23:24 85:10,23 86:17 86:23 87:24 89:16
prorated 267:4
prospective 61:9 179:1
prospectively 61:19
protected 20:21 72:24
protection 89:16 387:7
provide 34:19 70:24 71:12 87:8 143:17 147:19 157:15 166:16 180:1 210:1 211:18 219:11 220:9 225:22 244:11 279:12 339:20 356:3 399:18
provided 15:3 22:1 53:12 56:21 63:5,22 66:1 67:14 73:17 75:7,11 107:13 135:13 136:3 144:1 146:8 152:11 153:12 177:12 182:20 183:3 197:14 206:5 261:7 276:6 279:15 306:10 306:20,22 307:9 320:10 339:8 353:11 353:16 381:23 400:14,24,24 401:24
providence 6:3 330:22
provides 240:14

providing 60:21 145:1 148:2 157:21 159:5 174:16 201:16 224:3 246:17 251:22 302:4,19,21 329:6 330:8 339:19 340:1,2 400:1 403:17
provision 311:12
proxies 114:4 198:22
ptsd 320:19
public 1:19 299:9,20 410:20
publication 97:19 98:8,12 99:1,24
publications 97:7,10
publish 96:2
published 108:24 111:23 114:1,23 204:1 204:6 374:15
pull 229:9 345:14
pulled 242:19
purchase 174:4 174:12
purchasing 150:1 174:10
pure 158:16 176:23
purely 224:24
purpose 77:12 350:16
purposes 114:6 234:3 366:24 367:12
pursue 95:17
put 86:4,5 87:2 87:2 94:1 100:4 148:16 163:15 170:16 172:16 207:12 208:14 243:14 244:4 275:17 286:14 287:24 328:4 345:21 405:21
puts 244:9 267:19 345:6
putting 124:8 153:7 207:13

q

qualified 386:3 386:8
quarter 211:5
question 7:13 10:16,18,19 39:9 61:6 67:13 76:7 78:6 79:1 81:7 86:17 89:20 97:22 98:16,18 125:20 133:12 135:7 158:10 163:17,20 168:24 169:3 176:22,23 186:17 191:8 207:22 208:13 208:16 210:23 211:22 212:22 226:3 229:6 235:2 237:19 237:20 238:8 253:11,22 268:4 288:3 292:19 309:14 312:14 329:22 335:14 344:7 345:2,8 346:2,5 355:13 356:2 358:4,13 366:13,20 367:15 371:15 374:20 399:1 404:15
questioned 189:17
questionnaire 206:5
questions 10:4 10:7,13,23 79:20 85:4 119:20 139:4 192:12 197:1 208:6 250:15 270:24 396:8 396:12,15,20 396:23 404:12 410:6
quick 383:18
quit 385:15
quite 115:8,10 115:24
quitting 385:19
quote 17:22 184:16

r

r 9:12 407:1 409:2,2
race 108:18,21 131:13
rain 208:9,9
raking 175:9
random 378:11
range 129:4 168:5 218:1
ranges 399:19
rate 25:8 62:3,4 62:8,9 65:9,18 86:5,5 87:2,3 106:22 107:6 148:17,18 149:11 157:1,3 171:10,24 174:6,9 183:1,7 184:11,24 187:11 188:14 195:3,7,11,16

195:19 202:11 203:4,12,14 211:10,19 213:21 221:8 240:24 241:11 241:14,17 242:2,4,7,23 274:21 275:1 276:20 281:4,8 323:3,9 329:3 343:8 392:16 392:17 393:6 403:17
rates 61:16,16 174:13 177:18 203:9,20,22 204:12 219:20 219:21 220:22 220:24 221:1 226:1 237:6 241:5,8,10,10 276:15,24 277:10 280:22 322:23 336:11 391:21 392:21 392:24 404:6 404:19
rather 130:18 272:22 275:7 289:15 357:5 376:5 382:8
rating 283:9
ratings 120:5,7
rationale 203:1
reach 34:9 66:13 225:6 390:2
reached 23:13
reaching 22:3
reacquainted 26:11,12 377:10
read 21:11 26:18 27:23 41:18 58:8,9 63:11 72:6 100:10 102:4 119:19 120:15 121:2,6 122:21 163:23 185:11 222:21 223:23 256:13 285:6 310:13 313:16 320:22 331:22 332:15,22 333:17 345:16 346:8 355:12 355:15 356:11 358:16 361:22 362:8 377:18 408:3 410:3
readily 91:13 117:19
reading 20:15 26:13 37:10 164:3 256:23 363:12 364:3
ready 117:16 117:20
real 244:22
really 60:1 70:22 143:14 147:14,14 185:12 210:8,8 214:2 224:7 289:18
reason 10:21 15:20 16:24 43:2 57:23 61:24 69:24 70:2 88:19 139:3 142:7 149:24 205:11 206:9 207:20 209:17 216:5 247:22 357:13 375:15 378:4 392:22 408:5
reasonable 20:9 21:2 22:21 102:9 111:18 112:13 113:19 116:3 222:19 224:22 225:5 238:3,20 292:7 356:22 357:2
reasonably 160:21
reasons 125:14 177:16 231:13 321:2 349:20 375:13
reassessment 218:13
rebuttal 4:18 5:8 51:14,18,20 56:11,16 63:9 222:2,12
recall 17:6 28:13,15 37:4 39:21 60:6 65:8 76:18 78:16 85:7 99:4 117:14 150:7 150:13 155:13 156:9 158:1,3 159:17 160:3,4 162:3 163:4 182:2 188:22 188:24 189:2 189:13 190:1,3 190:24 191:2 191:16 192:1 223:2 224:2 251:5 255:17 255:20 256:4,9 256:22 257:2 274:4 284:7 291:22 293:3 299:14 306:24 311:11 327:21 328:1,2,11 330:18 338:15 340:4,7 353:13 354:8 360:14

362:23 375:22 376:1 380:6 385:4,13,17,18 396:19 401:11
recalling 255:14
receipt 408:15
receive 38:23 64:22 77:1 103:4 206:13 266:16 267:20 352:13
received 13:18 39:9,10 40:3 43:4,8 63:21 76:1,21 91:24 93:10 143:21 146:14 227:20 240:20 241:1 327:9
receiving 167:9 268:2 283:8 310:12 371:18 399:11
recent 333:14 401:5,6 402:18 403:7
recently 98:17 333:24
recess 84:21 181:17 248:2 317:10 383:24
recipient 240:18
recognition 240:17
recollection 42:5 43:15 64:19 76:6 99:2 131:15 156:22 161:14,22 170:20 180:3,6 190:10,17,20 199:11 206:15 206:22 256:1 256:15 263:23 280:1 291:1 293:14,17 306:19 318:24 328:7 330:12 339:4,9,23 342:4 375:2 401:19
recommendat... 317:22
reconcile 287:23
record 6:4 8:2 8:6 13:19 16:15 18:24 23:7 24:4 24:11 27:7,11 27:13,16 29:21 35:13 43:22 64:2 80:22 84:18,24 91:6 134:19 142:16 142:18,20,23 149:13 181:14 181:20 185:15 190:8 192:7 223:8 247:24 248:5 317:7,13 330:23 331:7 333:6 334:18 335:7 336:7 348:13 363:21 383:22 389:1 405:19,21
records 20:10 21:3 22:22 30:22 39:18,19 39:20 40:8,11 40:15,18 41:2 77:23 146:14 146:19 147:6 147:10 164:6 164:10 171:16 190:12 197:11 252:19 348:17 384:3 402:3
recover 368:2 401:8
recoveries 144:7
recovering 144:5 159:22 190:21 400:16
recovery 151:24 402:12
recreate 24:17 85:16 86:14 89:22
rectify 287:22
recurrence 257:7,11,13,17 257:19,23 258:1,8,10,12 258:18 259:2,9 259:12,13,14 259:15,21 260:4
red 334:19
reduce 358:13 359:1
reduced 126:5 126:18,21 127:2,8,13 128:13 216:12 243:2 305:4 378:20
reduction 81:5 223:6
reductions 223:9
reenter 368:2,6
refer 30:14 50:10 342:20 342:24
reference 80:21 145:4 197:4,4 212:23
referenced 40:15 73:22 106:5
referred 129:18 362:16 388:10

referring 29:15 29:21 30:3,6 41:9 63:9 146:7 154:22 184:15 185:15 192:9 199:20 224:14 243:6 264:15 291:24 362:19 379:19,20 389:14
refers 276:20
reflect 243:4
reflected 391:10
refrain 279:4 306:6
refresh 339:22
refresher 317:3
regard 60:17 177:17 178:23 254:2 256:5 373:24
regarding 66:13 101:13 102:8 103:8,16 104:1 108:12 127:11 128:17 173:1 193:18 193:24 196:16 218:9 246:14 260:16 274:6 307:10 310:22 379:1 396:16 396:17 400:8
regardless 128:16 316:13
regards 60:9 67:14,24 69:11 71:8 76:22 80:3 82:6 85:11 98:19 104:24 125:22 171:9 172:13 181:24 199:21 235:11 274:19 276:14 280:19 283:15 299:1 304:18 316:19 318:17 343:9 346:22 348:13 387:16 393:19 404:15
regional 331:13 332:8 333:7
registered 1:18 407:15
regular 268:18 305:9
rehabilitation 300:13 402:12
reinvested 241:1,6 242:3,9 242:17 392:9
related 34:5 50:20 68:3 99:12 143:6 144:12,17 146:6 150:16 151:8 152:4 160:13 168:8 168:19 171:9 172:7 183:21 202:22 252:2 252:15 278:11 278:17 279:21 282:12 283:10 298:17 301:24 321:14 362:17 363:8,19 368:16
relates 1:7
relationship 233:1
relaying 129:7
relevance 58:12 113:9 221:7 283:13
relevant 22:4 39:23 90:17 112:2 156:23 159:4 381:4
reliability 198:11,24 205:19 206:5,7 210:23 225:9 225:12 237:14
reliable 111:23 112:10,10 113:20,24 114:5 115:10 115:10,11,12 115:13,15 116:7 139:11 197:3,9 198:12 198:14,15 209:23 210:24 212:13
reliably 207:17
relied 22:2 24:8 30:21 40:15 73:3 172:5 263:3 301:1 311:5 312:4 390:10
relies 180:2
relocates 275:11
rely 24:5 78:3,7 80:16 100:12 107:19 108:6 110:12 116:8 116:12 122:12 123:2 130:10 131:6,8 133:4 183:8 184:10 186:23 187:10 197:23 201:1 201:10 203:24 204:9 209:24 211:10 217:10 217:22 221:21 239:11 292:23 292:24 300:16 376:4,17
relying 52:4 73:17 123:14 124:13 126:18

184:24 215:13 230:11,15 233:10 245:10 246:2,12 279:18 283:18 293:9 310:23 339:1,17 363:16 373:11 390:1
remain 236:15 236:17
remainder 236:22
remained 284:19 285:3
remaining 122:10 214:13 236:3 350:6,7
remains 242:19
remember 18:2 76:8 80:10 138:10 197:6 313:9
remission 254:3
removed 187:14 203:5
removing 398:13
render 111:8 112:17 114:11 115:3 120:2 123:1,7,13 124:12 125:8 133:20 239:11
rendered 188:19
renders 120:20 120:22
reoriented 377:19
repair 183:23
repairs 193:6 193:11
repeat 163:18 163:19 346:4
repeated 318:5
rephrase 148:7
replace 194:5
replacement 153:22 174:3 186:4 188:14 194:12 313:2
report 3:19,21 3:22,24 4:1,3,4 4:6,7,9,10,12 4:13,15,17,18 5:7,18 6:10 24:14 25:9 29:12 30:5,14 31:16 38:11,15 38:19 42:16 44:7,10,15,18 44:23 45:16,24 46:5,8,13,16,21 46:24 47:5,8,13 47:16,21,24 48:5,8,13,16,21 48:24 49:5,8,20 49:23 50:4,9,13 51:2,10,14,18 51:20 56:1,7 57:12,16,19,23 58:9,9,11 63:6 63:9 66:9 67:1 67:5,24 68:4 77:2 78:11,22 80:23 115:9 116:18,22,23 117:3,13 118:6 118:13,17 162:7 183:12 185:16,20 186:11,19 188:20 202:4 220:2 222:2,13 226:18,19,24 229:10 234:3 248:10,18 251:12 261:17 277:4 278:18 278:24 279:12 291:5 297:10 300:7,16,21 301:17 303:18 304:13 305:16 308:18 317:19 321:6,8 328:4 336:10,17 339:17 340:13 340:18 341:20 342:20 352:3,8 352:14 359:6,9 360:1,19 361:1 364:11,16 369:2,13 371:8 372:20 379:8 384:6 388:10 390:11
reported 332:2 332:24 333:21
reporter 1:19 9:1 163:20,22 346:7 407:15 407:24
reports 5:8 22:5 24:12,23 25:12,21 26:13 26:15,18,19 27:23 28:3,8,9 28:19,19,23 29:2,7,13,19,22 30:1,20 31:16 31:17 32:3 37:16 40:17 42:23 43:3,18 44:3 49:15 52:3 52:9,13,17 53:6 56:12,16 60:21 60:24 61:2,3,8 61:13,23 62:7 62:10 63:4,11 63:13,16 70:7 70:21 71:16,23 72:2,3,5,6,7,10 72:11,17 73:3

73:18 74:3,5 78:4,5 80:24 81:16 88:13 100:18 102:5 104:7 127:9 128:12 143:4 144:24 147:17 149:23 150:12 167:4 169:14 169:24 171:19 172:23 173:18 202:14,18,20 211:23 212:5 226:5 228:4 229:1,1 235:12 240:11 242:6 243:1 245:10 248:8 279:8,14 351:8 391:20 392:3,15 400:20
represent 8:14 149:2 195:13 270:4
representations 309:21 310:5 353:9,11
representative 184:16,20 185:22 186:1 186:22 187:21 202:6 219:21 274:21 275:1 301:3 337:18 347:18 369:8 382:20
represented 203:4
representing 203:15
represents 266:12 267:7 326:2
reproduction 407:22
request 7:7 19:16 20:4,7,11 20:16 21:4,12 21:19 22:14,17 22:24 23:3,4,8 26:5
requested 91:7 163:23 346:8
requests 14:22 15:4,13 20:7 22:16,19
require 53:3 60:24
required 145:24 146:2 146:16 162:13 191:19 239:3,7 278:10 353:22 370:20 385:8
requirements 283:22 315:8
requiring 402:24
reread 26:16
rescheduling 71:4
resides 150:19
residing 275:14
residual 283:17 349:23 351:15 398:5,6
residuals 213:24 254:4,5
resolve 253:24
resources 83:11 350:19,20
respect 22:3
respected 175:24
respective 24:12 25:5 28:5 59:16 75:16 80:10 106:15 143:18 160:6 164:5 167:16 171:18 175:1 203:16 215:9 218:13 226:24 351:6
respectively 403:12
respond 10:23 17:18 123:18 198:4 208:16
responding 10:4
response 16:16 20:7,15 22:20 23:1 63:20,21 68:15,20 73:8,8 76:8 91:11 117:17,20 125:2 396:22
responses 3:13 15:23 16:2,9,15 16:23 17:4,10 17:12 18:2 19:17,18 20:6 132:15
responsibilities 345:3,5
responsive 15:3 15:12 20:11 21:4 22:23 199:3
restating 318:10
restrictions 254:12
restrictive 95:4
result 13:14 120:11 158:22 189:9 248:13 260:22 303:22 397:21
resulted 340:17
resulting 249:15
results 110:20

resumed 332:3
retained 34:19 37:6
retainer 63:23 64:23 65:2,7
retention 5:13 15:8 33:13 64:8 64:15 66:2 67:15,19 68:8
retire 140:24 284:11 292:12 293:1,16 298:12 307:2 311:1 312:14 312:19 313:2 313:21 314:13 314:18 315:23 326:10 358:21 377:5 379:9,14 380:10 381:5 385:1,9 390:14
retired 179:18 218:2 220:11 221:4 226:22 249:6 262:4 276:10,11 277:12,13 297:24 298:3 305:17 308:20 311:9 313:3,4 313:11,12 316:20 318:22 319:7,10 320:14 321:2 327:3,4 351:10 360:2 364:20 365:18 369:22 387:5 395:4 399:14 405:2
retiree 327:13
retirement 137:5,17 230:7 235:21 263:11 263:21 267:17 267:18 298:7 299:1,4,6,24 305:10,21 306:2 308:23 310:1 312:16 315:10 320:16 323:11 325:20 358:5,6,9 373:22 374:18 374:22,23 386:4 387:11 388:20,23 389:2 390:2,4 390:20 391:3 391:15
retires 325:9
retiring 358:14 359:2
retrained 231:13
return 240:24 242:7,23 254:11 319:2 392:1,9 408:13
returned 92:12
returns 333:13
review 14:18 14:22 30:8,12 31:1,12 37:6 41:1,22 42:2 53:7 57:19 59:12 63:3 66:23 71:18 72:16 97:19 204:5 301:10 328:14,17 343:23 344:1 353:24 354:10 375:17 380:18 397:6 400:18 400:22
reviewed 22:2 28:3 29:6 41:8 42:12 57:12,16 57:23 59:9 62:16 71:15 72:2,11 97:13 97:14,18,22 114:1 116:17 116:20 117:2,5 118:18 151:18 171:17 172:5 192:14 205:1 224:19 283:24 323:18 354:5
reviewing 26:14 28:8,10 28:20,23 67:1,8 68:2 72:5 97:20 343:24 394:20
richard 6:15 59:7 389:18
richer 269:4
right 12:3 13:8 16:18 18:15 20:24 22:20,24 25:19 28:14 30:4 34:6 35:3 35:4,17,21 42:24 43:16 45:6 51:11 52:2 53:14,18 54:24 57:14 59:10,22 66:5 69:16 70:8 70:13 74:18 75:9,12,21 76:2 82:2 84:9,12,17 85:18 86:18 88:14,24 90:3 91:24 96:19 97:10,11 101:14,19 102:22 105:1,4 107:4 110:21 111:2 121:3 123:23 126:17 127:17 132:6 132:22 138:7,9 146:10 148:3 148:19 150:19 151:10 152:7 154:23 155:2

157:5,10
160:21 164:16
164:17 181:13
182:22 183:4
183:14 184:17
185:1,8 189:22
191:1 192:8
194:21 195:20
196:3 199:16
200:17,22
201:16 205:6
205:10 210:12
211:14 212:4
214:22 216:21
217:13,17
218:1,4 219:9
219:17,23
220:19 221:13
221:23 224:8
225:21 229:19
230:7 231:4
232:16 235:10
235:22 238:1
239:9 240:10
241:2 242:9
245:12 246:14
246:19 247:6,8
247:23 248:21
249:16 250:1
251:24 254:17
254:19 257:15
260:6 261:4,16
262:5,9,13
263:13 264:13
265:24 266:9
267:12 270:1,6
271:3 272:6
275:16,19,24
276:3,7,11
278:9 280:17
283:11 284:15
284:20 285:16
288:4,7,8,11
290:1 294:1,18
296:14,18
297:9,10,13,21
300:23 301:24
304:1,23 305:1
305:18,23
309:5 312:19
316:17,24
317:6,15,18
321:24 322:6
322:24 324:17
326:14,15
337:3,8,13
338:1 340:14
340:24 341:5
343:12 347:1
347:19 351:14
352:2,9,17
353:2 357:22
359:13,22
362:5 365:1
366:1 369:14
369:23 371:5,8
372:12,14,16
379:1,11
380:17 381:12
381:14,21
382:5,22 383:5
383:16 384:5,9
384:19 385:2
386:19,23
387:8,12
388:20 390:16
391:17 393:11
394:22,22
395:2 403:3
rings 251:7
255:16
rn 403:16
rns 403:15
roadmap 98:4
99:17
robert 38:19
robin 1:18 9:1
407:15
role 17:3 40:10
72:8 166:22
167:1 214:12
223:14 228:17
253:5 276:14
roman 171:18
277:8
ronald 50:15,21
51:2 68:9
rothchild 4:10
5:5 38:4 48:6,8
55:13,19 384:6
384:7,12,16
386:1,13
rothchild's
384:18 385:11
386:2
roughly 300:4
round 29:19
rounded 213:3
227:10 288:22
327:11 343:17
routine 86:3
rows 220:9,24
322:21
rule 72:24
197:22 238:5
rules 9:24
238:5
run 215:17
255:3
ruzicka 2:3 3:4
8:19,19 17:13
18:20 23:17
39:3 41:11 45:1
45:5,14 57:24
66:15 72:21
82:8,18 111:10
112:20 115:5
117:23 118:1
120:24 121:14
121:17 123:4
123:16 124:4
124:15 125:10
125:24 133:9
133:23 146:1
152:14,20
153:16 156:4

159:13 162:24 164:1 165:17 168:21 171:13 181:10 187:24 188:3 191:6 192:23 194:7 195:8 196:20 212:16 215:15 219:4 228:20 230:18 233:12 234:8,21 237:17 239:14 253:9 256:2,20 258:4 259:4 263:6 273:6,13 273:18 277:19 279:1,23 291:17 292:5 292:17 293:4 294:6 302:12 305:2,11 306:3 307:7,23 308:15 309:12 309:19 310:3 315:2 316:3 334:13 335:4 335:21 336:1 338:9 345:24 346:17 351:23 356:18 357:10 363:10 364:23 365:12,24 367:7 368:18 370:5,15 377:8 380:12 383:6 383:13,17 394:4 395:16 396:11 399:6 403:8 405:15 405:22

rybolt 5:18 57:13 116:19 116:24 118:7 118:14 120:19 123:11,18 124:10,18,21 125:5,13,16

rybolt's 119:3 125:21

résumé 3:9 11:14,20 90:7

s

s 3:6 92:11,14 92:14 252:13

sabbatical 154:17

salary 265:20 284:15 285:15 289:24

sales 183:21

salt 175:11

sat 94:9

saw 17:21 290:3 294:9 348:16 367:24

saying 67:16 106:8,13 128:8 138:5,6 146:3 165:19,22 166:1 189:2,3 190:2,18,20 194:10,16 252:11 335:14 377:5

says 20:16 22:21 84:3 119:16 121:1 122:2 142:2 199:14 265:13 277:7 333:13 343:13 361:16 388:14 389:2 390:18

scale 266:3

scenario 179:23 180:2 182:19 203:6 219:19 292:13 368:8

scenarios 182:7 182:9,12 219:11 261:7 300:4 317:24

schedule 86:19 264:20,20

schedules 71:2 86:1,4,12

school 93:13 141:10 355:21 385:5,15

schoolers 342:3

sciatic 362:4

sciatica 362:5

science 232:16

scope 52:18

scott 50:15,21 51:2 68:9 333:13

scratch 217:8

se 232:18

search 20:10 21:3 22:22

seat 223:10

second 5:11 14:7,8 27:7 58:15,22 98:19 119:16 122:2 141:7 179:23 203:6 219:19 229:18 287:16 375:8,16

secret 88:16

section 20:3 30:20 73:22 77:2 78:14 79:16,19 119:11 197:16 200:12 201:22 229:13 240:11 263:10 277:7 278:5 284:23 287:17 298:24 310:8 320:5 335:9 342:20 352:18 361:14 372:21 376:6

391:11
sections 71:23 228:5 229:8,17 235:11 243:1 335:6
security 249:11 252:7 253:13 304:8 360:13 364:13 368:1 373:21,23 374:17 391:16
see 21:12 42:7 66:4 67:19 80:4 81:16 82:14,21 98:5,22 107:3 119:1,7,13,17 121:23 147:11 153:20 198:3 201:6 203:1 209:9 210:5 237:6 238:13 241:19 252:18 262:18 320:5 323:13,18 325:15 327:6 332:20 333:10 340:6 343:20 343:22 348:12 352:18 362:22 372:10 388:15 389:13
seeing 26:3 33:24 116:23 300:2 381:7
seeking 79:9 104:17 138:14
seeks 20:18,19
seem 210:12
seems 123:19 124:20 210:8 260:1 335:18 376:12
seen 29:11 210:7 323:21 334:18 336:6 344:21 361:8
segment 109:6 109:12
select 185:23 187:20
selected 169:10 175:13,23 177:19 186:7 207:24 223:16 224:16 374:3
selection 95:10 374:4
self 95:6 129:19 134:3 242:12
send 89:2
sending 91:9
senior 70:20 71:14
sense 72:5 168:4 198:11 210:15 232:4,6 274:15 292:20
sent 75:19
sentence 288:11 390:17
separate 51:10 136:4 323:23 363:7
separately 361:21
separating 324:16
separation 324:4
september 162:12,19 165:24 166:3 241:17 248:15 249:12 250:6 250:13 260:8 283:4 303:24 364:14 372:15 391:23
sequelae 83:6 190:5 252:9,13 252:19 254:5
served 16:16
service 79:16 84:1 136:11 149:3,4 150:2 174:12,16 183:13,20 201:18 209:1 211:18 212:6 225:7 226:17 264:6,7 265:1,2 265:10,15,16 267:15 268:9 300:17 302:19 304:5 312:24 315:15 334:12 398:10,11
services 4:16,17 49:20 50:2,3,15 50:21 80:4,6,18 81:6,23 82:4,6 82:14,16 83:5 83:17,23 99:15 105:20,20 106:10,11 130:3,4,7,9 133:8 135:4,8 135:10 136:5 136:10 145:1 145:23 146:15 148:3 153:12 153:23 154:13 157:4,8,10,14 157:18 158:6 159:12 173:1,5 173:6,18,19,24 174:4,5,11,22 175:2,3 176:6,8 177:4,12,15 178:1,12,13 179:5 180:1 182:1,5,7,14,21 183:2,7 186:5 193:19 194:1,4 194:5,11 195:5

196:6,17
197:16,17,18
199:7,9 200:13
200:16,21,22
201:14 202:21
202:24 203:8
204:23 211:9
212:15 217:8
218:10,15,22
219:1,10,17
220:6,17
222:18 223:6
224:23 225:3
225:24 226:7
227:4,13
239:19 241:21
241:24 251:21
256:17 260:8
260:17,21
261:3,12,15
269:19,23
270:4,12,17,22
271:18 272:2,5
272:24 273:23
274:2,7,14,19
275:6 276:3
277:16 280:9
280:20 281:17
281:21 282:4
295:3,9 297:7
300:23 301:7
301:12,16
302:17 303:9
321:9,14 322:3
322:4,9,17
323:19 324:19
324:23 325:4
325:10 326:23
327:3,12,16
328:5 334:5
335:3,19,20,24
336:5 337:6,11
337:16,23
338:7 339:6,18
339:21,24
340:22 341:3,9
341:14,20
342:8,17 343:9
344:6 346:23
347:6,11,23
348:4 349:5,11
349:18 350:24
351:1,21
352:24 353:15
353:21 357:8
357:18 369:4
370:3 381:24
382:11 383:2
383:10 393:20
393:24 394:8
395:7,13,21
396:17 397:1,9
397:11,23
399:8,20
400:13 401:2
403:12,24
404:16
serving 183:19
set 24:13 25:9
52:18 78:14
97:7 171:17
186:14 226:20
245:14 277:8
288:4 299:8
308:9 366:9
387:20
seven 208:4,20
210:6 296:19
296:21 297:1,1
350:5,6,7,9
368:4,11 396:2
396:4
several 373:19
severance
284:10,14
285:5 289:13
289:14,17,19
289:23 290:3,4
severe 358:7
severity 166:22
167:24 169:8
sga 253:14,20
shahnasarian
42:4,6,7,10
246:23
shared 89:9
she'll 170:1,19
sheet 85:24
408:6,9,11,14
410:9
shoes 134:20
shop 194:20
shopping
129:24 173:13
206:1 270:10
272:16
short 195:21
230:11
shortcuts 87:19
shorter 84:8
126:14 393:4
shortly 313:3
shoveling
175:10
show 179:6
180:9 380:4
showed 191:2
shower 170:18
showing 178:6
shown 399:13
sic 14:5,9
sick 144:21
side 362:5,6
388:17
sign 408:8
signature
407:13 410:11
significant
39:14 147:2,3
167:5 296:2
signing 408:10
silence 26:23
27:1

similar 19:21 23:3 88:20 99:19,22 131:19 148:3 153:21 211:3 261:2 302:15 328:8 341:16
similarly 24:23 104:14 337:10 348:2
simplest 266:11
simplifies 87:21
simply 11:19 65:2 88:6,9 137:21 165:13 166:6 203:12 211:18 212:7 221:1 223:19 234:4 235:14 246:16 286:14 287:22,24 302:2 318:9 389:11
simultaneously 177:22
sinclair 304:9
single 51:14 88:10
sink 237:20
sister 328:22 329:11,17,19 330:1,2
sit 52:8,15,24 53:8 59:20 76:18 104:8 112:6 150:9 156:21 159:9 159:15 189:19 191:1 200:24 222:5 255:21 257:18 297:3 303:11 327:14 327:24 374:7 380:5
site 299:8 387:18
sits 377:24
sitting 52:11 80:12 191:15 192:20 223:10 225:9 256:16
situation 85:23 177:8
situations 105:22 141:23
six 227:24 288:9 315:4 379:21 401:16
sixteen 366:16
skewed 132:14
skills 386:2,6
slightly 288:13 288:20 375:11
small 131:13
smith's 149:5,6
sneakers 244:3
social 249:11 252:6 253:12 360:12 364:13 367:24 373:21 373:22 374:17
society 113:19
solely 301:19
somebody 83:12 130:22 154:6 165:14 166:6 207:7
someone's 141:24 199:6
sooner 110:5
sorry 20:5 24:9 27:2,5,8,19 45:1 54:9 63:19 70:6 72:14 74:8 75:4 78:5 93:21 94:4 117:24 121:16 130:13 132:7,12 145:21 156:8 165:3 181:9 187:7 206:16 217:3 252:12 261:11,12 292:23 298:23 330:19 332:19 338:5 343:23 372:19 383:13 389:9 392:18
sort 82:15 163:14 171:2 274:14
sought 34:9
sound 35:3
sounds 35:4 97:11 154:21 214:7,9 335:9 386:7
source 73:21 78:15,21 79:6 107:18,22 115:19 151:19 210:24 222:9 222:16 223:1 224:18 264:10 277:8
sources 116:5 222:8
space 408:6
sparks 4:12 6:13,15 38:4 48:14,16 59:7 59:22 60:4,10 386:10,12,15 386:16,21 387:5 388:4 389:5,9,18 390:13,18 391:2,18 393:1
speak 32:13 81:20 124:18 163:1 274:10
speaking 22:13 79:17 152:2 192:10 282:18 294:2

special 308:3
specific 25:4,10 25:12,13 33:2 39:15 44:2 49:15 74:9 75:6 78:8 117:14 128:7 130:14 130:21 138:18 140:20 142:11 145:4 147:15 152:22 156:22 158:6 159:20 160:2 163:4 165:18 172:4 183:8 184:1,6 185:10 188:6 188:15 189:1 189:17 190:17 190:24 191:14 191:16 192:11 203:18 205:10 210:18 223:6 225:14 232:18 232:23 233:3,3 235:6 236:6 238:8 251:10 253:12 259:18 274:11 289:4 311:11 323:15 327:18 328:1 328:12 338:3 339:18,21 340:4 341:11 341:13,20,24 350:18 351:4,4 351:15 357:19 376:1 397:1 399:1,4 402:11 404:9
specifically 19:19 41:9 182:4 185:20 188:5 190:1 203:23 233:10 263:11 291:21 319:14 339:16 380:6 396:24 398:9
specificity 26:17 185:3
specifics 67:8 255:18 299:14 338:15
specifies 277:10
speculative 112:19,22 113:1 114:12 119:24 120:22 122:17 123:3 123:15 124:14 133:1,4,22 239:12
spelled 9:12
spend 90:1 96:9 207:3 208:19 225:19 243:22 325:17,18
spending 211:13
spends 177:24
spent 89:6 198:18,19 205:15 209:20 225:2,7 226:17 243:18 329:10 329:16,18
spoke 95:22
sporting 34:6
spousal 145:5
spouse 144:2,2 146:22 152:5 152:12,16 153:13 154:13 154:14,19,20 154:23 155:1,9 155:17,24 156:1,18,20 158:13 162:14 170:8 207:6 224:3 273:12 276:23 302:3 338:20 339:2 352:20 353:6 400:13 401:4
spouses 156:23 400:24 402:1 402:24
spring 29:23 98:3
ssa 6:10,11 360:20,21 361:2,3
st 6:3 330:22 331:13 332:8 333:7
staff 70:5
stage 361:20
stages 399:9,9 399:16,17
staller 1:15 3:3 3:8,14 4:18 5:14,16,21 8:11 9:4,9,12,13 11:15,19 13:1 13:24 14:14 16:4,4,8,11 18:24 19:15 20:9 21:2 22:21 23:10 26:8 27:18 34:13 35:9 36:14,18 44:11,19 45:17 46:1,9,17 47:1 47:9,17 48:1,9 48:17 49:1,9 50:4,8 51:20,21 52:2 53:12 54:2 54:15 55:7,20 56:7,17 57:6 58:24 62:13 64:5,10,11,15 68:22 69:2,4,8 77:3 85:2 100:6 118:8,12 143:3 181:22 199:18

200:5,6 248:7 311:18,22 317:15 319:16 319:22 331:1,5 344:16 354:16 355:5 359:10 360:17 361:4 381:18 384:5 388:5 389:19 396:13 410:2
staller's 213:19
stamped 5:14 64:4,9
standalone 44:2
standard 65:3,5 65:9 70:19 75:17 108:13 111:21,22 114:21 115:1 116:11 186:3 197:19 198:1 238:4,22 252:8 253:12,14,20 405:22
standpoint 109:18 140:6 141:22 307:13 307:16 365:1
stands 256:7
start 39:13 60:1 61:18 75:5 96:23 105:7 160:12,17 169:12,17 241:12 248:10 267:5 321:18 351:13 359:20
started 94:11 96:20 121:7 162:18 270:18 271:17 288:10
starting 80:1 161:12 163:12 235:19 305:15 331:12 358:3 363:23 366:10
starts 77:16 220:5 343:15 355:14
state 1:20 8:13 9:10 90:24 91:2 150:18 219:23 222:13 231:23 233:4 238:5 274:22 297:19 308:19 352:19 369:9 373:15 382:20 408:5
stated 20:8 125:15 138:21 139:24 149:24 177:17 190:9 297:23 376:10 376:13
statement 78:22 190:10 191:14,17 192:1,2,6 316:16 353:5 387:17 390:10
statements 390:12
states 1:1 8:18 29:23 42:3 63:3 85:15 102:21 103:2 107:3 108:2 111:24 112:2 117:9 131:14 232:1 246:24 320:13 332:10
statistical 105:21 106:20 106:23 107:11 108:3,7,12 109:4,10,13 110:6,9,18 111:8 112:17 112:19 114:9 114:16 124:23 125:17,22 127:4,11 128:17 130:18 130:20 131:20 141:11,21 204:24 205:7 248:19 342:16 373:17 374:15 376:9,11,15,22 377:2 378:14
statistically 107:2 135:18
statisticians 114:2
statistics 107:13,22 109:1 113:6 114:3,23 132:6 145:16 148:20 184:4 204:2,7,9 205:2
status 204:14 218:1 269:1,14 276:14,16,21 302:7
statute 100:13 104:13 232:7 233:3 235:6
statutory 231:24
stay 314:12
stayed 374:5,9
staying 374:1
steaks 272:15
stenographer 156:5 165:1
stenographic 407:6
step 31:24 133:15 151:3 179:22 280:18
stephen 32:8 261:17

stepping 270:3
stimulating 94:8
stimulation 371:18
stipulation 17:17 39:7 58:3 66:19
stoma 401:12
stop 170:6 254:22 368:24 396:4
store 173:14
straight 287:11
straightforward 122:8
strategy 247:19 247:20
streamline 89:17
streamlined 89:9
street 2:3 95:2
strike 63:19 72:15 133:3 168:15 194:1 199:2 230:12 250:9 260:14 271:16 308:20 326:8 380:7 404:11
string 121:2,9 387:18 389:4
structure 129:23 173:10
struggling 287:15
students 95:11
studied 113:5
studies 1:16
study 129:6
study's 129:7
stuff 209:2,3 217:4 296:15 296:17
subbed 385:20
subject 20:24 408:10
submitted 69:10,15 70:1 303:17
subpoena 3:10 3:12 13:15,23 14:13 63:21 68:16,21 91:7 91:11
subpoenas 14:24 15:4
subscribed 410:12
subsection 118:23 121:20
subsequent 39:1 167:10 271:13 314:6 367:20
subsided 170:4
substance 17:2 32:20 410:8
substantial 122:20 253:15
substantive 26:17 90:17,22 90:23 91:16
substitute 385:20
subsumed 184:21
subtractions 372:9
successful 147:12
suffer 214:19 257:6
suffered 248:13
suffering 105:1 364:5
suffers 147:3
sufficient 368:5
suggest 125:13 125:16 133:1 134:19 283:19 323:19 336:3 339:18 368:12
suggesting 121:9 201:17 325:8 326:9 350:17
suite 1:17
suited 94:16
sum 132:15 240:17
summary 119:12 121:8 155:21 339:21 346:11
summation 143:15,18
summer 29:17 98:3
supervision 407:24
supplanting 223:20
supplemental 5:9,11 29:10,12 29:14 56:22 57:4 58:16,22
support 7:1 166:13,17 183:18,22 293:10 389:14
supporting 21:24 22:18
sure 18:11,23 25:15 30:6 41:7 45:14 69:23 70:23 71:8 72:2 77:10 81:17,19 83:2 90:5,15 99:6 106:6 117:15 121:12 128:10 133:14

134:19,20 139:4 140:21 146:5 149:12 153:23 155:6 156:15 163:19 176:5 185:4 187:1 199:13 222:3 226:4 227:3 229:7 253:1 256:11 272:8 286:18 294:24 309:16 346:4 356:8 367:14 402:9 403:3
surgeries 191:24
surgery 144:5 146:22
survey 178:2,8 178:10 197:5 198:7 204:3 205:18 207:21 208:24 210:21 210:22 215:8 227:16 325:16 326:17 342:22 343:1 399:22
survival 106:22 107:1,6 111:5 113:8 294:20
survivor 268:12,14 273:1,16,19
suspenders 70:22
swear 9:2
sweat 89:17
switch 143:2 179:12 324:3 324:13
sworn 9:5 410:12
symptoms 162:22 348:14 358:8 360:6 362:17 363:8 363:18 366:12 366:17,19 368:20 380:13 384:13
syndrome 362:7
synonymous 144:19
synthesize 77:24
synthesizes 87:21
system 87:12 89:3,7 263:16 263:21 264:23

t

t 3:6 407:1,1 409:2
table 59:6 60:6 203:16 220:8 220:15,23 221:11,22 226:20 227:11 257:14 258:7 266:22 276:20 286:1,2 296:6 296:11 322:14 322:15 336:13 343:3,13 359:17 369:12 372:8 377:2
tables 19:20 24:16,17,19 59:10,13 72:6 107:4,12 108:7 108:17,20,23 110:13 113:4 116:13 123:3 123:14,24 124:13 125:23 127:19,21 128:4 129:11 130:20 131:6,7 131:11,15,19 131:20 133:5 204:13 294:19 349:20 373:18
tabulate 143:13
tailor 188:5
tails 109:18
take 31:24 53:7 58:8 77:10 84:4 84:6,14 117:12 133:14 141:13 147:12 154:17 155:1 170:5,18 170:21 172:19 175:5 181:8,11 207:10 227:23 227:24 247:12 250:11 267:24 268:21 271:9 273:24 281:13 284:10 295:16 296:21 317:2 317:21 355:21 383:17 390:5 393:8,9
taken 1:15 5:23 6:7,16 77:15 84:21 181:17 248:2 250:4 277:24 285:4 311:17 313:14 317:10 344:15 371:13 383:24 389:18 394:14 407:6
takes 173:15 368:7
talk 10:5 23:17 24:1 43:23 73:1 80:24 99:10,11 105:5 135:22 153:8,23 159:16 164:6 167:15 209:2 245:1 248:8 347:1

talked 203:7 255:18 370:17 373:19 391:21
talking 50:11 82:23 85:3 96:12 123:19 130:17 145:7 151:23 159:19 160:5 161:19 168:2 177:2,3 202:5 212:24 217:3 227:4 270:21 287:17 302:16 325:24 377:12,21,21 378:3
talks 145:17 328:9 391:14
tammy 94:5
tangled 261:13
tantamount 143:22
taper 402:13
target 368:1
task 189:17 198:20,21 205:16,16,17 207:15,18 211:14
tasked 39:24
tasks 83:12,20 83:21 135:15 144:8,9 145:17 148:12 162:14 206:3 209:18 211:1 216:12 225:19 281:21 295:19
taxes 137:4,10 137:11
teach 96:1
teacher 140:4 342:2,10 385:5 385:20
team 193:17,23 333:22
technical 204:4
technically 242:21 244:7 273:19 312:10 403:19
ted 2:3 8:19
tell 18:16 28:7 32:5 67:23 99:3 149:20 198:17 198:19 220:21 220:23 293:1 304:12 340:16 343:7 373:9
temperature 247:18
temple 94:24 94:24 95:23
ten 45:3 142:3 142:6 172:18 172:20 175:6 180:24 207:14 214:12 290:22 291:9,16 292:4 292:16 293:12 334:20 336:2,7 393:6,7,9,10
tend 108:2 175:22 196:24 216:2 237:6,8 325:17,18 393:7,9
tendency 111:4 132:9,17
tends 272:24
tennessee 369:9 382:21
tense 146:3 151:10
tenths 211:6
term 24:7 37:1 112:22 143:8 143:24 148:4 152:9 159:1 183:15,16 232:15 235:4 243:9 254:5,7 319:10
terminate 255:2
terminated 382:15
terminates 106:15
terms 144:19 153:12 266:11 306:8 345:2
terrible 166:17 344:6
terry 59:6
test 161:18 162:8 224:17
tested 203:20 211:11 222:8,9 222:16 223:1 223:18 224:15 224:19 225:13 225:14 348:19
testified 9:6 12:7,22 41:15 85:10,14 90:24 91:1 141:6 169:3 212:12 246:22 279:11 292:10,22 314:9 344:5 346:12 354:3 360:9 362:19 380:7 397:20 401:19
testifies 170:10 346:14
testify 53:10 152:24 170:1 170:19 213:8,8 213:22 225:2 226:15 231:6 238:2,2 376:3
testifying 9:16 11:3,4 13:13 52:5 71:9

testimony 3:9 11:14,20 12:1,2 13:2,6,9 23:24 39:17 40:5,23 41:8,9,16 43:11 52:19 65:15 70:24 80:20 85:7 90:13,15 116:17 145:7 146:14,21 147:6,16 151:17,22 156:23 159:4 159:18 161:14 161:23 162:10 162:16,20 163:5 164:4 169:21 179:20 182:2 187:17 190:3,7,8,18,20 192:9 201:1,5,9 209:4 213:12 214:8 215:6,9 215:13 219:6 223:7,23,24 224:12,17 250:18,20 251:6,8 254:1 255:12,13 256:4 274:1 291:3,7,12,22 292:15,24 293:3,10,15,18 295:13,17 296:15 311:9 313:17,20,24 314:11 316:5 316:11 328:15 328:17 334:7 339:17 340:5,7 344:9,20,21,22 345:17 351:9 353:20 354:1,6 354:10,18 355:10 356:15 358:1,20 359:3 362:16 363:13 364:3 375:18 375:23 376:2,7 376:17,19,21 377:11,17,19 380:4,9,19 385:12,14 387:14,19 389:24 390:6 394:19 397:6 397:14 401:11
tests 21:23 22:17
thank 13:20 45:13 49:13 100:5 118:4 289:9,11 396:6 396:13 405:15
theme 190:21
therapies 59:5 143:20 159:22 160:7 180:24 191:24 339:12
thing 16:21 85:3 86:7 128:9 137:7 194:10 194:16 389:12
things 81:9,10 83:7,8,9,19 89:6 93:23 121:10 127:19 189:3 213:10 214:1 224:5 225:10 243:21 349:1
think 12:16 16:24 18:18 20:16 23:12 26:20,24 27:1,2 29:9 32:19 34:4 42:1 61:6 63:15 66:8 74:20 76:15 87:24 89:20 91:6 95:8 98:9,10,15 99:10 107:24 109:2 115:7,24 121:14 128:8 139:19 140:5 144:16 146:9 148:15 167:15 176:22 178:17 180:11 183:15 184:19 187:16 189:13 194:15 199:12,14 206:19 209:20 214:23 215:16 223:4 240:5 246:21 252:14 257:22 273:19 277:9 278:19 280:2,3 285:12 289:1,21,22 290:3 293:14 293:19 302:16 318:5 328:11 339:20 341:23 348:16 352:2 359:5 366:1,13 367:23 374:5 376:8 390:24 391:9,21 396:1 404:11
thinking 62:5
third 28:13 83:20,22 97:8
thirteen 179:16
thirty 62:20 408:15
thought 41:14 42:5 263:23 325:8
thousands 141:3
threatening 397:16
three 24:16 31:10 60:1 110:19 121:20

122:12 178:18
210:9,11 223:3
230:8 237:9
243:10 265:22
266:4 276:22
286:24 300:4
320:19 350:13
350:15 403:13
throw 375:7
tie 134:20
tied 289:16,17
tightly 175:14
195:17
time 8:5 10:11
10:11 12:5,21
23:7 26:7 33:19
35:24 36:4
60:12 61:10,14
61:19,23 62:2,9
71:11 84:8,10
84:10,11,21
87:22 88:22
89:6,11,17 90:2
90:16 92:21
93:14 98:10
106:3,21,23
109:24 113:17
113:18 126:14
127:16 134:24
137:5,6 138:2,3
154:8,16,16,19
158:23 160:3,9
161:4 164:21
167:16 169:13
178:2,8,10
181:9,17
190:23 197:5,9
197:10 198:6,7
198:8,10,10,12
198:17,23
199:5,6 201:17
204:3 205:14
205:15,18,22
206:4,7,9
207:21,24
208:6,16
209:14,18
210:20 211:3
213:11,15,18
213:24 214:13
215:8 218:20
224:3 225:2,15
227:16 229:4
229:24 230:6
235:16,16,19
238:19 241:23
248:2 255:19
256:13 275:2
276:8 278:12
287:24 288:4,5
290:12 294:13
296:3 302:3
303:6 305:9
308:10 317:10
318:22 319:3
324:2,2,8,15
325:10,16
326:17 336:24
342:5,6,21
343:1 355:15
357:11 364:16
383:24 384:3
386:4 395:4
396:7,9,13
402:6
timekeeping
199:1
times 12:7,10
13:4,10 78:16
176:4 188:11
210:6 221:22
291:11 373:19
tinnitus 362:4
tired 147:14
170:15 214:20
tiredness
190:22
titled 310:8
361:15
titles 403:13
today 8:11 9:1
10:21,24 13:14
15:6 52:8,11,16
53:1,9,10 59:20
60:18 65:18
68:7 112:6
159:16 191:16
207:2 257:18
257:21 258:1,6
270:24 296:3
297:3 332:23
363:22 396:9
396:14,15
today's 8:4 26:9
27:22 186:18
405:18
together 175:15
184:23 195:18
211:8 289:16
toileting 205:24
told 312:18
took 132:20
207:8,14,18
208:1,2 269:12
313:7 338:20
339:2 350:7
352:20 353:6
tool 159:6
170:22 215:2
216:23 296:20
350:10,16,19
351:3 405:10
top 21:21 60:7
60:13 76:19,24
80:9 145:3
150:7,13
156:10 169:24
189:1 192:2,17
193:1,7,14
200:12 202:1
220:5 251:18
256:22 259:6
278:14 281:24
284:7 298:13
304:15 338:16
342:11 362:23

388:17
topic 101:23 147:19 159:5
topics 99:18,19 99:22 137:19 143:3 232:2 240:4 243:19
tosic 28:12 63:12 86:10 88:18 111:14 223:4,16 224:11
total 49:14 51:4 62:14,15 221:18 399:14
totaled 13:5,11 266:7
totality 52:18 227:20
touched 128:20
towards 95:12 139:3 268:3
track 36:24 37:1,18,21 53:17 156:2,7 198:8,10,16 208:7 209:18
tractor 93:3
traditional 97:15
tragic 166:12
trailer 93:3
trained 126:23
training 232:13 232:20
transcript 5:22 6:6,8 311:16 344:14 355:3 407:8,22 408:16,17
transcription 410:5
transcripts 251:1
transferable 386:2,6
transfers 157:21 231:12
transient 238:10
transition 324:15 326:20
transplant 254:15
transportation 183:23 243:20
trash 271:9
travel 333:14 335:16
traveled 333:24
traveling 331:20 332:4 332:11 335:10
treat 234:24 235:1,4,7 371:19
treated 260:12
treating 33:9 334:10 380:20 380:23,24
treatment 83:16 144:4 146:24 151:12 151:23 160:21 167:13 190:5 191:19 213:14 215:3 245:16 259:15 271:8 330:17 348:9 371:23 398:4,7 399:10 400:15 400:16 401:9 402:7,8 405:8
treatments 143:21 145:8,9 147:12 159:20 160:8 167:17 168:5 170:4,16 180:23 190:22 191:20 245:18 339:12 402:11
tremors 402:22
trend 262:21
trends 262:24
trial 37:9 53:2 61:10,15,19,21 62:9 70:24 71:11 169:21 170:11 179:20 190:7 222:20
327:9 400:3
trials 12:20 71:3
trier 81:14 104:20 105:3 116:7 149:21 179:10 214:11 216:4 221:14 222:18 223:11 223:13,21 227:1 260:3 296:4,8 327:7,7 349:21 350:11 366:14 373:14 374:3 375:8 376:20 398:22 400:1,12,17 402:15
trigger 151:24 159:24 167:6
triggers 251:7
trite 94:6
trouble 215:18
truck 320:18,21 368:24
true 22:10 25:18 38:13,17 38:21 42:20,21 51:12 57:18 66:11 75:22 81:6 85:21 90:1 100:20 101:20 102:12,17,23 104:19 105:2

109:8,19 114:13 116:15 126:15 130:23 131:4,23 137:2 149:2,19 150:1 151:1 175:3 186:9 218:14 219:5 221:24 222:10 231:5 236:4,8,11,23 237:11 239:5 246:1 247:2 251:14 252:3 257:24 260:11 261:1 263:8 275:4 281:15 282:5,10 283:1 297:8 300:19 300:24 301:18 314:3 315:17 315:21 316:15 316:23 338:3 348:1,7 349:2 350:21 351:24 358:23 359:4 365:9 366:9 369:20 387:9 394:5,12 395:17,24 397:17 399:7 399:22,23 400:7 404:4

truly 404:23

truzicka 2:5

try 71:1

trying 88:15 93:1 128:9 138:12 153:11 156:16 163:8 179:2,21 206:11,17 287:22 292:12 343:2

tuesday 1:11

tukes 4:13,23 38:4 42:17 48:22,24 54:7 54:14 76:23 393:12,13,14 394:1,9,14,20

turn 90:4 118:21 200:10 220:5 248:8 285:24 312:8 344:23 355:9 356:24 357:24 358:12

turner 2:13 8:17,17

turning 97:8

turns 326:23

tv 34:1 355:15

two 13:4,18 25:16,16 26:2,2 26:3,3 31:10 59:19 60:17,19 60:22 61:1,2,24 62:1,4,10 70:20 70:23 71:7,14 75:13,17 92:24 96:9 132:8 141:12 172:21 182:7,9 195:23 200:20 201:8 209:20 219:11 220:9,22 223:17 226:23 229:17 232:2,2 237:9,9 241:10 254:12 261:7 279:8 320:18 323:7 372:24 373:15 374:24 375:4 377:24 391:20

type 151:14 166:21 167:23 169:7 220:10 245:15 270:4 299:4 361:20

types 299:23 403:11

typical 78:1 99:9,16 108:9 179:17

typically 30:20 61:9 68:6 70:20 70:21 78:15 93:3 95:24 97:22 107:3,19 144:2 145:18 147:5,8 173:7 179:6 195:24 196:15 201:6 231:2 232:21 233:5 266:1,3 267:18 270:7 403:16

u

u 252:13

u.s. 2:12 9:15 98:2 107:22 108:24 114:2 114:23 122:14 127:19,21 304:4 307:5 314:6 315:15 398:17

uber 175:6 195:20

uh 103:23 287:20 289:8

ultimate 72:19 81:15 96:17 159:2

ultimately 66:24 67:7,24 81:5 95:19 176:21 253:23 374:2,11

um 358:5

unable 196:18 219:2 225:4 257:7 281:22 283:19 328:5

335:23 341:14 341:21 342:9 348:4 357:17 366:4 394:9 395:22
unadjusted 122:13
uncertainties 120:13
uncertainty 292:12
under 11:3 12:22 54:18 93:24 103:9 104:4 106:23 119:15 122:18 142:6 201:8 216:3 220:8 238:4 253:17 253:19 284:23 286:6 310:7 320:4 332:9 342:20 363:4 372:18 388:13 407:23
undercompen... 110:15
undergo 318:13
underlies 158:11
underlying 19:7 79:13 350:3 351:7 367:17
understand 9:16 10:15,23 11:2 34:14 70:10 71:6 77:7 77:8 97:21 101:21 109:3 153:11 156:13 156:16 163:9 164:15 168:24 179:21,22 192:8 206:12 206:18 212:20 226:3 229:5 253:2 256:11 286:19 292:13 294:15 297:15 300:11 304:3 318:21 323:6,8 335:13 336:9 339:7 343:2 345:19 357:20 358:19 362:1 362:11 366:22 368:14 382:14 403:6
understanding 15:2 23:19 187:17 249:5 249:17 257:21 263:18 293:9 308:1,7 310:16 310:20 319:1,5 319:6 321:1 380:8,15 385:7 403:18
understood 10:19 18:4 53:11 62:12,12 98:1 107:10 132:18 136:13 138:17 149:14 185:14 209:19 221:6 234:2 264:22 265:18 275:16 289:1 324:9 336:9 343:6 391:8 393:11
undoubtedly 10:16
unduly 20:17 122:17
unemployed 294:12
unemployment 294:10,22
unfortunate 144:6 167:9
unfortunately 97:4 139:7 181:4 210:11 221:16 338:11 368:7 402:19 403:4
unique 176:8
united 1:1 8:18 29:22 42:3 63:3 85:15 102:20 103:2 107:3 108:1 111:24 112:1 117:9 131:14 246:24
universe 53:9 62:22 140:11
university 95:1
unloading 93:4
unquote 17:23
unreasonable 111:9 112:9 114:11
unrelated 120:8 321:3 364:18 365:22 366:5 367:2
unreliable 112:9 115:4 120:3,23 123:8 125:9 133:22 209:15 224:21 239:12,21
untimely 265:9 266:14
unwell 161:20 162:11
update 61:13 62:7 104:7
updated 29:19 60:16,21,24 61:12 90:8,13 90:16,21 343:5
updates 61:7,22

updating 53:4 59:18 61:4
upjohn 139:23 139:24 140:3 284:24 285:19 285:20 286:7 286:20,22 287:1,14 289:4 289:22 290:22 293:15,16,23
upkeep 173:7 173:12,15 176:3
upstairs 170:18
usdoj.gov 2:15 2:16
use 20:20 24:8 62:3 78:15,17 100:12 105:21 110:18 111:23 112:2,21 113:11,13,18 113:24 116:5 123:24 125:22 130:1 134:16 136:22 137:3 139:2 143:8 146:10 147:7 148:4 149:11 157:1,3 158:24 178:1,2,8,10 179:4 184:23 186:3 197:5 198:7,22 204:3 205:18,18,22 206:10,12,18 207:21,21 208:23 209:13 215:8 216:10 221:1 225:15 227:15,16 228:11 231:10 231:14,15 232:15 233:18 234:15 241:10 253:14 274:24 290:2,4,5 300:20 325:16 326:17 342:21 343:1 377:6 392:14 400:5 404:1,17,22 405:9
used 19:2 81:8 135:16 143:24 169:13 174:6 180:24 183:16 185:12 194:12 194:19 196:22 213:9 214:21 215:20 216:11 220:24 224:4 227:11 232:23 268:22 271:3 326:6 328:1 374:16 391:24 392:8,13 393:5 404:5 408:18
users 87:17 89:14
uses 392:23
using 85:12,17 86:10,11,24 88:6 109:15,16 110:19 112:10 115:8,11,12 116:4 143:20 148:18 165:21 169:23 178:10 182:7 227:15 238:22 241:4 242:5 252:24 254:4,7 265:16 289:13,18,23 292:14 296:10 323:9 326:16 336:10 343:8 379:4 392:21 399:21 405:6
usually 77:20 252:15 380:3
utilize 203:9 219:20 229:23
utilized 230:5 262:11 305:8 337:17 347:17 381:10,10

v

v 277:9 284:23
va 283:8,14,22 284:2,3
vacation 71:1
vacuum 140:22
valuation 99:16 155:15
value 25:2 50:14,20 59:18 60:3,11 86:2 88:4 89:12,18 99:14 102:9 110:22,23,24 115:14 128:1 135:8 150:15 152:3 153:22 154:7 172:21 174:3 182:6,13 186:5 188:14 217:7 219:10 240:12,14,16 245:6 246:17 251:21 286:2 287:18 289:13 300:21 317:23 318:5,8 322:16 324:14 340:21 341:2 342:13 369:3,7 370:23 371:3 381:23 382:18 391:19
valued 280:8 322:8 337:5,10 347:5,10 352:24 359:15 369:10

values 104:21 171:22 240:15 247:4 372:4
valuing 84:10 275:6
vanslyke 2:7 8:21,21 247:10 405:20
variability 71:3 114:15 115:3 117:10 119:6 120:20 124:1 242:3
variables 25:6 239:11
variance 175:18
variances 176:14,17
various 14:22 53:12 63:11 91:2 167:16 177:5 217:21 232:1,1 280:22 396:18 397:2 397:21 399:9 402:8
vary 167:11 231:8,23 399:8
varying 399:9
vba 119:21 120:10,13 122:8 123:20 124:9
vehicle 200:18
verbal 73:20
verbiage 190:24
verify 255:6 306:23 309:9 309:17,23 353:10
veritext 8:4
versa 120:12
version 29:10 29:11,15 90:21 91:10,18 312:9
versions 13:18 29:12
versus 62:10 78:22 163:13 180:17 232:9 232:15 404:18
vesting 263:22
vetted 204:1 205:1
vice 120:12
video 8:7
videographer 8:1,3,24 18:5,9 18:15 26:22 27:10,15 84:17 84:23 142:17 142:22 181:13 181:19 247:23 248:4 317:6,12 383:21 384:2 405:17
videotaped 1:14 3:14 16:3 16:10
videotapes 22:9
view 58:11 195:10,11
viii 310:8
virtually 84:9
visits 167:18,18
visualization 26:1
vital 107:22 109:1 114:3,23
vivian 272:11
vocational 42:6 42:11 300:10 386:7,8
voluntary 388:20

w

w 9:12
wacky 210:5
wage 39:18 136:20 148:10 148:17,18 157:16 171:10 175:14,17 177:4,18 184:11,24 185:13 186:8 187:11 195:3,7 202:11,23 203:4 211:9,19 228:13 232:12 237:10 274:20 275:1 280:22 281:4,8,12 329:3 336:11 337:18 347:18 369:8 382:19
wages 79:21 147:21 150:17 154:18 155:4,4 174:15 195:17 196:4 202:16 228:17 229:3 234:19 235:3 235:15 237:3,5 241:21 242:14 263:4 275:15 280:13 281:2 281:14 289:15 289:17
waiving 21:1
walk 208:7 229:8 333:1 355:24
walked 208:17 332:12
walks 355:16 355:17
wallace 102:2
want 84:14 90:3 105:4 134:18 139:5 143:2 181:8,11 182:4 221:15 227:3 245:1

247:11 248:7 253:1 260:2 294:23 311:13 336:17 386:10 389:12
wanted 96:11 139:9 141:7,9 142:3 149:12 174:11 221:20 308:1,8 374:20 377:23 396:14
warm 247:14 247:17
wash 190:2
washing 189:9 189:21,22 190:6 207:12
washington 1:16 2:14 90:22
watch 26:21 355:15,20
water 1:5 8:10 9:17 19:23 33:23 34:11 36:3 88:22
way 71:2 111:13 129:15 129:16 153:20 195:11 205:3 212:22 214:19 218:24 223:18 263:2 273:3 278:10 348:18 362:24 381:6,7
wayne 5:23 311:17
ways 108:23 110:19
we've 86:3 87:1 87:20,23 89:6 111:17 135:20 157:9 198:2 261:6 321:6 323:21 331:6 344:10 354:17 370:17 373:18 391:21
wear 176:3
weather 355:18
website 264:12 299:11
weed 345:13
weeds 345:14
week 12:23,24 81:17,20 158:10,14 159:7 171:21 174:2 176:21 178:5 179:17 180:10,24 181:2 182:10 199:15 201:7 203:13,17,21 203:23 204:20 208:3,21 209:8 209:22 210:6 210:18 212:2,7 213:3,5,20 215:19,21 220:22 221:18 223:22 224:9 227:13,17 255:4 276:6 296:3,7,12 325:19,22 326:4 327:2 330:3 331:20 332:4 343:8,11 349:21 350:2 350:10,11,13 350:14,15 351:2,12 398:20 399:2 400:11 405:12
weekly 182:21 219:16 222:17 322:23 323:3
weeks 60:19 212:2
weigh 215:24
weight 223:24 224:1,1 260:1
weitz 2:7
weitzlaw.com 2:10
welch 4:15 5:5 38:5 49:6,8 55:13,19 394:24,24 395:13,21
welch's 395:6
went 12:15 74:4 94:17 95:19 161:15 163:9 170:5 208:11 227:9 269:15 299:10 315:14
west 2:8
wheel 86:14
whimsical 113:1
white 131:17
wide 175:18
widower 302:6 302:8,10
wife 270:9 272:11 303:10 344:2 355:22 356:3
wife's 356:16 356:23
william 6:8 354:18 355:4
windfall 122:20
window 293:24
winter 33:15,16 93:8 175:10 208:8,9
withdraw 206:16 259:16 294:21 326:3
withdrew 365:2 366:7

withheld 15:16 15:20 120:10
witness 3:2 7:4 9:2 17:19 18:7 18:13,18 26:24 27:8 34:16 39:8 41:14,18 45:7 54:18 58:5 66:21 71:12 73:7,12 82:20 111:12 112:21 115:7 118:4 121:1,4,24 123:5,17 124:5 124:16 125:11 126:1 133:11 133:24 146:2 152:15,21 153:17 156:9 159:15 163:1 164:2 165:3,18 168:23 171:14 188:4 191:7 192:24 194:8 194:18,22 195:10 196:21 212:17 215:10 215:16,20 216:1 219:5 228:21 230:19 233:13,21 234:9 237:18 239:15 247:13 247:19 253:10 256:3,21 258:5 259:5 263:8 273:7,14 277:20 279:6 279:24 291:18 292:6 293:5 294:8 302:14 305:3,12 306:11 307:12 307:24 308:16 309:13,20 310:4 315:3 316:4 317:5 334:14 335:5 336:2 338:10 346:1,10,18 351:24 356:19 357:11 363:11 364:24 365:13 366:1 367:9 368:19 370:6 370:16 377:9 380:13 383:7 383:15 394:5 395:17 396:3 396:10 398:16 403:3 408:1
witnesses 3:16 3:18 35:9,15 36:9,14 70:23 223:15
woman 214:23 276:7,22
word 252:11,14 252:23 277:13
words 82:11 127:7 128:11 129:12 173:4
work 15:17 20:22 34:10 66:2 69:15,20 93:6,19 94:12 97:2 136:17,22 137:3,8,13,17 137:18,20,22 137:24 138:14 138:20,22 139:8,9,14,15 140:1,4,6,7,18 141:11,11,20 142:3,4,6 154:16,24 155:10 156:18 205:4,16 236:3 236:10,16,18 236:22 238:15 242:13 257:8 258:13,18 283:19 284:4 289:4 290:17 291:15 292:15 293:19,21 294:5,16,19 304:24,24 305:3 307:5,15 315:7,14 324:2 324:6 326:18 326:19 334:21 335:16 358:5,6 358:10 361:18 366:4 373:1,17 375:1,16 376:5 376:9,11 377:2 377:7,15,23 391:4,16 401:17 405:10
worked 74:3 139:22 249:2 262:3 267:12 267:13 278:6 287:9 288:13 293:11 304:4 308:13 342:10
worker 88:23
workers 113:13 113:14,15 187:13,15 294:3
workforce 294:17 319:3
working 39:16 69:11 138:15 138:16 139:23 179:17 205:24 210:3 213:1 214:6,22 220:10 221:8 221:16 226:21 276:6 277:11 278:12,13 286:20,22

290:17,21
291:15 292:3
296:12 297:16
307:20 320:20
325:17 327:4
331:19 332:3
335:10 336:4
350:1 351:10
358:8 374:21
375:23 399:14
405:2
worklife 286:3
372:21
works 328:21
331:21
world 140:12
244:23 327:1,6
378:7
worn 177:21
worse 402:24
403:6 405:9
worth 284:14
288:17,22
would've
186:16 345:12
writing 99:17
written 72:12
125:5 167:4
wrong 74:15
252:24
wrongful 99:11
99:12 244:8
wrote 124:19
169:13 285:13
384:24

x

x 3:1,6 147:10
225:17

y

yeah 27:4 63:10
75:13 78:24
110:18 111:3
116:21 132:7
132:10 148:6
152:8 156:15
156:21 169:2
184:4 186:2
206:24 210:14
218:21 225:8
235:9 237:24
247:13,15
264:13 358:11
383:19 402:9
year 60:1 86:15
87:10,10 88:10
127:20,20
148:23 158:14
168:12 169:15
171:21 197:7
205:21 212:3
236:2 238:17
238:17 240:18
242:15 246:10
248:20 249:10
254:16 257:8
258:11 263:24
267:7,8,21
284:20 285:4
285:11,13,16
286:9,12,17,20
286:23 287:10
287:14 288:14
288:19,20
289:23 290:9
290:22 294:4
312:15 318:7
322:11 326:7
330:9 336:12
337:13 373:24
376:24 377:1,6
378:1,15 392:8
392:16,17,21
393:4,6,8,10
402:14,14
year's 288:17
288:21
years 13:4 34:5
88:10 94:10,10
96:9 99:5 100:3
112:7 113:7,8
138:1 139:17
141:12 142:3,6
170:21 175:21
186:4 198:2,3,5
210:4 213:21
215:3,4 221:5
221:16 238:14
242:1 249:20
254:12 262:3
263:24 264:1,5
264:7 265:1,4,4
265:6,10,15,15
265:22 266:4
267:14 268:9
268:10,13
271:13 275:23
284:1 290:23
291:16 292:4
292:16 293:12
298:7 308:6,10
308:14 310:2
321:23 322:11
336:23 337:3
374:10,18,19
374:22 375:9
375:24 377:4
377:22,24
384:13 385:21
393:7,9 402:16
402:18 403:7
yesterday
32:13
yield 391:22
392:7,14
young 93:23
141:8 221:17
younger 375:11
youngest
204:16
yount 28:12
29:8 63:12
86:10 88:17
111:13 223:5
290:4 294:10

youtube 355:20
355:21
yup 264:14
266:13 289:11
295:1 331:17

z

zero 208:15
258:3,15,23
316:9 350:8
zoom 2:20

Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate. The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

DISCLAIMER: THE FOREGOING FEDERAL PROCEDURE RULES ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY. THE ABOVE RULES ARE CURRENT AS OF APRIL 1, 2019. PLEASE REFER TO THE APPLICABLE FEDERAL RULES OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.

VERITEXT LEGAL SOLUTIONS

COMPANY CERTIFICATE AND DISCLOSURE STATEMENT

Veritext Legal Solutions represents that the foregoing transcript is a true, correct and complete transcript of the colloquies, questions and answers as submitted by the court reporter. Veritext Legal Solutions further represents that the attached exhibits, if any, are true, correct and complete documents as submitted by the court reporter and/or attorneys in relation to this deposition and that the documents were processed in accordance with our litigation support and production standards.

Veritext Legal Solutions is committed to maintaining the confidentiality of client and witness information, in accordance with the regulations promulgated under the Health Insurance Portability and Accountability Act (HIPAA), as amended with respect to protected health information and the Gramm-Leach-Bliley Act, as amended, with respect to Personally Identifiable Information (PII). Physical transcripts and exhibits are managed under strict facility and personnel access controls. Electronic files of documents are stored in encrypted form and are transmitted in an encrypted

fashion to authenticated parties who are permitted to access the material. Our data is hosted in a Tier 4 SSAE 16 certified facility.

Veritext Legal Solutions complies with all federal and State regulations with respect to the provision of court reporting services, and maintains its neutrality and independence regardless of relationship or the financial outcome of any litigation. Veritext requires adherence to the foregoing professional and ethical standards from all of its subcontractors in their independent contractor agreements.

Inquiries about Veritext Legal Solutions' confidentiality and security policies and practices should be directed to Veritext's Client Services Associates indicated on the cover of this document or at www.veritext.com.

Exhibit 787

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF NORTH CAROLINA
SOUTHERN DIVISION - NO. 7:23-cv-897

- -

IN RE:
Camp Lejeune Water Litigation
This Document Relates To :
ALL CASES

- -

TRANSCRIPT of the stenographic notes of the deposition of Dubravka K. Tosic in the above-entitled matter, as taken by and before LORRAINE B. ABATE, a Certified Shorthand Reporter and Notary Public of the State of New York, and Registered Professional Reporter, held at the offices of BRG, 810 Seventh Avenue, New York, New York, on March 5, 2026, commencing at 9:08 a.m., pursuant to Notice.

A P P E A R A N C E S:

WEITZ & LUXENBERG, ESQS.
Attorneys for the Plaintiff
3011 West Grand Boulevard, 24th Floor
Detroit, Michigan 48202
BY: BENJAMIN VANSLYKE, ESQ.
(313) 800-4165
bvanslyke@weitzlux.com
-and-
WEITZ & LUXENBERG, ESQS.
700 Broadway
New York, New York 10003
BY: GIANNA VALENTE, ESQ.
gvalente@weitzlux.com
(212) 558-5651

U.S. DEPARTMENT OF JUSTICE
Attorneys for the United States of America
1100 L Street NW, Room 4054
Washington, DC 20005
BY: WILLIAM V. KLOTZBUCHER, ESQ.
MARCUS TUBIN, ESQ.
(610)358-3291
william.v.klotzbucher@usdoj.gov
marcus.o.tubin@usdoj.gov

A P P E A R A N C E S:
(Continued)

A L S O P R E S E N T:
Danny Ortega, Videographer

APPEARANCES VIA VIDEOCONFERENCE:

BELL LEGAL GROUP
Attorneys for the Plaintiff
219 Ridge Street
Georgetown, South Carolina 29440
BY: LESLIE LaMACCHIA, ESQ.
(843)984-2476
llamacchia@belllegalgroup.com

WARD and SMITH, P.A.
127 Racine Drive
Wilmington, North Carolina
BY: JENNA F. BUTLER, ESQ.
(910)794-4829
JFB@wardandsmith.com

APPEARANCES VIA VIDEOCONFERENCE:
(Continued)

DAVIS BETHUNE JONES, ESQS.
1100 Main St., Suite 2930
Kansas City, Missouri 64105
BY: TED RUZICKA, ESQ.
(816)421-1600
truzicka@dbjlaw.net

I N D E X

WITNESS	EXAMINATION BY	PAGE
Dubravka K. Tosic		
	Mr. VanSlyke	9

E X H I B I T S

PLAINTIFFS'		PAGE
1	Plaintiffs' Notice of Deposition and Request for Production of Documents for Dubravka Tosic	12
2	United States Responses and Objections to Plaintiffs' Notice of Deposition and Request for the Production of Documents to Dubravka Tosic	13
3	Appendix B to Ms. Tosic's Reports	20
4	Appendix C to Ms. Tosic's Reports	68
5	BRG Invoices	90
6	Invoice No. 159421 dated September 11th, 2023	91

E X H I B I T S

(Continued)

PLAINTIFFS'		PAGE
7	Invoice No. 10004661 dated October 9th, 2024	93
8	Supplemental Materials Considered of Dubravka Tosic dated February 23rd, 2026	129
9	Expert Report of Dubravka Tosic, Estimated Economic Loss of Ms. Karen Marie Amsler dated December 15th, 2025	134
10	Separation Notice of Karen Amsler	139
11	Expert Report of Dubravka Tosic for Mr. Ronald Carter dated December 15, 2025	167
12	Expert Report of Dubravka Tosic for Mr. Stephen Matthew Connard dated December 15, 2025	172
13	Expert Report of Dubravka Tosic for Mr. Cometto Davis dated December 15, 2025	181

E X H I B I T S

(Continued)

PLAINTIFFS'		PAGE
14	Expert Report of Dubravka Tosic for Mr. Joseph M. GLeesing dated December 15, 2025	187
15	Expert Report of Dubravka Tosic for Mr. Bruce Hill dated December 15, 2025	192
16	Expert Report of Dubravka Tosic for Mr. Scott Keller dated December 15, 2025	208
17	Expert Report of Dubravka Tosic for Mr. Robert A. Kidd dated December 15, 2025	220
18	Excerpt from Bates No. CLJA_VBA_0000000019	232
19	Excerpt from Bates No. CLJA_VBA_0000000019	234
20	Excerpt from Bates No. CLJA_VBA_0000000019	23

* * * * * *

Tosic - March 5, 2026

THE VIDEOGRAPHER: We are now on the record. My name is Daniel Ortega. I'm the legal videographer for Golkow Litigation Services.

Today's date is March 5th, 2026, and the time is 9:08 a.m. This video deposition is being held at 810 Seventh Avenue, New York, New York, in the matter of Legeune Water Litigation. The deponent today is Dubravka Tosic.

All counsel will be noted on the stenographic record. The court reporter today is Lorraine Abate, and will now swear in the witness.

D U B R A V K A K. T O S I C,

Having been first duly sworn by a Notary Public of the State of New York, was examined and testified as follows:

MR. VANSLYKE: For appearances, this is Ben VanSlyke from Weitz & Luxenberg on behalf of the Plaintiffs Leadership Group.

MS. VALENTE: This is Gianna Valente on behalf of Weitz & Luxenberg for the Plaintiffs Leadership Group.

MR. KLOTZBUCHER: William Klotzbucher,

Tosic - March 5, 2026

U.S. Department of Justice for the defendant United States.

MR. TUBIN: Marcus Tubin, U.S. Department of Justice for defendant United States.

D U B R A V K A K. T O S I C,

Having been previously duly sworn was examined and testified as follows:

EXAMINATION BY MR. VANSLYKE:

Q. Good morning.

It's Ms. Tosic, correct?

A. Good morning. Yes.

Q. My name is Ben VanSlyke, and you just heard I'm here on behalf of the plaintiffs in the Camp Lejeune litigation.

Could you please state your date of birth.

A. [redacted], 1967.

Q. Thank you. And have you been deposed before?

A. Yes, I have.

Q. Could you give me an estimate of how many times.

A. In total?

Q. Yes.
A. I would say about 25 to 30 times.
Q. So you know the drill a little bit. I'll fast forward.
You understand that you're under oath, correct?
A. Correct.
Q. And you have to answer truthfully today?
A. Yes.
Q. Is there anything that you believe might interfere with your ability to testify truthfully today?
A. No.
Q. It's okay if you don't know every answer, but to the best of your ability, please answer the questions that I ask. Okay?
A. Sure.
Q. And if I ask you a question and you do not understand the question, please ask me and I will rephrase to clarify. Okay?
A. That sounds good.
Q. And we're going to be talking about your reports today, which I'm sure you know better than I do, so if at any point you think I'm misunderstanding

something, please feel free to correct me. Okay?

A. Okay.

Q. If at any point you need a break, please fell free to let me know. We can get water, stretch your legs, whatever.

I will ask that you please finish the question that is pending, but otherwise, we can take a break at any time. Okay?

A. Thank you.

Q. Throughout the deposition, you may hear counsel state objections to my questions. Unless they specifically instruct you not to answer a question, they will state their objection for the record and then you will proceed to answer. Okay?

A. Okay.

Q. How did you first learn that you were going to be deposed today?

A. I believe I received an e-mail that I was going to be deposed on this day.

Q. Have you received a notice of deposition?

A. Yes. I got a copy of it.

MR. VANSLYKE: I will enter the Plaintiffs' Notice of Deposition and Request for

Tosic - March 5, 2026

Production of Documents Dubravka Tosic as Exhibit 1.

(Exhibit 1, Plaintiffs' Notice of Deposition and Request for Production of Documents for Dubravka Tosic, marked for identification, as of this date.)

Q. Ms. Tosic, does this appear to be the notice of deposition that you received?

A. It looks like it is, yes.

Q. And I see that you're reviewing following pages. Are you aware that along with this notice, we requested copies of certain documents?

A. Yes.

Q. And are you aware that in response to those requests, we were provided with a set of invoices from BRG and a set of spreadsheets with your calculations?

A. Correct.

Q. Have you reviewed those invoices?

A. No.

Q. Are you aware that the government also provided a written response to our notice of deposition in the requests that it included?

A. No.

Q. At the back of that document, do you see attachment A?

A. I see Schedule A.

Q. Schedule A. Thank you.

A. Yes.

Q. Are those requests familiar to you?

A. Yes. I believe I reviewed this.

Q. And do you believe that you have produced the materials you have that are responsive to those requests?

A. I believe so.

MR. VANSLYKE: I will enter as Exhibit 2 the United States Responses and Objections to Plaintiffs' Notice of Deposition and Request for the Production of Documents to Dubravka Tosic.

(Exhibit 2, United States Responses and Objections to Plaintiffs' Notice of Deposition and Request for the Production of Documents to Dubravka Tosic, marked for identification, as of this date.)

Q. Feel free to take a moment to review, if you'd like. If I can spare you the remainder pages, my question here is do I understand correctly that you have not seen this document before?

A. That is correct.

Q. And you did not participate in the creation of this document; is that correct?

A. That's correct.

Q. Nothing further on that document. Thank you.

Other than reviewing your notice of deposition and the attached subpoena in Schedule A, did you do anything to prepare for today's deposition?

A. Yes, I did.

Q. Could you describe for me how you prepared for today's deposition.

A. Sure. I reviewed my expert reports and I met with counsel.

Q. And without telling me anything about what was discussed, can you tell me who you met with when you say I met with counsel.

MR. KLOTZBUCHER: I would also like to mark an objection here to reiterate going into the substance without what was discussed.

You may answer.

A. I met with Bill Klotzbucher and Michael Cromwell.

Q. And again, without telling me about anything about what was discussed, how many times did you meet with Bill and/or Michael in preparation for today's deposition?

A. I met twice.

Q. Twice. And how long was each meeting?

A. The first one, I believe was about an hour long, and the second one was about an hour and a half.

Q. And had you ever communicated with Bill or Michael before those meetings?

A. Yes.

Q. How many times?

A. Can you be a little more specific.

Q. We will get into the timeline a bit further; but is it fair to say that you have been in communication with the DOJ's attorneys for more than two years?

A. That's correct.

Q. And in those communications, were those all by e-mail or were some of them by phone or Zoom?

A. All by e-mail, over the phone, and through Teams or Zoom -- excuse me, Teams or Zoom.

Q. So fair to say all of the above?

A. All of the above.

Q. And approximately when was the first time that you recall speaking with DOJ attorneys for this case?

A. I believe it was in early 2023.

Q. In preparation for today's deposition, did you speak with any teammates or supervisors to help you prepare?

A. Yes.

Q. Could you identify who those people were.

A. I spoke with Robin Cantor and Shireen Meer.

Q. In preparation for today's deposition, did you speak with an individual named Dr. Henry Miller?

A. No, I did not.

Q. And in preparation for today's deposition, did you speak with an individual named Gregory Russo?

A. No, I did not.

Q. Do you know who both of those are?

A. Yes, I do.

Q. And when you spoke with Robin and

Shireen, what were the topics?

A. It was a very quick phone call, just about the timing of my deposition.

Q. Is it fair to say that it was more about logistics than substance?

A. Correct.

Q. Other than those two co-workers and counsel, have you spoken with anyone else to prepare for today's deposition?

A. No.

Q. Are you aware that we have deposed Dr. Miller in this litigation?

A. I'm aware that he was going to have a deposition. I don't know whether it already happened or not.

Q. Is the same true for Mr. Russo?

A. Correct.

Q. Is it safe to assume you have not spoken to either of them about their depositions?

A. Correct.

Q. Have you reviewed any other documents to prepare for today's deposition?

A. I reviewed a document online about the Federal Employee Retirement Systems' pension plan.

Q. Do you recall the title of that document?

A. It's the FERS Summary Plan Description.

Q. Are there different versions of that document based on the year?

A. I read whatever is online.

Q. Do you recall what website that was on?

A. No, I don't. I believe it was a website from the federal government. Maybe opm.gov.

Q. Are you aware that we received a Supplemental Materials Considered List on February 23rd, 2026?

A. Yes.

Q. Have any additional materials been supplied to you since that Supplemental Materials Considered List was produced?

A. No --

Q. So --

A. -- not that I'm aware of.

Q. Thank you.

Is there anything else that you've done to prepare for today's deposition?

A. I think that's about it.

Q. Okay. Can you tell me where you live

and work.

A. I live in New Jersey, and I work in New Jersey.

Q. So this is not your typical office, correct?

A. I come here once in a while, but I am aligned with the New Jersey office.

Q. It sounds like you have a preference.

A. It's an easier commute for me.

Q. And can you tell me the company that you work for.

A. Yes. I work for BRG.

Q. And just for the record, what does BRG stand for?

A. It stands for Berkeley Research Group.

Q. Throughout today's deposition, are we in agreement that BRG and Berkeley Research Group are the same thing?

A. Yes.

Q. When you produced your reports, they contained a copy of your CV as Appendix B and your list of recent testimony as Appendix C, correct?

A. Correct.

MR. VANSLYKE: I will enter as Exhibit 3

Tosic - March 5, 2026

Appendix B to Ms. Tosic's reports.

(Exhibit 3, Appendix B to Ms. Tosic's Reports, marked for identification, as of this date.)

Q. Ms. Tosic, does this appear to be the CV that you produced with your reports?

A. It does.

Q. And to the best of your knowledge, is this CV up to date?

A. Yes. The only thing that is -- that needs updating is that under Presentations, the first entry says Upcoming Panelist for Session, and that session already happened. So that's -- it's just the wording that needs to change. Other than that, everything else is the same.

Q. So remove the word upcoming?

A. That's right.

Q. Am I correct that you have not held any teaching positions, presented any lectures, published any articles, or held any positions that are not listed here?

A. Correct.

MR. KLOTZBUCHER: Objection to form.

You may answer. Sorry.

A. Correct.

Q. Thank you.

So I'll just briefly walk through this with you.

I see under Education, you have a BA in economics from the University of Maryland.

A. Correct.

Q. Do you recall what year you completed that degree?

A. Yes.

Q. Can you tell me.

A. 1989.

Q. And I see an MA in economics from Florida State University.

A. Correct.

Q. And what year was that completed?

A. 1991.

Q. And I see a Ph.D. in economics.

Does the parentheses mean a specialty in labor?

A. Correct.

Q. And that was also from Florida State University?

A. Yes.

Q. And what year was that completed?

A. '97.

Q. So looking under your Previous Positions, if I start with the earliest one listed, I see that you were a research assistant at Florida State University from 1989 to 1991.

A. Correct.

Q. And would you have been a student at that time?

A. Yes.

Q. And then I see in 1984, you were an intern/consultant at the World Bank.

A. Correct.

Q. Could you describe for me the work that you were doing in that role.

A. I was doing research and analysis in the department for Central and Eastern Europe, and the research involved reviews of the economies of several countries in Central and Eastern Europe, their labor markets, their pension -- their pensions, and culminating in some written materials, reports.

Q. Were those reports published?

A. Yes, they were.

Q. Were they published under your name or

under the World Bank's name?

A. They were published under the World Bank's name.

Q. And I'll briefly go back to the research assistant position.

Could you describe what your role was there.

A. Sure. I did -- worked on a number of research projects for professors in my department, and I also taught certain classes when professors would ask me to do that. I proctored their exams and I supported professors in, you know, whatever -- whatever they needed from a research assistant.

Q. Am I correct that it sounds like you were not focused on one specific research project?

A. Correct.

Q. Moving forward to the research associate at ERS Group from 1991 to 1996, could you describe what your role was there.

A. Sure. I worked as a research associate at ERS Group focusing on supporting economists who were working on -- as consulting or testifying experts in employment discrimination cases and personal injury wrongful death cases and in

commercial litigation.

Q. Would you say that that role is when you began performing work similar to what you do today?

A. Yes.

Q. And then I see in 1997 to 2001, you were a senior associate at PricewaterhouseCoopers, correct?

A. Correct.

Q. And could you describe that role.

A. Sure. I again worked in the disputes and litigation practice of what was then Pricewaterhouse, and then it became PricewaterhouseCoopers, also supporting economists and other -- economists and financial experts as they were hired to be either consulting or testifying experts. And that work also was more or less focused in the area of labor and employment.

Q. And I see in 2001, you appeared to have received a promotion to manager; and in 2005, a promotion to director, correct?

A. Correct.

Q. Were those performing similar roles with increasing responsibility?

A. I would say so. There were some other

roles that I played in -- as a director.

Q. Could you describe any new roles that you received at the manager or director level.

A. That is around the time when I became a manager. I started authoring my own expert reports and serving as a consulting or testifying expert.

And as a director, I also worked on a number of consulting projects that were outside of the area of labor and employment and involved various international organizations, such as the United Nations.

Q. If the topics were not employment, could you summarize what the topics would be.

A. The topics were mostly in the area of risk; risk management, risk assessments, risk management.

Q. Was there a particular category of risk involved?

A. No. It was all kinds of risk.

Q. And then 2010 to 2015, I see you returned to ERS Group as a principal, correct?

A. Correct.

Q. Could you describe any changes in the roles you were doing.

A. I continued doing my work as a labor economist, working on consulting projects and serving as a consulting or testifying expert in litigation matters.

Q. So I believe you said that the manager role at PricewaterhouseCoopers is when you first began authoring your own reports, correct?

A. Correct.

Q. Do you recall in what role you first began testifying?

A. I'm sorry, can you -- can you rephrase your question.

Q. Do you recall the first time that you ever provided deposition or trial testimony in litigation?

A. I don't recall right now.

Q. Do you recall which role you would have been in at that time?

A. I'm sorry, can you rephrase that. I'm not understanding what you mean by role.

Q. I see the different positions listed here under Previous Positions. By role, I'm referring to position.

So do you recall which position you

would have been in when you first began providing testimony?

A. I don't remember exactly when I first testified as an expert. So I don't know what role I was in, whether I was a manager or a director.

Q. Is it your belief that it would have been one of those two positions, manager or director, at PricewaterhouseCoopers?

A. Yes.

Q. And I see in December 2015, you transitioned to your current role as a director at BRG, correct?

A. Correct.

Q. Were there any changes in your responsibilities upon that transition?

A. The only change was that I came to a firm that is a lot larger than ERS Group, and therefore, had responsibility for working with, you know, a wider group of individuals.

Q. And when I look at the next page under Experience, I see Consulting.

Do I understand correctly that all of your consulting was performed within the employment positions that we just discussed?

A. Correct.

Q. So you do not engage in independent consulting outside of those positions?

A. No, I do not.

Q. And I see in the first bullet that says Economic and statistical analyses performed in connection with matters involving allegations of employment discrimination with respect to various employer actions, correct?

A. Correct.

Q. I know your Ph.D. had a focus in labor. Would you say that the majority of your still -- your work still relates to labor and employment?

A. That is correct.

Q. And the second bullet, it says Extensive experience in the calculation of economic loss involving allegations of discrimination and pay, hiring, promotion, discipline and termination, personal injury, and wrongful death, correct?

A. Correct.

Q. The next sentence says Estimation of economic loss related to all forms of compensation and fringe benefits, including stock options and

stock shares, defined benefit and defined contribution pension plans, analyses of job availability by occupation, and/or industry and calculation of present value of lost household services and life care plans, correct?

A. Correct.

Q. When you calculate damages such as compensation and fringe benefits, do you believe there's any special relation to labor and employment?

A. As compensation is an element of labor and a characteristic of -- of one characteristic, that is taken into account in labor and employment.

Q. Do you believe that the principles that you apply in doing so carry over to other forms of litigation?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. I'm not understanding your question. Can you rephrase, please.

Q. So in the first bullet, it refers to various employer actions, correct?

A. Correct.

Q. Do you understand that those are lawsuits based on employment?

A. Yes.

Q. Do you believe that the principles that you applied to calculate the types of economic loss listed in the second bullet apply equally to litigation that is not employer actions?

A. Yes. So as an example, in personal injury wrongful death cases which don't involve necessarily employer actions, I mean, although sometimes they may have those allegations included; and just to be clear, personal injury and wrongful death calculation of damages in personal injury and wrongful death, I consider those part of the general labor and employment area.

So yes, the principles would, I believe, apply similarly to those types of cases as well.

Q. So in the second sentence of the second bullet, I'm skipping to the fifth line in that paragraph, and it refers to calculation of present value of lost household services and life care plans, correct?

A. Correct.

Q. Do I understand correctly that you are not preparing the life care plans themselves?

A. Correct.

Q. Could you describe for me what calculation of present value means.

A. The calculation of present value is -- involves taking a certain amount that is, for example, identified or given to me and calculating its value through a certain period of time, and then discounting it to present value to assess what the current value is in today's dollars.

Q. So do I understand that that's taking a future value and bringing it to present value?

A. Yes, typically.

Q. Does calculation of present value also include taking a past value and bringing it to present value?

A. It may.

Q. Is there another label that you think is more appropriate for that calculation?

A. No. When one takes a past value and brings it up to the present time, one can say that they're calculating the present value.

Q. I'm looking at the last paragraph after the bullets.

It says Dr. Tosic supervises and coordinates the work of economists and other research

staff, correct?

A. Correct.

Q. In this litigation, are there other economists and research staff that have supported you in your work?

A. Yes.

Q. Could you describe generally for me your role versus the role of the people that you are managing.

A. In terms of what?

Q. I will defer to you in terms of how you think those roles are different.

A. And you're talking about my work, generally speaking?

Q. Your work specific to the Camp Lejeune litigation.

A. So I -- on the work related to this Camp Lejeune litigation, I lead a group of -- of colleagues who support me in my work on the matter. So I delegate work to them. I ask them to perform certain research tasks, perform calculations. That's generally speaking.

Q. When you delegate tasks like that, how do you ensure that they're performed correctly?

A. I review them. I review their work.

Q. Does your level of review vary based on who you've delegated a task to?

A. Usually it doesn't. I mean, sometimes I may vary it, but in this particular litigation, I reviewed everybody's work.

Q. And among the people that you delegate tasks to, do any of those people also have the authority to delegate tasks?

A. They will have the authority, but I would be involved in that decision.

Q. Is it fair to say that if you delegate a task to one person and they delegate a task to another person, you would be aware of that second delegation?

A. Absolutely.

Q. Okay. After going through all of your background, is it fair to say that you're an economist?

A. Yes.

Q. And are you an economist who specializes in labor?

A. That would be correct.

Q. Would you agree that you have no

background in medicine?

A. Correct.

Q. So you have no specialized knowledge about leukemia or non-Hodgkin's lymphoma, correct?

MR. KLOTZBUCHER: Objection to form.

You any answer.

A. Correct.

Q. And in your reports, you do not express any opinions as to what care any of the plaintiffs will need in the future, correct?

A. That's correct.

Q. And you do not express any opinions about the appropriateness of care that they've received in the past?

A. That's correct.

Q. And you are not opining as to whether any particular care will be available to them through government programs in the future?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. Can you repeat the question, please.

Q. I understand that your reports include certain projections about the value of government services that will be provided to them in the future,

correct?

A. When you say government services, what exactly do you mean?

Q. I'm referring to the programs identified as potential offsets in your reports.

A. That's correct.

Q. And although you are providing an opinion as to the value, you are not providing an opinion as to whether those programs will continue to provide the same services that they do today, correct?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. That's correct.

Q. And you are not opining as to whether providers who offer care paid for by government programs would be the best care available for any of these plaintiffs, correct?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. Correct.

Q. You are not a medical diagnostician, correct?

A. That would be correct.

Q. And still today, you do not prepare life care plans, correct?

A. Correct.

Q. So in this case, you have deferred to the life care plans prepared by others, correct?

A. I'm not sure I understand your question when you say deferred.

Q. In your reports, do you rely on other experts who have prepared life care plans?

A. Yes, I do.

Q. And you are relying on the substance of those life care plans as prepared by those individuals, correct?

A. Correct. I take them as given.

Q. And your work is to value the substance of those life care plans, correct?

A. I wouldn't phrase it that way. I would say that my work involves the calculation of the present value of those life care plans, not necessarily the substance.

Q. When you calculate the present value of the life care plans, am I correct that at no point, you alter the substance of the life care plans?

A. That's correct.

Q. Have you spoken with any of the individuals who prepared life care plans in this case?

A. I have spoken to one individual that prepares life care plans. I'm not sure whether he has prepared life care plans for -- for Camp Lejeune litigation.

Q. Which individual are you referring to?

A. Michael Shahnasarian.

Q. So if you are not aware of whether Mr. Shahnasarian has prepared life care plans in the Camp Lejeune litigation, am I correct that the conversation with Mr. Shahnasarian was not specific to Camp Lejeune?

A. It was specific to Camp Lejeune.

Q. Did you rely on that conversation in conducting the present value analysis of the life care plans that you reviewed?

A. No.

MR. KLOTZBUCHER: Objection.

THE WITNESS: Sorry.

Q. And in your reports, you also did not calculate the cost of the individual medical expenses in a life care plan, correct?

A. That is correct.

Q. But you applied a present value calculation to the costs that you relied upon?

A. That is correct.

Q. Am I correct that in your reports, you do not attempt to value past medical care?

A. No, I do not.

Q. And with VBA disability benefits, the original award that a plaintiff receives, you are relying on the VBA's determinations, correct?

A. Can you clarify what you mean by original award.

Q. Do you understand that there is a defined amount that each plaintiff receives in VBA disability benefits at a point in time?

A. Correct.

Q. The actual amount received represents an award issued by the VBA, correct?

A. Correct.

Q. And that award and the value of that award is determined by the VBA, correct?

A. Correct.

Q. And you are relying on those determinations in your reports?

A. Yes.

Q. Would it be accurate to say that the expertise you provide in your reports is to analyze economic data that is provided to you?

A. That is correct, but it's -- I don't analyze only data that is provided to me.

Q. Could you clarify what else you analyze.

A. In performing my work, I may also do research to gain an understanding of a particular topic, and that understanding could then supplement, add to, the information that I receive.

Q. Would it be fair to say that that research material is to help you analyze the economic data?

A. I think that would be correct.

Q. But your statement is that at times, you still perform additional research; you are not simply analyzing based on your existing knowledge, correct?

A. That's true. Sometimes I -- I find it necessary to do additional research to understand whatever topic I'm -- is in front of me.

Q. And in this case, part of that analysis was to apply the present value to amounts provided to you?

A. Can you be more specific.

Q. Part of your analysis in this case is to take a value that you are relying upon from another source and apply a present value calculation, correct?

A. In some instances.

Q. Is it fair to say that you have quite a bit of experience analyzing wage loss?

A. That would be -- I would agree with that.

Q. Approximately how many years would you say you've been analyzing wage loss?

A. Approximately, I guess, over -- over 25 years.

Q. Could you define wage loss for me.

A. Can you tell me in which context you would like me to define this.

Q. Can you define wage loss as a category of damages in a lawsuit.

A. Yes.

Q. Will you please do so.

A. Wage loss in a litigation matter is typically defined as the difference between what we would refer to as but-for earnings, and potentially,

any mitigating earnings during a specific period of time.

Q. When you say but-for, what do you mean?

A. But for the alleged action.

So in an employment litigation matter, it would be in the context of but for the alleged wrongful termination.

In a personal injury matter, it would be projected earnings but for the alleged personal injury.

Q. And do you understand that that meaning of but for can apply to more than just wage loss?

A. It may.

Q. What types of analysis do you perform when you are analyzing wage loss?

A. It depends on what I am asked to do. Typically, the calculation of wage loss would involve projecting what an individual's wages would have been but for the allegation, projecting them either during a past time period and/or a future time period.

It would also -- if it's -- if there are wage loss projections into the future, typically, the present value calculation would also be involved.

Q. Approximately how many cases have you

provided wage loss analysis in?

A. Hundreds.

Q. Hundreds, not thousands?

A. That would be correct.

Q. Do you analyze loss of earnings and loss of earning capacity?

A. Yes.

Q. Do you view those as two different concepts?

A. Two different concepts, but very much connected.

Q. What is the difference?

A. Earning capacity is what an individual may earn, given their education, experience, occupation, industry; and earnings is typically what they actually earn.

Q. Can those two numbers be different for one individual?

A. They may be.

Q. What would cause those two numbers to be different?

A. If the person that is -- that has earnings is not working up to their earning capacity, for example. So a mother who is home with their

children but has a law degree may have an earning capacity of a lawyer, but their actual earnings may be zero because they're stay at home.

Q. And have you performed wage loss analysis in the Camp Lejeune litigation?

A. Yes.

Q. And was that a loss of earnings analysis or a loss of earning capacity analysis?

A. I mean, it would be -- it would be both for some plaintiffs. It could be the same. It could be different for other plaintiffs.

Q. What would indicate whether an analysis is loss of earnings or loss of earning capacity?

A. If the earnings that are being analyzed, projected, would be considered the same as the earning capacity of the individual, and they would be the same. If -- if the earnings may be different from the individual's earning capacity, then of course, they -- you know, their amounts would be different.

Q. In looking at a report that you have authored, what would indicate that you have analyzed loss of earning capacity?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. I think a review of an individual's past earnings and occupation and an understanding whether all of those earnings were considered in the calculations would be an indication of whether we're talking about earnings or earning capacity.

Q. Am I understanding that if your report considers all of the previous earnings, that that report is an analysis of loss of earnings?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. Can you repeat the question.

Q. Do I understand correctly that your previous statement was that if a report includes a review of all previous earnings, that it would be a loss of earnings analysis?

A. It would be a loss of earnings analysis.

Q. So is it fair to say that the review of the earnings history is what would indicate a loss of earnings analysis?

A. Yes.

Q. Is there something else that would indicate a loss of earning capacity analysis?

A. If there are, for example, other

earnings in the record that are not considered in the earnings loss analysis.

Q. Am I understanding correctly that your testimony today is that if your report analyzes all earnings in the record, it is a loss of earnings analysis, but if it only analyzes some of the earnings in the record, it is a loss of earning capacity analysis?

A. No.

Q. Could you clarify what I'm getting wrong.

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. Can you repeat the question.

Q. What about that description was incorrect?

A. Earning capacity usually considers an individual's actual earnings and earning potential. So if there is an earning potential that is not reflected in the actual earnings, then that would be just an earnings loss calculation. But if one considers also the earnings potential of the individual, in addition to actual earnings, then that analysis could be viewed as an analysis of earnings

capacity.

Q. So do I understand correctly that the indicator of a loss of earning capacity analysis would be some sort of comparison between the actual earnings and the potential earnings?

A. It may involve that.

Q. If it does not involve that, would it still be a loss of earning capacity analysis?

A. I think to do an earnings capacity loss analysis, you would need to look holistically at the individual's characteristics and their actual earnings and see if there is -- if there are earnings potentials that are not reflected in actual earnings.

Q. Have you served as an expert in both federal and state court?

A. Yes.

Q. Have you testified for both plaintiffs and defendants?

A. Yes, I have.

Q. When you have served as an expert for plaintiffs, have they been individual human plaintiffs?

A. Yes.

Q. So based on your experience, knowledge,

background, training, is your role to analyze information that you obtain from others?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. That would be part of the analysis. As I mentioned previously, part of my work is not only looking at information I receive from others, but also, conducting research myself.

Q. And we agreed that that was research you were conducting to improve your ability to analyze the data provided, correct?

A. Or improve my understanding of the data that is to be analyzed.

Q. But you do obtain the source data from someone else, correct?

MR. KLOTZBUCHER: Objection, form.

You can answer.

A. Typically, that's what research involves, yes.

Q. You are not, for example, collecting documents reflecting earning loss directly from a party, correct?

I'll rephrase that question.

You are not typically collecting the

source data directly from the party that an attorney represents, correct?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. Sometimes I may.

Q. Could you give me an example.

A. I may conduct an interview or ask for specific documents from the individual involved in the litigation matter directly.

Q. Is it fair to say that most often, you obtain data provided by others?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. I wouldn't say most. I would say, you know, many times that's what happens, that the information that I review, analyze, collect, comes from others.

Q. Is it fair to say that you did not collect information directly from any of the plaintiffs in this litigation?

A. That would be correct.

Q. So all of the data that you have analyzed in your reports under this litigation have been provided from other sources, correct?

A. From other sources, yes.

Q. Do you hold yourself out as an expert on offsets?

MR. KLOTZBUCHER: Objection, form.

You may answer.

We've also been going a little over an hour now, so if there's a good stopping point, if anybody wants a short break.

MR. KLOTZBUCHER: Sure.

MR. VANSLYKE: Sure.

Q. If you can answer that question, we can take a break.

A. To the extent what you mean by offsets is -- would, for example, involve the calculation of the present value of a particular offset, I would consider myself an expert in that, yes.

MR. VANSLYKE: Okay. Can we go off the record.

THE VIDEOGRAPHER: The time right now is 10:11 a.m. We are off the record.

(There was a recess taken.)

THE VIDEOGRAPHER: The time right now is 10:28 a.m. We are back on the record.

BY MR. VANSLYKE:

Q. Ms. Tosic, I want to back up just one moment.

Do you recall discussing you sometimes conduct research to aid in your analysis of the data?

A. Yes.

Q. In your reports for the Camp Lejeune cases, have you conducted additional research?

A. Yes, I have.

Q. And would all of that research be reflected either in your Materials Considered Lists or cited in the reports themselves?

A. That's correct.

Q. So am I correct that there is no additional research that you are relying on in your reports that is not provided either in the reports themselves or in the Materials Considered List?

A. Correct. They would either be in the footnotes of -- of my reports or in the list of materials considered.

Q. Okay. So before the break, do you recall we had just started discussing offsets?

A. Yes.

Q. And is it correct that you said you do hold yourself out as an expert on offsets in terms of

calculating the present value of offsets; is that correct?

A. If I may be a little more specific, I regard myself as an expert in the calculation of the present value, whether we're talking about offsets or -- or losses. To me, it's not necessarily relevant whether -- what the classification is.

Q. So fair to say that you hold yourself out as an expert on the calculation of present value and that that applies to offsets, among other things?

A. So I -- as part of my expert reports, I calculated the present value of, for example, VBA benefits, which were classified as offsets and potential offsets in my reports.

Q. In the context of damages analysis within litigation, what do you understand the word offset to mean?

MR. KLOTZBUCHER: Objection, foundation. You may answer.

A. In the context of litigation, offsets could mean a number of different things. It could be a -- it could be a legal classification. From an economic point of view, it -- an offset could be something that is considered in the calculation of

economic and non-economic losses.

Q. So it's something that is considered, but what is it that's being considered?

A. I'm sorry?

Q. You said that it is something that is being considered, but what is it that's being considered?

A. It could be a number of things. It could be -- it could be lost compensation, it could be lost benefits, it could be lost household services, it could be -- it could be -- offsets could be considered, you know, in terms of -- of anything that is calculated.

So in this particular case, my understanding is that the word offsets has more of a legal meaning than an economic meaning, that a person like me, an economist, would determine what it is.

Q. So in your answer, one of the examples you gave was lost household services, correct?

A. Correct.

Q. To ensure that I'm understanding correctly, were you describing that the lost household services are the offset or that the lost household services could be applied to the offset?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. It may be or it may be not. Lost household services is part of a wider concept of economic loss.

Q. Is the loss distinct from the offset?

A. It may and may not be.

Q. Could you give me an example where the loss is also the offset.

A. Well, for example, in the calculation of lost earnings, and we talked about that earlier, sometimes what is considered are mitigating earnings, and mitigating earnings are sometimes referred to as offsets.

So in the calculation of earnings losses, you know, one can consider mitigating earnings as offsets to the but-for earnings. So in that case, you have mitigating earnings playing a role as offsets, but also being part of economic loss calculations.

Q. Do I understand correctly that you've identified both the lost earnings and the mitigated earnings as two components of the economic loss analysis?

A. Yes. Both could be considered in the economic loss analysis.

Q. And do I understand correctly that you're describing the mitigated earnings as the offset to the loss earnings; is that correct?

A. No, that's not correct.

Q. Could you explain why that's incorrect.

A. The -- as I mentioned, the mitigating earnings are sometimes referred to as potential offsets to projected but-for earnings. So when you consider the but-for earnings and the mitigating earnings, what you get is the earnings loss.

Q. Understood. So the earnings loss is the output of that calculation, correct?

A. Correct.

Q. So do I understand that the mitigated earnings is the offset to the but-for earnings?

A. Correct.

Q. So you described that you hold yourself out as an expert on applying a present value calculation to offsets, correct?

A. No, that's not entirely I think what I said. What I said was that I regard myself as an expert in the calculation of the present value. In

this particular case, I calculated a present value of VBA benefits which have been classified as potential, potentially offsets.

Q. Do you hold yourself out as an expert in identifying the offsets before present value is applied?

A. Well, in, for example, the calculation of lost earnings, I have extensive experience in the determination of earnings loss, and in the calculation of earnings loss, the consideration of mitigating earnings and the projection of potential mitigating earnings, which are, as I said, sometimes regarded as, or called, offsets.

Q. So your experience working with those types of calculations provides you with expertise on identifying those offsets; is that correct?

A. No, that's not entirely correct. I'm not an expert in identifying what an offset is or isn't.

My experience in the calculation of earnings losses, as I mentioned, sometimes involves the calculation of actual and potential mitigating earnings; and so those are sometimes called offset earnings. And my expertise is specific to that.

Whether or not something is or isn't an offset, I would not regard myself as an expert in that.

Q. Have you ever been retained as an expert in offsets?

A. In which sense?

Q. Have you ever been retained as an expert for a lawsuit for the purpose of identifying offsets?

A. Can you rephrase your question, please.

Q. When you are retained as an expert, do you typically have an understanding of what the work is that you're supposed to perform?

A. At the beginning, sometimes there's a general sense, and as my work progresses, there is a better definition.

Q. Other than the Camp Lejeune litigation, has there been a matter in which you have been retained as an expert where your understanding at the beginning of retention is that your role is to identify offsets?

A. I don't think that I am ever retained as an expert to identify offsets, per se. My work sometimes involves the calculation, as in this case, the present value, of something that may or may not be considered or offset.

Q. So is it fair to say that your opinions in this case do not identify offsets that should be applied; you calculate the present value of offsets that have already been identified?

A. That's correct. My understanding is that part of the litigation in this matter involves the issue of whether -- whether the Camp Lejeune language identifies certain offsets or not. I have been asked to calculate the present value of certain items that are potentially offsets. I don't have an opinion on whether they are or are not offsets.

Q. In the example that you provided of offsets based on mitigating earnings, would you agree that the purpose is to prevent double recovery?

MR. KLOTZBUCHER: Objection.

You may answer.

A. Can you tell me what you mean by double recovery.

Q. I will -- what do you understand double recovery to mean?

A. I don't know. That's why I'm asking you.

Q. When a plaintiff presents their damages claims in a lawsuit, do you understand that they're

seeking to recover for the damages identified?

A. Yes.

Q. Do you understand that at times, those damages may have already been compensated by other means?

A. Yes.

Q. If the plaintiff receives compensation for those damages, again, in a lawsuit, do you understand that that could be referred to as double recovery?

A. They could be.

Q. Does that answer your question of what double recovery refers to?

A. It gives me an idea of what double recovery is.

Q. Do you understand that avoiding double recovery would be why an offset could be applied?

MR. KLOTZBUCHER: Objection.

You may answer.

A. No, I don't have an opinion on that.

Q. When you referred to mitigated earnings, I believe you said that sometimes that's referred to as an offset, correct?

A. Correct.

Q. Are there other ways that that's referred to?

A. Not that I'm aware of. It's mitigating earnings or offsets, earnings offsets.

Q. Would it be fair to say that removing mitigating earnings from the actual loss of earnings represents identifying what the actual loss was?

A. I would not agree with that.

Q. Why not?

A. Because typically, in the calculation of earnings loss, one calculates what the person would have earned but for the allegation, and if the individual has had earnings during the same time period, those are -- those are typically taken into account. And so the review of both the projected but-for earnings and actual and projected mitigating earnings is what is typically considered in the calculation of earnings loss.

So when you're calculating earnings losses, if an individual, if the plaintiff has actual mitigating earnings, typically, one would not ignore them.

Q. I'll try to clarify what I mean.

When you identify damages in a lawsuit,

is the goal to identify the damages that were actually caused by the subject of the lawsuit?

A. I think that's more of a legal question. Typically, economists don't get into what caused or didn't cause the alleged damages. Our role is to calculate the value of these damages, whatever, you know, the alleged cause is. We don't really get into the determination of what the alleged cause is.

Q. I understand that you are not involved in the determination of the cause, but when you focus on but-for damages, isn't that relying on a cause?

A. No, not necessarily.

Q. What is it but for if it's not but for a cause?

A. Well, we typically -- and I'll just follow with this example. We typically calculate but-for earnings, meaning but for the alleged cause, but we don't get into an analysis of whether the alleged cause is determined or not.

Q. So when you remove mitigated earnings from that calculation, is it correct that you are doing so because any mitigated earnings that are not obtained, they were not obtained for some reason other than the alleged cause?

MR. KLOTZBUCHER: Objection.

You may answer.

Q. I'll rephrase my question.

A. Yes, please.

Q. Do you understand if I distinguish between actual mitigated earnings versus potential mitigated earnings?

A. Yes. We deal with that concept.

Q. And is it your opinion that both of those would be removed from the damages calculation?

A. I'm sorry, when would they be removed?

Q. I'm referring to -- I'll rephrase my question.

Should a plaintiff be compensated for their mitigated earnings?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. Again, I'm not sure I understand your question.

Q. When you apply mitigated earnings in the way that is sometimes described as an offset, am I correct that you are removing that from the amount that a plaintiff should be compensated under an economic analysis?

A. When you say removed, do you mean that the but-for earnings are reduced by actual or potential mitigating earnings?

Q. Correct.

A. Yes.

Q. And would that apply to both actual and potential mitigated earnings?

A. It may.

Q. Under what circumstances would it not?

A. If, for example, the calculations do not involve the calculation of projected mitigating earnings; if the calculations just deal with actual mitigating earnings.

Q. What would determine whether it includes one or both?

A. It could be a number of different things. It could be the estimated work life expectancy of the individual; it could be the duration of the projected losses; it could be the -- the actual current earning capacity of the individual. It could be a number of different things.

Q. Do I understand correctly that the methodology you've applied to quantifying offsets in

these cases is not to identify that the offsets should be applied, but to simply value offsets that may be applied?

A. I believe that's correct. I don't have an opinion on whether the offsets should or should not be applied. I was asked to calculate their value in case they're applied.

Q. Do you have any particular background, experience, or training related to VBA disability benefits?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. I have quite a lot of experience in the calculation of the present value of VBA benefits.

Q. Is that experience limited to the present value calculations, not calculating anything related to the benefits themselves?

A. The benefit amounts themselves are provided by the VBA, typically, and my role is typically to calculate the present value of such benefits.

Q. Do you have any background, experience, or training specific to Medicare?

MR. KLOTZBUCHER: Objection.

You may answer.

A. My experience with Medicare is just in terms of dollar amounts that I sometimes use in my calculations.

Q. Is it fair to say that you are relying on some other source to identify the appropriate dollar amounts?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. In this particular case, in my expert reports, I rely on another expert for the amounts of Medicare benefits.

Q. Is that typical for when you work on Medicare issues?

A. Sometimes there is an expert report of another expert, and sometimes the numbers come from documentation that is provided to me.

Q. So in either case, you are relying on another source for the root numbers upon which you apply your calculations, correct?

A. That's correct.

Q. Do you have any background, experience, or training specific to VA healthcare?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. In which sense, VA healthcare?

Q. What are the different senses that you understand VA healthcare to refer to?

A. When I deal with VA healthcare benefits, typically I deal with numbers, and my expertise rely -- is based on the analysis of the numbers that are provided to me, and preparing various kind of calculations.

Q. Would the same be true for Tricare?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. Yes, that would be the same.

Q. And would the same be true for TriWest?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. That's correct.

Q. Would the same be true for payments or benefits from government programs in general?

MR. KLOTZBUCHER: Objection, form.

A. Not always.

Q. What would be an example where that is not the case?

A. I have a lot of experience in

calculating, for example, the present value of Social Security retirement benefits. Those calculations involve complex formulas, and understanding how the formulas work is important to preparing accurate calculations.

Q. Would it be fair to describe that as an advanced calculation?

A. I don't know if I would call it advanced. There are a lot more advanced calculations than that. It's simply understanding the complex formulas that are involved and the different elements of the calculations.

Q. And in that case, would it still be true that you are applying calculations, the numbers related to Social Security that you are relying on from another source?

A. Can you repeat the question.

Q. In that example, would it still be the case that you are relying on the underlying Social Security numbers from another source such as the Social Security Administration, and then applying calculations upon those numbers?

A. Not always.

Q. What would be a scenario where you

obtained the original number without an outside source?

A. Sometimes I have to calculate what the Social Security benefit is, or would be, based on the -- based on data -- compensation data on personal information on the plaintiff.

The Social Security benefits data is not provided to me. I have to calculate it myself based upon formulas and various kinds of assumptions that are typically used.

Q. Would you say that you have background, experience, or training in the eligibility criteria for government benefit programs?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. No, I don't have that experience or expertise.

Q. And just to be clear, you do not have any past experience specific to the offset provision in the Camp Lejeune Justice Act prior to this litigation, correct?

A. Correct.

Q. Have you read the statute?

A. I have.

Q. What is your understanding of what the statute says about offsets?

MR. KLOTZBUCHER: Objection. Foundation and form.

You may answer.

A. If I recall, the statute lists a number of items that may be considered offsets.

Q. And is your testimony today that you have no opinion as to how the offset provisions in the Camp Lejeune Justice Act should be applied, correct?

A. That is correct.

MR. VANSLYKE: I am marking as Exhibit 4 the list Trial and Deposition Testimony in Past Four Years provided with Ms. Tosic's reports.

(Exhibit 4, Appendix C to Ms. Tosic's Reports, marked for identification, as of this date.)

Q. I should have clarified this with Exhibit 3.

So going back to Exhibit 3, your CV, am I correct that the same CV was attached to each of your reports?

A. That's correct.

Q. And do you recognize this list of trial and deposition testimony in the past four years?

A. I do.

Q. Was the same list attached to each of your reports?

A. I believe so.

Q. Do you believe that this list is up to date?

A. Yes.

Q. Looking at this list, are there any cases in which you represented the plaintiffs?

A. No.

Q. Did any of these cases involve VBA disability benefits?

A. I don't believe so.

Q. To the best of your recollection, did any of them involve VA healthcare?

A. I am not 100 percent sure, and I'm pausing here because of the three cases against the City of Chicago where one of them may have. May have.

Q. To the best of your recollection, did your work in any of these cases involve offsets?

A. Yes. Many of them did.

Q. Do you recall if they were offsets related to mitigation or offsets related to double recovery?

A. Many of these cases involved the calculation of actual or potential mitigating earnings as -- in the context of the calculation of earnings losses, as well as the calculation of mitigated fringe benefits, actual or potential, as -- you know, if you want to consider those as potential offsets as well.

I believe that one of them also involved the calculation of pension offsets. So pension benefits as a potential offset.

Q. Would those be similar in the sense that they would be a mitigation?

A. Correct.

Q. In any case where you've been retained, has your testimony ever been disallowed or stricken?

A. Yes. Once.

Q. Do you recall the subject matter of the testimony that was disallowed or stricken?

A. That was my one and only criminal case that I was retained as an expert, and that involved the calculation of the reasonableness of compensation

compared to the market for the wife of the defendant.

Q. Other than that example, has your testimony ever been limited without being disallowed or stricken?

A. No, I'm not aware of that.

Q. Do you know how DOJ found you for this case?

A. I have a general understanding.

Q. Without telling me anything that you have discussed with your attorneys, can you describe that general understanding.

A. Yes. I believe that the DOJ reached out to one of my colleagues initially, who subsequently involved me.

Q. Do you recall who that colleague was?

A. Yes.

Q. Who was it?

A. Robin Cantor.

Q. Is Robin Cantor a supervisor to you?

A. No, not necessarily.

Q. Before this case, have you ever been retained by the DOJ before?

A. I have worked on projects where BRG was retained by the DOJ.

Q. Do you distinguish between BRG being retained and you being retained individually?

A. Yes.

Q. Are you retained individually on this case?

A. No.

Q. Have you ever been a government contractor before?

A. Again, I have worked on projects where BRG was retained as a government contractor.

Q. What were the subjects of those projects?

A. Well, I'll give you an example of the September 11th Victim Compensation Fund where BRG was retained, and -- by the DOJ, and the subject of that work is assisting the special master's office in the calculation of personal injury and wrongful death claims.

Q. Am I correct that when you describe something as a project, you're referring to something other than being retained for active litigation?

A. Well, the September 11th Fund work is consulting work; it is not litigation. So in that case, that is a project, right? But there are other

matters that BRG has been retained by various Federal government agencies in litigation matters.

Q. Would you refer to that as being retained for purposes of litigation rather than for purposes of a project?

A. I mean, I refer to those as projects as well.

Q. So other than this case and the 9/11 project, have you been a government contractor before?

A. Not me personally.

Q. Am I correct that BRG was a government contractor?

A. Was and has been, and is.

Q. And you were performing work in those matters on behalf of BRG?

A. Yes.

Q. Do you believe that is not serving as a government contractor?

A. I'm not sure what the -- what the legal implications of that are. I'm an employee of BRG, and BRG works on various federal contracts.

Q. You stated that you are aware that Henry Miller and Gregory Russo are involved in this

litigation, correct?

A. Correct.

Q. And they are both BRG employees?

A. Yes.

Q. Other than knowing that he is another BRG employee, have you had interactions with Dr. Miller?

A. Can you rephrase that.

Q. Have you interacted directly with Dr. Henry Miller?

MR. KLOTZBUCHER: And you can answer that question, but I'm going to object to the substance of any conversations you might have had with Dr. Miller.

MR. VANSLYKE: Limited to this litigation, correct?

MR. KLOTZBUCHER: Correct.

A. So your question is limited to this litigation?

Q. Other than for purposes of this litigation, have you interacted directly with Dr. Henry Miller?

A. Yes, I have.

Q. For what purpose?

A. For various purposes.

Q. Were they all work related?

A. Yes.

Q. Other than for purposes of this litigation, have you interacted directly with Gregory Russo?

A. I don't believe so.

Q. Other than Dr. Miller and Mr. Russo, have you worked with any of the other experts in this case before?

A. I may have worked with one additional individual, if he is an expert in this matter, which I don't know.

Q. Is that Mr. Shahnasarian that you were referring to earlier?

A. Correct.

Q. Have you ever encountered any of plaintiffs' experts in another litigation?

A. I have.

Q. Which ones?

A. I don't -- which experts or which matters?

Q. Which experts.

A. Mr. Staller.

Q. And do you recall any matters where you encountered Mr. Staller?

A. I don't recall the exact matters.

Q. Do you recall if you were both serving in an economic role in those litigations?

A. I believe so.

Q. Do you have any opinions about Mr. Staller?

MR. KLOTZBUCHER: Objection.

A. Not really.

Q. So you said that you are not individually retained for this litigation, correct?

A. Correct.

Q. So is it fair to say that BRG was retained, and they assigned you this role?

A. Your first part is correct. BRG was retained, and I was assigned to the role of a testifying expert on it.

Q. Do you know how you were identified to fill that role?

A. Yes.

Q. How were you?

A. There was an internal discussion.

Q. Were you part of that internal

discussion?

A. Yes.

Q. Who else was part of that internal discussion?

A. Robin Cantor and Shireen Meer.

Q. And how was it decided that you would fill this role?

MR. KLOTZBUCHER: Objection.

A. It was decided through our discussion.

Q. Was there a reason that one of the other two were not selected for this role?

MR. KLOTZBUCHER: Objection. The substance is protected communication. Otherwise, you may answer.

MR. VANSLYKE: Counsel, for clarification, are either of them retained experts?

MR. KLOTZBUCHER: It's communications with staff. It's protected under the CMO.

Q. Do you recall when you were assigned to fill this role?

A. I believe it was end of 2023. Maybe December 2023.

Q. Had you performed any work related to

this litigation before you were identified as the individual who would fill this role?

A. Yes.

Q. Do you recall first, when you began working on this litigation?

A. I began working on it as soon as we were retained.

Q. And I believe earlier you testified that that was early 2023, correct?

A. Correct.

Q. When you first began working on this litigation, what did you understand your assignment to be?

A. My understanding then was that we were retained in a consulting role to perform various kinds of tasks requested of us.

Q. Was that assignment provided in writing or verbally?

A. I think mostly -- I think some verbally. Some may have come through e-mails.

Q. Are you aware that the first selection of discovery pool plaintiffs did not occur until December 5th, 2023?

A. I -- I believe I remember that.

Q. So you were working on this litigation before the discovery pool plaintiffs were selected?

A. Correct.

Q. Which would also be before the trial plaintiffs were selected on July 9th of 2024?

A. Correct.

Q. Did you understand your assignment to change after the discovery pool plaintiffs were selected?

A. Yes.

Q. And what did you understand your assignment to be at that point?

MR. KLOTZBUCHER: Objection, form.

A. At the time when the plaintiffs were selected, one of our assignments was to serve as testifying experts and the calculation of potential economic losses of the plaintiffs.

Q. Did you begin those calculations before the trial plaintiffs were selected?

A. When you say the trial plaintiffs, those are the individuals -- the 50-some individuals?

There was a larger pool before that, so I just want to make sure I'm understanding what you mean.

Q. Do you understand that there are currently 22 individuals with cases before the court?

I'll rephrase.

Do you understand that there are 22 individuals with non-stayed cases before the court?

A. No, I wasn't aware of that.

Q. It sounds like you are aware that at some point, the pool of plaintiffs with non-stayed cases was narrowed to a smaller number, correct?

A. Correct.

Q. Did you begin calculating the economic damages and potential offsets before that narrowing occurred?

A. I don't believe so.

Q. And since you began that work, has your understanding of your assignment changed?

A. When you say that work, which work are you referring to?

Q. The work when you began calculating the damages and potential offsets of the identified plaintiffs.

A. No. I think it has remained the same.

Q. And is that still what you understand your assignment to be today?

A. Yes.

Q. Were you provided with any assumptions in this case?

MR. KLOTZBUCHER: Objection, form.

A. To the extent the assumptions -- certain assumptions came from other experts, the answer is yes; but in terms of assumptions provided by someone else, no.

Q. Would you agree that the reports that you've provided to date contain the extent of the opinions that you expect to present in this case?

A. To the extent I'm provided additional information -- my reports were issued December 15th, 2025. So to the extent I'm provided additional information, I will consider it, and may, if I'm requested, to update my reports and expert opinions, I will do so.

Q. But sitting here today, you do not have an intent to express opinions that are not reflected in your report, correct?

A. I have not been asked to consider anything, no.

MR. KLOTZBUCHER: It has been about an hour, counsel. I don't know if anybody would

like a break or if you want to keep going forward.

MR. VANSLYKE: Do we want to --

THE WITNESS: Maybe we can go forward until 12?

MR. VANSLYKE: Sounds good to me.

THE WITNESS: Okay.

Q. In completing your work, have you kept any personal notes or similar?

A. No.

Q. Do you know if anyone on your team has?

A. It's BRG policy not to, so I would hope that nobody did.

Q. Do you know the purpose of that policy?

MR. KLOTZBUCHER: Objection.

You may answer.

A. No. I don't want to speculate at this point.

Q. And I think I can confirm that you have not brought any notes or materials with you today, correct?

A. Correct.

Q. So when you talk about completing additional research, I'd like to know more about what

sources you used.

Did you look at Google?

A. I may have used Google to research a particular topic.

Q. Have you used VA websites?

A. Yes.

Q. Have you used individual ratings decisions?

A. To the extent that those were provided to us by the VBA, yes.

Q. Are there any other sources that you specifically remember using?

A. Yes.

Q. Could you tell me what they are.

A. I used the Bureau of Labor Statistics' website. I used the Social Security Administration website. I used data from the Federal Reserve Bank. I think that's -- that's what I remember at this point.

Q. And in your own words, what is the scope of the opinions that you are providing in this litigation?

A. The scope of my opinions pertain to potential economic losses of each plaintiff, which

may involve earnings losses, fringe benefit losses, lost household services, and the present value of a life care plan.

Q. And how would you describe the work that you completed in order to provide those opinions?

A. I prepared economic loss calculations, and prepared an economic expert report which summarized the assumptions and methodologies that I used.

Q. So you mentioned earlier that you manage other employees that you can delegate tasks to, correct?

A. Correct.

Q. Could you describe for me what tasks you completed yourself versus what tasks you delegated to others.

A. We typically work as a close team, so there may be certain tasks that I assign to a particular individual. It could be conducting research, collecting data; and the process, once the individual performs that task, then I sit down with the individual and review the information and the data provided.

Q. Would you say that you review every

piece of data?

A. I usually do a thorough review, yes.

Q. So you would not say that you spot check?

A. No.

Q. Are there any tasks that you do not delegate?

A. I am very involved in the writing of the expert reports. There may be instances where a particular individual is asked to provide a particular piece of information. For example, deposition testimony, that is usually what I do myself.

Q. Do you ever delegate writing the narrative sections of your report?

A. Sometimes I do.

Q. Are there any tasks that you always delegate?

A. Conducting research on the Bureau of Labor Statistics' website is something that I typically delegate. I give specific instructions on what I need; and typically, that is done by, you know, an associate or research associate. And that data is then provided to me.

Q. Would the same be true for the other examples of outside research?

A. No. Sometimes I conduct the research myself. Sometimes I conduct the research myself, and then am able to delegate certain tasks related to that research to someone else. It all depends.

Q. So at this point in time, you have provided eight expert reports pertaining to eight plaintiffs in this case, correct?

A. Correct.

Q. And I understand that in approximately April of 2025, there was a previous round of reports where you provided ten reports for ten plaintiffs, correct?

A. Correct.

Q. What is your understanding of why those reports were filed again in December?

MR. KLOTZBUCHER: Objection.

You may answer.

A. If -- my understanding is that discovery was perhaps, reopened, and additional information was included in the realm of documents.

Q. Do you still stand by the methodologies applied in the initial reports?

A. I mean, the methodologies that I applied in the first reports are pretty consistent with the methodologies that I applied in the -- first reports are similar or the same as I applied in the second set of reports.

Q. Are there any that you recall being different?

A. I never conducted that analysis to conclude whether any of them were different or not.

Q. So do I understand correctly that you have not compared the reports filed in April against the reports filed in December?

A. I may have done a -- I may have gone back to the original reports as I was preparing the second set of reports. I do recall in the second set of reports, there were additional elements of potentially economic loss that Mr. Staller introduced that were not considered in the first set that, you know, I addressed in the second set.

Q. Are you aware of whether any of the staff members you delegate tasks to have compared those two sets of reports?

A. I think that -- I'm not sure whether they compared the reports, but certainly, the first

set of calculations that were performed were taken into account when we were preparing the second set of calculations.

Q. Would you say that you started from the existing calculations and reviewed them for a need to modify them?

A. I think that would be a fair statement.

Q. Would you say that you did that or your staff did that, or both?

A. Both.

Q. Were there any calculations that were identified as incorrect?

A. I do recall that I made an adjustment to the calculations of lost earnings for Mr. Connard, one of the plaintiffs.

Q. Do you remember what that modification was?

A. I believe it had to do with the personal consumption offset. I do recall that there was an adjustment made to those calculations.

Q. Do you recall why there was an adjustment made?

A. Yes. I know in the first -- I believe in the first expert report, this wasn't considered a

reduction, but an addition; so the sign was wrong.

Q. At any point during your work on this case, are you aware of AI being used in completion of any of the work?

A. No, I'm not aware of that.

Q. Does that apply to your staff as well?

A. That's correct.

Q. Are you aware of whether BRG has any AI services?

MR. KLOTZBUCHER: Objection.

You may answer.

A. What do you mean by AI services?

Q. Are you aware of whether BRG subscribes to any services that provide AI functionality?

MR. KLOTZBUCHER: Same objection.

You may answer.

A. I believe that some parts of BRG do.

Q. Does that mean that you and your team do not have access to those services?

A. I certainly don't. I -- I don't use them. I don't know whether the other team members have the access. I would have to check that.

Q. So is it fair to say that you know that you have not used AI in completion of the work

related to Camp Lejeune, but you cannot say for certain whether any of the staff members have used AI?

A. Certainly, nobody has ever indicated that to me.

Q. All right. I think I can get to a few things before noon.

Ms. Tosic, you are aware that BRG bills clients through invoices, correct?

A. Correct.

Q. And is it your understanding that DOJ has received invoices on behalf of the work that BRG has completed?

A. Yes.

Q. And I believe you testified earlier that you had not reviewed -- you had not reviewed the invoices that were produced to us, correct?

A. Correct.

MR. VANSLYKE: I will mark this as Exhibit 5.

(Exhibit 5, BRG Invoices, marked for identification, as of this date.)

Q. Ms. Tosic, I will represent to you that this is a complete set of the invoices provided to

us, with the exception of two that I will review shortly.

MR. VANSLYKE: I will mark as Exhibit 6 Invoice No. 159421 dated September 11th, 2023.

(Exhibit 6, Invoice No. 159421 dated September 11th, 2023, marked for identification, as of this date.)

Q. Ms. Tosic, the Bates stamps at the bottom of these invoices will be helpful to identify pages.

A. Okay.

Q. They are not in order. I have placed these in chronological order instead of Bates stamp order.

Will you flip through Exhibit 5 until you find an invoice dated September 11th, 2023, and please let me know when you're there.

A. Is that different from Exhibit 6?

Q. Correct. There should be one invoice dated September 11th, 2023 in Exhibit 5. It is approximately this far from the front.

A. Oh. Is it 133, Bates No. -- Bates No.?

Q. It should be Bates No. 70.

MR. KLOTZBUCHER: Page 10. It's the

10th page.

MR. VANSLYKE: Thanks.

A. September 11th, you said?

Q. Correct.

A. Okay. No, that's not the one.

No, it's not my 10th page.

MR. KLOTZBUCHER: You can always look at my exhibit.

THE WITNESS: Okay.

MR. VANSLYKE: Thank you, Counsel.

Q. Okay. Are you looking at the document with Bates No. 70 at the bottom?

A. Correct.

Q. And in the text block near the top under the word Invoice, do you see the original invoice date of September 11th, 2023?

A. Yes.

Q. And do you see the revised date of September 27th, 2023?

A. Yes.

Q. And the invoice number is 159421R?

A. Yes.

Q. And comparing that to Exhibit 6, it says Invoice No. 159421?

A. Yes.

Q. Is it your understanding that Bates page 70 represents the revised version of the invoice at Exhibit 6?

A. Yes.

MR. VANSLYKE: I will mark as Exhibit 7 an invoice dated October 9th, 2024, Invoice No. 10004661.

(Exhibit 7, Invoice No. 10004661 dated October 9th, 2024, marked for identification, as of this date.)

Q. If you can look for an invoice dated October 15th, 2024 within Exhibit 5. It is Bates page 47.

A. 147 or 47?

Q. 47.

A. 47.

Okay. I have 47 here.

Q. Okay. And do you see at the top it's dated October 15th, 2024?

A. Yes.

Q. And it says the invoice number is 10005469, correct?

A. Correct.

Q. And looking at Exhibit 7, it's dated October 29th, 20 -- I'm sorry, October 9th, 2024, correct?

A. Yes.

Q. And the invoice number is 10004661, correct?

A. Correct.

Q. Would you agree that those do not match?

A. The invoice numbers are different; the amounts are different.

Q. If you look under re Blackmer, if you look below that, do you see services rendered through September 30th, 2024?

A. Yes.

Q. Do you see that on both documents?

A. Yes.

Q. And if you look at the following page -- I'm sorry, two pages forward. I meant Bates No. 94 -- apologies. I think I'm looking at the wrong invoice. Okay. I must have marked the wrong invoice, but I will represent to you that Exhibit 7, I have excluded from any invoice tallying under the belief that it is a duplicate. Is that clear?

A. That's clear.

Q. And you understand that in some cases such as Exhibit 6, BRG does revise invoices, correct?

A. Exhibit 6? Yes.

Q. I will set Exhibit 7 aside for now.

Ms. Tosic, do you have a sense of how many hours you have billed in regards to Camp Lejeune?

A. No, I don't.

Q. If I represent that excluding Exhibit 6 and Exhibit 7, I count 918 hours .3, would you have any reason to disagree with that?

A. Is that over the period from February of 2023?

Q. Correct.

A. I mean, I don't have a reason to doubt that.

Q. If I represent to you that the total amount billed for your services is 558,767, would you have any reason to doubt that?

A. I --

MR. KLOTZBUCHER: Objection, form.

A. No.

Q. If I represent to you that the total charges contained in these invoices excluding

Exhibit 6 and Exhibit 7 is $2,545,984.55, would you have any reason to doubt that?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. No, I don't.

Q. And do I understand correctly that the difference between the total charges and the charges in your name would be the people that you've referred to as staff that assists with your work?

MR. KLOTZBUCHER: Objection, form.

A. I would think that these numbers include not only staff, but individuals that are not considered staff. So Robin Cantor, Shireen Meer are not considered staff, so their hours are probably included in that total as well.

Q. To rephrase, the difference between the total charges and your charges would be the charges attributable to other BRG members on these reports, correct?

A. Correct.

Q. If I represent to you that the total amount billed to Robin Cantor is $191,375, would you have any reason to disagree?

MR. KLOTZBUCHER: Objection, form.

A. No, I don't.

Q. And if I represent that the total for Shireen Meer is $283,032, any reason to disagree?

MR. KLOTZBUCHER: Objection, form.

A. No.

Q. Can you explain to me the difference between your role in preparing these reports and the role of Robin Cantor.

A. Robin Cantor, in preparing the expert reports, had a minimal role. She, I believe, reviewed the draft expert reports, and I think that was really the extent of it in terms of the expert reports.

Q. And how would you describe the difference between your role and the role of Shireen Meer?

A. I believe that Shireen's role was similar to -- to Dr. Cantor's role. She, I believe, reviewed several draft expert reports, and that was probably the extent of her involvement in the expert reports.

Q. What was the purpose of having Robin Cantor or Shireen Meer review the reports?

A. That is typically a process that we take

at BRG where others that have knowledge or expertise may review drafts and provide any comments or insight.

Q. And is it your understanding that the 217.4 hours billed for Robin Cantor were for reviewing those reports?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. No.

Q. What is your understanding of the other tasks that would generate those hours?

A. Well, she has an administrative role on the project. She also was involved in the project in the 2023 time period and the 2024 time period that don't necessarily have anything to do with drafting of the expert reports.

Q. And would the same be true of the 402.8 hours -- 402.8 --

MR. KLOTZBUCHER: Objection.

Q. -- attributed --

MR. KLOTZBUCHER: Sorry.

Q. Would the same be true of the 402.8 hours attributed to Shireen Meer?

MR. KLOTZBUCHER: Objection.

Tosic - March 5, 2026

You may answer.

A. I think that for Shireen, she additionally participated in various conference calls that we had with the DOJ. So those hours were reflect -- would reflect, you know, tasks like that.

Q. Are there any other staff members that you recall participating in those conference calls?

A. Yes.

Q. Who?

A. I believe Sydney Fallone occasionally participated in conference calls. Jill Fitzpatrick participated in conference calls. There may be some others also that occasionally, once in a while, would participate in conference calls.

Q. Okay.

MR. VANSLYKE: Can we go off the record.

THE VIDEOGRAPHER: The time right now is a 11:58 a.m. We are off the record.

(There was a luncheon recess taken.)

Tosic - March 5, 2026

A F T E R N O O N S E S S I O N

THE VIDEOGRAPHER: The time right now is 1:03 p.m. We're back on the record.

D U B R A V K A K. T O S I C,

Having been previously duly sworn was examined and testified further as follows:

EXAMINATION BY MR. VANSLYKE: (Continued)

Q. Ms. Tosic, we were speaking about the invoices before launch, correct?

A. Correct.

Q. And I believe you have previously identified Robin Cantor and Shireen Meer as not staff who you would delegate tasks to, correct?

A. Correct.

Q. I see Himadri Palikhe.

Do you know who Himadri is?

A. Yes.

Q. Are they someone you would consider a staff member?

A. Yes.

Q. And if I represent that they have 43.5 hours billed for a total of $25,012.50, do you have any reason to disagree?

MR. KLOTZBUCHER: Object to form.

You may answer.

A. No.

Q. Do you know who Sydney Fallone is?

A. Yes.

Q. I believe you mentioned her earlier as somebody who might sometimes participate in the Zoom calls, correct?

A. Correct.

Q. If I represent that there are 599.8 hours billed for a total of $331,980, do you have any reason to disagree?

MR. KLOTZBUCHER: Object to form.

A. No.

Q. I believe my names are cut off here, but let me find the full names.

I have a Benjamin Mulholland.

Do you know who that is?

A. Yes.

Q. I only have 10.5 hours for a total of $3,622. Do you have any reason to disagree?

MR. KLOTZBUCHER: Objection, form.

A. No.

Q. Do you know who Jill Fitzpatrick is?

A. Yes.

Q. If I represent that these invoices contain 556 hours for 300 -- $31,586.50, do you have any reason to disagree?

MR. KLOTZBUCHER: Objection, form.

A. No.

Q. Do you know who Austin Salley is?

A. Yes.

Q. And if I represent that the invoices show 573.4 hours for a total of $272,546, do you have any reason to disagree?

MR. KLOTZBUCHER: Objection, form.

A. No.

Q. I may be pronouncing this wrong.

Do Elisabeth Thies --

A. Thies.

Q. -- Thies is?

A. Yes, I do.

Q. And if I represent that the invoices contain 368.6 hours, do you have any reason to disagree?

MR. KLOTZBUCHER: Objection, form.

A. No.

Q. And if I say there is a total for Ms. Thies of $92,824, do you have any reason to

disagree?

MR. KLOTZBUCHER: Objection, form.

A. No.

Q. Do you know who Sanskar Bista is?

A. Yes.

Q. If I represent that the invoices contain 399.8 hours for a total $144,365, do you have any reason to disagree?

MR. KLOTZBUCHER: Objection.

A. No.

Q. Do you know who Joshua Hochberg is?

A. Yes.

Q. And if I represent that the invoices contain 72 hours for a total of $29,880, do you have any reason to disagree?

MR. KLOTZBUCHER: Objection.

A. No.

Q. Do you know who Hanna Scofield is?

A. Yes.

Q. If I represent that the invoices contain 272.95 hours for a total of $91,438.25, do you have any reason to disagree?

MR. KLOTZBUCHER: Objection.

A. No.

Q. Do you know who Spencer Smith is?
A. Yes.
Q. If I represent that the invoices contain four hours for a total of $1,040, do you have any reason to disagree?
MR. KLOTZBUCHER: Objection.
A. No.
Q. Do you know who Emaan Siddique is?
A. Yes.
Q. If I represent that the invoices contain 24.8 hours for a total of $10,292, do you have any reason to disagree?
MR. KLOTZBUCHER: Objection.
A. No.
Q. Do you know who Charlotte Brown is?
A. Yes.
Q. If I represent that the invoices contain 15.5 hours for a total of $4,030, do you have any reason to disagree?
MR. KLOTZBUCHER: Objection.
A. No.
Q. Do you know who Mi Young Kim is?
A. Yes.
Q. If I represent that the invoices contain

136.3 hours for a total of $81,780, do you have any reason to disagree?

MR. KLOTZBUCHER: Objection.

A. No.

Q. Do you know who Audry Sun is?

A. Yes.

Q. If I represent that the invoices contain 190.3 hours for a total of $63,750.50, do you have any reason to disagree?

MR. KLOTZBUCHER: Objection.

A. No.

Q. And last but not least, do you know who Jana Hulsey is?

A. Yes.

Q. If I represent that the invoices contain 45.9 hours for a total of $15,376.50, do you have any reason to disagree?

MR. KLOTZBUCHER: Objection.

A. No.

Q. Other than Robin Cantor and Shireen Meer, are all of the people that I have identified here people that you would consider staff?

A. Staff or senior staff, yes.

Q. How do you distinguish between staff and

senior staff?

A. You would distinguish by their title, their experience.

Q. Are there differences in the work they perform?

A. Yes.

Q. Do you delegate tasks to both staff and senior staff?

A. Yes.

Q. Other than Robin Cantor and Shireen Meer, were these staff and senior staff involved in the work on the Camp Lejeune litigation prior to the work on individual damage calculations?

A. Some of them were.

Q. Was Himadri Palikhe?

A. Yes, I believe she was.

Q. Was Sydney Fallone?

A. Yes.

Q. Was Benjamin Mulholland?

A. Possibly.

Q. Was Jill Fitzpatrick?

A. Yes.

Q. Was Austin Salley?

A. Yes.

Q. Was Elisabeth Thies?
A. I believe so.
Q. Was Sanskar Bista?
A. I'm not sure about him.
Q. Was Joshua Hochberg?
A. Yes.
Q. Was Hanna Scofield?
A. I'm not sure about her.
Q. Was Spencer Smith?
A. I'm not sure.
Q. Was Emaan Siddique?
A. I believe so.
Q. Was Charlotte Brown?
A. No.
Q. Was Mi Young Kim?
A. No.
Q. Was Audrey Sun?
A. No.
Q. Was Jana Hulsey?
A. No.
Q. So I'm going to go through these names again, and I'm going to ask what role each of them had in preparing the reports published.

Can you please describe the role in the

reports performed by Himadri Palikhe?

A. I don't believe that she had any role in preparing the expert reports.

Q. Can you please describe the role in the reports of Sydney Fallone.

A. Sydney verified certain numbers and footnotes in the draft reports.

Q. And --

A. Sorry.

Q. Go ahead.

A. She also helped me prepare the list of materials considered.

Q. Do I understand correctly that she was verifying the numbers and footnotes, but she was not somebody who placed them there?

A. That's correct.

Q. What was the role of Benjamin Mulholland in the reports?

A. I believe that he conducted research.

Q. What type of research?

A. I don't recall.

Q. What was the role of Jill Fitzpatrick?

A. Jill Fitzpatrick assisted me in developing the economic loss models. She conducted

research. She verified my calculations.

Did I say she conducted research?

Q. Yes.

A. She also verified not only the calculations, but also the draft reports. She reviewed deposition transcripts. I think -- I think that's probably the bulk of the work that she conducted.

Q. Did you also review deposition transcripts or did your staff complete that for you?

A. Both. I reviewed a number of deposition transcripts, some of them several times, and I also had staff review some of the deposition transcripts; and I also gave them tasks to search for specific information in the deposition transcripts.

Q. When you say that Jill Fitzpatrick conducted research, what type of research was she conducting?

A. For example, she performed research for data on -- from the Bureau of Labor Statistics. I do recall her doing some research on VA disability benefits.

Q. Do you recall what about the VA disability benefits she was researching?

A. I believe the research that she did involved finding historical benefit data by percent disability.

Q. When you say historical benefit data, you're distinguishing from the present rating, correct?

A. I'm distinguishing that from current benefit amounts based on percent disability. That's what's available online, as well as a couple of years back. What you have to dig for is this data going back in the number of years, a couple years.

Q. So do I understand that this was research about the value of certain percentage ratings in general, not specific to one plaintiff?

A. Correct.

Q. When you talk about Jill Fitzpatrick reviewing your calculations, do you recall which calculations that would be?

A. She reviewed calculations regarding earnings and fringe benefit losses. I believe she also reviewed the calculations of pension losses and household services.

Q. And when those calculations are made, are they made within an Excel spreadsheet?

A. Yes.

Q. And there would be formulas applied to the data within the Excel spreadsheet to produce the calculation, correct?

A. Yes.

Q. When you say that Jill Fitzpatrick reviewed your calculations, do I understand correctly that you were the one who entered the data into the spreadsheet?

A. I would have entered some of the data. I may not have entered all of the data into the spreadsheets.

Q. Would you have been the one that entered the formulas being applied to the data within the spreadsheet?

A. Most of the time, yes.

Q. So when you refer to somebody reviewing your calculations, are you specifically referring to calculations where you entered the formula?

A. Either me or somebody else. That was one of her roles.

Q. Do you recall any specific calculations where somebody else entered the formulas?

A. There may have been times where Jill

Fitzpatrick entered formulas, and I was the one, of course, that reviewed them.

Q. Are there any other individuals that you recall entering formulas for the calculations?

A. I believe Austin Salley may have entered some formulas regarding the calculation of the life care plan, present value.

Q. Would you say that it's standard practice at BRG for more than one person to review calculations?

A. That is typically how we would -- how we like to do it, yes.

Q. Are there any calculations within the Camp Lejeune reports that you believe were not reviewed?

A. I don't think so. I hope not.

Q. Is it your understanding that this multiperson review is a quality control practice?

A. I mean, that's part of it; yes, absolutely.

Q. What is the other part of it?

A. Consistency.

Q. Consistency with what?

A. With, for example, what we say in my

expert report, making sure that what their -- what is reflected in the expert report is consistent with the calculations and the assumptions made in the Excel spreadsheets.

Q. Do you believe the reviewing for consistency in that way avoids mistakes?

A. That's the intention, usually.

Q. Do you believe that when BRG is retained as an expert, the expectation is that the work product will be flawless?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. I think the expectation is that we do the best work that we can.

Q. Do you think expert reports are supposed to contain zero errors?

A. Ideally, yes.

Q. What would it mean to you if an expert report contained an error?

MR. KLOTZBUCHER: Objection.

You may answer.

A. I wouldn't be pleased with it.

Q. What would it mean to you if you found an error in an opposing expert's report?

MR. KLOTZBUCHER: Objection.

You may answer.

A. I would note it. I'm not sure that I would feel any way about it.

Q. So you mentioned Austin Salley, correct?

A. Yes.

Q. Other than being another person who might sometimes enter formulas for the calculations, what other roles did he have in the reports?

A. He did research. He did a review of -- of certain calculations. He also reviewed, as I said, the consistency between the assumptions that are listed in the expert reports and the actual calculations. He may have reviewed -- I believe he reviewed certain sections of deposition transcripts. I think that's pretty much the main roles that he played.

Q. Do Austin Salley and Jill Fitzpatrick review each other's calculations?

A. They may.

Q. Can you describe for me the role that Elisabeth Thies had in these reports.

A. Her role was primarily file management. We would receive documents from the DOJ through an

online system, and her responsibility was to download documents, identify what they are, notify me and the rest of the team what the documents contain. That was her primary role. I believe that she may have done a very limited review, also, of one of my draft reports.

Q. Is it fair to say that those roles included document review?

A. Yes. If Elisabeth Thies reviewed a document and determined that it was not relevant to the report, would it be looked at by anybody else?

MR. KLOTZBUCHER: Objection.

You may answer.

A. It may.

Q. Under --

A. Depends on which documents she was reviewing.

Q. Under what circumstances would that document not be reviewed again?

MR. KLOTZBUCHER: Objection, foundation.

You may answer.

A. As an example, if we received copies of medical records of a particular plaintiff, if she went through the documents and determined that all of

them were medical records, there typically wasn't a process before somebody else would then go in and confirm that all of the records were medical records. I may do a spot check, too. On occasion, I would do that.

Q. And for Sanskar Bista, what was their role in the reports?

A. His role was primarily research and document review and review of publications with data that I used as support for some of my assumptions.

Q. Was his role in document review different from Elizabeth Thies?

A. Yes.

Q. How was it different?

A. It was different in the sense that I would give him a specific task to go through a number of documents and look for specific information.

Q. And other than the publications that you mentioned, what other types of research was he doing?

A. He -- he may have conducted research, again, on the Bureau of Labor Statistics' website. He -- I guess I include, in the word research, also researching the documents that we received from the DOJ looking for specific information.

Q. Is it fair to characterize that as targeted doc review?

A. He did targeted document review, yes. I believe also, that he may have spent some time -- if we received a new batch of documents, his role was also to go through those documents and see what they are, what they contained, as a first review process.

Q. And that part would be similar to the document review conducted by Elizabeth Thies, correct?

A. I think that Sanskar's document review was a little bit more in-depth. Her role was primarily just to identify the types of documents that are contained within, you know, a group of documents.

Q. And for Joshua Hochberg, what was his role in the reports?

A. His role was also to identify key pieces of information that I needed from using the documents that we received on -- from the plaintiffs, on the plaintiffs.

Q. And for Hanna Scofield, what did she do in the reports?

A. Hanna, if I recall, did some deposition

transcript reviews. She also reviewed documents that we received. She may have conducted some research of external sources like the Bureau of Labor Statistics. I think that's -- that's about it.

Q. And Spencer Smith only has 4 hours. Was any of that spent working on the reports?

A. No.

Q. For Emaan Siddique, did they play any role in the reports?

A. I don't think so.

Q. Did Charlotte Brown play any role in the reports?

A. No.

Q. Did Mi Young Kim play any role in the reports?

A. Yes. She -- she worked with me on certain calculations. She reviewed the draft expert reports. She -- she also reviewed documents that we received from the DOJ. She -- yes, I think that's pretty much what she did.

Q. So earlier, you referenced people reviewing your calculations or you reviewing other people's calculations.

When you say that Mi Young Kim worked with you on some calculations, how is that different?

A. I think it's very similar. It's the same.

Q. Would you be preparing the initial calculations with Mi Young Kim?

A. Most of the time, I did. Sometimes she did. Her role was limited in the sense that she came on board later, and so her role was specific to kind of the last part of the drafting of the expert reports.

Q. And what was Audrey Sun's role in the expert reports?

A. Conducting research, reviewing documents, again, received from the DOJ. Reviewing -- looking for specific information I would request from the deposition transcript, reviewing the accuracy of footnotes, helping prepare the documents, materials considered.

Q. And when you refer to conducting research, what type of research was Audrey doing?

A. It was looking for specific information that I would request.

Q. And what was Jana Hulsey's role in the

reports?

A. Oh, very limited.

Q. So would you agree that there are several people who have had a role in preparing these reports?

A. Yes. They were part of the team.

Q. And you described conducting reviews to identify any potential mistakes, correct?

A. The purpose of my reviews was to -- to make sure that the calculations are correct; that the assumptions used are what I wanted to use; that there is consistency between the calculations, the assumptions, the results between the spreadsheets and the expert reports.

Q. So in that description, I did not hear you mention reviewing the individual inputs to ensure there are no errors; is that correct?

A. I did that, too. Absolutely.

Q. And in these review processes, have there ever been mistakes that have been caught and fixed?

A. I'm sure there were.

Q. And when you're working with large sets of data like this, mistakes happen sometimes,

correct?

MR. KLOTZBUCHER: Objection, foundation.

You may answer.

A. Sometimes.

Q. And ideally, they will be caught and corrected?

A. Ideally, absolutely.

Q. Would you agree that notwithstanding quality control practices like those, sometimes mistakes do slip through?

A. Yes.

Q. So earlier, you described Robin Cantor and Shireen Meer's role in the reports as primarily reviewers, correct?

A. Correct.

Q. Is their review different than the review that was occurring with all these staff and senior staff members?

A. It was a one set -- you know, an additional set of eyes by senior individuals with significant experience.

Q. All right. Last time I'm going to go through this list.

Do you know the qualifications of Robin

Cantor?

A. Yes.

Q. What are they?

A. She has a Ph.D. in economics. I believe she has over 30 years of experience.

Q. Do you know the qualifications of Shireen Meer?

A. Yes.

Q. And what are they?

A. She has also a Ph.D. in economics. I believe she has about 20 years of experience.

Q. Do you know the qualifications of Himadri Palikhe?

A. Yes.

Q. And what are they?

A. I believe she has a Ph.D. in economics as well.

Q. Do you know the qualifications of Sydney Fallone?

A. I believe so.

Q. What are they?

A. I believe that she either has a master's degree or an MBA.

Q. Do you know the qualifications of

Benjamin Mulholland?

A. Yes.

Q. And what are those?

A. He has a bachelor's degree.

Q. Do you know the qualifications of Jill Fitzpatrick?

A. Yes.

Q. And what are those?

A. She has a Ph.D. in economics.

Q. Do you know how many years of experience Jill Fitzpatrick has?

A. I would say around 20.

Q. Do you know the qualifications of Austin Salley?

A. Yes.

Q. And what are they?

A. I believe that he has a bachelor's degree.

Q. Do you know the qualifications of Elizabeth Thies?

A. Yes.

Q. And what are they?

A. She has a bachelor's degree.

Q. Do you know the qualifications of

Sanskar Bista?

A. Yes.

Q. And what are they?

A. He has a bachelor's degree.

Q. Do you know the qualifications of Joshua Hochberg?

A. Yes. He has a bachelor's degree. He may have a master's degree, but I'm not certain about that.

Q. Do you know the qualifications of Hanna Scofield?

A. Yes.

Q. What are they?

A. She has a bachelor's degree.

Q. Do you know the qualifications of Spencer Smith?

A. No, I don't.

Q. Do you know the qualifications of Emaan Siddique?

A. Yes.

Q. What are they?

A. I believe that she has a bachelor's degree.

Q. Do you know the qualifications of

Charlotte Brown?

A. No.

Q. Do you know the qualifications of Mi Young Kim?

A. Yes.

Q. What are they?

A. I believe that she has an advanced degree, either a master's or a MBA.

Q. Do you know the qualifications of Audrey Sun?

A. Yes.

Q. What are they?

A. She has a bachelor's degree.

Q. And do you know the qualifications of Jana Hulsey?

A. Yes.

Q. What are they?

A. She has a bachelor's degree.

Q. Okay. I'm going to look back at Exhibit 5 for a minute.

Okay. I'm looking at Bates page 5, which is an invoice dated November 27th, 2024.

Could you attempt to find that page.

A. I will try. I found it.

Q. And do you see the total listed here under Current Charges is $34,890.50?

A. Correct.

Q. And if you look at the following page, Bates page 6, do you see the total amount for Robin Cantor is 8,280?

A. Yes.

Q. Do you see the total amount for Shireen Meer is $5,600?

A. Yes.

Q. Do you see the total amount under your name is 2,856?

A. Yes.

Q. Do you see the total for Jill Fitzpatrick is 702?

A. Yes.

Q. Do you see the total for Sydney Fallone is 9,027,50?

A. Yes.

Q. And do you see the total for Austin Salley is 2,500?

A. Yes.

Q. And the total for Elizabeth Thies is 5,925, correct?

A. Correct.

Q. I will represent to you that that does add up to $34,890.50.

If we turn the page, we see the detailed entries of each individual entering their time, correct? I'm looking at --

A. On page 3 of 6?

Q. Yes.

I'm looking at Bates page 7, correct?

A. Yes.

Q. And is that what you see as the individual time entries?

A. Yes.

Q. Is this an accurate portrayal of how BRG typically records time?

A. Yes, it is.

Q. And am I correct that in each of these invoices, I should be able to add up the hours listed under each person's name, and that total should reflect the total on the previous page which indicates each person's total charges?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. Yes, they should add up.

Q. Have you ever encountered a scenario where they did not?

A. No.

Q. If you did, would there be any explanation that comes to mind for why they would not add up?

MR. KLOTZBUCHER: Objection.

You may answer.

A. I wouldn't know what a potential explanation would be. There -- obviously, if there's a difference, there would be an explanation for the difference. I just don't know what that difference could be for the -- what the explanation would be.

Q. So when we spoke about all of the staff members contributing to these reports, there were several people in addition to yourself who conducted research, correct?

A. Correct.

Q. And earlier, you told me that all of the research that you conducted would either be included in the Materials Considered List or cited in the report themselves, correct?

A. Yes.

Q. Would the same be true for the research

conducted by your staff?

A. Yes.

Q. So any research that your staff conducted would be included in either the MCL or cited in the report?

A. Yes, it should be.

Q. Okay. I'm going to set aside Exhibit 5 for now.

MR. VANSLYKE: I am entering as Exhibit 8 the Supplemental Materials Considered of Dubravka Tosic dated February 23rd, 2026.

(Exhibit 8, Supplemental Materials Considered of Dubravka Tosic dated February 23rd, 2026, marked for identification, as of this date.)

Q. Ms. Tosic, have you reviewed this Supplemental Materials Considered List?

A. Yes.

Q. And earlier, you stated that you have not been provided with any new materials to review since this list was produced, correct?

A. Correct.

Q. So this list, plus the original materials considered lists, plus materials cited in

the reports, constitutes everything that you relied upon in preparing these reports, correct?

A. I did not rely on any of the materials in this supplemental list in the preparation of my expert reports, because these materials came afterwards.

Q. Thank you for the clarification.

Did you review these materials between the production of your reports and today's deposition?

A. Most of them, I did.

Q. Are there any on here that you have not reviewed?

A. Yes.

Q. Can you tell me which ones.

A. I did not review the Rebuttal Expert Report Opinion Report of Marjorie Hackett-Wallace, nor the Corrected Rebuttal Expert Opinion Report of Marjorie Hackett-Wallace.

I did not review the Expert Report of Anirban Basu, nor did I review the Materials Considered List for Rebuttal Expert Anirban Basu.

Or the Materials Considered List for 1/20/26 Expert -- Expert Rebuttal report of MHW. I

did not review the Supplemental Materials Considered List for 10/29/25 Export Report of MHW. I did not review the last two items -- the last two bullets, PLG Expert Basu, Bates 01 to 16, and PLG Expert Hackett-Wallace, 67 to 112.

Q. Do you know why these items are on here if you have not reviewed them?

A. They were provided to us.

Q. Is it fair to say that these materials are available for your consideration, but sitting here today, you have not considered the materials you just identified?

A. Yes, I did not review them and/or consider them.

Q. Why not?

A. I believe that the expert reports of Marjorie Hackett-Wallace are -- touch on an area that is outside of my area of expertise; and the same thing with Anirban Basu.

Q. And by an area outside of your area of expertise, are you referring to medical expenses?

A. Medical expenses and medical records, yes.

Q. Do you believe it would be within your

area of expertise to rely upon another expert's tabulation of medical expenses to apply present value calculations?

A. Can you repeat the question, please.

Q. If another expert completes a report identifying medical expenses, would it be within your expertise to rely on that report and apply a present value calculation?

A. Sure. I mean, that's what economists do with life care plans, for example.

Q. Do I understand correctly that you were not asked to apply present value calculations to any of these materials?

A. That's correct.

Q. Have you reviewed any materials prepared by Gregory Russo?

A. I don't believe so.

Q. So it's safe to assume you have also not been asked to apply any present value calculations to numbers identified by Gregory Russo?

A. I believe that's correct.

Q. And you stated that this list was provided after your reports were published in December, correct?

A. These documents were provided after, yes, I issued my expert report.

Q. Do you have any opinions that you intend to offer in this litigation based upon any of the items in this Supplemental Materials Considered list?

A. I have not been asked to. If I'm asked to, I may, but I have not been asked to so far.

Q. Have you independently formed any opinions based on these materials?

A. Yes.

Q. What would those be?

A. Regarding the one-page document provided by Mr. Staller, my opinion is that it was a very limited rebuttal expert report that didn't provide very much information on anything.

Q. Have you independently arrived at any other opinions based on these materials?

A. No, not at the moment.

Q. Where did you obtain these supplemental materials considered?

A. They were sent to us.

Q. By who?

A. By the DOJ.

MR. VANSLYKE: I'm introducing as

Tosic - March 5, 2026

Exhibit 9 the Expert Report of Dubravka Tosic Estimated Economic Loss of Ms. Karen Marie Amsler dated December 15th, 2025.

(Exhibit 9, Expert Report of Dubravka Tosic, Estimated Economic Loss of Ms. Karen Marie Amsler dated December 15th, 2025, marked for identification, as of this date.)

MR. KLOTZBUCHER: I should note that it's been about an hour, if anybody would like a break or not like a break and continue.

MR. VANSLYKE: Would you like a short break?

THE WITNESS: No. I mean, do you want to break? I mean, I'm -- I'm fine. We can go forward a little bit longer.

MR. KLOTZBUCHER: No, I'm looking out for you. So...

THE WITNESS: Okay.

MR. KLOTZBUCHER: Yeah.

THE WITNESS: We can go a little bit longer.

MR. KLOTZBUCHER: Okay.

Q. Does this appear to be your report for plaintiff Amsler?

MR. VANSLYKE: I will note for the record that I have removed Appendix B and C, the Resume and Testimony Lists, so I'm not providing multiple copies.

THE WITNESS: And I believe page 1 is missing.

MR. VANSLYKE: Indeed, it is. I apologize for missing that page somewhere. The questions that I have are related to subsequent pages.

THE WITNESS: Okay.

Q. Are you okay with proceeding without page 1?

A. That's fine.

Q. Okay. So I would like to walk through and I'm sure that I am understanding your methodology in these sections.

So I am beginning on page 6. I'm sorry, page 5 is the heading. On page 5, do you see the section is titled Review and Assessment of Plaintiffs Economic Expert Report?

A. Yes.

Q. And then on the next heading, it says Introduction. And the first paragraph of page 6

provides introductory information about plaintiff Amsler, correct?

A. Correct.

Q. And then the following section is Future Lost Earnings and Fringe Benefits, correct?

A. Correct.

Q. Can you summarize in your own words the methodology that you apply here to identify the future lost earnings and fringe benefits of plaintiff Amsler.

A. This section does not pertain to my calculations. This section pertains to Mr. Staller's calculations.

Q. That is my mistake. Thank you.

Can you summarize here the observations that you are making about Mr. Staller's calculations of these damages.

A. Sure. Mr. Staller, for Ms. Amsler, calculates future earnings and pension losses for 2026, '27 and '28, and my critique of those calculations is that these calculations are based on the assumption that Ms. Amsler will have a relapse of her leukemia, and based on Dr. Erba and his opinions. So she has less than a 5 percent likelihood of

remission.

And my opinion here is that even if one calculates future economic losses for Ms. Amsler, which would include the likelihood that she would indeed, have a relapse, and we're already in 2026, those would need to be -- those calculations would need to be adjusted by this probability that she would actually have a relapse, which Mr. Staller has not done.

Q. And just to clarify, you noted that it is now 2026. But at the time this report was finalized, the calculations were 2026, represented as a future projection, correct?

A. Correct.

Q. Do you recall if any of the other plaintiffs for which you provided reports had a similar projection of potential relapse?

A. Not as explicit, as Mr. Staller does not do these kinds of calculations for any of the other plaintiffs that I reviewed, assuming a future relapse.

Q. Thank you.

And on the following page, under the section for Retirement Benefits, can you briefly

describe your assessment of Mr. Staller's calculations here.

A. Yes. Mr. Staller includes in his calculations of loss -- lost estimated retirement benefits, and I did not see anything in the record that Ms. Amsler had access to a defined contribution plan with a match. I believe that I found one document that showed that there is a defined contribution plan of her prior employer, but that that match was zero.

So I believe that Mr. Staller, in his calculations of retirement benefits, are -- did not consider this information.

Q. And is that document the one cited in Footnote 38?

A. Correct.

Additionally, I did not find any information in the record that Ms. Amsler at her prior job had access to a defined benefit pension plan. So I -- I don't think that Mr. Staller had a basis for -- to include losses related to a defined benefit pension plan for Ms. Amsler.

Q. When you say her previous job, are you referring to the one referenced here, St. Joseph's

Hospital?

A. Correct.

MR. VANSLYKE: I will enter as Exhibit 10 the document with the Bates No. 00284_Amsler_SJ_0000000052.

(Exhibit 10, Separation Notice of Karen Amsler, marked for identification, as of this date.)

Q. Does this appear to be the document cited in Footnote 38?

A. Yes.

Q. And I see in about the middle of the page, under No. 6, there is a line for employer's name, correct?

A. Yes.

Q. And that says St. Joseph's/Candler Health System, correct?

Is that what you see there?

A. Yes.

Q. And do you understand this document to refer to the position we were just discussing at St. Joseph's Hospital?

A. Yes.

Q. I'm looking at 4-B. Do you see that

Section 4 indicates the reason for separation?

A. 4-B?

Q. Well, do you see that -- the Section 4 in general --

A. Yes.

Q. -- says Reason for Separation?

And then do you see that B says If for other than lack of work, state fully and clearly the circumstances of separation?

A. Yes.

Q. And it says Voluntary, correct?

A. Correct.

Q. And for No. 3, it says Period of last Employment, from March 30th of 2020 to December 8th of 2020, correct?

A. I'm sorry, where is that?

Q. It's No. 3.

A. Yes.

Q. Is it your understanding that after she's voluntarily separated after working there for less than a year, would she be retiring?

A. I believe that I reviewed that -- Ms. Amsler's deposition testimony, and it wasn't clear whether her plan was to retire at that time. I

think she discussed retiring and then working. Perhaps, working additionally -- additionally in some other jobs, which I believe she did.

Q. In general, would you understand retirement as something different than voluntary separation?

A. Well, based on her deposition testimony, this is around the time when she was diagnosed with leukemia; and so her diagnosis of leukemia coincides with the timing of this separation as well.

So I don't know whether voluntary would be considered or whether retirement at this particular institution would also be classified as voluntary, or voluntary is something different.

Q. So do I understand correctly your opinion is that a voluntary separation may or may not be a retirement?

A. Correct.

Q. And if I look at paragraph No. 5, is this the paragraph that at the bottom, you believe indicates 0 percent contributions?

A. Yes.

Q. Do you see the second line from the bottom of paragraph 5 says If employee retired,

furnish amount of retirement pay and what percentage of contributions were paid by the employer?

A. Yes.

Q. Is it your understanding that if an employee did not retire, that section would not need to be completed?

MR. KLOTZBUCHER: Objection.

You may answer.

A. I don't know. I don't know how -- what their protocols are in filling this out or not.

Q. So is it fair to say that you do not know for sure whether that 0 percent represents an indication of the contribution or just an uncompleted section of the form?

A. No. What this tells me is that the employer -- employer's contribution, or contributions paid by employer, was 0 percent. Now, whether or not this was filled out because Ms. Amsler retired or not, I don't know what their -- what the -- what this institution's protocols are in filling this particular section out.

But this tells me that the employer contributions were 0 percent, whether she retired or she -- whether she left voluntarily, whether she

retired or both.

Q. But you understand that the If Employee Retired language states that this section would not be applicable if the employee did not retire?

A. Not -- I don't know that as a fact.

Q. And do you see that the rest of that sentence says Furnish the amount of retirement pay and what percentage of contributions were paid by the employer?

A. Yes.

Q. And do you see on the line below that there is a blank and then per month?

A. Yes.

Q. And that blank is not filled in, correct?

A. Correct.

Q. Okay. I will set aside Exhibit 10.

So I'm back on Exhibit 9, and I'm looking at Section D on page 7. That says Probability of unemployment adjustment, correct?

A. Correct.

Q. And would you briefly explain your assessment of Mr. Staller's calculations here.

A. He calculates earnings losses for

Ms. Amsler of her past and her future, with the assumption that she would have had 100 percent probability of remaining employed each and every year.

And in labor economics, we know that that is not the -- that is not a fact. Each one of us has a certain probability of becoming unemployed each and every year, for various factors. And so when you're calculating economic losses, that's one of the adjustments that is typically made to account for a probability of unemployment.

Q. When you have been retained as an economist for a plaintiff in a lawsuit, do you always include the probability of unemployment adjustment in your calculations?

A. Yes. I mean, I use the same methodology whether I'm retained by plaintiffs or defendants. If the -- if we're talking about projections, yes. If -- if the individual, for example, has mitigating earnings showing that they actually worked, then this adjustment obviously would not be applied, because the person was employed.

Q. If the person does not have mitigating earnings, would you apply the same adjustment to past

calculations?

A. Most of the time, yes. I think the individual's circumstances, the facts of the case, is something that I would also look at to make that determination.

Q. Would it not be the case that regardless of somebody's employment status in the past, that status would be concrete?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. Can you rephrase the question.

Q. Do I understand correctly that this adjustment is based on the likelihood of somebody being unemployed?

A. Yes. It's a probability.

Q. And if we're looking at past calculations, wouldn't it be true that they are either unemployed or not unemployed?

A. Yes.

Q. If it is definitively one or the other, how would the probability apply?

A. Well, for example, in Ms. Amsler's case where we're calculating past losses, right, earnings losses. And during that time, she -- she didn't work

or -- or worked very seldomly. So you could apply this probability to projected past earnings as well.

Q. I understand. Thank you.

I'm moving on to page 8, Section E for Lost Household Services.

And would you briefly explain for me your assessment of Mr. Staller's calculations here.

A. Yes. So Mr. Staller uses one methodology to calculate past lost household services and a slightly different methodology for calculating future lost household services.

And for the past, what he does is he provides a table with estimated hours of household services based on certain categories and types of household services. And it's not clear what the basis for those categories that he chooses to present in his expert report, what those categories are based on.

What he proceeds to do for the calculation of past household services is he states that he uses a number of different occupational groups, pools their wages, and calculates an average wage.

There is -- I did not see the basis for

the occupations that Mr. Staller chooses to calculate this average wage; which then he uses to calculate the value of lost household services, assuming one hour of household services a week. So that's lost -- that's past lost household services.

For future lost household services, he -- he uses ATUS data, which is a great data source. But he, again, calculates lost household services using occupational groups that are not clear what -- what the basis is for choosing those occupational groups in terms of dollar amounts and -- per hour and the number of hours.

And the -- the additional problem is that it's not clear whether Mr. Staller took into account the documents received on Ms. Amsler and her deposition testimony, where there are documents from the Social Security Administration that show that she stated that she doesn't have any problems conducting any household services. And that is -- at that point, she actually stopped receiving Social Security disability benefits.

So it's not -- it's not entirely clear what the bases are for Mr. Staller's calculations of lost household services.

Q. So I have a few clarifying questions.

A. Sure.

Q. Do I understand correctly that you said for past household services, he identifies essentially a one-hour rate, correct?

A. Correct.

Q. And that would be for each year, correct?

A. Correct.

Q. For future household services, I understand that he has an added component of the average number of hours under ATUS, correct?

A. Correct.

Q. Am I correct that for future lost household services, he also includes the one hourly rate like he does for past household services?

A. I believe that's correct.

Q. So for past household services, it's only the hourly rate, and for future household services, it's both the hourly rate and the total average hours, correct?

A. For future, it's the value of one hour, and plus the value of lost household services using a number of different occupations and household --

types of household services to come up with the number of hours and the average wage.

Q. And I understand you take issue with Mr. Staller's calculations because you don't understand the basis for selecting the types of services that he selected, correct?

A. It's not only the types of services. It's also the occupations that he uses to calculate the average wage used in the calculation of household services.

Q. If that basis were available, do you believe that would resolve some of the issues with Mr. Staller's calculations from your perspective?

A. What do you mean by available?

Q. If you were to review Mr. Staller's report and find that that basis was identified, would that resolve that concern?

A. Not necessarily, because Ms. Amsler herself testified about things that she does, right, in her housework. But also, I think, as I mentioned, there is documentation that shows that she indicated to the Social Security Administration that she has no problem conducting any household services.

So I think if additional information was

available on the types of household services that Ms. Amsler is claiming that she has lost, that she is no longer able to perform, I will definitely consider that and review it. And I would have to also review that in connection with these other documents that have been available so far.

Q. Is it your understanding that the ATUS data relies on certain occupations?

A. Yes.

Q. Do you believe those occupations are different than the occupations that Mr. Staller is basing his calculations on?

A. ATUS data provides the number of hours individuals, on average, spend on various kinds of household services. So there are various kinds of categories of household services. There are I can't remember, seven to ten different kinds of household services. And that -- that data is -- is combined with the hourly wages that are representative of the occupations that are similar to the household services that are performed in each one of these categories.

So what Mr. Staller has done is he has included in his calculations, it seems, it appears,

he -- based on my review of the ATUS data, it appears that he has included in his calculations a number of different kinds of household services, and those -- the valuation of those household services for future losses involves various kinds of occupations. Those -- those two need to match.

And it appears although it's not entirely clear, that for Mr. Staller's calculations, they may match. The problem is that he is basing on the selection of the types of household services he uses for the calculations, and the occupations that he uses as the basis for the hourly wages to calculate the loss of household services, I don't see a basis for those selections.

Q. So I understand there is a second issue related to identifying the services that an individual plaintiff performed prior to the incident and the services they're no longer able to perform, correct?

A. Typically, that's where -- yes. Household service losses would be associated with those types of services that were performed before and are no longer able to be performed.

Q. And do I understand correctly that

you're saying for the household services calculations, Mr. Staller should identify the specific services that are no longer able to be performed, and apply his calculations based on the analogous occupation to those services only; correct?

A. Yes, that's typically how it should be done. What he has done is he has chosen a whole number of different types of household services, and he is assuming that Ms. Amsler has not been able to perform any of those household services since her diagnosis.

Q. I understand that issue.

I believe there is another issue that we started talking about where Mr. Staller identifies the occupations that he is using for his calculations, correct?

A. Yes. For his calculations of the average wage.

Q. Am I wrong in understanding Mr. Staller's use of occupations to be the full spectrum of household service occupations that represent the ATUS data?

A. No. There are many more different kinds of -- of time categories that are included in ATUS

data; that it appears that Mr. Staller did not include them. But it appears, again, that he included a number of different types of household services.

Q. Have you encountered in other contexts economists using banded rates from ATUS data?

A. No, I have not.

Q. Do you know what that refers to?

A. Yes.

Q. What do you understand that to refer to?

A. It's categories of rates that could be applied to different kinds of household services.

Q. Would that be analogous to what Mr. Staller has done here?

A. No, I don't think so.

Q. What is the difference, in your view?

A. Mr. Staller includes again -- and it's not even clear whether the whole list of occupations that he includes and in his expert report as the basis for the calculation of the average wage, whether those occupations are even relevant to the household services that Ms. Amsler claims or Ms. Amsler is no longer able to perform.

So for example, one of the household

services is taking care of the household; cooking and cleaning. That -- occupations that are related to cooking and cleaning, such as cooks and cleaners and dishwashers, are included in Mr. Staller's calculations.

We simply don't know whether based on -- or I don't know based on currently available information, whether cooking and cleaning are the types of services, household services, that Ms. Amsler is no longer able to perform.

Those occupations carry with them different wage rates, right? And there are different ways to calculate wage rates for those occupations. So that's -- that's slightly different than what you mentioned.

Q. Is it fair to say that you have very similar criticisms of Mr. Staller's calculations of lost household services for all plaintiffs for which he calculates lost household services?

A. Yes. Because his methodology is relatively cookie cutter across all of the plaintiffs. He uses a very similar methodology. He uses the same occupational groups for all the plaintiffs. He calculates the past losses in one way

and the future losses in, you know, that way plus using ATUS data. And the only adjustments that he makes in considering the characteristics of the plaintiffs is that he applies geographic adjustments to the hourly wages for the different plaintiffs; but other than that, his methodology is the same across most of the plaintiffs, or all of the plaintiffs that I have looked at.

Q. So I'm moving to the next section on page 10 titled Past Medical and Related Care.

Do you see that?

A. Yes.

Q. And for clarity, am I correct in understanding this to refer to essentially medical care provided at home by family members as opposed to medical care provided in a medical facility?

A. That's my understanding of Mr. Staller's calculations, yes.

Q. And could you briefly summarize your assessment of his calculations here.

A. Well, the calculations that he performs for past medical and related care, and again, this is just past -- past losses, are associated with an estimated value of care that Ms. Amsler's husband

provided to her; and her husband is not the plaintiff in this matter.

So I think that, you know, the first thing is to establish whether losses to the plaintiff's husband are recoverable -- are damages in this particular case. Because they're not damages to Ms. Amsler; they're estimated damages to Mr. Wukitsch.

So that said, if these types of damages are accepted by the judges, again, Mr. Staller uses personal care -- the personal care, health care aides, as an occupation and as the basis for the -- for the wage rates. And it is just not clear whether what kind of services Mr. Wukitsch provided to Ms. Amsler and whether those types of personal medical care services are consistent with what personal and health care assistants provide. So that's -- that's, you know, the first item regarding the occupation chosen that are the basis for the wage rates.

But you know, another -- another aspect of this is that one really needs to pay attention, I think I mention that in my report, that there isn't some double counting here between the calculation of

lost household services and the loss of -- the calculation of lost personal care.

Because for example, personal care, healthcare aides perform shopping, right? That's one of their duties. And if you look at the job description provided for a personal and healthcare assistants, shopping, food shopping is one of the tasks.

If Mr. Wukitsch provided shopping as part of his personal care because Ms. Amsler claims that she was no longer able to, then those types of household services are already accounted for in the calculation of lost household services for Ms. Amsler.

So I think we need to be very specific here about what types of services, when -- and when those services are performed to really be at -- able to value those lost personal care services. Right now, I don't see that we have enough information to perform those calculations.

Q. What would be the issue with double counting?

A. What would be the issue?

Q. Yeah.

A. Well, if we double counted, we would count damages associated with personal and related -- in medical care, and we would calculate the same damages as part of Ms. Amsler's house -- lost household services. So we would be, you know, double counting here.

Q. Is that similar to the concept of double recovery that we discussed earlier?

MR. KLOTZBUCHER: Objection to form.

You may answer.

A. It's similar.

Q. And it is your position that it would be inappropriate to award damages based on double counting, correct?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. In this particular -- in this particular category of economic loss that Mr. Staller calculates, again, I -- I don't think that Mr. Staller has enough information or basis for his calculations; and because of that, there is a risk of double counting, which, you know, is again, not -- not very appropriate.

Q. I'm moving on to page 12, and I see here

we transition -- oh, sorry. One thing before I move on.

Your notes on Mr. Staller's methodology for past medical and related care, is it fair to say that you have similar criticisms in every instance where Mr. Staller calculates past medical and related care?

A. That's correct.

MR. VANSLYKE: Can we go off the record.

THE VIDEOGRAPHER: The time right now is 2:40 p.m. We are off the record.

(There was a recess taken.)

THE VIDEOGRAPHER: The time right now is 2:58 p.m. We're back on the record.

BY MR. VANSLYKE:

Q. Ms. Tosic, I would like to go to page 12 of Exhibit 9 and the section titled Calculations of Economic Loss for Plaintiff Ms. Amsler.

Do you see that?

A. Yes, I do.

Q. Do I understand correctly that in this section, you transitioned from assessing Mr. Staller's calculations to performing your own assessment of her damages here, correct?

A. Correct.

Q. And the first section is Calculation of Lost Earnings, correct?

A. Correct.

Q. And can you briefly tell me about your methodology for calculating her lost earnings.

A. I calculate her past economic losses for '21 and '22 based on the same earning spaces that Mr. Staller uses, and I don't include any losses related to retirement benefits, given that I did not find any documentation or support for that.

I adjust the earnings losses by the probability of unemployment, which is based on the average unemployment rate in Savannah, Georgia, in the Savannah, Georgia metropolitan area. I apply the same effective tax rate to the earnings losses that Mr. Staller uses, and I come up with past earnings loss of 107,000, approximately.

Q. And does this calculation include earning capacity or lost earnings?

A. Well, Mr. Staller, in his expert report, states that he calculates her lost earning capacity.

I take a very similar approach in the sense that I use the same earning spaces that he

does; that the calculations that I perform are only for past earnings losses, not future.

So to the extent that Mr. Staller calculates lost earning capacity, it, you know, could be similar to my calculation of lost earnings. They are, you know, one and the same for past losses.

Q. Do I understand correctly that you're saying for past income-related losses, lost earnings and lost earning capacity are one and the same thing?

A. Yes, only because Mr. Staller's calculations are -- he calls them calculations of lost earning capacity, and I use the same earning spaces as he does.

Q. I understand you're using the same basis.

Do you agree with the label that he's using?

A. I would have to go back to Ms. Amsler's historical earnings to be able to answer that question.

Q. Is it fair to say that sitting here today, your opinion is that the lost earnings may or may not be the same as the lost earning capacity?

A. They may or may not, but again,

Mr. Staller calls his calculations calculations of lost earning capacity. I use the same basis for the earnings loss. I call my calculations, calculations of loss of earnings.

So to the extent that we're both using the same earning basis, in that sense, you know, we could be talking about the same thing. But again, I would have to go back to Ms. Amsler's historical earnings to see whether the basis that I used is actually her earning capacity, her estimated earning capacity.

Q. And in terms of past lost earnings, do you use the same methodology for Ms. Amsler as you do for other plaintiffs for which you calculated past lost earnings?

A. Yes and no. For Ms. Amsler, I only consider her but-for earnings for two years.

For certain other individuals, such as Mr. Hill, I take into account also some projected mitigated earnings, which I don't do for Ms. Amsler.

So Ms. Amsler's earnings losses are based on her but-for earnings, right? Didn't use any potential mitigated earnings. For others, such as Mr. Hill, as I said, I do consider potential

mitigating earnings.

Q. Other than Ms. Amsler's calculations, not including mitigated earnings, would you say that it's the same methodology applied to other plaintiffs' lost -- past lost earning calculations?

A. The methodology is the same in the sense that I consider annual growth rates, and I -- in Ms. Amsler's case, I do adjust for the probability of unemployment. If I recall for Mr. Hill, I don't. And so there is a difference there.

So the methodologies are, you know, similar, but not always the same.

Q. Okay. I'm moving forward to page 13. Section B says Lost Household Services, correct?

A. Correct.

Q. And could you briefly summarize for me your opinions on the lost household services calculation here.

A. Yes. I calculate her lost household services for the period from her diagnosis until April 30 of 2022, when she was no longer deemed disabled by the Social Security Administration, and I rely on The Dollar Value of a Day for -- and I consider household services during this time period

that are inside housework; food, cooking, and cleaning, pets, home and vehicles, household management, shopping, obtaining services and travel for household activity.

And I use The Dollar Value of a Day for these types of household services, and I use that same publication also for the hourly wage, adjusted for the particular metropolitan statistical area; and I calculate these losses for, you know, roughly the two years.

And so that the value of past lost household services that I come up with is about 27,000, approximately.

Q. And in your view, does The Dollar Value of a Day publication supplement or replace ATUS in its calculation?

A. This publication is entirely based on ATUS data, and it's based on ATUS data for a number of years. So it's a combination of ATUS data for I would say, a number of years from the current publication date.

Q. So when you reference ATUS data in your calculations, are you referencing the ATUS data that is contained within The Dollar Value of a Day of

publication?

A. Yes, because that's what I rely on.

Q. Is it safe to assume that the ATUS data contained within the publication would be the same as the ATUS data that is published under ATUS directly?

A. Yes.

Q. Am I correct that The Dollar Value of a Day adds more detail to the ATUS data by itself?

A. It adds more information in the sense that, for example, it provides geographic adjustments that one can use, which the ATUS data does not provide.

Q. In making these calculations, do you still rely on the ATUS data even if it's the ATUS data within The Dollar Value of a Day, for identifying the amount of hours?

A. I rely on the publication Dollar Value of a Day for the number of hours, and also, the hourly wage rate for the services that are -- that are considered.

Q. And when you rely on The Dollar Value of a Day for the number of hours, is the material that you're relying on different than the ATUS data itself?

A. It would be different in the sense that in certain circumstances, I apply a geographic adjustment; and so to the extent that the ATUS data does not have a geographic adjustment, that's the difference.

The ATUS data also, by itself, comes out every year, and The Dollar Value of a Day, the numbers that are provided in this publication, are the culmination of a number of years of ATUS data. So it's not only just one year. It's a number of years that are combined together.

Q. Okay. I'll move on to Section C on page 15, and that section is titled Past Medical and Related Care Loss of Mr. Wukitsch, correct?

A. Correct.

Q. And could you briefly summarize for me your analysis here.

A. I don't provide a number for past medical and related care loss of Mr. Wukitsch. I discuss in paragraph 52 some of the deposition testimony of Ms. Amsler and Ms. Wukitsch that, you know, is pretty limited, and provides a little bit of information, but not enough to be able to provide reasonable and reliable calculations.

Q. We'll move on from this exhibit.

MR. VANSLYKE: I will mark as 11 your report for Mr. Carter.

(Exhibit 11, Expert Report of Dubravka Tosic for Mr. Ronald Carter dated December 15, 2025, marked for identification, as of this date.)

MR. VANSLYKE: I will note that we have page 1 this time.

Q. Does this appear to be the report that you provided for plaintiff Carter?

A. It does.

Q. I'm going to turn to page 6. And do you see that this is, again, a section entitled Review and Assessment of Plaintiff's Economic Expert Report?

A. Yes.

Q. And I see that there is another Lost Household Services section here, correct?

A. Correct.

Q. And we discussed that you had similar criticisms for Mr. Staller's calculation of lost household services for all plaintiffs, correct?

A. Correct.

Q. Is there anything unique to Mr. Carter

that you think needs to be understood in this report?

A. Well, I believe what is unique about Mr. Carter is the deposition testimony of Mrs. Carter and Ms. Allen, who provided some insight into what -- what Mr. Carter did previously and what he was able to do during -- after his diagnosis.

Q. Is it fair to say that that pertains to the basis for these calculations more so than the methodology of the calculations?

A. Yes. What is unique also about Mr. Carter is that in the calculation of lost household services, I calculate based on The Dollar Value of a Day, the annual -- I provide annual estimates of -- of the lost household services, and up to -- from his date of diagnoses to his date of death, I also provide an estimate of the household services that are performed by disabled men as a type of estimated mitigating household services, and the difference between the two is used to calculate the estimated loss.

Q. What is the source for the data on disabled men?

A. It's The Dollar Value of a Day --

Q. Is there a --

A. -- publication.

Q. Is there a reason that would not be applicable to other plaintiffs?

A. Each plaintiff for whom I calculated economic losses are unique and have unique characteristics, and the information that I was able to gather from the various documents is also very unique. So based on their characteristics and the documents and the information collected, you know, is used -- I use as the basis for -- for these calculations.

So for some of the other plaintiffs, I don't take this approach. I take -- you know, for example, from Ms. Amsler, I calculate lost household services for two years, but I don't consider any mitigating lost household services, because the two years that I calculate lost household services is the time when she was dealing with her leukemia actively and was in treatment.

Q. And just to note for clarity, what you just described about using The Dollar Value of a Day for mitigation, that would be relevant to Section 6-B on page 11, which are your calculations instead of your assessment of Mr. Staller's calculations,

correct?

A. Yes, correct.

Q. Is there anything else unique to note about either Mr. Staller's or your calculations of past household services?

A. No, I don't believe so.

Q. And back on page 9, I see another section titled Past Medical and Related Care.

A. Yes.

Q. And we noted that you had similar criticisms of Mr. Staller's methodology for all plaintiffs that he calculates this category, correct?

A. Correct.

Q. And do those criticisms carry over here, or is there anything unique that you think we need to know as to Mr. Carter?

A. I think the criticism is applicable to Mr. Staller's calculations for Mr. Carter as well. Again, I don't feel that we have enough information to be able to reliably calculate such losses at the present time.

Q. Okay.

I will move forward to briefly revisit Section 6-B. I know we talked about it a little bit,

but is there anything else about your calculations that you think is unique and needs to be noted for Mr. Carter?

A. I think -- you know, again, it's listed in my report. What is unique about Mr. Carter is that based on the deposition testimony, the Household Services category that I consider in the calculations is called pets, home and vehicle household services. So that is the type of household services that I consider in my calculations.

Q. Okay. I will move forward to page 14 -- I'm sorry, page 15. Do you see at the top, Section 7 is titled Potential Offsets?

A. Yes.

Q. And can you briefly summarize your approach to calculating these offsets.

A. I don't calculate these offsets. These offsets and the amounts are provided in Doctor G's export report, and I simply provide them here in my expert report.

Q. And am I correct that these are offsets for past Medicare payments, not future?

A. That is my understanding, yes.

Q. Are you offering any opinion as to these

offsets or are you merely restating Dr. G's opinion?

A. I'm not providing any opinions about them.

Q. Okay. I'm done with Exhibit 11.

MR. VANSLYKE: I will mark as Exhibit 12 your report for Mr. Connard.

(Exhibit 12, Expert Report of Dubravka Tosic Report for Mr. Stephen Matthew Connard dated December 15, 2025, marked for identification, as of this date.)

Q. Does this appear to be your report for Mr. Connard?

A. Yes, it does.

Q. I'm going to start on page 6.

Do you see Section 5 titled Review and Assessment of Plaintiff's Economic Expert Report?

A. Yes.

Q. And Section B is titled Calculation of the Marginal FERS Pension Benefit Loss, correct?

A. Correct.

Q. So this is a new section that we have not seen in a previous report, correct?

A. Correct.

Q. Can you briefly summarize your

assessment of Mr. Staller's calculations here.

A. Sure. Mr. Staller calculates losses regarding the FERS pension benefits that Mr. Connard was a member of, and his methodology, which he calls the calculation of marginal pension benefit loss, considers two things. It considers Mr. Connard's but-for pension benefits, and it considers Mr. Connard's -- what I understand Mr. Connard's vested pension benefit, had he stopped working on the date of his death.

And my view is that that is -- this approach is incorrect.

Q. Why do you believe it's incorrect?

A. Because the proper way to calculate the pension, the FERS pension benefit losses, is to compare what Mr. Connard's but-for pension benefits would have been had he remained employed and had he not died versus what Ms. Connard has been getting and will continue to get until her life expectancy. And what Ms. Connard -- what Ms. Connard's benefits are, they are based on the vested pension benefits of Mr. Connard.

What Mr. Staller fails to do is he fails to consider the pension benefits that Ms. Connard has

been receiving prior to -- prior to when Mr. Connard would have started receiving his benefits, and also, the time period from the difference between Mr. Connard's expected life expectancy and Ms. Connard's life expectancy.

So those two chunks is what Mr. Staller is missing from his calculations.

Q. Am I correct in observing that what you just described represents part of the methodology laid out for a calculation of FERS pension loss under Section 6, which is your calculation of economic loss for plaintiff, Ms. Connard?

The calculation of FERS Pension Loss section starts on page 13, F-E-R-S, begins on page 13?

A. That's correct.

Q. Okay. And back on page 7, the heading for Mr. Staller -- your assessment or Mr. Staller's calculation of lost household services begins.

Is there anything that you believe is unique to Mr. Connard in this section?

A. The only thing that is unique is that Mr. Connard's lost household services are calculated from the date of his death until his healthy life

expectancy. So Mr. Staller didn't calculate any -- any lost household services prior to his death; and I take the same approach.

And what is also -- what is -- you know, what is consistent here is also that the calculations that I perform were based on the deposition testimony of Ms. Connard; and again, there are adjustments that are made, considering where Mr. Connard lived while he was alive.

Q. I'm looking at page 10, paragraph 31.

Does this paragraph describe what you're referencing about where he lived while he was alive?

A. Yes.

Q. And then I believe we've already discussed Section D about the death benefits received by plaintiff, correct?

A. I don't believe that we discussed them.

Q. Okay. Would you like to briefly summarize your assessment of Mr. Staller's opinion here?

A. The only thing that Mr. Staller considers in terms of death benefits are the expenses for the funeral; and what Mr. Staller does not take into account are the various death benefits that

Ms. Connard received in connection with Mr. Connard's employment by the Congress.

Q. Do you understand that in this litigation, Ms. Connard is the representative rather than the plaintiff herself?

A. Sure. Yes.

Q. Do you recall when we were reviewing Mr. Carter's report, you noted that the plaintiff's spouse was not the plaintiff, correct?

A. Yes.

Q. And you objected to -- I'll rephrase that question.

You expressed uncertainty about whether the spouse could obtain damages if they're not the plaintiff, correct?

A. In relation to personal and medical care. In terms of the FERS pension benefits, it's very well established that Ms. Connard is, in fact, receiving death benefits based on Mr. Connard's participation in the FERS pension plan. And based on his employment, it's also a fact that Ms. Connard, based on his employment with the federal government, has received certain death benefits.

I include those in my expert report for

consideration. I don't have an opinion on whether they should or should not be considered, but I do include them if they are to be considered.

Q. Are you familiar with the Collateral Source Doctrine?

A. A little bit.

Q. Could you describe your understanding of that doctrine.

A. I think I would butcher it. I don't want to attempt to do that.

Q. So I'm going to move forward to page 11. And I see the heading here for Section B, Calculation of Earnings and TSP Employer Contribution Losses, correct?

A. Correct.

Q. And this is another new section, correct?

A. Yes.

Q. Could you briefly describe for me your methodology here.

A. The methodology includes the calculation of Mr. Connard's lost earnings and lost TSP employer contributions based on but for his death.

I use the same earnings basis as

Mr. Staller, and in terms of -- as the basis for the projections. And in terms of the TSP employer contributions, I use a 5 percent employer contribution rate, which is the rate that is -- that Mr. Staller uses; but it's also the rate that is applicable to employees of the Congress.

I deduct from that the FERS employee contributions that Mr. Connard would have made to continue participating in the FERS pension plan. I apply an effective tax rate and a personal consumption adjustment to take into account the amount of consumption that Mr. Connard would have had from his earnings.

And based on those calculations, which are all in past, because his work life expectancy comes up to the past, is estimated to be 989,000, approximately.

Q. I know you mentioned part of how your methodology is different than the methodology of Mr. Staller when it comes to the FERS pension loss when we were discussing Mr. Staller's analysis.

Is there anything else in Section C beginning on page 13 that you don't feel you've already explained?

A. No. I think I've -- I think we covered it.

Q. And I see on page 15 that you did apply a present value calculation to the FERS pension loss, correct?

A. Yes.

Q. And on page 16, I see calculation of lost household services, correct?

A. Correct.

Q. And is there anything unique to Mr. Connard that you feel we need to discuss, or does this apply the same methodology that we've discussed elsewhere?

A. The only thing that is unique here is that the adjustments to the averly -- average hourly wages are done, considering that he lived in the Washington D.C. Metropolitan area. So that adjustment is made to the average hourly wages that are used in the calculation of lost household services.

Q. Did I misunderstand earlier that your methodology in every case where you calculate past lost household services applies the appropriate geographical rates?

A. Yes.

Q. In what cases would you not apply the appropriate geographical rates?

A. Hypothetically speaking, or --

Q. In --

A. -- what exactly are you referring to?

Q. Let me rephrase my question.

Are there some geographical locations that do not have an applicable rate modification?

A. There may be. I'm not sure.

Q. When you calculate the past lost household services for the plaintiffs in this litigation, do you apply the appropriate geographical modification for each plaintiff?

A. Yes, I do.

Q. Is the unique characteristic here just which geographical location it is?

A. That's correct.

Q. I understand. Thank you.

And do you feel that we've fully discussed the relationship between Section E for past non-medical expenses and Section F for death benefits received by Ms. Connard?

A. I think we covered that.

Q. Okay.

I see on page 18, the top heading says The Present Value of Past and/or Future Lost Household Services, correct?

A. Yes.

Q. Do you apply the present value calculation for each plaintiff that you calculate past lost household services?

A. In the sense that the growth rates in the hourly wage are -- are increased.

Q. And do you apply the present value calculation in each case where you calculate future lost household services?

A. Yes.

Q. All right. I think I'm done with Exhibit 12.

MR. VANSLYKE: I will introduce as Exhibit 13 the -- your report for Mr. Davis.

(Exhibit 13, Expert Report of Dubravka Tosic for Mr. Cometto Davis dated December 15, 2025, marked for identification, as of this date.)

Q. I'm beginning on page 6. Do you see again, Section 5, is titled Review and Assessment of

Plaintiff's Economic Expert Report?

A. Yes.

Q. And Section B is titled Lost Household Services?

A. Correct.

Q. Is there anything that you believe is unique about Mr. Davis that needs to be understood, or does this apply your same criticisms of Mr. Staller's methodology?

A. I think the review of Mr. Staller's methodology follows the same criticisms I have in the reports that we already covered.

Q. And if I move forward to page 10, this is your calculation of lost household services, correct?

A. Correct.

Q. And do you apply the same methodology here or is there anything unique that you believe we need to understand about Mr. Davis?

A. Again, Mr. -- Mr. Davis is unique in the sense that the calculations of lost household services, again, are based on my review of the deposition transcripts and what he previously performed and what he is able to perform now; and so

that is reflected in the -- the types of household services that are considered in the calculations.

And so the types of household services are listed in paragraph 36, and given the information that I had available, I also considered the mitigating household services to reflect some of the household services that Mr. Davis still is able to perform.

And the other unique thing, again, is the geographic area that is chosen for him, for the wages that are considered.

Q. And beyond those details, you are applying the same methodology for this calculation, correct?

A. That's correct.

Q. Okay. I'm going to move forward -- I'm going to jump ahead to page 15.

A. Okay.

Q. And I see Section B, Federal Government Offset Payments, correct?

A. Correct.

Q. And I see again, you are citing to the report of Dr. G, correct?

A. Correct.

Q. Is this another instance where you have no opinion on this and you're restating Dr. G's opinion?

A. That's correct.

Q. Okay. I will go backwards to page 13.

And I see this is the U.S. Department of Veterans Affairs VA Disability Benefits, correct?

A. Correct.

Q. And this is a new offset section, correct?

A. Correct.

Q. Could you briefly describe for me your analysis here.

A. Sure. So Mr. Davis has been receiving VA disability benefits based on 100 percent disability rating associated with his non-Hodgkin's lymphoma diagnosis.

And what -- the methodology that I use is I used information on the VA disability benefits that Mr. Davis has received up to whenever the data ended, and I calculate the value of those VA disability benefits; and up to 2025 and going forward, I use COLA increases to estimate the value of future disability benefits that Mr. Davis is

expected to receive until his life expectancy.

The COLA increases are standard increases that VA -- the VA uses to determine the monthly disability benefits for veterans based on their disability percent rating.

Q. Do I understand correctly that you are identifying the difference between the value of his ratings excluding the NHL from the total value of his ratings including the NHL?

A. I consider the VA disability benefits that are related to his NHL diagnosis, and I calculate their value.

So in my calculations, I don't consider the illnesses that are deemed not related to Camp Lejeune.

Q. And I see here that those not related are rated at 90 percent, correct?

A. Correct.

Q. And when you include the NHL, he's rated at 100 percent, correct?

A. Correct.

Q. In addition to the SMC rating?

A. Right.

Q. So is your analysis here that the

potential offset is the total value of the 100 percent plus SMC rating?

A. The value is related -- is only related to the Camp -- the -- those are that allegedly related to Camp Lejeune. I don't consider -- I take out the amounts that are deemed not related to Camp Lejeune.

Q. So you identify the amount of the award that would be received for those not related to injuries, and you take that amount out?

A. That's right.

Q. Is that correct?

A. Exactly.

Q. So is it fair to say that you're identifying the difference between those two ratings?

A. Correct.

Q. Okay. Is there anything else that you think we haven't discussed yet in terms of your analysis of the VA disability benefits?

A. I calculate their present value using a discount rate. That's about it.

Q. Okay. I'm done with Exhibit 13.

MR. VANSLYKE: I will mark as Exhibit 14 your report for Mr. Gleesing.

Tosic - March 5, 2026

(Exhibit 14, Expert Report of Dubravka Tosic for Mr. Joseph M. Gleesing dated December 15, 2025, marked for identification, as of this date.)

Q. I will jump ahead to page 7.

And do you see heading 5, Review and Assessment of Plaintiff's Economic Expert Report?

A. Yes.

Q. And I see heading B, Lost Earnings at Upjohn/Pfizer, correct?

A. Correct.

Q. Are there any differences in your assessment or Mr. Staller's calculation of lost earnings for Mr. Gleesing?

A. I'm sorry, can you repeat the question.

Q. Do you agree that we've looked at other plaintiffs with lost earnings sections?

A. Yes.

Q. Would you agree that there is a different calculation occurring for Mr. Gleesing than for the previous plaintiffs?

A. Slightly different.

Q. Could you explain briefly your assessment of Mr. Staller's calculation for

Mr. Gleesing's lost earnings.

A. Sure. There are two elements to the calculation of lost earnings for Mr. Gleesing conducted by Mr. Staller. The first one is related to lost earnings at what I would call Pfizer.

Based on Mr. Gleesing's testimony, he decided to accept severance. He decided to accept a severance package provided to him by Pfizer, and his testimony -- he testified that had he not been ill, perhaps he would have remained employed one more year; would have taken the severance package one year afterwards.

The severance I think -- believe -- I believe goes on for 18 months. And what Mr. Staller does, without any basis, is he increases the amount of the severance -- the severance amount in the second year; and there -- I did not see a basis for that growth rate for the severance amount in the second year of the severance package. And typically, when individuals get severance pay, they don't get increases to the severance amount that they receive. That's the criticism regarding lost earnings at Pfizer.

I also include here the criticism

related to the probability of unemployment adjustment that Mr. Staller did not apply to the calculation of lost earnings associated with Mr. Gleesing's work, teaching, and I believe that, you know, this is an appropriate adjustment to be made.

Q. And specific to the probability of unemployment adjustment, is the methodology there the same as the previous time that we talked about that adjustment?

A. Yes, correct.

Q. And I see Section D is titled Past and Future Lost Household Services, correct?

A. Correct.

Q. In terms of past lost household services, is there anything unique to Mr. Gleesing, or are you applying the same criticisms of Mr. Staller methodology as you have elsewhere?

A. I'm applying the same criticism.

Q. And do you feel that we've already covered everything related to your criticisms of future household services or is there more that you think needs to be understood?

A. I believe we've covered it.

Q. So I'm going to turn to Section 11 at

the bottom. I see Section B heading Calculation of Earnings Lost, correct?

A. Correct.

Q. And then that continues on page 12.

And I know you explained your unique criticisms of Mr. Staller's calculations here. Is there anything unique about how you calculate Mr. Gleesing's lost earnings?

A. I think -- I believe I follow the same methodology that I do with other plaintiffs where I calculate lost earnings.

Q. Subject to the things we already discussed about the severance pay and the probability of unemployment adjustment, correct?

A. Correct.

Q. I see on page 13, Section 5 discusses Actual/Mitigated Earnings, correct?

A. Yes.

Q. Is this the first plaintiff where we've seen that section?

A. I believe so.

Q. I know it's a short section, but can you just briefly explain your analysis there.

A. So during the loss period, Mr. Gleesing

had actual earnings with Pfizer, and -- as an educator, and those actual earnings are considered in the calculations.

Q. Thank you.

And on page 14, I see Section C for Calculation of Lost Household Services.

Are you applying the same methodology here as you have for other plaintiffs?

A. I do.

Q. I'm moving ahead to page 17. I see Section A, VA Disability Benefits, correct?

A. Correct.

Q. And are you applying the same methodology here as you do for other plaintiffs in calculating their VA disability benefits offsets?

A. That's correct.

Q. And on page 19, under Section E, Federal Government Offsets, it looks like you are, again, restating the opinions of Dr. G, correct?

A. That's correct.

Q. So you are providing no opinions on the offsets based on Medicare payments, correct?

A. Correct.

Q. And no opinions about services provided

through VHA, correct?

A. Correct.

Q. And no opinions about services paid for by Tricare, correct?

A. Correct.

Q. I'm done with Exhibit 14.

MR. VANSLYKE: I will mark as Exhibit 15 your report for Mr. Hill.

(Exhibit 15, Expert Report of Dubravka Tosic for Mr. Bruce Hill dated December 15, 2025, marked for identification, as of this date.)

Q. I will move to page 9, and I see Section 5 says Review and Assessment of Plaintiff's Economic Expert Report, correct?

A. Correct.

Q. And then on page 10, I see Section B for Fringe Benefit Loss, correct?

A. Correct.

Q. I believe that is a new section to be by itself.

Can you please briefly explain to me your analysis in this section.

A. Sure. Mr. Staller calculates Mr. Hill's

fringe benefit losses by assuming that Mr. Hill had access to a defined benefit pension plan and a defined contribution plan with an employer match.

Based on the information available to me that I reviewed, I concluded that there is documentation to support Mr. Hill having had access to a defined benefit pension plan while employed with the Department of Corrections, but I did not see any evidence that he also had a -- access to a defined contribution benefit plan with an employer match.

And so I believe that Mr. Staller's calculations of Mr. Hill's fringe benefit losses are overstated.

Q. Am I correct that for Mr. Hill, your opinion is solely that there is no basis to believe that he had access to the matching, as opposed to for plaintiff Amsler, where you believe a record specifically indicates that she does not have matching?

A. That's correct.

Q. So you did not find any specific indication confirming that Mr. Hill does not have access to matching?

A. That's correct.

Q. Okay. I see Section C is for Lost Household Services. And is there anything unique to understand about Mr. Hill here or do your previous criticisms of Mr. Staller's methodology apply?

A. Well, it is a little bit unique in the sense that we have vocational expert reports here of Mr. Fryar and Ms. Navarro, and it's not entirely clear whether Mr. Staller even considered them in his calculations of past lost household services. So that's, I think, what is unique about my criticism of Mr. Staller's calculations regarding Mr. Hill.

Q. And what is the role that you believe those life care plans would play as to lost household services?

A. Well, in terms of one of the elements that both Mr. Fryar and Ms. Navarro address in their life care plans is that Mr. Hill will need assistance with lawn care; and lawn care is a type of household services. It is included in a life care plan, but it's a type of household services. And so it's not entirely clear whether Mr. Staller, you know, took those elements of the life care plans into account.

Q. Do you understand the life care plans to address any needs in the past or are they only

projecting needs in the future?

A. They typically provide the basis for care in the future, but they often involve a review of items that have been -- may have been needed in the past. And so that's why I think that it's not clear whether Mr. Staller took that into account or not.

Q. Other than that factor, are you applying the same criticisms to Mr. Staller's methodology here?

A. Yes.

Q. Okay. I will move forward to page 14, and I see Section 6 titled Calculations of Economic Lost for Plaintiff Mr. Hill, correct?

A. Correct.

Q. And then I see Section B, Calculation of Earnings Lost, correct?

A. Correct.

Q. Is there anything unique about your calculations here or are you applying the same methodology that you've used for other plaintiffs?

A. What is unique here about Mr. Hill is that Ms. Navarro, one of her opinions is that Mr. Hill has had a residual earning capacity, and

even though he did not work, he could have performed certain services and could have worked in certain occupations. So I use that as the basis -- those occupations that she lists in her expert report, I use that as the basis for the calculation of projected mitigating earnings for Mr. Hill if he worked full-time or if he worked part-time.

So those projected mitigating earnings are considered in the calculation of Mr. Hill's lost earnings. So that's what's unique about him.

Q. When you refer to earning capacity here, do I understand correctly that you are referring to an analysis that Mr. Hill could have earned this money but did not?

A. Correct.

Q. Do you believe that that analysis would be an indicator that lost earning capacity is being analyzed instead of lost earnings?

A. Well, certainly, in terms of mitigated earnings, Ms. Navarro's opinion is that he had a residual earning capacity, and so that is what I consider in my calculations of earning losses.

In terms of but-for earnings, I project his but-for earnings based on his actual earnings.

Q. So in this case, those are presented as two separate concepts, correct?

A. Well, his -- you know, you can think of his projected mitigating earnings as earnings that he could have earned had he worked. So you can also think of both but-for earnings and mitigating earnings as both following the concept of lost earnings or earnings; either but-for earnings or mitigating earnings.

Q. Am I wrong that they are distinguished in this report?

A. Which ones?

Q. The lost earnings versus lost earning capacity.

A. I don't make that distinction in here. I refer to but-for earnings, and I refer in my report to actual and estimated mitigating earnings. So I don't call them mitigating earnings, mitigating earning capacity. I call it mitigating earnings.

Q. But --

A. What I'm saying is that Ms. Navarro -- these calculations are based on Ms. Navarro's assessment that -- that Mr. Hill is -- it's her opinion that Mr. Hill had a residual earning capacity

and could have worked in certain occupations, which I considered.

Q. Is it your opinion that this report, including your reliance on Ms. Navarro's opinion, treats lost earnings and lost earning capacity as one and the same?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. Again, the lost -- the estimated mitigating earnings are based on what I believe is Ms. Navarro's opinion that Mr. Hill had residual earning capacity. I -- I call them estimated mitigating earnings.

Q. So you're saying you use the label estimated mitigated earnings for what Ms. Navarro refers to as his earning capacity?

A. I -- I believe so.

Q. Does your report treat estimated mitigated earnings and lost earnings as one and the same?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. Can you repeat the question.

Q. Does your report treat estimated

mitigated earnings and lost earnings as one and the same?

MR. KLOTZBUCHER: Same objection.

A. No.

Q. So I see on page 15, Section 3 is titled Actual and Estimated Mitigated Earnings, correct? Mitigating Earnings. Sorry.

A. Correct.

Q. And this is the section discussing Ms. Navarro's report that we just referred to?

A. Correct.

Q. Is there anything further about this section that you feel needs to be explained?

A. No, I don't think so.

Q. And I see Section 4 on page 16 is titled Fringe Benefits, correct?

A. Correct.

Q. Are you applying the same methodology here as we discussed under your criticism of Mr. Staller's calculation of fringe benefits?

A. In my calculation of lost fringe benefits, I take into account the average estimated employer cost of providing the defined benefit pension plans to employees, and that cost is the

basis for my calculations of lost fringe benefits.

Q. On page 17, I see Section 6 for Earnings and Fringe Benefit Lost, correct?

A. Correct.

Q. Is this essentially compiling the sections we already discussed?

A. Correct.

Q. In Section C, I see the title Calculation of Lost Household Services, correct?

A. Correct.

Q. And are you applying the same methodology as you have for other plaintiffs, or are there things you need to understand about Mr. Hill?

A. For Mr. Hill, what is -- what is unique about him here is that the calculations of lost household services is based on the assistance with lawn care that I provide calculations for.

Q. And you rely upon that as the basis for lost household services, correct?

A. Correct.

Q. Are you otherwise applying the same methodology?

A. Yes.

Q. I see Section D on page 18 titled

Calculation of the Present Value of Medical and Related Care, correct?

A. Correct.

Q. Okay. And do I understand correctly that your role here is to provide a present value calculation of the competing life care plans?

A. I provide a present value calculation using Ms. Navarro's life care plan.

Q. I'm looking at page 26, and the table in the section Estimated Offsets.

I see. We have not reached that part yet. I will come back to it.

Okay. So in Section D, you are only applying the present value calculation to Ms. Navarro's life care plan, correct?

A. Correct.

Q. And can you briefly describe your methodology to do so.

A. What I do is I look at the elements of care that Mr. -- Ms. Navarro has identified in her life care plan. I consider the values that she provides for each type of care as well as their frequency, and based on the value and the frequency, I calculate what the present value of those -- of

that life care plan would be; and I do this for all elements that have information on cost and frequency.

So there are a couple of -- a couple of categories for which either the cost or the frequency was not provided, so I've put that aside and I did not include those in my valuations.

Q. And Section 7 on page 20 is titled Potential Offsets, correct?

A. Correct.

Q. And then on page 21, I see Section A, VA Disability Benefits, correct?

A. Correct.

Q. And are you applying the same methodology here to identify the amount of a potential offset for VA disability benefits?

A. Correct.

Q. On page 23, I see Section B, Present Value of Future Medical and Related Care Covered by Federal Government based on VA Rates and Medicare Rates, correct?

A. Correct.

Q. And in this calculation, are you relying on the report of Dr. Miller?

A. Yes, I am.

Q. And what are you relying on that report for?

A. I'm relying on Dr. Miller's report for VA rates and Medicare rates for the elements of the life care plans provided by both Mr. Fryar and Ms. Navarro.

Q. And can you briefly summarize your calculations here.

A. Sure. So for -- starting with Mr. Fryar's export report and the elements contained in it with respect to the life care plan, I take those elements and their frequency, and I apply the VA rates that are provided in Dr. Miller's expert report. And since -- since Mr. Fryar's export report provides a high range and a low range, I provide two alternative calculations; one using his low range and another one using his high range.

I do the same thing for Ms. -- using Ms. Navarro's expert report, where I take the elements that she has identified in her expert report, their frequency, and I apply the VA rates based on Dr. Miller's expert report. And again, since Ms. Navarro also provides a low and a high range in terms of frequency, I have two calculations

here, using -- one using her low range and another one using her high range.

I repeat these calculations considering Medicare rates. So in the first instance, I rely on the VA rates provided by Dr. Miller, and in the second go-round, I rely on the Medicare rates that Dr. Miller provides. And I repeat the same calculations; one using the low and the high estimates from Mr. Fryar's report, and the low and the high estimates from Ms. Navarro's expert report.

Q. When you rely on Dr. Miller's report, is it your understanding that Mr. Hill will receive coverage from both the VA and Medicare?

A. I don't make that determination.

Q. So if I turn back to page 26, in the table section titled Estimated Offsets, am I correct that you have identified the amounts that you were just describing as the high range and low range for both Mr. Fryar and Ms. Navarro?

A. In Section 8?

Q. Yes.

A. Correct.

Q. And I see a line for the VA coverage using Mr. Fryar's life care plan, and the line for VA

coverage using Ms. Navarro's life care plan, correct?

A. Correct.

Q. And then I see a line for Medicare coverage using Mr. Fryar's life care plan, and another line for Medicare coverage using Ms. Navarro's life care plan, correct?

A. Correct.

Q. So in this table of offsets, is it your understanding that these numbers should be added together in any way?

A. I think that they should be considered individually, because they are based on Mr. Fryar's expert report using VA rates; and then Mr. Fryar's expert report using Medicare rates. Two different types of rate bases.

Q. Is it your understanding that the services outlined in Mr. Fryar's life care plan would be covered either by the VA or by Medicare?

A. Again, I don't make that determination.

Q. Are you providing any opinion on the amount of offsets that should be provided based on VA coverage of Mr. Fryar's life care plan?

A. The only opinion I provide is related to the present value of the life care plan using

Mr. Fryar's life care plan expert report, and based on either VA rates or Medicare rates. So I'm providing an opinion on what their present value is, and nothing more than that.

Q. So you have no opinion on whether a service will be covered by the VA as opposed to by Medicare?

A. That's correct.

Q. Are you offering an opinion that the services identified in the life care plans would be covered by either of them?

A. I don't have an opinion on that.

Q. So your opinion is limited to the present value of the coverage, correct?

A. Correct.

Q. So you are not offering an opinion that any coverage will actually be provided, correct?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. Right. I believe that's outside of my area of expertise.

Q. So I'm back on page 23, Section B.

Do you believe we've fully discussed your analysis in this section?

A. I believe so.

Q. And on page 26, I see Section C at the top, Federal Government Offset Payments, correct?

A. Correct.

Q. And is this another section where you are simply restating Dr. G's opinions?

A. That's correct.

Q. So you have no opinion on offsets for medical services paid for by Medicare, correct?

MR. KLOTZBUCHER: Objection, form.

A. That's correct.

Q. I'm sorry, I'll clarify.

You have no opinion on offsets for past medical services paid for by Medicare, correct?

A. That's correct.

Q. And you have no opinion about past medical services provided by the VHA, whether outpatient or inpatient, correct?

A. Correct.

Q. Okay. I'm done with Exhibit 15.

MR. VANSLYKE: I will mark as Exhibit 16 your report for Mr. Keller.

(Exhibit 16, Expert Report of Dubravka Tosic for Mr. Scott Keller dated December 15,

2025, marked for identification, as of this date.)

Q. Turning to page 9, I see Section 5 titled Review and Assessment of Plaintiff's Economic Expert Report, correct?

A. Correct.

Q. And Section B, Lost Household Services, correct?

A. Correct.

Q. Is there anything unique to understand about Mr. Keller or are you applying the same criticisms of Mr. Staller's methodology as you have for other plaintiffs?

A. I think the criticism is pretty consistent with the other plaintiffs.

Q. And on page 12, I see Section C, Past Medical and Related Care.

And I understand this to be another section referring to essentially, home care provided by family members, correct?

A. Correct.

Q. And are you applying the same criticisms here as you have for other plaintiffs?

A. Pretty much so, yes.

Q. Is there anything unique that you feel we need to understand about Mr. Keller?

A. Yes. I think one of the things that is unique is that Mrs. Keller testified in her deposition that she provides caregiving to her sister, and given this information, if I were to calculate losses related to personal care -- personal medical care provided by Ms. Keller to Mr. Keller, I would want to know what her hourly wages for the caregiving that she's provided -- that she has been providing to her sister. That may be a useful data point to consider. I don't know if I would use it, but I would definitely want to look at it.

And it's just not clear whether Mr. Staller at all took that into account in his calculations. Again, he relies on the hourly wage rates for personal care and healthcare assistance, and it would be useful to know what -- Mrs. Keller's actual hourly wages compared to the averages.

Q. Other than that factor, are you applying the same criticisms?

A. Yes.

Q. I'm moving on to page 14 where I see Section 6 titled Calculations of Economic Loss for

Plaintiff Mr. Keller.

And then on page 15, I see Section A, Calculation of Lost Household Services, correct?

A. Correct.

Q. And are you applying the same methodology to calculate those lost household services, or is there anything unique that we need to -- that you need to understand about Mr. Keller?

A. What is unique about Mr. Keller is during the period of loss, he has children in the household. And when selecting data from The Dollar Value of a Day, the age of the youngest child is taken into account to determine the size and character of the household.

Q. Other than that factor, are you applying the same methodology?

A. Yes.

Q. Okay. On page 18, I see Section B, Past Medical and Related Care Loss of Mrs. Keller.

And are you applying any unique analysis here other than wanting to know her existing hourly rate?

A. Well, I think what's also unique about these calculations is that it's again, important to

distinguish between the time Mrs. Keller has been spending taking care of her sister versus taking care of Mr. Keller.

So I think when one would perform some -- such calculations, that kind of information would be useful to have.

Q. Other than that factor, are you applying the same analysis as you have for other plaintiffs that have claimed past medical and related care?

A. I'm not doing an analysis for this type of loss. I'm just providing a criticism of what Mr. Staller did.

Q. Fair enough.

Your criticism is the same otherwise, correct?

A. Correct.

Q. I'm moving forward to page 19. I see Section 7 titled Potential Offsets, and then I see Section A titled U.S. Department of Veterans Affairs VA Disability Benefits, correct?

A. Correct.

Q. I am on page 20, looking at paragraph 55.

A. Okay.

Q. Can you read paragraph 55 in its entirety, and let me know when you're finished.

A. Sure.

Q. Do you understand paragraph 55 to describe identifying the difference between the total amount of benefits that he is receiving versus the amount of benefits that he would be receiving absent his Camp Lejeune injuries?

A. The calculations that are described in paragraph 55 consider Mr. Keller's illnesses, except his heart-related illnesses, and if you take out his heart-related illnesses from the picture, his combined disability percent rating is 90 percent.

So what I do is he received a rating related to his leukemia in 2022. Up until then, it was other illnesses at 90 percent. So I'm sorry, it's the other way around. His heart-related illnesses, he received a rating of around 2022. So up until then, it was -- he had a 90 percent rating. So I'm able to use his actual monthly amounts up until that point.

And afterwards, I refer to VA compensation tables using a 90 percent rating, and I -- considering everything except the heart-related

illnesses. And so the 90 percent ratings and the monthly benefit amounts is what I use in my calculations.

Q. Do I understand correctly that this is essentially presenting two hypotheticals; one where the heart-related illnesses are found to be related to his exposure at Camp Lejeune, and one where his heart-related illnesses are found to be unrelated?

A. Correct.

Q. And is your opinion that in each of those examples, separately, the methodology would still be to identify the difference between benefits received for conditions related -- apologies. Let me rephrase.

Is your understanding that the methodology could still be to identify the difference between the total benefits being received versus the benefits that would be received for unrelated conditions by themselves?

A. So what I do here is when it comes to all illnesses, so taking into account all illnesses including heart-related illnesses, his disability rating is 100 percent. And so there is no difference there to be calculated. I consider the total amount

of his monthly VA disability benefits in my calculations.

In the second scenario where I assume that all of Mr. Keller's illnesses are related to Camp Lejeune except the heart-related illnesses, it's clear that his combined rating in this scenario would be 90 percent. So I don't calculate a difference between 100 percent and 10 percent. I calculate -- I take what the VA compensation figures are using the 90 percent combined rating, and those monthly benefit amounts are the basis for my calculations of the VA disability benefits.

Q. When we discussed the offset calculation related to VBA disability benefits before, do you recall discussing finding the difference between the total award versus the amount that would be received only for those conditions unrelated to Camp Lejeune?

A. Yes.

Q. And the increase from what would be received for the conditions unrelated to Camp Lejeune to the total that's actually being received is the amount that you identified as being received due to the Camp Lejeune-related ratings, correct?

A. Correct.

Q. For Mr. Keller, in the hypothetical where the heart-related illnesses are unrelated, wouldn't that methodology require identifying the value that would be received for the heart-related conditions by themselves and subtracting that from the total that is actually being received?

A. I think that this is a much simpler scenario, given that his disability ratings were 90 percent prior to August 2022, and that his combined disability percent rating without the heart-related is again, 90 percent.

So it's simple just to go to the tables and look up the amounts that are -- that are at 90 percent. I didn't take the next step to calculate the differences, because this is a lot more straightforward than some other ones.

Q. Sticking with the hypothetical where the heart-related illnesses are found unrelated, if the heart-related illnesses were rated at 100 percent by themselves, wouldn't that absorb all of the benefits received for other conditions?

A. I would have to run the VA calculator to see, because he has a number of illnesses, and I would have to see how -- the combined rating

calculations are not straightforward like that. You have to take the individual ratings for every single disease and see what the ratings turn out with or without. So it's not -- it's not a straightforward calculation like you say.

Q. So my understanding of your methodology for this process for other plaintiffs is that you take the total award and subtract the award that would be received if the plaintiff only had their unrelated injuries, and you identify the difference as the increased amount received due to the Camp Lejeune-related injuries, correct?

A. Correct.

Q. In the hypothetical where the heart-related illnesses are found to be unrelated, my understanding of that methodology would be to take the total that's being received and identify the amount that would be received for only the unrelated injuries, i.e., the heart-related illnesses, and the difference would be the increased amount received due to the Camp Lejeune-related illnesses; is that correct?

A. Correct.

But you would need to calculate -- you

would, again, need to go to VA calculator and calculate what the cumulative amount is without the heart-related rating. That's what you would have to do. So it's not -- you would have to enter every single disease that he received a rating for in the calculator with and without the heart-related disease to see what percent. It's not necessarily if he received 100 percent rating for heart-related illnesses that suddenly, all the VA disability benefits that are Camp Lejeune-related would become zero. And the reason for that is because he has a number of illnesses, and every single illness has an associated percent disability rating. So you would have to do that calculation really to see how the numbers pan out.

Q. So my interpretation of these calculations, again, under the hypothetical that the heart-related illnesses are found unrelated, is that you have essentially applied the inverse calculation to what you have applied for other plaintiffs.

Do you disagree with that?

A. I think what I did is I calculated the combined rating by taking out the heart-related illnesses is 90 percent. And so based on the

90 percent rating, I went to the VA -- I looked at his actual VA benefit amounts, and in order to project into the future, I used the 90 percent rating that's available in the tables.

So it's not the inverse. It's actually just a more straightforward calculation for him, for this scenario.

Q. So your opinion today is that you are applying the same methodology to calculate this offset for Mr. Keller as you have for the other plaintiffs?

A. Well, it's the same methodology in the sense that I -- in this particular scenario, I calculate what the cumulative percent disability is for -- for illnesses that are related or allegedly are related to Camp Lejeune. And since that is 90 percent and he had 90 percent before, I'm able to use the monthly amounts straight from the tables.

Q. So if I represent to you that this analysis is the backwards version of the analysis applied to other plaintiffs, you would disagree?

MR. KLOTZBUCHER: Objection, form.

You may answer.

A. I'm not sure that it's backwards. I

think it's just more straightforward.

Q. If I represent to you that the calculations here are incorrect according to the methodology applied to other plaintiffs' VBA offsets, you would disagree?

A. I would have to go back to the calculations and review them --

Q. So you --

A. -- to respond.

Q. So you have no opinion on whether or not you agree with me that these calculations are incorrect?

A. Not at this time.

Q. All right. Moving to page 22.

Paragraph 58 is another example where you are simply restating Dr. G's opinions, correct?

A. Correct.

Q. Okay. I'm done with Exhibit 16.

MR. VANSLYKE: We can go off the record.

THE VIDEOGRAPHER: The time right now is 4:47 p.m. We are off the record.

(There was a recess taken.)

THE VIDEOGRAPHER: The time right now is 5 p.m. We're back on the record.

BY MR. VANSLYKE:

Q. I'm going to introduce as Exhibit 17 your report for Mr. Kidd.

(Exhibit 17, Expert Report of Dubravka Tosic for Mr. Robert A. Kidd dated December 15, 2025, marked for identification, as of this date.)

Q. So Ms. Tosic, in this report, I notice that there is no assessment of Mr. Staller's opinion, correct?

A. That's correct.

Q. Is that because Mr. Staller did not provide any reports related to Mr. Kidd?

A. That's probably true.

Q. Looking through this report, it appears to me that the only section that may be an opinion is Section 3 titled Federal Government Offsets.

Do you agree?

A. That is included in my report, but again, I don't have an opinion on offsets.

Q. So this is another section where you are restating Dr. G's opinion?

A. Correct.

Q. And it appears to me that nowhere else

in this report are you providing an opinion on either damages or offsets for Mr. Kidd; is that correct?

A. Correct.

Q. Okay. Done with Exhibit 17.

After having gone through these reports, are you aware of any other opinions that you intend to offer as to these eight plaintiffs?

A. Not at the moment.

Q. And sitting here today, is there anything about the reports for these eight plaintiffs that you believe needs to be supplemented or amended?

A. I would want to look at the VA disability benefit calculations for Mr. Keller, and at the time I will evaluate whether my calculations stand or whether they need to be supplemented. At this point, I don't know.

Q. Thank you.

I'm going to refer back for a moment to Exhibit 14, which is the report for Mr. Gleesing.

I'm going to refer to Appendix A, Table 2. Please let me know when you're there.

A. Okay.

Q. Looking at this table, I see a column titled Present Value of Earnings Loss Less Taxes,

correct?

A. Correct.

Q. And it appears to me that except for the last number, these values do not change from the previous column Earnings Loss Less Taxes, correct?

A. Correct.

Q. Are you aware of a basis to conduct a present value analysis on past losses?

A. Sometimes you can do that, yes.

Q. And what would be the reason to do so?

A. A reason could be that I'm asked to do it. A reason could be if the opposing expert has done it.

Q. Can I assume you were not asked to do so here?

A. Yes.

Q. So looking at the first row under those two columns, I see that in 2016, the Earnings Loss Less Taxes was 4,853, correct?

A. Correct.

Q. And then in the following column, the 2016 Present Value of Earnings Loss Less Taxes is also listed as 4,853, correct?

A. Correct.

Q. If an individual had $4,853 in 2016, would that be worth $4,853 today?

A. Probably not.

Q. Can you explain why.

A. Because the time value of money.

Q. What does that mean?

A. That means that $4,000 ten years ago is worth less today.

Q. It's worth less today?

A. Yes.

Q. How does it become worth less today?

A. Because there are -- what you were able to buy with $4,000 back in 2016, due to inflationary pressures from year to year, you are able to buy less with $4,000 today. That is the time value of money.

Q. I understand.

So in order to achieve the same value today that $4,853 would have achieved in 2016, it would require a greater amount of money, correct?

A. Today, yes.

Q. Have you ever applied present value calculations to past losses in that way?

A. I believe I have.

Q. And if you had been asked to do so in

this case, you could have?

A. I could have, yes.

Q. I am setting aside Exhibit 14.

Wouldn't the same rationale apply to medical expenses incurred in the past?

MR. KLOTZBUCHER: Sorry. Objection, form.

You may answer.

A. Possibly.

Q. Do you believe that it would be unreasonable to conduct such a past value -- I apologize.

Do you believe it would be unreasonable the conduct such a present value calculation for past medical expenses?

A. I guess I would need a little bit more information about this hypothesis to be able to answer that question.

Q. So sitting here today, you do not hold an opinion that that would be unreasonable?

A. It's -- it's -- it may not be unreasonable. I would need a little bit more information.

Q. And if you had been provided with past

medical expenses and asked to conduct a present value calculation for those expenses, you would have been able to make that determination at that time?

A. Possibly.

Q. Have you ever conducted a present value calculation for past medical expenses?

A. No.

Q. Are you aware of other economists who have?

A. No, I'm not.

Q. And I understand that you have not reviewed the reports of plaintiffs' experts, Marjorie Hackett-Wallace or Anirban Basu, correct?

A. Correct.

Q. And you have not reviewed the reports of the BRG employee, Gregory Russo?

A. Correct.

Q. But you are aware that he is retained in this litigation, correct?

A. Correct.

Q. Have you discussed this litigation with him?

A. No.

Let me stand corrected. I did discuss

this litigation once with him.

Q. When was that conversation?

A. Around the time when he was being considered for retention. So before he conducted any work.

Q. Are you generally aware of the topics that his report addresses?

A. No.

Q. You have not provided any opinion as to past medical expenses as damages in your reports, correct?

A. That's correct.

Q. And to the extent that your reports contain statements about past medical expenses as offsets, you are only restating the opinions of Dr. G, correct?

A. Correct.

Q. In general, would you agree that an expense must first be incurred in order for that expense to be paid?

MR. KLOTZBUCHER: Objection.

A. Generally speaking.

Q. For example, BRG does not get paid for your work as an expert unless you perform such work

resulting in a bill for services, correct?

A. That's usually the case.

The exception is in cases where we ask for a retainer before any work is performed, so BRG is paid in advance of any work being performed.

Q. In that instance, is BRG incurring an obligation to perform that work?

A. The obligation comes from the contract that is signed.

Q. And the contract is the basis for the retainer payment, correct?

A. Usually, yes.

Q. From an economic perspective, would you agree that if the government paid for a past medical expense, there must have been an expense incurred that needed to be paid?

MR. KLOTZBUCHER: Objection.

A. I think this is outside of my area of expertise.

Q. So you have no opinion on that topic?

A. No.

Q. When you analyze VBA disability benefits, do you utilize the same life expectancy as Mr. Staller?

A. I do, with the exception of Mr. Davis, I believe.

Q. And why is that different?

A. Because Mr. Staller did not produce a report back in February 2025 for Mr. Davis, and I did; and in preparing my expert report, I had to consider Mr. Davis' statistical life expectancy. And so in my December report, I used -- continued to use the same methodology.

Q. Do you think there are any issues caused by using different life expectancies to calculate damages than to calculate offsets?

A. Not necessarily.

Q. Why not?

A. If the life expectancy estimates are close, the -- any differences may be relatively small. So it wouldn't matter.

Q. Are you aware that the VA makes its own internal projections about future obligations to disability recipients?

MR. KLOTZBUCHER: Objection.

A. I'm vaguely aware of that, yes.

Q. Are you aware that in doing so, the VA uses specific veterans' life tables?

A. No.

Q. If you had been aware of that, would you have also used veterans' life tables for your VBA offset calculations?

MR. KLOTZBUCHER: Objection.

You may answer.

A. I would consider them. I'm not sure at this point whether I would use them.

Q. Setting aside the issue about your calculations of VBA benefit offsets for Mr. Keller, is it still your opinion that for the other plaintiffs, you identify the offset by subtracting the amount that the plaintiff would receive for the unrelated conditions from the total amount that they receive?

A. Correct.

MR. VANSLYKE: I will introduce as Exhibit 18 -- strike that.

Q. Will you refer back to Exhibit 15, please. And this is the report for Mr. Hill. And I am looking at the very last page of the Materials Considered.

So in that table, do you see where the Bates numbers change from starting with three zeros

to starting with CLJA?

A. Yes.

Q. The second to last Bates range starting with three zeros, I read 00028_HILL_VBA_0000000001; is that correct?

A. Sorry, can you repeat it.

Q. I see 00028_HILL_VBA_ and then nine zeros, and the number 1.

A. Yes.

Q. And then the ending Bates of that range is the same intro, and the ending Bates page ends in 11947, correct?

A. Correct.

Q. And then if you go down to the entries beginning with CLJA, second to last one of those is CLJA_VBA_9 zeroes and 1, correct?

A. Correct.

Q. And the ending Bates page is the same preface, and then ending with the numbers 22, correct?

A. Correct.

Q. Would you agree that CLJA_VBA_00000000, and then 19 falls within that range?

A. Yes.

Q. Can I assume that you have reviewed Bates No. CLJA_VBA_0000000019?

A. I would have to review the document to see if I reviewed it in the past.

Q. I will represent to you that it is a spreadsheet provided by the VBA that includes detailed entries of each plaintiff's individual ratings over time, awards over time, and payments over time.

Does that sound familiar?

A. It does, in the sense that what I referred to was an Excel spreadsheet with that information.

Q. And to clarify, that was an Excel spreadsheet that you could manipulate, not a screenshot of an Excel spreadsheet, correct?

A. It's an Excel spreadsheet.

Q. Okay.

MR. VANSLYKE: Now I will introduce as Exhibit 18 an excerpt from that spreadsheet, and I'll represent that this is the data from the Ratings tab filtered to plaintiff Davis, and sorted in reverse chronological order by the begin date of each rating.

Tosic - March 5, 2026

(Exhibit 18, Excerpt from Bates No. CLJA_VBA_0000000019, marked for identification, as of this date.)

Q. Do you see an entry on August 26, 2014 for left ankle strain with left Achilles tendonitis?

A. Yes.

Q. And do you see the Percent Number column to the left of the Begin Date column?

A. Yes.

Q. Do you understand that that's the rating percentage for this rating?

A. This is the percent rating for this diagnosis.

Q. Correct.

And do you see that it says 20 percent?

A. Yes.

Q. And then if we go up to October 3rd of 2017, do you see that it says Left ankle strain with left Achilles tendonitis rated for 100 percent?

A. Yes.

Q. And then if we go up to January 1st of 2018, it says Left ankle strain with left Achilles tendonitis rated for 20 percent, correct?

A. Correct.

Q. And then on December 24th of 2018, it says Left ankle strain with left Achilles tendonitis rated for 10 percent, correct?

A. Yes.

Q. Would you agree that this is an example of a rating for the same condition fluctuating up and down?

A. Yes.

Q. If we apply the methodology that you described for calculating the VBA offsets where we subtract the amount of benefits received for unrelated conditions from the total amount of benefits received, that difference would change if an unrelated conditions rating changes, correct?

A. It may or may not.

Q. There is at least a potential for that difference to change based on an unrelated conditions rating changing?

A. There's a potential, but we don't know for sure.

Q. And if, for example, Mr. Davis' left ankle strain with left Achilles tendonitis were to some day return to 100 percent disability rating, do you believe that would cause a change in the

difference between those two numbers?

A. I'm sorry, which two numbers?

Q. The difference between the amount received for the unrelated conditions subtracted from the total amount received.

A. It could. It may.

Q. I will set this exhibit aside.

MR. VANSLYKE: I will introduce as Exhibit 19 another excerpt from the same spreadsheet, and I will represent that this one is also from the Ratings tab, this time filtered to plaintiff Hill.

And it appears that I did not sort this one by the begin date, so it is only the Ratings tab filtered to plaintiff Hill.

(Exhibit 19, Excerpt from Bates No. CLJA_VBA_0000000019, marked for identification, as of this date.)

Q. Do you see on the third line Degenerative changes lumbar spine?

A. Yes.

Q. And at that point in time, it appears that this has not received a rating percentage, correct?

A. Correct.

Q. Do you understand generally what a degenerative condition is?

A. Generally.

Q. Can you provide for me, to the best of your knowledge, what a degenerative condition is.

A. A degenerative condition is a condition where something is -- has, I guess, reduced capacity.

Q. Do you understand degenerative to mean that the condition is expected to get worse over time?

A. No. No, I don't have that knowledge.

Q. All right. I will move on from Exhibit 19.

I will represent that this is the same spreadsheet with the Awards tab filtered to plaintiff Hill, and this will be Exhibit 20.

(Exhibit 20, Excerpt from Bates No. CLJA_VBA_0000000019, marked for identification, as of this date.)

Q. So this spreadsheet, based on the number of columns, runs onto the following page.

Do you understand that the amount a veteran receives in VBA disability benefits changes

based on the number of dependents that veteran has?

A. Yes.

Q. Do you understand that for purposes of that modification, a spouse is covered as a dependent?

A. Yes.

Q. And if we look at the second page, do you see the second column is the spouse flag?

A. Yes.

Q. Do you understand that to indicate whether the particular award shown includes a modification for a spouse as a dependent?

A. That's correct.

Q. And do you see that for part of the time, Mr. Hill received the spouse modification?

A. That's correct. And I may have mentioned that in my expert report, too.

Q. So is it your understanding that at some point in time, Mr. Hill no longer received the spouse modification?

A. Correct.

Q. And is it your understanding that that would decrease the amount of his award?

A. Yes.

Tosic - March 5, 2026

MR. KLOTZBUCHER: Can I get a time check.

THE VIDEOGRAPHER: We've been on the record for six hours, 30 minutes.

MR. KLOTZBUCHER: Thank you.

Q. Are you aware that the three other plaintiffs for whom you've calculated VBA offsets, Mr. Davis, Mr. Gleesing and Mr. Keller, all currently are receiving an award based upon having a spouse as a dependent?

A. I believe that I'm aware about Mr. Davis. I don't recall that to be the case for Mr. Keller; and who else did you say?

Q. Mr. Gleesing.

A. Mr. Gleesing.

Q. If I represent to you that that is the case for all three of them, do you have any reason to disagree?

A. No.

Q. You said you recall that for Mr. Davis, correct?

A. Correct.

Q. Would you agree that it's possible that Mr. Davis' spouse could die before he dies?

A. I mean, it's possible.

Q. Would you agree that it's possible that Mr. Davis and his spouse could get divorced?

A. Again, it's possible.

Q. Would you agree that if either of those happened, Mr. Davis' VBA award would decrease due to losing the spouse modification?

A. If that were to happen, his benefits may be reduced, holding everything else constant. So assuming nothing else has changed. He could also get divorced and get remarried, and now that we're speculating, we can, you know, assume that he could also get remarried and continue with the same benefits.

Q. If you believe that's speculation, wouldn't it also be speculation to assume that he will continue to have a spouse for the entire time he receives VBA disability benefits?

A. No. I think it would be speculative not to assume that.

Q. What's the difference?

A. The -- our current knowledge. The information that we have currently available.

Q. If Mr. Davis were to lose the spouse

benefit, wouldn't your VBA offset calculation based on current knowledge be inflated?

A. Not based on current information.

Q. But it would --

A. If the current information was updated, then the calculations could be updated. But the current calculations would not be updated based on some speculations about what could happen in the future.

Q. Are you aware of any opportunity for plaintiffs to have their offsets updated based on change in circumstances after they receive their award?

MR. KLOTZBUCHER: Objection.

A. I think that if I were to receive updated information and that updated information shows a change, that would result in potentially new calculations.

Q. And if the situation remains the same until the award is determined, and then the day after the award is determined and the offset is applied, Mr. Davis gets divorced, there would be no way to update the calculations at that time, correct?

MR. KLOTZBUCHER: Objection.

A. What do you mean by award?

Q. Any determination at trial about the amount of damages owed to the plaintiff and the offsets to be applied.

A. Again, if I'm asked to prepare my calculations the day after trial, I -- I would do that.

Q. Are you aware that the VA offers needs-based pensions?

A. Yes.

Q. Are you aware of military retirement pensions?

A. Yes.

Q. Are you aware of any relationship between these pensions and VBA disability benefits?

A. Yes.

Q. What is that relationship?

A. There is a concept called concurrent VBA and military retirement benefits, and I believe some of the plaintiffs that I have reviewed have concurrent, which allows an individual to receive both military retirement benefits and VBA retirement benefits, in full.

Q. Are you aware of any current policy

proposals to eliminate the concurrent program?

MR. KLOTZBUCHER: Objection.

A. No.

Q. Are you aware that in some circumstances, like a medical malpractice claim against the VA, if the plaintiff is successful and receives a damages award, the government withholds VBA disability benefits until the full damages award has been recouped?

MR. KLOTZBUCHER: Objection.

A. I have heard of such instances, but I'm not sure whether I've heard of them in relation to VA, VBA benefits being withdrawn.

Q. If the VBA offsets that you calculated were applied to a plaintiff in this litigation and then the scenario were to arise for that plaintiff, wouldn't they be losing the value of those benefits twice?

MR. KLOTZBUCHER: Objection.

A. I -- I mean, you -- you're asking me now to speculate. I -- I don't know.

Q. So you have no opinion to the effect that they would not be losing those benefits twice?

A. Again, I would have to have more

information. I would have to have actual data to be able to consider something like that.

Again, I have not heard of such instances.

Q. Is it still the case that you are not offering any opinions as to how the offsets that you've calculated should be applied?

A. That's correct.

Q. Are you rendering an opinion as to what VBA disability offsets should be applied against?

A. No, I'm not.

Q. So you're not holding yourself out as an expert in the application of offsets against a damages award, correct?

A. Again, I have no opinion on -- on whether the offsets can be applied or not.

Q. And your opinion is only as to the amount that you calculated as a potential offset, correct?

A. Correct.

Q. And you performed those calculations based upon what you were asked to do, correct?

A. As far as VBA benefits, that's correct.

Q. Do you have an opinion on whether VBA

disability benefits should be applied as an offset against a plaintiff's out-of-pocket medical expenses?

A. I don't have an opinion on that.

Q. Have you performed any research or analysis regarding solvency of funds from which Medicare is paid?

MR. KLOTZBUCHER: Objection.

A. No.

Q. Do you know where the funds come from to pay for medical care provided by Medicare?

A. Yes.

Q. Have you heard of the Federal Hospital Insurance and Federal Supplementary Medical Insurance Trust Funds?

A. Yes.

Q. Have you reviewed the 2025 annual report from the boards of trustees for either of those trusts?

A. No.

Q. Is it your opinion that the status of those trust funds does not jeopardize the future benefits upon which Medicare offset calculations are based?

MR. KLOTZBUCHER: Objection.

A. I don't have an opinion on that.

Q. Do you have any opinions about the stability of the VA healthcare system?

MR. KLOTZBUCHER: Objection.

A. No, I don't have an opinion on that.

Q. Have you done any research into the solvency or viability of the budgeting for continued payments under Tricare or TriWest?

MR. KLOTZBUCHER: Objection.

A. No.

Q. What about under Community Care Network?

MR. KLOTZBUCHER: Objection.

A. No.

Q. Have you done any research or analysis into the solvency or viability of the veterans' disability system?

MR. KLOTZBUCHER: Objection.

A. I would say no.

Q. Are you aware of the difference between mandatory and discretionary spending in the federal budget?

MR. KLOTZBUCHER: Objection.

A. Yes.

Q. Can you briefly explain the difference.

A. Mandatory spending is regulated by statements, and discretionary is by policy.

Q. Is it your understanding that discretionary spending needs to be appropriated on an annual basis?

A. I don't have that infor- --

MR. KLOTZBUCHER: Objection.

THE WITNESS: Sorry.

A. I don't have that information.

Q. Are you aware that funding for VA benefits specifically requires annual congressional approval?

MR. KLOTZBUCHER: Objection.

A. I don't have knowledge on that.

Q. Do you have an opinion on whether any of these factors jeopardize the future benefits upon which your VBA disability offset calculations are based?

MR. KLOTZBUCHER: Objection.

A. I don't have an opinion on that.

Q. Would you agree that all of your reports in this litigation are premised upon the assumption that the government programs involved in your offset calculations will continue in the same manner as they

are operating at the present time?

MR. KLOTZBUCHER: Objection.

A. Of course, because that is the best information that we currently have available.

Q. Are they also premised upon the assumption that the care and benefits the plaintiffs need will continue to be covered by those programs to the same extent as they are now?

MR. KLOTZBUCHER: Objection.

A. I don't have an opinion on that.

Q. Is it correct that you have no opinions on the reports provided by Marjorie Hackett-Wallace?

A. That's correct.

Q. And you have no opinions on the reports provided by Anirban Basu?

A. Correct.

Q. And you have no opinions on the reports provided by Gregory Russo?

A. Correct.

Q. Your Supplemental Materials Considered List also listed the Plaintiffs' Amended Damage Assessment forms, correct?

A. Yes.

Q. Are you rendering an opinion with

respect to anything in the damage assessment forms?

MR. KLOTZBUCHER: Objection, form.

A. I don't have an opinion about those documents.

Q. Have you read the report of Peter Rybolt?

A. I have.

Q. Do you intend to offer any opinions with respect to the issues addressed in that report?

A. Not at the moment. I haven't been asked.

Q. Have you independently formed any opinions about that report?

A. I have very, very basic general impressions.

Q. Are you distinguishing impressions from opinions?

A. Yes.

Q. Are you aware that there are other plaintiffs with non-stayed cases besides the eight that you've issued reports for?

A. Yes, vaguely.

Q. Are you aware that the government has retained two other economists to prepare similar

reports for those other plaintiffs?

A. Yes, I'm aware.

Q. And I do not see those materials on your Materials Considered list; is that correct?

A. Correct.

Q. So you have not reviewed the reports of Dr. Brod or Dr. Yount -- or Ms. Yount?

A. No, I have not reviewed their reports.

Q. Is it safe to assume you are not offering any opinions on their reports?

A. No, I'm not.

Q. Do you intend to review their reports?

A. If I'm asked to. I haven't been asked to.

Q. Do you intend to review the report of Dr. Russo?

A. I have not been asked to.

Q. Do you intend to review the deposition transcripts of any other experts in this case?

A. Not at the moment. I haven't been asked to.

Q. Other than the VBA offsets calculation for Mr. Keller, sitting here today, do you contemplate making any revisions, updates, or

corrections to your reports?

A. Not at the moment.

Q. And do you anticipate testifying to any opinions we have not discussed today?

A. Not as I sit here today.

MR. VANSLYKE: Okay. I will pass the witness.

MR. KLOTZBUCHER: Thank you for your time. I have nothing further.

THE WITNESS: Okay. Thank you.

THE VIDEOGRAPHER: The time right now a 5:46 p.m. We are off the record.

MR. KLOTZBUCHER: Mr. Ortega, before we go off the record --

THE VIDEOGRAPHER: Oh, I -- do you want me to go back on.

MR. KLOTZBUCHER: Go back on, yes, very briefly.

THE VIDEOGRAPHER: The time right now is 5:46 p.m. We're back on the record.

MR. KLOTZBUCHER: I just wanted to add that the United States reserves the right to review under Rule 30(e).

And with that, you can go off the

Tosic - March 5, 2026

record.

THE VIDEOGRAPHER: The time right now is 5:47 p.m. We are off the record.

(Time noted: 5:47 p.m.)

C E R T I F I C A T I O N

STATE OF NEW YORK)
) ss:
COUNTY OF WESTCHESTER)

I, LORRAINE B. ABATE, a Certified Shorthand Reporter and Notary Public of the State of New York and Registered Professional Reporter, do hereby certify the foregoing to be a true and accurate transcript of my original stenographic notes taken of Dubravka K. Tosic at the time and place hereinbefore set forth.

I further certify that I am not related, by blood or marriage, to any of the parties in this matter and that I am in no way interested in the outcome of this matter.

<%9221,Signature%>

_____

LORRAINE B. ABATE, CSR, RPR
License No. 000965

Dated: March 19, 2026

&

& 2:3,11 8:20 8:23

0

0 141:22 142:13 142:18,24
00000000 230:23
0000000001 230:5
0000000019 7:18,20,22 231:3 232:3 234:18 235:20
0000000052 139:6
00028 230:5,8
000965 251:24
00284 139:6
01 131:5

1

1 5:10 12:3,4 135:6,14 167:10 230:9 230:17
1,040 104:5
1/20/26 130:25
10 6:14 91:25 139:5,7 143:18 155:11 175:11 182:14 192:18 214:9 233:4
10,292 104:12
10.5 101:20
10/29/25 131:3
100 69:19 144:3 184:16 185:21 186:3 213:24 214:9 215:20 217:9 232:20 233:24
10003 2:13
10004661 6:5 93:9,10 94:6
10005469 93:24
107,000 160:19
10:11 49:21
10:28 49:24
10th 92:2,7
11 6:15 167:3,5 169:24 172:5 177:12 189:25
1100 2:20 4:6
112 131:6
11947 230:13
11:58 99:19
11th 5:23 72:15 72:23 91:5,7,17 91:21 92:4,17
12 5:12 6:18 82:6 158:25 159:17 172:6,8 181:17 190:5 208:17
127 3:19
129 6:9
13 5:17 6:21 163:14 174:15 174:16 178:24 181:19,20 184:6 186:23 190:17
133 91:23
134 6:13
136.3 105:2
139 6:14
14 7:5 171:12 186:24 187:2 191:6 192:7 195:13 209:24 221:20 224:4
144,365 103:8
147 93:16
15 6:17,20,23 7:7,8,10,13,16 166:14 167:6 171:13 172:10 179:4 181:21 183:18 187:4 192:8,10,11 199:6 207:21 207:25 210:3 220:6 229:20
15,376.50 105:17
15.5 104:19
159421 5:22 91:5,6 92:25
159421r 92:22
15th 6:12 81:14 93:14,21 134:4 134:7
16 7:11 131:5 179:8 199:16 207:22,24 219:19
167 6:17
17 7:14 191:11 200:3 220:3,5 221:5
172 6:20
18 7:17 181:3 188:15 200:25 210:19 229:19 231:21 232:2
181 6:23
187 7:7
19 7:19 191:18 211:18 230:24 234:10,17 235:15 251:25
190.3 105:9
191,375 96:23
192 7:10
1967 9:19
1984 22:12
1989 21:13 22:7
1991 21:18 22:7 23:19
1996 23:19
1997 24:6

1:03 100:4
1st 232:22

2

2 5:13 13:13,17 221:22
2,500 126:22
2,545,984.55 96:2
2,856 126:13
20 5:19 7:21 94:3 122:12 123:13 202:8 211:23 232:16 232:24 235:18 235:19
20005 2:21
2001 24:6,19
2005 24:20
2010 25:21
2014 232:5
2015 25:21 27:11
2016 222:19,23 223:2,14,19
2017 232:19
2018 232:23 233:2
2020 140:15,16
2022 163:22 212:16,19 215:10
2023 5:23 16:6 77:23,24 78:10 78:24 91:5,7,17 91:21 92:17,20 95:14 98:15
2024 6:6 79:6 93:8,11,14,21 94:3,14 98:15 125:23
2025 6:13,17,20 6:23 7:7,10,13 7:16 81:15 86:13 134:4,7 167:7 172:10 181:22 184:23 187:4 192:12 208:2 220:7 228:6 243:17
2026 1:14 6:9 8:1,6 9:1 10:1 11:1 12:1 13:1 14:1 15:1 16:1 17:1 18:1,13 19:1 20:1 21:1 22:1 23:1 24:1 25:1 26:1 27:1 28:1 29:1 30:1 31:1 32:1 33:1 34:1 35:1 36:1 37:1 38:1 39:1 40:1 41:1 42:1 43:1 44:1 45:1 46:1 47:1 48:1 49:1 50:1 51:1 52:1 53:1 54:1 55:1 56:1 57:1 58:1 59:1 60:1 61:1 62:1 63:1 64:1 65:1 66:1 67:1 68:1 69:1 70:1 71:1 72:1 73:1 74:1 75:1 76:1 77:1 78:1 79:1 80:1 81:1 82:1 83:1 84:1 85:1 86:1 87:1 88:1 89:1 90:1 91:1 92:1 93:1 94:1 95:1 96:1 97:1 98:1 99:1 100:1 101:1 102:1 103:1 104:1 105:1 106:1 107:1 108:1 109:1 110:1 111:1 112:1 113:1 114:1 115:1 116:1 117:1 118:1 119:1 120:1 121:1 122:1 123:1 124:1 125:1 126:1 127:1 128:1 129:1,12 129:15 130:1 131:1 132:1 133:1 134:1 135:1 136:1,21 137:1,6,12,13 138:1 139:1 140:1 141:1 142:1 143:1 144:1 145:1 146:1 147:1 148:1 149:1 150:1 151:1 152:1 153:1 154:1 155:1 156:1 157:1 158:1 159:1 160:1 161:1 162:1 163:1 164:1 165:1 166:1 167:1 168:1 169:1 170:1 171:1 172:1 173:1 174:1 175:1 176:1 177:1 178:1 179:1 180:1 181:1 182:1 183:1 184:1 185:1 186:1 187:1 188:1 189:1 190:1 191:1 192:1 193:1 194:1 195:1 196:1 197:1 198:1 199:1 200:1 201:1 202:1 203:1 204:1 205:1 206:1 207:1

208:1 209:1
210:1 211:1
212:1 213:1
214:1 215:1
216:1 217:1
218:1 219:1
220:1 221:1
222:1 223:1
224:1 225:1
226:1 227:1
228:1 229:1
230:1 231:1
232:1 233:1
234:1 235:1
236:1 237:1
238:1 239:1
240:1 241:1
242:1 243:1
244:1 245:1
246:1 247:1
248:1 249:1
250:1 251:25
208 7:13
21 160:9 202:11
212 2:16
217.4 98:6
219 3:12
22 80:3,5 160:9 219:15 230:20
220 7:16
23 7:22 202:18 206:23
232 7:18
234 7:20
23rd 6:9 18:13 129:12,15
24.8 104:12
24th 2:5 233:2
25 10:3 40:14
25,012.50 100:23
26 201:10 204:16 207:3 232:5
27 136:21
27,000 164:14
272,546 102:10
272.95 103:22
27th 92:20 125:23
28 136:21
283,032 97:4
29,880 103:15
2930 4:6
29440 3:13
29th 94:3
2:40 159:12
2:58 159:15

3

3 5:18 19:25 20:3 68:21,22 95:11 127:8 140:14,18 199:6 220:18
3,622 101:21
30 10:3 122:6 163:22 237:5 249:24
300 102:3
3011 2:5
30th 94:14 140:15
31 175:11
31,586.50 102:3
313 2:8
331,980 101:11
34,890.50 126:3
34,890.50. 127:4
358-3291 2:24
36 183:5
368.6 102:20
38 138:16 139:11
399.8 103:8
3rd 232:18

4

4 5:20 68:14,17 118:6 139:25 140:2,3,4 199:16
4,000 223:8,14 223:16
4,030 104:19
4,853 222:20,24 223:2,3,19
402.8 98:19,19 98:24
4054 2:20
421-1600 4:9
43.5 100:23
45.9 105:17
47 93:15,16,17 93:18,19
48202 2:6
4:47 219:22

5

5 1:14 5:21 8:1 9:1 10:1 11:1 12:1 13:1 14:1 15:1 16:1 17:1 18:1 19:1 20:1 21:1 22:1 23:1 24:1 25:1 26:1 27:1 28:1 29:1 30:1 31:1 32:1 33:1 34:1 35:1 36:1 37:1 38:1 39:1 40:1 41:1 42:1 43:1 44:1 45:1 46:1 47:1 48:1 49:1 50:1 51:1 52:1 53:1 54:1 55:1 56:1 57:1 58:1 59:1 60:1 61:1 62:1 63:1 64:1 65:1 66:1 67:1 68:1 69:1 70:1 71:1 72:1 73:1 74:1 75:1 76:1 77:1 78:1 79:1 80:1 81:1 82:1 83:1 84:1 85:1 86:1

87:1 88:1 89:1
90:1,21,22 91:1
91:16,21 92:1
93:1,14 94:1
95:1 96:1 97:1
98:1 99:1 100:1
101:1 102:1
103:1 104:1
105:1 106:1
107:1 108:1
109:1 110:1
111:1 112:1
113:1 114:1
115:1 116:1
117:1 118:1
119:1 120:1
121:1 122:1
123:1 124:1
125:1,21,22
126:1 127:1
128:1 129:1,8
130:1 131:1
132:1 133:1
134:1 135:1,20
135:20 136:1
136:25 137:1
138:1 139:1
140:1 141:1,20
141:25 142:1
143:1 144:1
145:1 146:1
147:1 148:1
149:1 150:1
151:1 152:1
153:1 154:1
155:1 156:1
157:1 158:1
159:1 160:1
161:1 162:1
163:1 164:1
165:1 166:1
167:1 168:1
169:1 170:1
171:1 172:1,16
173:1 174:1
175:1 176:1
177:1 178:1,4
179:1 180:1
181:1,25 182:1
183:1 184:1
185:1 186:1
187:1,7 188:1
189:1 190:1,17
191:1 192:1,15
193:1 194:1
195:1 196:1
197:1 198:1
199:1 200:1
201:1 202:1
203:1 204:1
205:1 206:1
207:1 208:1,4
209:1 210:1
211:1 212:1
213:1 214:1
215:1 216:1
217:1 218:1
219:1,25 220:1
221:1 222:1
223:1 224:1
225:1 226:1
227:1 228:1
229:1 230:1
231:1 232:1
233:1 234:1
235:1 236:1
237:1 238:1
239:1 240:1
241:1 242:1
243:1 244:1
245:1 246:1
247:1 248:1
249:1 250:1
5,600 126:10
5,925 126:25
50 79:22
52 166:21
55 211:24 212:2 212:5,11
556 102:3
558,767 95:19
558-5651 2:16
573.4 102:10
58 219:16
599.8 101:11
5:46 249:13,21
5:47 250:4,5
5th 8:6 78:24

6

6 5:22 91:4,6,19 92:24 93:5 95:3 95:4,10 96:2 126:6 127:8 135:19,25 139:14 167:14 169:23 170:25 172:15 174:12 181:24 195:14 200:3 209:25
610 2:24
63,750.50 105:9
64105 4:7
67 131:6
68 5:20

7

7 6:5 93:7,10 94:2,22 95:5,11 96:2 127:10 143:20 171:13 174:18 187:6 202:8 211:19
70 91:24 92:13 93:4
700 2:12
702 126:16
72 103:15
794-4829 3:22
7:23 1:3
7th 9:19

8

8 6:7 129:11,13 146:5 204:21
8,280 126:7
800-4165 2:8

81,780 105:2
810 1:13 8:8
816 4:9
843 3:15
897 1:3
8th 140:15

9

9 5:6 6:10 134:2 134:5 143:19 159:18 170:8 192:14 208:4 230:17
9,027,50 126:19
9/11 73:9
90 5:21 185:18 212:14,17,20 212:24 213:2 214:8,11 215:10,12,15 217:25 218:2,4 218:18,18
91 5:23
91,438.25 103:22
910 3:22
918 95:11
92,824 102:25
9221 251:21
93 6:6
94 94:20
97 22:3
984-2476 3:15
989,000 178:17
9:08 1:14 8:7
9th 6:6 79:6 93:8,11 94:3

a

a.m. 1:14 8:7 49:21,24 99:19
abate 1:10 8:13 251:9,23
ability 10:12,16 47:11
able 86:6 127:19 150:4 151:19,24 152:4,10 153:24 154:11 157:12,18 161:20 166:24 168:6 169:7 170:21 182:25 183:8 212:21 218:18 223:13 223:15 224:18 225:4 242:3
above 1:9 15:25 16:2
absent 212:8
absolutely 33:17 112:21 120:19 121:8
absorb 215:21
accept 188:8,8
accepted 156:11
access 89:20,23 138:7,20 193:3 193:7,10,17,24
account 29:13 59:16 88:3 144:11 147:16 162:20 175:25 178:12 194:23 195:7 199:23 209:16 210:14 213:22
accounted 157:13
accuracy 119:19
accurate 39:3 66:5 127:15 251:12
achieve 223:18
achieved 223:19
achilles 232:6 232:20,23 233:3,23
act 67:21 68:11
action 41:5
actions 28:10 29:22 30:6,9
active 72:22
actively 169:19
activity 164:5
actual 38:18 43:3 45:19,21 45:24 46:5,12 46:14 55:23 59:7,8,17,21 61:7 62:3,7,13 62:21 70:6,9 114:14 190:18 191:2,3 196:25 197:18 199:7 209:20 212:21 218:3 242:2
actually 42:17 60:3 137:9 144:21 147:21 162:11 206:18 214:22 215:7 218:6
add 39:12 127:4,19,25 128:7 249:22
added 148:12 205:10
addition 45:24 89:2 128:17 185:23
additional 18:15 39:18,21 50:8,15 75:12 81:13,15 82:25 86:22 87:17 121:21 147:14 149:25
additionally 99:4 138:18 141:3,3

address 194:17 194:25
addressed 87:20 247:10
addresses 226:8
adds 165:9,10
adjust 160:13 163:9
adjusted 137:8 164:8
adjustment 88:14,21,23 143:21 144:15 144:22,25 145:14 166:4,5 178:12 179:19 189:2,6,8,10 190:15
adjustments 144:11 155:3,5 165:11 175:8 179:16
administration 66:22 83:17 147:18 149:23 163:23
administrative 98:13
advance 227:6
advanced 66:8 66:10,10 125:8
affairs 184:8 211:20
age 210:13
agencies 73:3
ago 223:8
agree 33:25 40:10 57:14 59:9 81:10 94:9 120:4 121:9 161:17 187:17 187:20 219:12 220:19 226:19 227:15 230:23 233:6 237:24 238:3,6 245:22
agreed 47:10
agreement 19:18
ahead 108:11 183:18 187:6 191:11
ai 89:4,9,13,15 89:25 90:4
aid 50:5
aides 156:13 157:5
aligned 19:8
alive 175:10,13
allegation 41:20 59:13
allegations 28:8 28:19 30:10
alleged 41:5,7 41:10 60:6,8,9 60:18,20,25
allegedly 186:5 218:16
allen 168:5
allows 240:22
alter 36:24
alternative 203:17
amended 221:12 246:22
america 2:19
amount 31:5 38:15,18 61:23 95:19 96:23 126:6,9,12 142:2 143:8 165:17 178:13 186:9,11 188:16,17,19 188:22 202:15 205:22 212:7,8 213:25 214:17 214:23 216:12 216:19,21 217:3 223:20 229:14,15 233:12,13 234:4,6 235:24 236:24 240:4 242:19
amounts 39:24 43:20 63:19 64:4,8,12 94:11 110:9 147:12 171:19 186:7 204:18 212:21 213:3 214:12 215:14 218:3 218:19
amsler 6:12,14 134:4,7,25 136:3,11,19,23 137:4 138:7,19 138:23 139:6,8 142:19 144:2 147:16 149:19 150:3 152:10 153:23,24 154:11 156:8 156:16 157:11 157:15 159:19 162:14,17,21 166:22 169:15 193:18
amsler's 140:24 145:23 155:25 158:5 161:19 162:9,22 163:3 163:9
analogous 152:6 153:14
analyses 28:7 29:3
analysis 22:17 37:18 39:23 40:3 41:15 42:2 43:6,8,9,13 44:10,17,18,21 44:24 45:3,7,9

45:25,25 46:4,9 46:11 47:6 50:5 51:16 53:25 54:3 60:19 61:25 65:8 87:9 166:18 178:22 184:14 185:25 186:20 190:24 192:24 196:14 196:17 206:25 210:21 211:9 211:11 218:21 218:21 222:9 243:6 244:15
analyze 39:4,7 39:8,14 42:6 47:2,11 48:17 227:23
analyzed 43:15 43:23 47:14 48:24 196:19
analyzes 45:5,7
analyzing 39:19 40:9,13 41:16
anirban 130:22 130:23 131:20 225:14 246:16
ankle 232:6,19 232:23 233:3 233:23
annual 163:8 168:14,14 243:17 245:6
245:12
answer 10:9,16 10:17 11:13,15 14:23 20:25 29:18 34:7,21 35:14,21 44:2 44:12 45:14 47:5,18 48:5,14 49:6,12 51:20 52:19 53:3 57:17 58:13,20 61:3,18 63:13 64:2,10 65:2,13 65:17 67:16 68:6 74:12 77:15 81:7 82:17 86:20 89:12,17 96:5 98:9 99:2 101:2 113:13,22 114:3 115:14 115:22 121:4 127:24 128:9 142:9 145:11 158:11,17 161:20 198:9 198:23 206:20 218:24 224:9 224:19 229:7
anticipate 249:4
anybody 49:9 81:25 115:12 134:10
apologies 94:20 213:14
apologize 135:9 224:13
appear 12:8 20:6 134:24 139:10 167:11 172:12
appearances 3:8 4:2 8:19
appeared 24:19
appears 150:25 151:2,8 153:2,3 220:16,25 222:4 234:14 234:23
appendix 5:18 5:20 19:22,23 20:2,3 68:17 135:3 221:21
applicable 143:5 169:4 170:18 178:7 180:10
application 242:14
applied 30:4 38:3 52:25 55:7 57:4 58:18 62:25 63:3,4,7 63:8 68:11 86:25 87:2,4,5 111:3,15 144:22 153:13
163:5 217:20 217:21 218:22 219:5 223:22 239:22 240:5 241:16 242:8 242:11,17 243:2
applies 51:11 155:5 179:24
apply 29:15 30:5,16 39:24 40:5 41:13 61:21 62:7 64:21 89:7 132:3,8,13,20 136:9 144:25 145:22 146:2 152:5 160:16 166:3 178:11 179:4,13 180:3 180:14 181:7 181:12 182:9 182:18 189:3 194:5 203:13 203:22 224:5 233:10
applying 54:21 66:15,22 183:14 189:17 189:19 191:8 191:14 195:9 195:21 199:19 200:12,22 201:15 202:14

208:12,23 209:21 210:6 210:16,21 211:8 218:10
approach 160:24 169:14 171:17 173:13 175:4
appropriate 31:18 64:7 158:24 179:24 180:4,14 189:6
appropriated 245:5
appropriateness 34:14
approval 245:13
approximately 16:3 40:12,14 41:25 86:12 91:22 160:19 164:14 178:18
april 86:13 87:12 163:22
area 24:18 25:10,15 30:14 131:18,19,21 131:21 132:2 160:16 164:9 179:18 183:11 206:22 227:19
arrived 133:17
articles 20:21
aside 95:5 129:8 143:18 202:6 224:4 229:10 234:8
asked 41:17 57:10 63:7 81:22 85:11 132:13,20 133:7,7,8 222:12,15 223:25 225:2 240:6 242:23 247:12 248:14 248:14,18,21
asking 57:22 241:21
aspect 156:22
assess 31:8
assessing 159:23
assessment 135:21 138:2 143:24 146:8 155:21 159:25 167:16 169:25 172:17 173:2 174:19 175:20 181:25 187:8 187:14,25 192:15 197:24 208:5 220:10 246:23 247:2
assessments 25:16
assign 84:19
assigned 76:16 76:18 77:21
assignment 78:13,18 79:8 79:13 80:17,25
assignments 79:16
assistance 194:18 200:17 209:18
assistant 22:6 23:6,14
assistants 156:18 157:8
assisted 108:24
assisting 72:17
assists 96:10
associate 23:18 23:21 24:7 85:24,24
associated 151:22 155:24 158:3 184:17 189:4 217:14
assume 17:19 132:19 165:4 214:4 222:15 231:2 238:13 238:17,21 248:10
assuming 137:21 147:4 152:10 193:2 238:11
assumption 136:23 144:3 245:23 246:7
assumptions 67:10 81:3,6,7 81:8 84:9 113:4 114:13 116:11 120:12,14
attached 14:9 68:23 69:5
attachment 13:3
attempt 38:7 125:24 177:11
attention 156:23
attorney 48:2
attorneys 2:4 2:19 3:11 15:18 16:4 71:11
attributable 96:19
attributed 98:21,24
atus 147:8 148:13 150:8 150:14 151:2 152:23,25 153:7 155:3 164:16,19,19

164:20,23,24
165:4,6,6,9,12
165:15,15,24
166:4,7,10
audrey 107:18
119:13,22
125:11
audry 105:6
august 215:10
232:5
austin 102:7
106:24 112:6
114:6,19
123:14 126:21
authored 43:23
authoring 25:6
26:8
authority 33:10
33:11
availability
29:4
available 34:18
35:18 110:10
131:11 149:12
149:15 150:2,7
154:8 183:6
193:5 218:5
238:24 246:5
avenue 1:13 8:8
average 146:23
147:3 148:13
148:22 149:3
149:10 150:15
152:19 153:21
160:15 179:16
179:19 199:23
averages
209:20
averly 179:16
avoiding 58:17
avoids 113:7
award 38:10,13
38:19,21,22
158:14 186:9
214:17 216:9,9
236:12,24
237:10 238:7
239:14,21,22
240:2 241:8,9
242:15
awards 231:9
235:17
aware 12:12,15
12:22 17:12,14
18:11,20 33:15
37:11 59:4 71:6
73:24 78:22
80:7,8 87:21
89:4,6,9,14
90:9 221:7
222:8 225:9,19
226:7 228:19
228:23,24
229:3 237:7,12
239:11 240:9
240:12,15,25
241:5 244:20
245:11 247:20
247:24 248:3

b

b 1:10 5:8,18
6:2 7:2 8:15 9:7
19:22 20:2,3
100:5 135:3
139:25 140:3,8
163:15 169:23
170:25 172:19
177:14 182:4
183:20 187:10
190:2 192:18
195:17 202:18
206:23 208:8
210:19 251:9
251:23
ba 21:6
bachelor's
123:5,18,24
124:5,8,15,23
125:14,19
back 13:2 23:5
49:24 50:2
68:22 87:15
100:4 110:11
110:12 125:20
143:19 159:15
161:19 162:9
170:8 174:18
201:13 204:16
206:23 219:7
219:25 221:19
223:14 228:6
229:20 249:17
249:18,21
background
33:19 34:2 47:2
63:9,23 64:23
67:12
backwards
184:6 218:21
218:25
banded 153:7
bank 22:13
83:18
bank's 23:2,4
based 18:6
29:25 33:3
39:19 46:25
57:14 65:8 67:5
67:6,9 110:9
133:5,10,18
136:22,24
141:8 145:14
146:15,18
151:2 152:5
154:7,8 158:14
160:9,14
162:23 164:18
164:19 168:13
169:9 171:7
173:22 175:7
176:20,21,23
177:24 178:15
182:23 184:16
185:5 188:7
191:23 193:5
196:25 197:23

198:11 200:17
201:24 202:20
203:23 205:13
205:22 206:2
217:25 233:18
235:22 236:2
237:10 239:2,4
239:8,12
240:10 242:23
243:24 245:19
bases 147:24
205:16
basic 247:15
basing 150:13
151:10
basis 138:22
146:17,25
147:11 149:6
149:12,17
151:13,15
153:21 156:13
156:20 158:21
161:16 162:3,7
162:10 168:9
169:11 177:25
178:2 188:16
188:18 193:16
195:3 196:4,6
200:2,19
214:12 222:8
227:11 245:6
basu 130:22,23
131:5,20
225:14 246:16
batch 117:6
bates 7:17,19
7:21 91:9,14,23
91:23,24 92:13
93:3,14 94:19
125:22 126:6
127:10 131:5
139:5 229:25
230:4,11,12,19
231:3 232:2
234:17 235:19
becoming
144:8
began 24:4 26:8
26:11 27:2 78:5
78:7,12 80:16
80:20
beginning
56:13,19
135:19 178:24
181:24 230:16
begins 174:15
174:20
behalf 8:20,23
9:15 73:17
90:13
belief 27:7
94:24
believe 10:11
11:19 13:8,9,12
15:8 16:6 18:9
26:6 29:9,14
30:3,15 58:23
63:5 69:7,8,16
70:12 71:13
73:19 75:8 76:7
77:23 78:9,25
80:15 88:19,24
89:18 90:16
97:11,18,19
99:11 100:12
101:6,15
106:17 107:3
107:13 108:3
108:20 110:2
110:21 112:6
112:15 113:6,9
114:15 115:5
117:5 122:5,12
122:17,21,23
123:18 124:23
125:8 131:17
131:25 132:18
132:22 135:6
138:8,12
140:23 141:4
141:21 148:18
149:13 150:11
152:14 168:3
170:7 173:14
174:21 175:15
175:18 182:7
182:19 188:14
188:15 189:5
189:24 190:10
190:22 192:21
193:12,16,18
194:13 196:17
198:11,18
206:21,24
207:2 221:12
223:24 224:11
224:14 228:3
233:25 237:12
238:16 240:20
bell 3:10
belllegalgrou...
3:16
ben 8:20 9:14
benefit 29:2
63:19 67:5,14
84:2 110:3,5,9
110:21 138:20
138:23 172:20
173:6,10,16
192:19 193:2,3
193:8,11,13
199:24 200:4
213:3 214:11
218:3 221:14
229:11 239:2
benefits 28:25
29:9 38:9,16
51:14 52:11
55:3 63:11,15
63:18,22 64:13
65:6,20 66:3
67:8 69:15 70:9
70:14 109:23
109:25 136:6
136:10 137:25
138:6,13

147:22 160:11 173:4,8,17,21 173:22,25 174:3 175:16 175:23,25 176:18,20,24 180:23 184:8 184:16,20,23 184:25 185:5 185:11 186:20 191:12,16 199:17,21,23 200:2 202:12 202:16 211:21 212:7,8 213:13 213:18,19 214:2,13,15 215:21 217:11 227:24 233:12 233:14 235:25 238:9,15,19 240:16,20,23 240:24 241:9 241:14,18,24 242:24 243:2 243:23 245:12 245:17 246:7
benjamin 2:7 101:17 106:20 108:18 123:2
berkeley 19:16 19:18
best 10:16 20:9 35:18 69:17,23 113:15 235:6 246:4
bethune 4:5
better 10:24 56:15
beyond 183:13
bill 14:24 15:4 15:11 227:2
billed 95:7,19 96:23 98:6 100:23 101:11
bills 90:9
birth 9:18
bista 103:5 107:4 116:7 124:2
bit 10:4 15:16 40:9 117:13 134:16,21 166:23 170:25 177:7 194:6 224:17,23
blackmer 94:12
blank 143:13 143:15
block 92:15
blood 251:17
board 119:10
boards 243:18
bottom 91:10 92:13 141:21 141:25 190:2
boulevard 2:5
break 11:4,9 49:9,13 50:21 82:2 134:11,11 134:13,15
brg 1:13 5:21 12:17 19:13,14 19:18 27:13 71:24 72:2,11 72:15 73:2,13 73:17,22,23 74:4,7 76:15,17 82:13 89:9,14 89:18 90:9,13 90:22 95:3 96:19 98:2 112:10 113:9 127:15 225:17 226:24 227:5,7
briefly 21:4 23:5 137:25 143:23 146:7 155:20 160:6 163:17 166:17 170:24 171:16 172:25 175:19 177:20 184:13 187:24 190:24 192:23 201:18 203:8 244:25 249:19
bringing 31:11 31:14
brings 31:20
broadway 2:12
brod 248:8
brought 82:21
brown 104:16 107:14 118:13 125:2
bruce 7:9 192:11
budget 244:22
budgeting 244:8
bulk 109:8
bullet 28:6,17 29:21 30:5,18
bullets 31:23 131:4
bureau 83:16 85:20 109:21 116:22 118:4
butcher 177:10
butler 3:21
buy 223:14,15
bvanslyke 2:9

c

c 2:2 3:2 5:20 8:15 9:7 19:23 68:17 100:5 135:3 166:13 178:23 191:6 194:2 200:9 207:3 208:17 251:2,2
calculate 29:8 30:4 36:22

37:24 57:4,10
60:7,17 63:7,21
67:4,9 146:10
147:2,3 149:9
151:14 154:14
158:4 160:8
163:20 164:10
168:13,20
169:15,18
170:21 171:18
173:15 175:2
179:23 180:12
181:8,13
184:22 185:13
186:21 190:8
190:12 201:25
209:8 210:7
214:8,9 215:15
216:25 217:3
218:10,15
228:12,13

calculated
51:13 52:14
55:2 162:15
169:5 174:24
213:25 217:23
237:8 241:15
242:8,19

calculates
59:12 136:20
137:4 143:25
146:23 147:9
154:20,25
158:20 159:7
160:23 161:5
170:13 173:3
192:25

calculating
31:6,21 51:2
59:20 63:17
66:2 80:12,20
144:10 145:24
146:11 160:7
171:17 191:16
233:11

calculation
28:18 29:5
30:12,19 31:3,4
31:13,18 36:19
38:4 40:5 41:18
41:24 45:22
49:15 51:5,10
51:25 53:11,16
54:15,22,25
55:8,11,21,23
56:23 59:11,19
60:22 61:11
62:12 63:15
66:8 70:6,7,8
70:13,25 72:18
79:17 111:5
112:7 132:9
146:21 149:10
153:21 156:25
157:3,14 160:3
160:20 161:6
163:19 164:17
167:22 168:12
172:19 173:6
174:11,12,14
174:20 177:14
177:22 179:5,8
179:20 181:8
181:13 182:15
183:14 187:14
187:21,25
188:4 189:3
190:2 191:7
195:17 196:6
196:10 199:21
199:22 200:10
201:2,7,8,15
202:23 210:4
214:14 216:6
217:15,20
218:7 224:15
225:3,7 239:2
248:23

calculations
12:18 32:22
44:6 53:21
55:16 62:11,13
63:17 64:5,21
65:10 66:3,6,10
66:13,15,23
79:19 84:7 88:2
88:4,6,12,15,21
106:14 109:2,6
110:18,19,20
110:22,24
111:8,19,20,23
112:5,11,14
113:4 114:9,12
114:15,20
118:19,24,25
119:3,7 120:11
120:13 132:4
132:13,20
136:13,14,17
136:22,22
137:7,13,20
138:3,5,13
143:24 144:16
145:2,18 146:8
147:24 149:5
149:14 150:13
150:25 151:3,9
151:12 152:3,5
152:17,18
154:6,18
155:19,21,22
157:21 158:22
159:18,24
161:2,12,12
162:2,2,4,4
163:3,6 164:24
165:14 166:25
168:9,10
169:12,24,25
170:5,19 171:2
171:8,11 173:2
174:8 175:6
178:15 182:22
183:3 185:14
190:7 191:4
193:13 194:10

194:12 195:14
195:21 196:23
197:23 200:2
200:16,18
203:9,17,25
204:4,9 209:17
209:25 210:25
211:6 212:10
213:4 214:3,12
216:2 217:18
219:4,8,12
221:14,15
223:23 229:5
229:11 239:7,8
239:19,24
240:7 242:22
243:23 245:18
245:25
calculator
215:23 217:2,7
call 17:3 66:9
162:4 188:6
197:19,20
198:13
called 55:14,24
171:9 240:19
calls 99:4,8,12
99:13,15 101:8
161:12 162:2
173:5
camp 1:4 9:16
32:16,18 37:7
37:13,15,16
43:6 50:7 56:16
57:8 67:21
68:11 90:2 95:7
106:13 112:15
185:15 186:5,6
186:7 212:9
213:8 214:6,18
214:21,24
216:12,22
217:11 218:17
candler 139:17
cantor 16:13
71:19,20 77:6
96:14,23 97:9
97:10,24 98:6
100:13 105:21
106:11 121:13
122:2 126:7
cantor's 97:19
capacity 42:7
42:14,24 43:3,9
43:14,17,19,24
44:7,24 45:9,18
46:2,4,9,10
62:21 160:21
160:23 161:5
161:10,13,24
162:3,11,12
195:25 196:12
196:18,22
197:15,20,25
198:6,13,17
235:9
care 29:6 30:20
30:24 34:10,14
34:18 35:17,18
36:3,6,10,13,17
36:20,23,24
37:3,6,7,12,19
37:25 38:7 84:4
112:8 132:11
154:2 155:11
155:16,17,23
155:25 156:12
156:12,12,17
156:18 157:3,4
157:11,19
158:4 159:5,8
166:15,20
170:9 176:18
194:14,18,19
194:19,20,23
194:24 195:4
200:18 201:3,7
201:9,16,21,22
201:23 202:2
202:19 203:6
203:12 204:25
205:2,5,7,18,23
205:25 206:2
206:11 208:18
208:20 209:8,9
209:18 210:20
211:3,3,10
243:11 244:12
246:7
caregiving
209:6,11
carolina 1:2
3:13,20
carry 29:15
154:12 170:15
carter 6:16
167:4,6,12,25
168:4,4,6,12
170:17,19
171:4,6
carter's 176:9
case 16:5 36:5
37:4 39:23 40:3
52:15 53:19
55:2 56:23 57:3
63:8 64:11,19
65:24 66:14,20
70:18,23 71:8
71:22 72:6,25
73:9 75:11 81:4
81:12 86:10
89:4 145:4,7,23
156:7 163:9
179:23 181:13
197:2 224:2
227:3 237:13
237:18 242:6
248:20
cases 1:5 23:24
23:25 30:8,16
41:25 50:8 63:2
69:12,14,20,24
70:5 80:3,6,10
95:2 180:3
227:4 247:21

categories 146:15,17,18 150:17,23 152:25 153:12 202:5
category 25:18 40:19 158:19 170:13 171:8
caught 120:21 121:6
cause 42:21 60:6,8,9,11,12 60:15,18,20,25 233:25
caused 60:3,5 228:11
central 22:18 22:20
certain 12:13 23:11 31:5,7 32:22 34:24 57:9,10 81:6 84:19 86:6 90:3 108:7 110:14 114:12,16 118:19 124:9 144:8 146:15 150:9 162:19 166:3 176:24 196:3,3 198:2
certainly 87:25 89:21 90:5 196:20
certified 1:10 251:9
certify 251:12 251:16
change 20:15 27:17 79:9 222:5 229:25 233:14,18,25 239:13,18
changed 80:17 238:11
changes 25:24 27:15 233:15 234:21 235:25
changing 233:19
character 210:15
characteristic 29:12,12 180:17
characteristics 46:12 155:4 169:7,9
characterize 117:2
charges 95:25 96:8,8,18,18,18 126:3 127:22
charlotte 104:16 107:14 118:13 125:2
check 85:5 89:23 116:5 237:3
chicago 69:21
child 210:13
children 43:2 210:11
chooses 146:17 147:2
choosing 147:11
chosen 152:8 156:20 183:11
chronological 91:14 231:24
chunks 174:7
circumstances 62:10 115:19 140:10 145:4 166:3 239:13 241:6
cited 50:12 128:22 129:6 129:25 138:15 139:11
citing 183:23
city 4:7 69:21
claim 241:6
claimed 211:10
claiming 150:3
claims 57:25 72:19 153:23 157:11
clarification 77:17 130:8
clarified 68:20
clarify 10:21 38:12 39:8 45:11 59:24 137:11 207:13 231:15
clarifying 148:2
clarity 155:14 169:21
classes 23:11
classification 51:8,23
classified 51:14 55:3 141:14
cleaners 154:4
cleaning 154:3 154:4,9 164:3
clear 30:11 67:19 94:24,25 140:25 146:16 147:10,15,23 151:9 153:19 156:14 194:9 194:22 195:7 209:15 214:7
clearly 140:9
clients 90:10
clja 7:18,20,22 230:2,16,17,23 231:3 232:3 234:18 235:20
close 84:18 228:17

cmo 77:20
coincides 141:10
cola 184:24 185:3
collateral 177:5
colleague 71:16
colleagues 32:20 71:14
collect 48:17,20
collected 169:10
collecting 47:21 47:25 84:21
column 221:24 222:6,22 232:8 232:9 236:9
columns 222:19 235:23
combination 164:20
combined 150:19 166:12 212:14 214:7 214:11 215:11 215:25 217:24
come 19:7 64:17 78:21 149:2 160:18 164:13 201:13 243:10
comes 48:17 128:6 166:7 178:17,21 213:21 227:9
cometto 6:22 181:21
commencing 1:14
comments 98:3
commercial 24:2
communicated 15:11
communication 15:18 77:14
communicati... 15:21 77:19
community 244:12
commute 19:10
company 19:11
compare 173:17
compared 71:2 87:12,22,25 209:20
comparing 92:24
comparison 46:5
compensated 58:5 61:15,24
compensation 28:24 29:9,11 52:10 58:8 67:6 70:25 72:15 212:24 214:10
competing 201:7
compiling 200:6
complete 90:25 109:11
completed 21:9 21:17 22:2 84:6 84:16 90:14 142:7
completes 132:6
completing 82:9,24
completion 89:4,25
complex 66:4 66:11
component 148:12
components 53:24
concept 53:5 61:9 158:8 197:8 240:19
concepts 42:10 42:11 197:3
concern 149:18
conclude 87:10
concluded 193:6
concrete 145:9
concurrent 240:19,22 241:2
condition 233:7 235:4,7,8,8,11
conditions 213:14,20 214:18,21 215:6,22 229:15 233:13 233:15,18 234:5
conduct 48:8 50:5 86:4,5 222:8 224:12 224:15 225:2
conducted 50:8 87:9 108:20,25 109:3,9,18 116:21 117:10 118:3 128:17 128:21 129:2,5 188:5 225:6 226:5
conducting 37:18 47:9,11 84:20 85:20 109:19 119:15 119:21 120:8 147:19 149:24
conference 99:4,8,12,13,15
confirm 82:20 116:4
confirming 193:23

congress 176:3 178:7
congressional 245:12
connard 6:19 88:15 172:7,9 172:13 173:4 173:19,21,23 173:25 174:2 174:13,22 175:8,9 176:2,5 176:19,22 178:9,13 179:12 180:24
connard's 173:7,9,9,17,21 174:5,6,24 176:2,20 177:23
connected 42:12
connection 28:8 150:6 176:2
consider 30:13 49:17 53:17 54:12 70:10 81:16,22 100:19 105:23 131:15 138:14 150:4 162:18 162:25 163:8 163:25 169:16 171:8,11 173:25 185:11 185:14 186:6 196:23 201:22 209:13 212:11 213:25 228:8 229:8 242:3
consideration 55:11 131:11 177:2
considered 6:7 18:12,17 43:16 44:5 45:2 50:11 50:17,20 51:25 52:3,4,7,8,13 53:13 54:2 56:25 59:18 68:8 87:19 88:25 96:14,15 108:13 119:20 128:22 129:11 129:14,18,25 130:23,24 131:2,12 133:6 133:21 141:13 165:21 177:3,4 183:3,6,12 191:3 194:9 196:10 198:3 205:12 226:5 229:23 246:21 248:5
considering 155:4 175:9 179:17 204:4 212:25
considers 44:9 45:18,23 173:7 173:7,8 175:23
consistency 112:23,24 113:7 114:13 120:13
consistent 87:3 113:3 156:17 175:6 208:16
constant 238:10
constitutes 130:2
consultant 22:13
consulting 23:23 24:16 25:7,9 26:3,4 27:22,24 28:4 72:24 78:16
consumption 88:20 178:12 178:13
contain 81:11 102:3,20 103:7 103:15,21 104:4,11,18,25 105:8,16 113:17 115:4 226:15
contained 19:22 95:25 113:20 117:8 117:15 164:25 165:5 203:11
contemplate 248:25
context 40:17 41:7 51:16,21 70:7
contexts 153:6
continue 35:10 134:11 173:20 178:10 238:14 238:18 245:25 246:8
continued 3:3 4:3 6:3 7:3 26:2 100:8 228:9 244:8
continues 190:5
contract 227:9 227:11
contractor 72:9 72:11 73:10,14 73:20
contracts 73:23
contributing 128:16
contribution 29:3 138:7,10 142:14,17 177:15 178:5 193:4,11
contributions 141:22 142:3

142:17,24
143:9 177:24
178:4,9
control 112:19
121:10
conversation
37:14,17 226:3
conversations
74:14
cookie 154:22
cooking 154:2,4
154:9 164:2
cooks 154:4
coordinates
31:25
copies 12:13
115:23 135:5
copy 11:23
19:22
correct 9:12
10:7,8 11:2
12:19 14:2,4,5
15:20 17:7,18
17:21 19:6,23
19:24 20:19,23
21:2,8,16,22
22:8,14 23:15
23:17 24:8,9,21
24:22 25:22,23
26:8,9 27:13,14
28:2,10,11,16
28:21,22 29:6,7
29:22,23 30:21
30:22,25 32:2,3
33:24 34:3,5,8
34:11,12,16
35:2,7,12,15,19
35:22,24,25
36:3,4,6,14,15
36:17,23,25
37:13,25 38:2,5
38:6,11,17,19
38:20,22,23
39:6,16,19 40:6
42:5 47:12,16
47:23 48:3,22
48:25 50:13,14
50:18,24 51:3
52:20,21 54:6,7
54:15,16,19,22
55:17,18 57:6
58:24,25 60:22
61:23 62:5 63:5
64:21,22 65:18
67:22,23 68:12
68:13,23,25
70:17 72:20
73:13 74:2,3,17
74:18 75:17
76:13,14,17
78:10,11 79:4,7
80:10,11 81:21
82:22,23 84:13
84:14 86:10,11
86:15,16 89:8
90:10,11,18,19
91:20 92:5,14
93:24,25 94:4,7
94:8 95:3,15
96:20,21
100:10,11,14
100:15 101:8,9
108:17 110:7
110:16 111:5
114:6 117:11
120:9,11,18
121:2,15,16
126:4,25 127:2
127:7,10,18
128:18,19,23
129:22,23
130:3 132:15
132:22,25
136:3,4,6,7
137:14,15
138:17 139:3
139:15,18
140:12,13,16
141:19 143:16
143:17,21,22
148:6,7,9,10,13
148:14,15,18
148:22 149:7
151:20 152:6
152:17 155:14
158:15 159:9
159:25 160:2,4
160:5 163:15
163:16 165:8
166:15,16
167:19,20,23
167:24 170:2,3
170:13,14
171:22 172:20
172:21,23,24
174:9,17
175:17 176:10
176:16 177:15
177:16,18
179:6,9,10
180:19 181:5
182:6,16,17
183:15,16,21
183:22,24,25
184:5,8,9,11,12
185:18,19,21
185:22 186:13
186:17 187:11
187:12 189:11
189:13,14
190:3,4,15,16
190:18 191:12
191:13,17,20
191:21,23,24
192:2,3,5,6,16
192:17,19,20
193:15,21,25
195:15,16,18
195:19 196:16
197:3 199:7,9
199:12,17,18
200:4,5,8,10,11
200:20,21
201:3,4,16,17
202:9,10,12,13
202:17,21,22

204:17,23
205:2,3,7,8
206:9,15,16,18
207:4,5,8,10,12
207:15,16,19
207:20 208:6,7
208:9,10,21,22
210:4,5 211:16
211:17,21,22
213:10 214:24
214:25 216:13
216:14,23,24
219:17,18
220:11,12,24
221:3,4 222:2,3
222:6,7,20,21
222:24,25
223:20 225:14
225:15,18,20
225:21 226:12
226:13,17,18
227:2,12
229:17 230:6
230:13,14,17
230:18,21,22
231:17 232:15
232:24,25
233:4,15
234:25 235:2
236:14,17,22
237:22,23
239:24 242:9
242:15,20,21
242:23,24
246:12,14,17
246:20,23
248:5,6
corrected 121:7
130:19 225:25
corrections
193:9 249:2
correctly 13:24
27:23 30:23
32:25 44:14
45:4 46:3 52:23
53:22 54:4
62:24 87:11
96:7 108:14
111:8 132:12
141:16 145:13
148:4 151:25
159:22 161:8
185:7 196:13
201:5 213:5
cost 37:24
199:24,25
202:3,5
costs 38:4
counsel 8:11
11:12 14:16,19
17:9 77:16
81:25 92:11
count 95:11
158:3
counted 158:2
counting
156:25 157:23
158:7,15,23
countries 22:20
county 251:6
couple 110:10
110:12 202:4,4
course 43:20
112:3 246:4
court 1:2 8:12
46:16 80:3,6
coverage
204:14,24
205:2,5,6,23
206:15,18
covered 179:2
180:25 182:13
189:21,24
202:19 205:19
206:7,12 236:5
246:8
creation 14:4
criminal 70:23
criteria 67:13
criticism
170:18 188:23
188:25 189:19
194:11 199:20
208:15 211:12
211:15
criticisms
154:18 159:6
167:22 170:12
170:15 182:9
182:12 189:17
189:21 190:7
194:5 195:10
208:13,23
209:22
critique 136:21
cromwell 14:25
csr 251:23
culminating
22:22
culmination
166:10
cumulative
217:3 218:15
current 27:12
31:9 62:21
110:8 126:3
164:21 238:23
239:3,4,6,8
240:25
currently 80:3
154:8 237:9
238:24 246:5
cut 101:15
cutter 154:22
cv 1:3 19:22
20:6,10 68:22
68:23

d

d 5:2 8:15 9:7
100:5 143:20
175:16 189:12
200:25 201:14
d.c. 179:18
damage 106:14
246:22 247:2

damages 29:8 30:12 40:20 51:16 57:24 58:2,5,9 59:25 60:2,6,7,12 61:11 80:13,21 136:18 156:6,7 156:8,10 158:3 158:5,14 159:25 176:15 221:3 226:11 228:13 240:4 241:8,9 242:15
daniel 8:3
danny 3:6
data 39:5,7,15 47:12,13,15 48:2,12,23 50:5 67:6,6,8 83:18 84:21,24 85:2 85:25 109:21 110:3,5,11 111:4,9,11,12 111:15 116:10 120:25 147:8,8 150:9,14,19 151:2 152:23 153:2,7 155:3 164:19,19,20 164:23,24 165:4,6,9,12,15 165:16,24 166:4,7,10 168:22 184:21 209:12 210:12 231:22 242:2
date 8:6 9:17 12:7 13:21 20:5 20:10 68:19 69:9 81:11 90:23 91:8 92:17,19 93:12 129:16 134:8 139:9 164:22 167:8 168:16 168:16 172:11 173:11 174:25 181:23 187:5 192:13 208:3 220:8 231:25 232:4,9 234:15 234:19 235:21
dated 5:22 6:5 6:8,12,17,20,23 7:7,10,13,16 91:5,6,17,21 93:8,10,13,21 94:2 125:23 129:12,14 134:4,7 167:6 172:10 181:21 187:3 192:11 207:25 220:6 251:25
davis 4:5 6:22 181:19,21 182:8,20,21 183:8 184:15 184:21,25 228:2,6,8 231:23 233:22 237:9,13,21,25 238:4,7,25 239:23
day 11:20 163:24 164:6 164:16,25 165:9,16,19,23 166:8 168:14 168:24 169:22 210:13 233:24 239:21 240:7
dbjlaw.net 4:10
dc 2:21
deal 61:9 62:13 65:6,7
dealing 169:19
death 23:25 28:21 30:8,12 30:13 72:18 168:17 173:11 174:25 175:3 175:16,23,25 176:20,24 177:24 180:23
december 6:12 6:17,20,23 7:7 7:10,13,16 27:11 77:24 78:24 81:14 86:18 87:13 132:25 134:4,7 140:15 167:6 172:10 181:21 187:3 192:11 207:25 220:6 228:9 233:2
decided 77:7,10 188:8,8
decision 33:12
decisions 83:9
decrease 236:24 238:7
deduct 178:8
deemed 163:22 185:15 186:7
defendant 9:2,5 71:2
defendants 46:19 144:18
defer 32:12
deferred 36:5,8
define 40:16,18 40:19
defined 29:2,2 38:15 40:24 138:7,9,20,22 193:3,4,8,10 199:24
definitely 150:4 209:14
definition 56:15
definitively 145:21

degenerative 234:21 235:4,7 235:8,10
degree 21:10 43:2 122:24 123:5,19,24 124:5,8,9,15,24 125:9,14,19
delegate 32:21 32:24 33:8,10 33:13,14 84:12 85:8,15,19,22 86:6 87:22 100:14 106:8
delegated 33:4 84:16
delegation 33:16
department 2:18 9:2,5 22:18 23:10 184:7 193:9 211:20
dependent 236:6,13 237:11
dependents 236:2
depends 41:17 86:7 115:17
deponent 8:10
deposed 9:20 11:18,20 17:12
deposition 1:8 5:10,15 8:7 11:11,22,25 12:5,9,24 13:15 13:18 14:9,11 14:14 15:5 16:7 16:15,20 17:4 17:10,15,23 18:23 19:17 26:15 68:15 69:3 85:13 109:7,10,12,14 109:16 114:16 117:25 119:18 130:11 140:24 141:8 147:17 166:21 168:4 171:7 175:7 182:24 209:6 248:19
depositions 17:20
depth 117:13
describe 14:13 22:15 23:7,19 24:10 25:3,24 31:2 32:8 66:7 71:11 72:20 84:5,15 97:15 107:25 108:5 114:22 138:2 175:12 177:8 177:20 184:13 201:18 212:6
described 54:20 61:22 120:8 121:13 169:22 174:10 212:10 233:11
describing 52:23 54:5 204:19
description 18:4 45:16 120:16 157:7
detail 165:9
detailed 127:5 231:8
details 183:13
determination 55:10 60:9,11 145:6 204:15 205:20 225:4 240:3
determinations 38:11,25
determine 52:18 62:15 185:4 210:14
determined 38:22 60:20 115:11,25 239:21,22
detroit 2:6
developing 108:25
diagnosed 141:9
diagnoses 168:16
diagnosis 141:10 152:12 163:21 168:7 184:18 185:12 232:14
diagnostician 35:23
die 237:25
died 173:19
dies 237:25
difference 40:24 42:13 96:8,17 97:7,16 128:12,13,13 153:17 163:11 166:6 168:20 174:4 185:8 186:16 212:6 213:13,17,24 214:8,16 216:11,21 233:14,18 234:2,4 238:22 244:20,25
differences 106:5 187:13 215:16 228:17
different 18:5 26:22 32:13 42:9,11,18,22 43:12,18,21 51:22 62:17,22

65:4 66:12 87:8 87:10 91:19 94:10,11 116:13,15,16 119:3 121:17 141:6,15 146:11,22 148:25 150:12 150:18 151:4 152:9,24 153:4 153:13 154:13 154:13,15 155:6 165:24 166:2 178:20 187:21,23 205:15 228:4 228:12
dig 110:11
directly 47:22 48:2,10,20 74:10,22 75:6 165:6
director 24:21 25:2,4,8 27:6,8 27:12
disability 38:9 38:16 63:10 69:15 109:22 109:25 110:4,9 147:22 184:8 184:16,17,20 184:23,25 185:5,6,11 186:20 191:12 191:16 202:12 202:16 211:21 212:14 213:23 214:2,13,15 215:9,11 217:10,14 218:15 221:14 227:23 228:21 233:24 235:25 238:19 240:16 241:9 242:11 243:2 244:17 245:18
disabled 163:23 168:18,23
disagree 95:12 96:24 97:4 100:24 101:12 101:21 102:4 102:11,21 103:2,9,16,23 104:6,13,20 105:3,10,18 217:22 218:22 219:6 237:19
disallowed 70:19,22 71:4
discipline 28:20
discount 186:22
discounting 31:8
discovery 78:23 79:3,9 86:21
discretionary 244:21 245:3,5
discrimination 23:24 28:9,19
discuss 166:21 179:12 225:25
discussed 14:18 14:22 15:3 27:25 71:11 141:2 158:9 167:21 175:16 175:18 179:13 180:22 186:19 190:14 199:20 200:7 206:24 214:14 225:22 249:5
discusses 190:17
discussing 50:4 50:22 139:22 178:22 199:10 214:16
discussion 76:24 77:2,5,10
disease 216:4 217:6,7
dishwashers 154:5
disputes 24:11
distinct 53:7
distinction 197:16
distinguish 61:6 72:2 105:25 106:3 211:2
distinguished 197:11
distinguishing 110:6,8 247:17
district 1:2,2
division 1:3
divorced 238:4 238:12 239:23
doc 117:3
doctor 171:19
doctrine 177:6 177:9
document 1:5 13:2,25 14:4,6 17:24 18:3,6 92:12 115:9,11 115:20 116:10 116:12 117:4 117:10,12 133:13 138:9 138:15 139:5 139:10,21 231:4
documentation 64:18 149:22 160:12 193:7
documents 5:12,16 12:2,6 12:13 13:16,19 17:22 47:22

48:9 86:23 94:16 114:25 115:3,4,17,25 116:18,24 117:6,7,14,16 117:20 118:2 118:20 119:16 119:19 133:2 147:16,17 150:6 169:8,10 247:5
doing 22:16,17 25:25 26:2 29:15 60:23 109:22 116:20 119:22 211:11 228:24
doj 16:4 71:7 71:13,23,25 72:16 90:12 99:5 114:25 116:25 118:21 119:16 133:24
doj's 15:18
dollar 64:4,8 147:12 163:24 164:6,15,25 165:8,16,18,22 166:8 168:13 168:24 169:22 210:12
dollars 31:9
double 57:15 57:18,20 58:10 58:14,15,17 70:3 156:25 157:22 158:2,6 158:8,14,23
doubt 95:16,20 96:3
download 115:2
dr 16:16 17:13 31:24 74:8,11 74:15,23 75:9 97:19 136:24 172:2 183:24 184:3 191:20 202:24 203:4 203:14,23 204:6,8,12 207:7 219:17 220:23 226:17 248:8,8,17
draft 97:12,20 108:8 109:6 115:6 118:19
drafting 98:16 119:11
drafts 98:3
drill 10:4
drive 3:19
dubravka 1:8 5:5,12,17 6:8 6:10,15,18,21 7:5,8,11,14 8:10 12:2,6 13:16,20 129:12,14 134:2,5 167:5 172:8 181:20 187:2 192:10 207:24 220:5 251:14
due 214:23 216:12,21 223:14 238:7
duly 8:16 9:8 100:6
duplicate 94:24
duration 62:20
duties 157:6

e

e 2:2,2 3:2,2,5,5 5:2,8 6:2 7:2 11:19 15:22,23 78:21 100:2,2 146:5 174:15 180:22 191:18 249:24 251:2
earlier 53:12 75:16 78:9 84:11 90:16 101:6 118:23 121:13 128:20 129:20 158:9 179:22
earliest 22:5
early 16:6 78:10
earn 42:15,17
earned 59:13 196:14 197:6
earning 42:7,14 42:24 43:2,9,14 43:17,19,24 44:7,24 45:8,18 45:19,20 46:4,9 47:22 62:21 160:9,21,23,25 161:5,10,13,13 161:24 162:3,7 162:11,11 163:6 195:25 196:12,18,22 196:23 197:14 197:20,25 198:6,13,17
earnings 40:25 41:2,10 42:6,16 42:24 43:3,8,14 43:15,18 44:4,5 44:7,9,10,16,17 44:18,20,21 45:2,3,6,6,8,19 45:21,22,23,24 45:25 46:6,6,10 46:13,13,14 53:12,13,14,16 53:18,18,19,23 53:24 54:5,6,10 54:11,12,13,13 54:14,18,18 55:9,10,11,12 55:13,22,24,25

57:14 58:22 59:5,5,7,7,12 59:14,17,18,19 59:20,22 60:18 60:21,23 61:7,8 61:16,21 62:3,4 62:8,13,14 70:7 70:8 84:2 88:15 110:21 136:6 136:10,20 143:25 144:21 144:25 145:24 146:3 160:4,7 160:13,17,18 160:21 161:3,6 161:9,20,23 162:4,5,10,13 162:16,18,21 162:22,23,24 163:2,4 177:14 177:23,25 178:14 187:10 187:15,18 188:2,4,6,23 189:4 190:3,9 190:12,18 191:2,3 195:18 196:7,9,11,19 196:21,24,25 196:25 197:5,5 197:7,8,9,9,9 197:10,14,17 197:18,19,20 198:6,11,14,16 198:20,20 199:2,2,7,8 200:3 221:25 222:6,19,23

easier 19:10

eastern 1:2 22:18,20

economic 6:11 28:7,18,24 30:4 39:5,14 51:24 52:2,2,17 53:6 53:20,24 54:3 61:25 76:6 79:18 80:12 83:25 84:7,8 87:18 108:25 134:3,6 135:22 137:4 144:10 158:19 159:19 160:8 167:16 169:6 172:17 174:12 182:2 187:8 192:16 195:14 208:5 209:25 227:14

economics 21:7 21:14,19 122:5 122:11,17 123:10 144:6

economies 22:19

economist 26:3 33:20,22 52:18 144:14

economists 23:22 24:14,15 31:25 32:5 60:5 132:10 153:7 225:9 247:25

education 21:6 42:15

educator 191:3

effect 241:23

effective 160:17 178:11

eight 86:9,9 221:8,11 247:21

either 17:20 24:16 41:20 50:11,16,18 64:19 77:17 111:21 122:23 125:9 128:21 129:5 145:19 170:5 197:9 202:5 205:19 206:3,12 221:2 238:6 243:18

element 29:11

elements 66:12 87:17 188:3 194:16,23 201:20 202:3 203:5,11,13,21

eligibility 67:13

eliminate 241:2

elisabeth 102:15 107:2 114:23 115:10

elizabeth 116:13 117:10 123:21 126:24

emaan 104:9 107:12 118:10 124:19

employed 144:4,23 173:18 188:11 193:8

employee 17:25 73:22 74:7 141:25 142:6 143:3,5 178:8 225:17

employees 74:4 84:12 178:7 199:25

employer 28:10 29:22 30:6,9 138:10 142:3 142:17,18,23 143:10 177:14 177:23 178:3,4 193:4,11 199:24

employer's 139:14 142:17

employment 23:24 24:18 25:10,13 27:24

28:9,15 29:10 29:13,25 30:14 41:6 140:15 145:8 176:3,22 176:23
encountered 75:18 76:3 128:2 153:6
ended 184:22
ends 230:12
engage 28:3
ensure 32:25 52:22 120:17
enter 11:24 13:13 19:25 114:9 139:4 217:5
entered 111:9 111:11,12,14 111:20,24 112:2,6
entering 112:5 127:6 129:10
entire 238:18
entirely 54:23 55:18 147:23 151:9 164:18 194:8,22
entirety 212:3
entitled 1:9 167:15
entries 127:6 127:13 230:15 231:8
entry 20:13 232:5
equally 30:5
erba 136:24
error 113:20,25
errors 113:17 120:18
ers 23:19,22 25:22 27:18
esq 2:7,14,22 2:23 3:14,21 4:8
esqs 2:3,11 4:5
essentially 148:6 155:15 200:6 208:20 213:6 217:20
establish 156:5
established 176:19
estimate 9:23 168:17 184:24
estimated 6:11 62:18 134:3,6 138:5 146:14 155:25 156:8 162:11 168:19 168:21 178:17 197:18 198:10 198:13,16,19 198:25 199:7 199:23 201:11 204:17
estimates 168:15 204:10 204:11 228:16
estimation 28:23
europe 22:18 22:20
evaluate 221:15
everybody's 33:7
evidence 193:10
exact 76:4
exactly 27:4 35:4 180:7 186:14
examination 5:4 9:10 100:8
examined 8:18 9:9 100:7
example 30:7 31:6 42:25 44:25 47:21 48:7 49:15 51:13 53:9,11 55:8 57:13 60:17 62:11 65:23 66:2,19 71:3 72:14 85:12 109:20 112:25 115:23 132:11 144:20 145:23 153:25 157:4 165:11 169:15 219:16 226:24 233:6 233:22
examples 52:19 86:3 213:12
exams 23:12
excel 110:25 111:4 113:4 231:13,15,17 231:18
except 212:11 212:25 214:6 222:4
exception 91:2 227:4 228:2
excerpt 7:17,19 7:21 231:21 232:2 234:10 234:17 235:19
excluded 94:23
excluding 95:10 95:25 185:9
excuse 15:24
exhibit 12:3,4 13:13,17 19:25 20:3 68:14,17 68:21,22 90:21 90:22 91:4,6,16 91:19,21 92:9 92:24 93:5,7,10 93:14 94:2,22 95:3,4,5,10,11 96:2,2 125:21 129:8,11,13

134:2,5 139:5,7 143:18,19 159:18 167:2,5 172:5,6,8 181:17,19,20 186:23,24 187:2 192:7,8 192:10 207:21 207:22,24 219:19 220:3,5 221:5,20 224:4 229:19,20 231:21 232:2 234:8,10,17 235:15,18,19
existing 39:19 88:6 210:22
expect 81:12
expectancies 228:12
expectancy 62:19 173:20 174:5,6 175:2 178:16 185:2 227:24 228:8 228:16
expectation 113:10,14
expected 174:5 185:2 235:11
expense 226:20 226:21 227:16 227:16
expenses 37:24 131:22,23 132:3,7 175:23 180:23 224:6 224:16 225:2,3 225:7 226:11 226:15 243:3
experience 27:22 28:18 40:9 42:15 46:25 55:9,15 55:21 63:10,14 63:16,23 64:3 64:23 65:25 67:13,17,20 106:4 121:22 122:6,12 123:11
expert 6:10,15 6:18,21 7:5,8 7:11,14 14:15 25:6,7 26:4 27:5 46:15,21 49:3,17 50:25 51:5,10,12 54:21,25 55:5 55:19 56:3,4,7 56:10,18,22 64:11,12,16,17 70:24 75:13 76:19 81:17 84:8 85:10 86:9 88:25 97:10,12 97:13,20,21 98:17 108:4 113:2,3,10,16 113:19 114:14 118:19 119:11 119:14 120:15 130:6,17,19,21 130:23,25,25 131:5,5,17 132:6 133:3,15 134:2,5 135:22 146:18 153:20 160:22 167:5 167:16 171:21 172:8,17 176:25 181:20 182:2 187:2,8 192:10,16 194:7 196:5 203:14,20,21 203:23 204:11 205:14,15 206:2 207:24 208:6 220:5 222:13 226:25 228:7 236:18 242:14
expert's 113:25 132:2
expertise 39:4 55:16,25 65:7 67:18 98:2 131:19,22 132:2,8 206:22 227:20
experts 23:24 24:15,17 36:10 75:10,19,22,24 77:18 79:17 81:7 225:13 248:20
explain 54:8 97:7 143:23 146:7 187:24 190:24 192:23 223:5 244:25
explained 178:25 190:6 199:14
explanation 128:6,11,12,14
explicit 137:19
export 131:3 171:20 203:11 203:15
exposure 213:8
express 34:9,13 81:20
expressed 176:14
extensive 28:17 55:9
extent 49:14 81:6,11,13,15 83:10 97:13,21 161:4 162:6 166:4 226:14 246:9

external 118:4
eyes 121:21

f

f 3:21 100:2 174:15 180:23 251:2
facility 155:17
fact 143:6 144:7 176:19 176:22
factor 195:9 209:21 210:16 211:8
factors 144:9 245:17
facts 145:4
fails 173:24,24
fair 15:17,25 17:5 33:13,19 39:13 40:8 44:19 48:11,19 51:9 57:2 59:6 64:6 66:7 76:15 88:8 89:24 115:8 117:2 131:10 142:12 154:17 159:5 161:22 168:8 186:15 211:14
fallone 99:11 101:4 106:18 108:6 122:20 126:18
falls 230:24
familiar 13:7 177:5 231:11
family 155:16 208:21
far 91:22 133:8 150:7 242:24
fast 10:5
february 6:8 18:13 95:13 129:12,15 228:6
federal 17:25 18:10 46:16 73:2,23 83:18 176:23 183:20 191:18 202:20 207:4 220:18 243:13,14 244:21
feel 11:2 13:22 114:5 170:20 178:24 179:12 180:21 189:20 199:14 209:2
fell 11:5
fers 18:4 172:20 173:4 173:16 174:11 174:14 176:18 176:21 178:8 178:10,21 179:5
fifth 30:18
figures 214:10
file 114:24
filed 86:18 87:12,13
fill 76:21 77:8 77:22 78:3
filled 142:19 143:15
filling 142:11 142:21
filtered 231:23 234:12,16 235:17
finalized 137:13
financial 24:15
find 39:20 91:17 101:16 125:24 138:18 149:17 160:12 193:22
finding 110:3 214:16
fine 134:15 135:15
finish 11:7
finished 212:3
firm 27:18
first 8:16 11:17 15:8 16:3 20:12 26:7,10,14 27:2 27:4 28:6 29:21 76:17 78:5,12 78:22 87:3,4,19 87:25 88:24,25 117:8 135:25 156:4,19 160:3 188:5 190:20 204:5 222:18 226:20
fitzpatrick 99:12 101:24 106:22 108:23 108:24 109:17 110:17 111:7 112:2 114:19 123:7,12 126:16
fixed 120:22
flag 236:9
flawless 113:11
flip 91:16
floor 2:5
florida 21:15 21:23 22:6
fluctuating 233:7
focus 28:12 60:11
focused 23:16 24:17
focusing 23:22
follow 60:17 190:10
following 12:12 94:18 126:5 136:5 137:24

197:8 222:22 235:23
follows 8:18 9:9 100:7 182:12
food 157:8 164:2
footnote 138:16 139:11
footnotes 50:19 108:8,15 119:19
foregoing 251:12
form 20:24 29:17 34:6,20 35:13,20 43:25 44:11 45:13 47:4,17 48:4,13 49:5 53:2 61:17 63:12 64:9,25 65:12,16,21 67:15 68:5 79:14 81:5 95:22 96:4,11 96:25 97:5 98:8 100:25 101:13 101:22 102:5 102:12,22 103:3 113:12 127:23 142:15 145:10 158:10 158:16 198:8 198:22 206:19 207:11 218:23 224:8 247:3
formed 133:9 247:13
forms 28:24 29:15 246:23 247:2
formula 111:20
formulas 66:4 66:5,12 67:10 111:3,15,24 112:2,5,7 114:9
forth 251:15
forward 10:5 23:18 82:3,5 94:19 134:16 163:14 170:24 171:12 177:12 182:14 183:17 184:24 195:13 211:18
found 71:7 113:24 125:25 138:8 213:7,9 215:19 216:16 217:19
foundation 51:19 68:4 115:21 121:3
four 68:16 69:3 104:5
free 11:2,5 13:22
frequency 201:24,24 202:3,5 203:13 203:22,25
fringe 28:25 29:9 70:9 84:2 110:21 136:6 136:10 192:19 193:2,13 199:17,21,22 200:2,4
front 39:22 91:22
fryar 194:8,17 203:6 204:20
fryar's 203:11 203:15 204:10 204:25 205:5 205:13,14,18 205:23 206:2
full 101:16 152:21 196:8 240:24 241:9
fully 140:9 180:21 206:24
functionality 89:15
fund 72:15,23
funding 245:11
funds 243:6,10 243:15,22
funeral 175:24
furnish 142:2 143:8
further 14:6 15:17 100:7 199:13 249:10 251:16
future 31:11 34:11,19,25 41:21,23 136:5 136:10,20 137:4,14,21 144:2 146:12 147:7 148:11 148:15,20,23 151:5 155:2 161:3 171:23 181:4,13 184:25 189:13 189:22 195:2,4 202:19 218:4 228:20 239:10 243:22 245:17

g

g 183:24 191:20 226:17
g's 171:19 172:2 184:3 207:7 219:17 220:23
gain 39:10
gather 169:8
general 30:13 56:14 65:20 71:9,12 110:15 140:5 141:5 226:19 247:15
generally 32:8 32:15,23 226:7

226:23 235:3,5
generate 98:12
geographic 155:5 165:11 166:3,5 183:11
geographical 179:25 180:4,9 180:14,18
georgetown 3:13
georgia 160:15 160:16
getting 45:11 173:19
gianna 2:14 8:22
give 9:23 48:7 53:9 72:14 85:22 116:17
given 31:6 36:15 42:15 160:11 183:5 209:7 215:9
gives 58:15
gleesing 7:6 186:25 187:3 187:15,21 188:4 189:16 190:25 221:20 237:9,15,16
gleesing's 188:2 188:7 189:4 190:9
go 23:5 49:18 82:5 99:17 107:22 108:11 116:3,17 117:7 121:23 134:15 134:21 159:10 159:17 161:19 162:9 184:6 204:7 215:13 217:2 219:7,20 230:15 232:18 232:22 249:15 249:17,18,25
goal 60:2
goes 188:15
going 10:23 11:18,20 14:21 17:14 33:18 49:7 68:22 74:13 82:2 107:22,23 110:11 121:23 125:20 129:8 167:14 172:15 177:12 183:17 183:18 184:23 189:25 220:3 221:19,21
golkow 8:4
good 9:11,13 10:22 49:8 82:7
google 83:3,4
government 12:22 18:10 34:19,24 35:3 35:17 65:20 67:14 72:8,11 73:3,10,13,20 176:23 183:20 191:19 202:20 207:4 220:18 227:15 241:8 245:24 247:24
grand 2:5
great 147:8
greater 223:20
gregory 16:21 73:25 75:6 132:17,21 225:17 246:19
group 3:10 8:21 8:24 19:16,18 23:19,22 25:22 27:18,20 32:19 117:15
groups 146:23 147:10,12 154:24
growth 163:8 181:10 188:19
guess 40:14 116:23 224:17 235:9
gvalente 2:15

h

h 5:8 6:2 7:2
hackett 130:18 130:20 131:6 131:18 225:14 246:13
half 15:10
hanna 103:19 107:8 117:23 117:25 124:11
happen 120:25 238:9 239:9
happened 17:15 20:14 238:7
happens 48:16
heading 135:20 135:24 174:18 177:13 181:3 187:7,10 190:2
health 139:18 156:12,18
healthcare 64:24 65:3,5,6 69:18 157:5,7 209:18 244:4
healthy 174:25
hear 11:11 120:16
heard 9:15 241:12,13 242:4 243:13
heart 212:12,13 212:18,25 213:7,9,23 214:6 215:3,5 215:12,19,20 216:16,20

217:4,7,9,19,24
held 1:12 8:8 20:19,21
help 16:9 39:14
helped 108:12
helpful 91:10
helping 119:19
henry 16:16 73:24 74:11,23
hereinbefore 251:14
high 203:16,18 203:24 204:3,9 204:11,19
hill 7:9 162:20 162:25 163:10 192:9,11 193:2 193:7,15,23 194:4,12,18 195:15,23,25 196:7,14 197:24,25 198:12 200:14 200:15 204:13 229:21 230:5,8 234:13,16 235:18 236:16 236:20
hill's 192:25 193:13 196:10
himadri 100:16 100:17 106:16 108:2 122:14
hired 24:16
hiring 28:20
historical 110:3 110:5 161:20 162:9
history 44:20
hochberg 103:12 107:6 117:17 124:7
hodgkin's 34:5 184:17
hold 49:3 50:25 51:9 54:20 55:5 224:20
holding 238:10 242:13
holistically 46:11
home 42:25 43:4 155:16 164:3 171:9 208:20
hope 82:13 112:17
hospital 139:2 139:23 243:13
hour 15:9,9 49:8 81:25 134:10 147:5 147:13 148:6 148:23
hourly 148:16 148:20,21 150:20 151:13 155:6 164:8 165:20 179:16 179:19 181:11 209:10,17,20 210:22
hours 95:7,11 96:15 98:6,12 98:19,24 99:5 100:23 101:11 101:20 102:3 102:10,20 103:8,15,22 104:5,12,19 105:2,9,17 118:6 127:19 146:14 147:13 148:13,22 149:3 150:14 165:17,19,23 237:5
house 158:5
household 29:5 30:20 52:11,20 52:24,25 53:5 84:3 110:23 146:6,10,12,14 146:16,21 147:4,5,6,7,9 147:20,25 148:5,11,16,17 148:19,20,24 148:25 149:2 149:10,24 150:2,16,17,18 150:21 151:4,5 151:11,14,22 152:2,9,11,22 153:4,13,23,25 154:2,10,19,20 157:2,13,14 158:6 163:15 163:18,20,25 164:3,5,7,13 167:19,23 168:13,15,17 168:19 169:15 169:17,18 170:6 171:7,9 171:10 174:20 174:24 175:3 179:9,20,24 180:13 181:5,9 181:14 182:4 182:15,22 183:2,4,7,8 189:13,15,22 191:7 194:3,10 194:14,19,21 200:10,17,20 208:8 210:4,7 210:12,15
housework 149:21 164:2
hulsey 105:14 107:20 125:16
hulsey's 119:25
human 46:22

hundreds 42:3 42:4
husband 155:25 156:2,6
hypothesis 224:18
hypothetical 215:2,18 216:15 217:18
hypothetically 180:5
hypotheticals 213:6

i

i.e. 216:20
idea 58:15
ideally 113:18 121:6,8
identification 12:7 13:20 20:4 68:18 90:23 91:7 93:11 129:15 134:8 139:8 167:7 172:11 181:22 187:4 192:12 208:2 220:7 232:3 234:18 235:20
identified 31:6 35:5 53:23 57:5 58:2 76:20 78:2 80:21 88:13 100:13 105:22 131:13 132:21 149:17 201:21 203:21 204:18 206:11 214:23
identifies 57:9 148:5 152:15
identify 16:11 56:20,22 57:3 59:25 60:2 63:2 64:7 91:10 115:3 117:14 117:19 120:9 136:9 152:3 186:9 202:15 213:13,17 216:11,18 229:13
identifying 55:6,17,19 56:8 59:8 132:7 151:17 165:17 185:8 186:16 212:6 215:4
ignore 59:22
illness 217:13
illnesses 185:15 212:11,12,13 212:17,19 213:2,7,9,22,22 213:23 214:5,6 215:3,19,20,24 216:16,20,22 217:10,13,19 217:25 218:16
implications 73:22
important 66:5 210:25
impressions 247:16,17
improve 47:11 47:13
inappropriate 158:14
incident 151:18
include 31:14 34:23 96:12 116:23 137:5 138:22 144:15 153:3 160:10 160:20 176:25 177:4 185:20 188:25 202:7
included 12:24 30:10 86:23 96:16 115:9 128:21 129:5 150:25 151:3 152:25 153:4 154:5 194:20 220:20
includes 44:15 62:15 138:4 148:16 153:18 153:20 177:22 231:7 236:12
including 28:25 163:4 185:10 198:5 213:23
income 161:9
incorrect 45:17 54:8 88:13 173:13,14 219:4,13
increase 214:20
increased 181:11 216:12 216:21
increases 184:24 185:3,4 188:16,22
increasing 24:24
incurred 224:6 226:20 227:16
incurring 227:7
independent 28:3
independently 133:9,17 247:13
indicate 43:13 43:23 44:20,24 236:11
indicated 90:5 149:22
indicates 127:22 140:2 141:22 193:19
indication 44:6 142:14 193:23

indicator 46:4 196:18
individual 16:16,20 37:5,9 37:24 42:14,19 43:17 45:24 46:22 48:9 59:14,21 62:19 62:22 75:13 78:3 83:8 84:20 84:22,23 85:11 106:14 120:17 127:6,13 144:20 151:18 216:3 223:2 231:8 240:22
individual's 41:19 43:19 44:3 45:19 46:12 145:4
individually 72:3,5 76:13 205:13
individuals 27:20 36:14 37:3 79:22,22 80:3,6 96:13 112:4 121:21 150:15 162:19 188:21
industry 29:4 42:16
inflated 239:3
inflationary 223:14
infor 245:7
information 39:12 47:3,8 48:17,20 67:7 81:14,16 84:23 85:12 86:22 109:16 116:18 116:25 117:20 119:17,23 133:16 136:2 138:14,19 149:25 154:9 157:20 158:21 165:10 166:24 169:7,10 170:20 183:5 184:20 193:5 202:3 209:7 211:6 224:18 224:24 231:14 238:24 239:4,6 239:17,17 242:2 245:10 246:5
initial 86:25 119:6
initially 71:14
injuries 186:11 212:9 216:11 216:13,20
injury 23:25 28:21 30:8,11 30:12 41:9,11 72:18
inpatient 207:19
inputs 120:17
inside 164:2
insight 98:4 168:5
instance 159:6 184:2 204:5 227:7
instances 40:7 85:10 241:12 242:5
institution 141:14
institution's 142:21
instruct 11:13
instructions 85:22
insurance 243:14,14
intend 133:4 221:7 247:9 248:13,16,19
intent 81:20
intention 113:8
interacted 74:10,22 75:6
interactions 74:7
interested 251:18
interfere 10:12
intern 22:13
internal 76:24 76:25 77:4 228:20
international 25:11
interpretation 217:17
interview 48:8
intro 230:12
introduce 181:18 220:3 229:18 231:20 234:9
introduced 87:18
introducing 133:25
introduction 135:25
introductory 136:2
inverse 217:20 218:6
invoice 5:22 6:5 91:5,6,17,20 92:16,16,22,25 93:4,8,8,10,13 93:23 94:6,10 94:21,22,23 125:23
invoices 5:21 12:17,20 90:10

90:13,18,22,25 91:10 95:3,25 100:10 102:2,9 102:19 103:7 103:14,21 104:4,11,18,25 105:8,16 127:19
involve 30:8 41:18 46:7,8 49:15 62:12 66:4 69:14,18 69:24 84:2 195:4
involved 22:19 25:10,19 33:12 41:24 48:9 60:10 66:12 70:5,12,24 71:15 73:25 85:9 98:14 106:12 110:3 245:24
involvement 97:21
involves 31:5 36:19 47:20 55:22 56:23 57:7 151:6
involving 28:8 28:19
issue 57:8 149:4 151:16 152:13 152:14 157:22 157:24 229:10
issued 38:19 81:14 133:3 247:22
issues 64:15 149:13 228:11 247:10
item 156:19
items 57:11 68:8 131:4,7 133:6 195:5

j

jana 105:14 107:20 119:25 125:16
january 232:22
jenna 3:21
jeopardize 243:22 245:17
jersey 19:3,4,8
jfb 3:23
jill 99:12 101:24 106:22 108:23,24 109:17 110:17 111:7,25 114:19 123:6 123:12 126:15
job 29:3 138:20 138:24 157:6
jobs 141:4
jones 4:5
joseph 7:6 187:3
joseph's 138:25 139:17,23
joshua 103:12 107:6 117:17 124:6
judges 156:11
july 79:6
jump 183:18 187:6
june 9:19
justice 2:18 9:2 9:5 67:21 68:11

k

k 1:8 5:5 8:15 8:15 9:7,7 100:5,5 251:14
kansas 4:7
karen 6:11,14 134:3,6 139:7
keep 82:2
keller 7:12 207:23,25 208:12 209:3,5 209:9,9 210:2,9 210:10,20 211:2,4 215:2 218:11 221:14 229:11 237:9 237:14 248:24
keller's 209:19 212:11 214:5
kept 82:9
key 117:19
kidd 7:15 220:4 220:6,14 221:3
kim 104:23 107:16 118:16 119:2,7 125:5
kind 65:9 119:10 156:15 211:6
kinds 25:20 67:10 78:17 137:20 150:15 150:16,18 151:4,6 152:24 153:13
klotzbucher 2:22 8:25,25 14:20,24 20:24 29:17 34:6,20 35:13,20 37:21 43:25 44:11 45:13 47:4,17 48:4,13 49:5,10 51:19 53:2 57:16 58:19 61:2,17 63:12 63:25 64:9,25 65:12,16,21 67:15 68:4 74:12,18 76:10 77:9,13,19 79:14 81:5,24 82:16 86:19 89:11,16 91:25 92:8 95:22 96:4

96:11,25 97:5
98:8,20,22,25
100:25 101:13
101:22 102:5
102:12,22
103:3,10,17,24
104:7,14,21
105:4,11,19
113:12,21
114:2 115:13
115:21 121:3
127:23 128:8
134:9,17,20,23
142:8 145:10
158:10,16
198:8,22 199:4
206:19 207:11
218:23 224:7
226:22 227:18
228:22 229:6
237:2,6 239:15
239:25 241:3
241:11,20
243:8,25 244:5
244:10,13,18
244:23 245:8
245:14,20
246:3,10 247:3
249:9,14,18,22
know 10:4,15
10:24 11:5
16:23 17:15
23:13 27:5,20
28:12 43:20
48:16 52:13
53:17 57:22
60:8 66:9 70:10
71:7 75:14
76:20 81:25
82:12,15,25
85:24 87:20
88:24 89:22,24
91:18 99:6
100:17 101:4
101:18,24
102:7 103:5,12
103:19 104:2,9
104:16,23
105:6,13
117:15 121:20
121:25 122:7
122:13,19,25
123:6,11,14,20
123:25 124:6
124:11,16,19
124:25 125:4
125:10,15
128:10,13
131:7 141:12
142:10,10,13
142:20 143:6
144:6 153:9
154:7,8 155:2
156:4,19,22
158:6,23 161:5
161:7 162:7
163:12 164:10
166:23 169:10
169:14 170:17
170:25 171:5
175:5 178:19
189:5 190:6,23
194:22 197:4
209:10,13,19
210:22 212:3
221:17,22
233:20 238:13
241:22 243:10
knowing 74:6
knowledge 20:9
34:4 39:19
46:25 98:2
235:7,13
238:23 239:3
245:15

l

l 2:20 3:5
label 31:17
161:17 198:15
labor 21:21
22:20 24:18
25:10 26:2
28:12,14 29:10
29:11,13 30:14
33:23 83:16
85:21 109:21
116:22 118:4
144:6
lack 140:9
laid 174:11
lamacchia 3:14
language 57:9
143:4
large 120:24
larger 27:18
79:23
launch 100:10
law 43:2
lawn 194:19,19
200:18
lawsuit 40:20
56:8 57:25 58:9
59:25 60:3
144:14
lawsuits 29:25
lawyer 43:3
lead 32:19
leadership 8:21
8:24
learn 11:17
lectures 20:20
left 142:25
232:6,6,9,19,20
232:23,23
233:3,3,22,23
legal 3:10 8:4
51:23 52:17
60:4 73:21
legeune 8:9
legs 11:6
lejeune 1:4
9:16 32:16,19
37:7,13,15,16
43:6 50:7 56:16
57:8 67:21

68:11 90:2 95:8 106:13 112:15 185:16 186:6,8 212:9 213:8 214:6,18,21,24 216:13,22 217:11 218:17
leslie 3:14
leukemia 34:5 136:24 141:10 141:10 169:19 212:16
level 25:4 33:3
license 251:24
life 29:6 30:20 30:24 36:2,6,10 36:13,17,20,23 36:24 37:3,6,7 37:12,18,25 62:18 84:4 112:7 132:11 173:20 174:5,6 174:25 178:16 185:2 194:14 194:18,20,23 194:24 201:7,9 201:16,22 202:2 203:6,12 204:25 205:2,5 205:7,18,23,25 206:2,11 227:24 228:8 228:12,16,25 229:4
likelihood 136:25 137:5 145:14
limited 63:16 71:4 74:16,19 115:6 119:9 120:3 133:15 166:23 206:14
line 30:18 139:14 141:24 143:12 204:24 204:25 205:4,6 234:20
list 18:12,17 19:23 50:17,19 68:15 69:2,5,8 69:11 108:12 121:24 128:22 129:18,22,24 130:5,23,24 131:3 132:23 133:6 153:19 246:22 248:5
listed 20:22 22:5 26:22 30:5 114:14 126:2 127:19 171:5 183:5 222:24 246:22
lists 50:11 68:7 129:25 135:4 196:5
litigation 1:4 8:4,9 9:16 17:13 24:2,12 26:4,16 29:16 30:6 32:4,17,19 33:6 37:8,13 40:23 41:6 43:6 48:10,21,24 51:17,21 56:16 57:7 67:22 72:22,24 73:3,5 74:2,17,20,22 75:6,19 76:13 78:2,6,13 79:2 83:23 106:13 133:5 176:5 180:14 225:20 225:22 226:2 241:16 245:23
litigations 76:6
little 10:4 15:15 49:7 51:4 117:13 134:16 134:21 166:23 170:25 177:7 194:6 224:17 224:23
live 18:25 19:3
lived 175:9,13 179:17
llamacchia 3:16
location 180:18
locations 180:9
logistics 17:6
long 15:7,9
longer 134:16 134:22 150:4 151:19,24 152:4 153:24 154:11 157:12 163:22 236:20
look 27:21 46:11 83:3 92:8 93:13 94:12,13 94:18 116:18 125:20 126:5 141:20 145:5 157:6 201:20 209:14 215:14 221:13 236:8
looked 115:12 155:9 187:17 218:2
looking 22:4 31:22 43:22 47:8 69:11 92:12 94:2,20 116:25 119:17 119:23 125:22 127:7,10 134:17 139:25 143:20 145:17 175:11 201:10 211:23 220:16 221:24 222:18 229:22
looks 12:10 191:19

lorraine 1:10 8:13 251:9,23
lose 238:25
losing 238:8 241:18,24
loss 6:11 28:18 28:24 30:4 40:9 40:13,16,19,23 41:13,16,18,23 42:2,6,6 43:5,8 43:9,14,14,24 44:10,17,18,20 44:24 45:3,6,8 45:22 46:4,9,10 47:22 53:6,7,10 53:20,24 54:3,6 54:13,14 55:10 55:11 59:7,8,12 59:19 84:7 87:18 108:25 134:3,6 138:5 151:14 157:2 158:19 159:19 160:19 162:4,5 166:15,20 168:21 172:20 173:6 174:11 174:12,14 178:21 179:5 190:25 192:19 209:25 210:11 210:20 211:12 221:25 222:6 222:19,23
losses 51:7 52:2 53:17 55:22 59:21 62:20 70:8 79:18 83:25 84:2,2 110:21,22 136:20 137:4 138:22 143:25 144:10 145:24 145:25 151:6 151:22 154:25 155:2,24 156:5 160:8,10,13,17 161:3,7,9 162:22 164:10 169:6 170:21 173:3,16 177:15 193:2 193:13 196:23 209:8 222:9 223:23
lost 29:5 30:20 52:10,11,11,20 52:23,24 53:4 53:12,23 55:9 84:3 88:15 136:6,10 138:5 146:6,10,12 147:4,5,6,7,9 147:25 148:15 148:24 150:3 154:19,20 157:2,3,14,19 158:5 160:4,7 160:21,23 161:5,6,9,10,13 161:23,24 162:3,13,16 163:6,6,15,18 163:20 164:12 167:18,22 168:12,15 169:15,17,18 174:20,24 175:3 177:23 177:23 179:9 179:20,24 180:12 181:4,9 181:14 182:4 182:15,22 187:10,14,18 188:2,4,6,23 189:4,13,15 190:3,9,12 191:7 194:2,10 194:14 195:15 195:18 196:10 196:18,19 197:8,14,14 198:6,6,10,20 199:2,22 200:2 200:4,10,16,20 208:8 210:4,7
lot 27:18 63:14 65:25 66:10 215:16
low 203:16,17 203:24 204:2,9 204:10,19
lumbar 234:21
luncheon 99:20
luxenberg 2:3 2:11 8:20,23
lymphoma 34:5 184:18

m

m 7:6 187:3
ma 21:14
made 88:14,21 88:23 110:24 110:25 113:4 144:11 175:9 178:9 179:19 189:6
mail 11:19 15:22,23
mails 78:21
main 4:6 114:17
majority 28:13
make 79:24 120:11 145:5 197:16 204:15 205:20 225:4
makes 155:4 228:19
making 113:2 136:17 165:14 248:25
malpractice 241:6

manage 84:11
management
25:16,17
114:24 164:4
manager 24:20
25:4,6 26:6
27:6,8
managing
32:10
mandatory
244:21 245:2
manipulate
231:16
manner 245:25
march 1:14 8:1
8:6 9:1 10:1
11:1 12:1 13:1
14:1 15:1 16:1
17:1 18:1 19:1
20:1 21:1 22:1
23:1 24:1 25:1
26:1 27:1 28:1
29:1 30:1 31:1
32:1 33:1 34:1
35:1 36:1 37:1
38:1 39:1 40:1
41:1 42:1 43:1
44:1 45:1 46:1
47:1 48:1 49:1
50:1 51:1 52:1
53:1 54:1 55:1
56:1 57:1 58:1
59:1 60:1 61:1
62:1 63:1 64:1
65:1 66:1 67:1
68:1 69:1 70:1
71:1 72:1 73:1
74:1 75:1 76:1
77:1 78:1 79:1
80:1 81:1 82:1
83:1 84:1 85:1
86:1 87:1 88:1
89:1 90:1 91:1
92:1 93:1 94:1
95:1 96:1 97:1
98:1 99:1 100:1
101:1 102:1
103:1 104:1
105:1 106:1
107:1 108:1
109:1 110:1
111:1 112:1
113:1 114:1
115:1 116:1
117:1 118:1
119:1 120:1
121:1 122:1
123:1 124:1
125:1 126:1
127:1 128:1
129:1 130:1
131:1 132:1
133:1 134:1
135:1 136:1
137:1 138:1
139:1 140:1,15
141:1 142:1
143:1 144:1
145:1 146:1
147:1 148:1
149:1 150:1
151:1 152:1
153:1 154:1
155:1 156:1
157:1 158:1
159:1 160:1
161:1 162:1
163:1 164:1
165:1 166:1
167:1 168:1
169:1 170:1
171:1 172:1
173:1 174:1
175:1 176:1
177:1 178:1
179:1 180:1
181:1 182:1
183:1 184:1
185:1 186:1
187:1 188:1
189:1 190:1
191:1 192:1
193:1 194:1
195:1 196:1
197:1 198:1
199:1 200:1
201:1 202:1
203:1 204:1
205:1 206:1
207:1 208:1
209:1 210:1
211:1 212:1
213:1 214:1
215:1 216:1
217:1 218:1
219:1 220:1
221:1 222:1
223:1 224:1
225:1 226:1
227:1 228:1
229:1 230:1
231:1 232:1
233:1 234:1
235:1 236:1
237:1 238:1
239:1 240:1
241:1 242:1
243:1 244:1
245:1 246:1
247:1 248:1
249:1 250:1
251:25
marcus 2:23
9:4
marcus.o.tubin
2:25
marginal
172:20 173:6
marie 6:12
134:3,7
marjorie
130:18,20
131:18 225:13
246:13
mark 14:21
90:20 91:4 93:7

167:3 172:6 186:24 192:8 207:22
marked 12:6 13:20 20:4 68:18 90:22 91:7 93:11 94:21 129:15 134:7 139:8 167:7 172:10 181:22 187:4 192:12 208:2 220:7 232:3 234:18 235:20
market 71:2
markets 22:21
marking 68:14
marriage 251:17
maryland 21:7
master's 72:17 122:23 124:9 125:9
match 94:9 138:8,11 151:7 151:10 193:4 193:11
matching 193:17,20,24
material 39:14 165:23
materials 6:7 13:10 18:12,15 18:16 22:22 50:11,17,20 82:21 108:13 119:20 128:22 129:11,13,18 129:21,25,25 130:4,6,9,22,24 131:2,10,12 132:14,16 133:6,10,18,21 229:22 246:21 248:4,5
matter 1:9 8:9 32:20 40:23 41:6,9 48:10 56:17 57:7 70:21 75:13 156:3 228:18 251:18,19
matters 26:5 28:8 73:2,3,17 75:23 76:2,4
matthew 6:19 172:9
mba 122:24 125:9
mcl 129:5
mean 21:20 26:21 30:9 33:5 35:4 38:12 41:4 43:10 49:14 51:18,22 57:18 57:21 59:24 62:2 73:7 79:25 87:2 89:13,19 95:16 112:20 113:19,24 132:10 134:14 134:15 144:17 149:15 223:7 235:10 238:2 240:2 241:21
meaning 41:12 52:17,17 60:18
means 31:3 58:6 223:8
meant 94:19
medical 35:23 37:24 38:7 115:24 116:2,4 131:22,23,23 132:3,7 155:11 155:15,17,17 155:23 156:17 158:4 159:5,7 166:14,20 170:9 176:17 180:23 201:2 202:19 207:10 207:15,18 208:18 209:9 210:20 211:10 224:6,16 225:2 225:7 226:11 226:15 227:15 241:6 243:3,11 243:14
medicare 63:24 64:3,13,15 171:23 191:23 202:20 203:5 204:5,7,14 205:4,6,15,19 206:3,8 207:10 207:15 243:7 243:11,23
medicine 34:2
meer 16:14 77:6 96:14 97:4 97:17,24 98:24 100:13 105:22 106:12 122:8 126:10
meer's 121:14
meet 15:4
meeting 15:7
meetings 15:12
member 100:20 173:5
members 87:22 89:22 90:3 96:19 99:7 121:19 128:16 155:16 208:21
men 168:18,23
mention 120:17 156:24
mentioned 47:7 54:9 55:22 84:11 101:6 114:6 116:20 149:21 154:16 178:19 236:18

merely 172:2
met 14:16,18 14:19,24 15:6
methodologies 84:9 86:24 87:2 87:4 163:12
methodology 62:25 135:17 136:9 144:17 146:10,11 154:21,23 155:7 159:4 160:7 162:14 163:5,7 168:10 170:12 173:5 174:10 177:21 177:22 178:20 178:20 179:13 179:23 182:10 182:12,18 183:14 184:19 189:8,18 190:11 191:8 191:15 194:5 195:10,22 199:19 200:13 200:23 201:19 202:15 208:13 210:7,17 213:12,17 215:4 216:7,17 218:10,13 219:5 228:10 233:10
metropolitan 160:16 164:9 179:18
mhw 130:25 131:3
mi 104:23 107:16 118:16 119:2,7 125:4
michael 14:24 15:4,12 37:10
michigan 2:6
middle 139:13
military 240:12 240:20,23
miller 16:17 17:13 73:25 74:8,11,15,23 75:9 202:24 204:6,8
miller's 203:4 203:14,23 204:12
mind 128:6
minimal 97:11
minute 125:21
minutes 237:5
missing 135:7,9 174:8
missouri 4:7
mistake 136:15
mistakes 113:7 120:9,21,25 121:11
misunderstand 179:22
misunderstan... 10:25
mitigated 53:23 54:5,17 58:22 60:21,23 61:7,8 61:16,21 62:8 70:9 162:21,24 163:4 190:18 196:20 198:16 198:20 199:2,7
mitigating 41:2 53:13,14,17,19 54:9,12 55:12 55:13,23 57:14 59:4,7,17,22 62:4,12,14 70:6 144:20,24 163:2 168:19 169:17 183:7 196:7,9 197:5,7 197:10,18,19 197:19,20 198:11,14 199:8
mitigation 70:3 70:16 169:23
models 108:25
modification 88:17 180:10 180:15 236:5 236:13,16,21 238:8
modify 88:7
moment 13:22 50:3 133:19 221:9,19 247:11 248:21 249:3
money 196:15 223:6,16,20
month 143:13
monthly 185:5 212:21 213:3 214:2,11 218:19
months 188:15
morning 9:11 9:13
mother 42:25
move 159:2 166:13 167:2 170:24 171:12 177:12 182:14 183:17 192:14 195:13 235:14
moving 23:18 146:5 155:10 158:25 163:14 191:11 209:24 211:18 219:15
mulholland 101:17 106:20 108:18 123:2
multiperson 112:19

multiple 135:5

n

n 2:2 3:2,5 5:2 100:2,2,2 251:2
name 8:3 9:14 22:25 23:2,4 96:9 126:13 127:20 139:15
named 16:16 16:20
names 101:15 101:16 107:22
narrative 85:16
narrowed 80:10
narrowing 80:13
nations 25:12
navarro 194:8 194:17 195:24 197:22 198:16 201:21 203:7 203:24 204:20
navarro's 196:21 197:23 198:5,12 199:11 201:9 201:16 203:20 204:11 205:2,7
near 92:15
necessarily 30:9 36:21 51:7 60:13 71:21 98:16 149:19 217:8 228:14
necessary 39:21
need 11:4 34:11 46:11 85:23 88:6 137:7,8 142:6 151:7 157:16 170:16 179:12 182:20 194:18 200:14 209:3 210:8,9 216:25 217:2 221:16 224:17 224:23 246:8
needed 23:14 117:20 195:5 227:17
needs 20:12,15 156:23 168:2 171:3 182:8 189:23 194:25 195:2 199:14 221:12 240:10 245:5
network 244:12
never 87:9
new 1:11,13,13 2:13,13 8:8,8 8:17 19:3,3,8 25:3 117:6 129:21 172:22 177:17 184:10 192:21 239:18 251:4,10
nhl 185:9,10,12 185:20
nine 230:8
non 34:5 52:2 80:6,9 180:23 184:17 247:21
noon 90:8
north 1:2 3:20
notary 1:11 8:16 251:10
note 114:4 134:9 135:2 167:9 169:21 170:4
noted 8:11 137:11 170:11 171:3 176:9 250:5
notes 1:7 82:10 82:21 159:4 251:13
notice 1:15 5:10 5:14 6:14 11:21 11:25 12:4,9,13 12:23 13:15,18 14:8 139:7 220:9
notify 115:3
notwithstandi... 121:9
november 125:23
number 23:9 25:9 51:22 52:9 62:17,22 67:2 68:7 80:10 92:22 93:23 94:6 109:12 110:12 116:17 146:22 147:13 148:13,25 149:3 150:14 151:3 152:9 153:4 164:19 164:21 165:19 165:23 166:10 166:11,19 215:24 217:13 222:5 230:9 232:8 235:22 236:2
numbers 42:18 42:21 64:17,20 65:7,8 66:15,21 66:23 94:10 96:12 108:7,15 132:21 166:9 205:10 217:16 229:25 230:20 234:2,3
nw 2:20

o

o 3:5 8:15 9:7 100:2,2,2,5 251:2
oath 10:6
object 74:13 100:25 101:13

objected 176:12
objection 11:14 14:21 20:24 29:17 34:6,20 35:13,20 37:21 43:25 44:11 45:13 47:4,17 48:4,13 49:5 51:19 53:2 57:16 58:19 61:2,17 63:12 63:25 64:9,25 65:12,16,21 67:15 68:4 76:10 77:9,13 79:14 81:5 82:16 86:19 89:11,16 95:22 96:4,11,25 97:5 98:8,20,25 101:22 102:5 102:12,22 103:3,10,17,24 104:7,14,21 105:4,11,19 113:12,21 114:2 115:13 115:21 121:3 127:23 128:8 142:8 145:10 158:10,16 198:8,22 199:4 206:19 207:11 218:23 224:7 226:22 227:18 228:22 229:6 239:15,25 241:3,11,20 243:8,25 244:5 244:10,13,18 244:23 245:8 245:14,20 246:3,10 247:3
objections 5:14 11:12 13:14,18
obligation 227:8,9
obligations 228:20
observations 136:16
observing 174:9
obtain 47:3,15 48:12 133:20 176:15
obtained 60:24 60:24 67:2
obtaining 164:4
obviously 128:11 144:22
occasion 116:5
occasionally 99:11,14
occupation 29:4 42:16 44:4 152:6 156:13 156:20
occupational 146:22 147:10 147:12 154:24
occupations 147:2 148:25 149:9 150:9,11 150:12,21 151:6,12 152:16,21,22 153:19,22 154:3,12,14 196:4,5 198:2
occur 78:23
occurred 80:14
occurring 121:18 187:21
october 6:5 93:8,11,14,21 94:3,3 232:18
offer 35:17 133:5 221:8 247:9
offering 171:25 206:10,17 242:7 248:11
offers 240:9
office 19:5,8 72:17
offices 1:12
offset 49:16 51:18,24 52:24 52:25 53:7,10 54:6,18 55:19 55:24 56:2,25 58:18,24 61:22 67:20 68:10 70:14 88:20 183:21 184:10 186:2 202:16 207:4 214:14 218:11 229:5 229:13 239:2 239:22 242:19 243:2,23 245:18,24
offsets 35:6 49:4,14 50:22 50:25 51:2,6,11 51:14,15,21 52:12,16 53:15 53:18,20 54:11 54:22 55:4,6,14 55:17 56:5,8,20 56:22 57:3,4,9 57:11,12,14 59:5,5 62:25 63:2,3,6 68:3,8 69:24 70:2,3,11 70:13 80:13,21 171:14,17,18 171:19,22 172:2 191:16 191:19,23 201:11 202:9 204:17 205:9 205:22 207:9 207:14 211:19

219:5 220:18 220:21 221:3 226:16 228:13 229:11 233:11 237:8 239:12 240:5 241:15 242:7,11,14,17 248:23
oh 91:23 120:3 159:2 249:16
okay 10:15,17 10:21 11:2,3,9 11:15,16 18:25 33:18 49:18 50:21 82:8 91:12 92:6,10 92:12 93:19,20 94:21 99:16 125:20,22 129:8 134:19 134:23 135:12 135:13,16 143:18 163:14 166:13 170:23 171:12 172:5 174:18 175:19 181:2 183:17 183:19 184:6 186:18,23 194:2 195:13 201:5,14 207:21 210:19 211:25 219:19 221:5,23
231:19 249:7 249:11
once 19:7 70:20 84:21 99:14 226:2
ones 75:21 130:16 197:13 215:17
online 17:24 18:7 110:10 115:2
operating 246:2
opining 34:17 35:16
opinion 35:9,10 57:12 58:21 61:10 63:6 68:10 130:18 130:19 133:14 137:3 141:17 161:23 171:25 172:2 175:20 177:2 184:3,4 193:16 196:21 197:25 198:4,5 198:12 205:21 205:24 206:4,6 206:10,13,14 206:17 207:9 207:14,17 213:11 218:9 219:11 220:10 220:17,21,23
221:2 224:21 226:10 227:21 229:12 241:23 242:10,16,18 242:25 243:4 243:21 244:2,6 245:16,21 246:11,25 247:4
opinions 34:10 34:13 57:2 76:8 81:12,17,20 83:22,24 84:6 133:4,10,18 136:24 163:18 172:3 191:20 191:22,25 192:4 195:24 207:7 219:17 221:7 226:16 242:7 244:3 246:12,15,18 247:9,14,18 248:11 249:5
opm.gov. 18:10
opportunity 239:11
opposed 155:16 193:17 206:7
opposing 113:25 222:13
options 28:25
order 84:6 91:13,14,15
218:3 223:18 226:20 231:24
organizations 25:11
original 38:10 38:13 67:2 87:15 92:16 129:24 251:13
ortega 3:6 8:3 249:14
outcome 251:19
outlined 205:18
outpatient 207:19
output 54:15
outside 25:9 28:4 67:2 86:3 131:19,21 206:21 227:19
overstated 193:14
owed 240:4
own 25:6 26:8 83:21 136:8 159:24 228:19

p

p 2:2,2 3:2,2,5
p.a. 3:18
p.m. 100:4 159:12,15 219:22,25 249:13,21 250:4,5

package 188:9 188:12,20
page 5:4,9 6:4 7:4 27:21 91:25 92:2,7 93:4,15 94:18 125:22 125:24 126:5,6 127:5,8,10,21 133:13 135:6,9 135:14,19,20 135:20,25 137:24 139:14 143:20 146:5 155:11 158:25 159:17 163:14 166:13 167:10 167:14 169:24 170:8 171:12 171:13 172:15 174:15,15,18 175:11 177:12 178:24 179:4,8 181:3,24 182:14 183:18 184:6 187:6 190:5,17 191:6 191:11,18 192:14,18 195:13 199:6 199:16 200:3 200:25 201:10 202:8,11,18 204:16 206:23 207:3 208:4,17 209:24 210:3 210:19 211:18 211:23 219:15 229:22 230:12 230:19 235:23 236:8
pages 12:12 13:23 91:11 94:19 135:11
paid 35:17 142:3,18 143:9 192:4 207:10 207:15 226:21 226:24 227:6 227:15,17 243:7
palikhe 100:16 106:16 108:2 122:14
pan 217:16
panelist 20:13
paragraph 30:19 31:22 135:25 141:20 141:21,25 166:21 175:11 175:12 183:5 211:23 212:2,5 212:11 219:16
parentheses 21:20
part 30:13 39:23 40:3 47:6 47:7 51:12 53:5 53:20 57:7 76:17,25 77:4 112:20,22 117:9 119:11 120:7 157:11 158:5 174:10 178:19 196:8 201:12 236:15
participate 14:3 99:15 101:7
participated 99:4,12,13
participating 99:8 178:10
participation 176:21
particular 25:18 33:6 34:18 39:10 49:16 52:15 55:2 63:9 64:11 83:5 84:20 85:11,12 115:24 141:14 142:22 156:7 158:18,18 164:9 218:14 236:12
parties 251:17
parts 89:18
party 47:23 48:2
pass 249:7
past 31:14,19 34:15 38:7 41:21 44:3 67:20 68:15 69:3 144:2,25 145:8,17,24 146:3,10,13,21 147:6 148:5,17 148:19 154:25 155:11,23,24 155:24 159:5,7 160:8,18 161:3 161:7,9 162:13 162:15 163:6 164:12 166:14 166:19 170:6,9 171:23 178:16 178:17 179:23 180:12,22 181:4,9 189:12 189:15 194:10 194:25 195:6 207:14,17 208:17 210:19 211:10 222:9 223:23 224:6 224:12,15,25 225:7 226:11 226:15 227:15 231:5
pausing 69:20
pay 28:19 142:2 143:8 156:23

188:21 190:14 243:11
payment 227:12
payments 65:19 171:23 183:21 191:23 207:4 231:9 244:9
pending 11:8
pension 17:25 22:21 29:3 70:13,13 110:22 136:20 138:20,23 172:20 173:4,6 173:8,10,16,16 173:17,22,25 174:11,14 176:18,21 178:10,21 179:5 193:3,8 199:25
pensions 22:21 240:10,13,16
people 16:11 32:9 33:8,9 96:9 105:22,23 118:23 120:5 128:17
people's 118:25
percent 69:19 110:3,9 136:25 141:22 142:13 142:18,24 144:3 178:4 184:16 185:6 185:18,21 186:3 212:14 212:14,17,20 212:24 213:2 213:24 214:8,9 214:9,11 215:10,11,12 215:15,20 217:8,9,14,25 218:2,4,15,18 218:18 232:8 232:13,16,20 232:24 233:4 233:24
percentage 110:14 142:2 143:9 232:12 234:24
perform 32:21 32:22 39:18 41:15 56:12 78:16 106:6 150:4 151:19 152:11 153:24 154:11 157:5 157:21 161:2 175:7 182:25 183:9 211:5 226:25 227:8
performed 27:24 28:7 32:25 43:5 77:25 88:2 108:2 109:20 150:22 151:18 151:23,24 152:5 157:18 168:18 182:25 196:2 227:5,6 242:22 243:5
performing 24:4,23 39:9 73:16 159:24
performs 84:22 155:22
period 31:7 41:2,21,21 59:15 95:13 98:15,15 140:14 163:21 163:25 174:4 190:25 210:11
person 33:14 33:15 42:23 52:17 59:12 112:10 114:8 144:23,24
person's 127:20 127:22
personal 23:25 28:21 30:7,11 30:12 41:9,10 67:6 72:18 82:10 88:19 156:12,12,16 156:18 157:3,4 157:7,11,19 158:3 176:17 178:11 209:8,8 209:18
personally 73:12
perspective 149:14 227:14
pertain 83:24 136:12
pertaining 86:9
pertains 136:13 168:8
peter 247:6
pets 164:3 171:9
pfizer 187:11 188:6,9,24 191:2
ph.d. 21:19 28:12 122:5,11 122:17 123:10
phone 15:22,23 17:3
phrase 36:18
picture 212:13
piece 85:2,12
pieces 117:19
place 251:14
placed 91:13 108:16
plaintiff 2:4 3:11 38:10,15

57:24 58:8 59:21 61:15,24 67:7 83:25 110:15 115:24 134:25 136:2 136:10 144:14 151:18 156:2 159:19 167:12 169:5 174:13 175:17 176:6 176:10,16 180:15 181:8 190:20 193:18 195:15 210:2 216:10 229:14 231:23 234:13 234:16 235:17 240:4 241:7,16 241:17
plaintiff's 156:6 167:16 172:17 176:9 182:2 187:8 192:15 208:5 231:8 243:3
plaintiffs 5:9 5:10,14 6:4 7:4 8:21,23 9:15 11:25 12:4 13:15,18 34:10 35:19 43:11,12 46:18,22,23 48:21 69:12 75:19 78:23 79:3,6,9,15,18 79:20,21 80:9 80:22 86:10,14 88:16 117:21 117:22 135:21 137:17,21 144:18 154:19 154:23,25 155:5,6,8,8 162:15 163:6 167:23 169:4 169:13 170:13 180:13 187:18 187:22 190:11 191:9,15 195:22 200:13 208:14,16,24 211:9 216:8 217:21 218:12 218:22 219:5 221:8,11 225:13 229:13 237:8 239:12 240:21 246:7 246:22 247:21 248:2
plan 17:25 18:4 37:25 84:4 112:8 138:8,10 138:21,23 140:25 176:21 178:10 193:3,4 193:8,11 194:20 201:9 201:16,22 202:2 203:12 204:25 205:2,5 205:7,18,23,25 206:2
plans 29:3,6 30:20,24 36:3,6 36:10,13,17,20 36:23,24 37:3,6 37:7,12,19 132:11 194:14 194:18,23,24 199:25 201:7 203:6 206:11
play 118:10,13 118:16 194:14
played 25:2 114:18
playing 53:19
please 9:17 10:16,20 11:2,4 11:7 29:20 34:22 40:22 56:9 61:5 91:18 107:25 108:5 132:5 192:23 221:22 229:21
pleased 113:23
plg 131:5,5
plus 129:24,25 148:24 155:2 186:3
pocket 243:3
point 10:25 11:4 36:23 38:16 49:8 51:24 79:13 80:9 82:19 83:20 86:8 89:3 147:21 209:13 212:22 221:17 229:9 234:23 236:20
policy 82:13,15 240:25 245:3
pool 78:23 79:3 79:9,23 80:9
pools 146:23
portrayal 127:15
position 23:6 26:24,25 139:22 158:13
positions 20:20 20:21 22:5 26:22,23 27:8 27:25 28:4
possible 237:24 238:2,3,5
possibly 106:21 224:10 225:5
potential 35:6 45:19,20,23 46:6 51:15 54:10 55:3,12 55:23 61:7 62:4 62:8 70:6,9,10

70:14 79:17 80:13,21 83:25 120:9 128:10 137:18 162:24 162:25 171:14 186:2 202:9,16 211:19 233:17 233:20 242:19
potentially 40:25 55:4 57:11 87:18 239:18
potentials 46:14
practice 24:12 112:10,19
practices 121:10
preface 230:20
preference 19:9
premised 245:23 246:6
preparation 15:4 16:7,15,19 130:5
prepare 14:10 16:9 17:9,23 18:23 36:2 108:12 119:19 240:6 247:25
prepared 14:14 36:6,10,13 37:3 37:7,12 84:7,8 132:16
prepares 37:6
preparing 30:24 65:9 66:5 87:15 88:3 97:8 97:10 107:24 108:4 119:6 120:5 130:3 228:7
present 29:5 30:19 31:3,4,8 31:11,13,15,20 31:21 36:20,22 37:18 38:3 39:24 40:5 41:24 49:16 51:2,6,10,13 54:21,25 55:2,6 56:24 57:4,10 63:15,17,21 66:2 81:12 84:3 110:6 112:8 132:3,8,13,20 146:17 170:22 179:5 181:4,7 181:12 186:21 201:2,6,8,15,25 202:18 205:25 206:4,15 221:25 222:9 222:23 223:22 224:15 225:2,6 246:2
presentations 20:12
presented 20:20 197:2
presenting 213:6
presents 57:24
pressures 223:15
pretty 87:3 114:17 118:22 166:23 208:15 208:25
prevent 57:15
previous 22:4 26:23 44:9,15 44:16 86:13 127:21 138:24 172:23 187:22 189:9 194:4 222:6
previously 9:8 47:7 100:6,12 168:6 182:24
pricewaterho... 24:13
pricewaterho... 24:7,14 26:7 27:9
primarily 114:24 116:9 117:14 121:14
primary 115:5
principal 25:22
principles 29:14 30:3,15
prior 67:21 106:13 138:10 138:20 151:18 174:2,2 175:3 215:10
probability 137:8 143:21 144:4,8,12,15 145:16,22 146:3 160:14 163:9 189:2,7 190:14
probably 96:15 97:21 109:8 220:15 223:4
problem 147:14 149:24 151:10
problems 147:19
proceed 11:15
proceeding 135:13
proceeds 146:20
process 84:21 97:25 116:3 117:8 216:8
processes 120:20

proctored 23:12
produce 111:4 228:5
produced 13:10 18:17 19:21 20:7 90:18 129:22
product 113:11
production 5:11,16 12:2,5 13:16,19 130:10
professional 1:12 251:11
professors 23:10,11,13
program 241:2
programs 34:19 35:5,10 35:18 65:20 67:14 245:24 246:8
progresses 56:14
project 23:16 72:21,25 73:6 73:10 98:14,14 196:24 218:4
projected 41:10 43:16 54:11 59:16,17 62:12 62:20 146:3 162:20 196:7,9 197:5
projecting 41:19,20 195:2
projection 55:12 137:14 137:18
projections 34:24 41:23 144:19 178:3 228:20
projects 23:10 25:9 26:3 71:24 72:10,13 73:7
promotion 24:20,21 28:20
pronouncing 102:14
proper 173:15
proposals 241:2
protected 77:14 77:20
protocols 142:11,21
provide 35:11 39:4 84:6 85:11 89:15 98:3 133:15 156:18 165:13 166:19 166:24 168:14 168:17 171:20 195:3 200:18 201:6,8 203:16 205:24 220:14 235:6
provided 12:16 12:23 26:15 34:25 39:5,7,24 42:2 47:12 48:12,25 50:16 57:13 63:20 64:18 65:9 67:9 68:16 78:18 81:3,8,11,13,15 83:10 84:24 85:25 86:9,14 90:25 129:21 131:9 132:24 133:2,13 137:17 155:16 155:17 156:2 156:15 157:7 157:10 166:9 167:12 168:5 171:19 188:9 191:25 202:6 203:6,14 204:6 205:22 206:18 207:18 208:20 209:9,11 224:25 226:10 231:7 243:11 246:13,16,19
providers 35:17
provides 55:16 136:2 146:14 150:14 165:11 166:23 201:23 203:16,24 204:8 209:6
providing 27:2 35:8,9 83:22 135:4 172:3 191:22 199:24 205:21 206:4 209:12 211:12 221:2
provision 67:20
provisions 68:10
public 1:11 8:17 251:10
publication 164:8,16,18,22 165:2,5,18 166:9 169:2
publications 116:10,19
published 20:20 22:23,25 23:3 107:24 132:24 165:6
purpose 56:8 57:15 74:25 82:15 97:23 120:10
purposes 73:5,6 74:21 75:2,5 236:4
pursuant 1:14
put 202:6

q

qualifications 121:25 122:7 122:13,19,25 123:6,14,20,25 124:6,11,16,19 124:25 125:4 125:10,15
quality 112:19 121:10
quantifying 62:25
question 10:19 10:20 11:8,14 13:24 26:13 29:19 34:22 36:7 44:13 45:15 47:24 49:12 56:9 58:13 60:4 61:4 61:14,20 66:18 74:13,19 132:5 145:12 161:21 176:13 180:8 187:16 198:24 224:19
questions 10:17 11:12 135:10 148:2
quick 17:3
quite 40:8 63:14

r

r 2:2 3:2,5 8:15 9:7 100:2,5 174:15 251:2
racine 3:19
range 203:16 203:16,17,18 203:25 204:2,3 204:19,19 230:4,11,24
rate 148:6,17 148:20,21 160:15,17 165:20 178:5,5 178:6,11 180:10 186:22 188:19 205:16 210:23
rated 185:18,20 215:20 232:20 232:24 233:4
rates 153:7,12 154:13,14 156:14,21 163:8 179:25 180:4 181:10 202:20,21 203:5,5,14,22 204:5,6,7 205:14,15 206:3,3 209:18
rather 73:5 176:5
rating 110:6 184:17 185:6 185:23 186:3 212:14,15,19 212:20,24 213:24 214:7 214:11 215:11 215:25 217:4,6 217:9,14,24 218:2,4 231:25 232:11,12,13 233:7,15,19,24 234:24
ratings 83:8 110:15 185:9 185:10 186:16 213:2 214:24 215:9 216:3,4 231:9,23 234:12,15
rationale 224:5
reached 71:13 201:12
read 18:7 67:24 212:2 230:5 247:6
really 60:8 76:11 97:13 156:23 157:18 217:15
realm 86:23
reason 60:24 77:11 95:12,16 95:20 96:3,24 97:4 100:24 101:12,21 102:4,11,20,25 103:9,16,23 104:6,13,20 105:3,10,18 140:2,7 169:3 217:12 222:11 222:12,13 237:18
reasonable 166:25
reasonableness 70:25
rebuttal 130:17 130:19,23,25 133:15
recall 16:4 18:2 18:8 21:9 26:10 26:14,17,18,25 50:4,22 68:7 70:2,21 71:16 76:2,4,5 77:21 78:5 87:7,16 88:14,20,22 99:8 108:22 109:22,24 110:18 111:23 112:5 117:25 137:16 163:10 176:8 214:16 237:13,21
receive 39:12 47:8 114:25

185:2 188:22 204:13 229:14 229:16 239:13 239:16 240:22
received 11:19 11:21 12:9 18:11 24:20 25:4 34:15 38:18 90:13 115:23 116:24 117:6,21 118:3 118:21 119:16 147:16 175:16 176:2,24 180:24 184:21 186:10 212:15 212:19 213:14 213:18,19 214:17,21,22 214:23 215:5,7 215:22 216:10 216:12,18,19 216:21 217:6,9 233:12,14 234:5,6,24 236:16,20
receives 38:10 38:15 58:8 235:25 238:19 241:8
receiving 147:21 174:2,3 176:20 184:15 212:7,8 237:10
recent 19:23
recess 49:22 99:20 159:13 219:23
recipients 228:21
recognize 69:2
recollection 69:17,23
record 8:3,12 11:15 19:14 45:2,6,8 49:19 49:21,24 99:17 99:19 100:4 135:3 138:6,19 159:10,12,15 193:18 219:20 219:22,25 237:5 249:13 249:15,21 250:2,4
records 115:24 116:2,4,4 127:16 131:23
recouped 241:10
recover 58:2
recoverable 156:6
recovery 57:15 57:19,21 58:11 58:14,16,18 70:4 158:9
reduced 62:3 235:9 238:10
reduction 89:2
refer 40:25 65:5 73:4,7 111:18 119:21 139:22 153:11 155:15 196:12 197:17,17 212:23 221:19 221:21 229:20
reference 164:23
referenced 118:23 138:25
referencing 164:24 175:13
referred 53:14 54:10 58:10,22 58:23 59:3 96:9 199:11 231:13
referring 26:24 35:5 37:9 61:13 72:21 75:16 80:19 111:19 131:22 138:25 180:7 196:13 208:20
refers 29:21 30:19 58:14 153:9 198:17
reflect 99:6,6 127:21 183:7
reflected 45:21 46:14 50:11 81:20 113:3 183:2
reflecting 47:22
regard 51:5 54:24 56:3
regarded 55:14
regarding 110:20 112:7 133:13 156:19 173:4 188:23 194:12 243:6
regardless 145:7
regards 95:7
registered 1:12 251:11
regulated 245:2
reiterate 14:21
relapse 136:23 137:6,9,18,22
related 28:24 32:18 63:10,18 66:16 70:3,3 75:3 77:25 86:6 90:2 135:10 138:22 151:17 154:3 155:11 155:23 158:3 159:5,7 160:11 161:9 166:15 166:20 170:9 185:12,15,17

186:4,4,6,7,10 188:5 189:2,21 201:3 202:19 205:24 208:18 209:8 210:20 211:10 212:12 212:13,16,18 212:25 213:7,7 213:9,14,23 214:5,6,15,24 215:3,5,12,19 215:20 216:13 216:16,20,22 217:4,7,9,11,19 217:24 218:16 218:17 220:14 251:16
relates 1:5 28:14
relation 29:10 176:17 241:13
relationship 180:22 240:15 240:18
relatively 154:22 228:17
relevant 51:8 115:11 153:22 169:23
reliable 166:25
reliably 170:21
reliance 198:5
relied 38:4 130:2
relies 150:9 209:17
rely 36:9 37:17 64:12 65:8 130:4 132:2,8 163:24 165:3 165:15,18,22 200:19 204:5,7 204:12
relying 36:12 38:11,24 40:4 50:15 60:12 64:6,19 66:16 66:20 165:24 202:23 203:2,4
remainder 13:23
remained 80:23 173:18 188:11
remaining 144:4
remains 239:20
remarried 238:12,14
remember 27:4 78:25 83:13,19 88:17 150:18
remission 137:2
remove 20:17 60:21
removed 61:11 61:12 62:2 135:3
removing 59:6 61:23
rendered 94:13
rendering 242:10 246:25
reopened 86:22
repeat 34:22 44:13 45:15 66:18 132:5 187:16 198:24 204:4,8 230:7
rephrase 10:21 26:12,20 29:20 47:24 56:9 61:4 61:13 74:9 80:4 96:17 145:12 176:12 180:8 213:15
replace 164:16
report 6:10,15 6:18,21 7:5,8 7:11,14 43:22 44:8,10,15 45:5 64:16 81:21 84:8 85:16 88:25 113:2,3 113:20,25 115:12 128:23 129:6 130:18 130:18,19,21 130:25 131:3 132:6,8 133:3 133:15 134:2,5 134:24 135:22 137:12 146:18 149:17 153:20 156:24 160:22 167:4,5,11,16 168:2 171:6,20 171:21 172:7,8 172:9,12,17,23 176:9,25 181:19,20 182:2 183:24 186:25 187:2,8 192:9,10,16 196:5 197:12 197:17 198:4 198:19,25 199:11 202:24 203:2,4,11,15 203:15,20,22 203:23 204:10 204:11,12 205:14,15 206:2 207:23 207:24 208:6 220:4,5,9,16,20 221:2,20 226:8 228:6,7,9 229:21 236:18 243:17 247:6 247:10,14 248:16
reporter 1:10 1:12 8:12 251:10,11

reports 5:19,20 10:24 14:15 19:21 20:2,4,7 22:22,23 25:6 26:8 34:9,23 35:6 36:9 37:23 38:6,25 39:4 48:24 50:7,12 50:16,16,19 51:12,15 64:12 68:16,18,24 69:6 81:10,14 81:17 85:10 86:9,13,14,18 86:25 87:3,4,6 87:12,13,15,16 87:17,23,25 96:19 97:8,11 97:12,14,20,22 97:24 98:7,17 107:24 108:2,4 108:6,8,19 109:6 112:15 113:16 114:10 114:14,23 115:7 116:8 117:18,24 118:8,11,14,17 118:20 119:12 119:14 120:2,6 120:15 121:14 128:16 130:2,3 130:6,10 131:17 132:24 137:17 182:13 194:7 220:14 221:6,11 225:13,16 226:11,14 245:22 246:13 246:15,18 247:22 248:2,7 248:9,11,13 249:2
represent 90:24 94:22 95:10,18 95:24 96:22 97:3 100:22 101:10 102:2,9 102:19 103:7 103:14,21 104:4,11,18,25 105:8,16 127:3 152:23 218:20 219:3 231:6,22 234:11 235:16 237:17
representative 150:20 176:5
represented 69:12 137:13
represents 38:18 48:3 59:8 93:4 142:13 174:10
request 5:11,15 11:25 12:5 13:15,19 119:18,24
requested 12:13 78:17 81:17
requests 12:16 12:24 13:7,11
require 215:4 223:20
requires 245:12
research 19:16 19:18 22:6,17 22:19 23:5,10 23:14,16,18,21 31:25 32:5,22 39:10,14,18,21 47:9,10,19 50:5 50:8,10,15 82:25 83:4 84:21 85:20,24 86:3,4,5,7 108:20,21 109:2,3,18,18 109:20,22 110:2,14 114:11 116:9 116:20,21,23 118:3 119:15 119:22,22 128:18,21,25 129:4 243:5 244:7,15
researching 109:25 116:24
reserve 83:18
reserves 249:23
residual 195:25 196:22 197:25 198:12
resolve 149:13 149:18
respect 28:9 203:12 247:2 247:10
respond 219:10
response 12:15 12:23
responses 5:13 13:14,17
responsibilities 27:16
responsibility 24:24 27:19 115:2
responsive 13:10
rest 115:4 143:7
restating 172:2 184:3 191:20 207:7 219:17 220:23 226:16
result 239:18
resulting 227:2
results 120:14
resume 135:4
retained 56:4,7 56:10,18,21

70:18,24 71:23 71:25 72:3,3,5 72:11,16,22 73:2,5 76:13,16 76:18 77:17 78:8,16 113:9 144:13,18 225:19 247:25
retainer 227:5 227:12
retention 56:19 226:5
retire 140:25 142:6 143:5
retired 141:25 142:19,24 143:2,4
retirement 17:25 66:3 137:25 138:5 138:13 141:6 141:13,18 142:2 143:8 160:11 240:12 240:20,23,23
retiring 140:22 141:2
return 233:24
returned 25:22
reverse 231:24
review 13:22 33:2,2,3 44:3 44:16,19 48:17 59:16 84:23,25 85:3 91:2 97:24 98:3 109:10,14 112:10,19 114:11,20 115:6,9 116:10 116:10,12 117:3,4,8,10,12 120:20 121:17 121:18 129:21 130:9,17,21,22 131:2,4,14 135:21 149:16 150:5,5 151:2 167:15 172:16 181:25 182:11 182:23 187:7 192:15 195:4 208:5 219:8 231:4 248:13 248:16,19 249:24
reviewed 12:20 13:8 14:15 17:22,24 33:7 37:19 88:6 90:17,17 97:12 97:20 109:7,12 110:20,22 111:8 112:3,16 114:12,15,16 115:10,20 118:2,19,20 129:17 130:14 131:8 132:16 137:21 140:23 193:6 225:13 225:16 231:2,5 240:21 243:17 248:7,9
reviewers 121:15
reviewing 12:11 14:8 98:7 110:18 111:18 113:6 115:18 118:24,24 119:15,17,18 120:17 176:8
reviews 22:19 118:2 120:8,10
revise 95:3
revised 92:19 93:4
revisions 248:25
revisit 170:24
ridge 3:12
right 20:18 26:17 49:20,23 72:25 90:7 99:18 100:3 121:23 145:24 149:20 154:13 157:5,19 159:11,14 162:23 181:16 185:24 186:12 206:21 219:15 219:21,24 235:14 249:12 249:20,23 250:3
risk 25:16,16 25:16,16,18,20 158:22
robert 7:15 220:6
robin 16:13,25 71:19,20 77:6 96:14,23 97:9 97:10,23 98:6 100:13 105:21 106:11 121:13 121:25 126:6
role 22:16 23:7 23:20 24:3,10 26:7,10,18,21 26:23 27:5,12 32:9,9 47:2 53:20 56:19 60:6 63:20 76:6 76:16,18,21 77:8,12,22 78:3 78:16 97:8,9,11 97:16,16,18,19 98:13 107:23 107:25 108:3,5 108:18,23 114:22,24 115:5 116:8,9 116:12 117:6 117:13,18,19

118:11,13,16
119:9,10,13,25
120:5 121:14
194:13 201:6
roles 24:23 25:2
25:3,25 32:13
111:22 114:10
114:17 115:8
ronald 6:16
167:6
room 2:20
root 64:20
roughly 164:10
round 86:13
204:7
row 222:18
rpr 251:23
rule 249:24
run 215:23
runs 235:23
russo 16:21
17:17 73:25
75:7,9 132:17
132:21 225:17
246:19 248:17
ruzicka 4:8
rybolt 247:7

s

s 2:2 3:2,5,5 5:8
6:2 7:2 8:15 9:7
100:2,2,2,5
174:15
safe 17:19
132:19 165:4
248:10
salley 102:7
106:24 112:6
114:6,19
123:15 126:22
sanskar 103:5
107:4 116:7
124:2
sanskar's
117:12
savannah
160:15,16
saying 152:2
161:9 197:22
198:15
says 20:13 28:6
28:17,23 31:24
68:3 92:24
93:23 135:24
139:17 140:7,8
140:12,14
141:25 143:8
143:20 163:15
181:3 192:15
232:16,19,23
233:3
scenario 66:25
128:2 214:4,7
215:9 218:8,14
241:17
schedule 13:4,5
14:9
scofield 103:19
107:8 117:23
124:12
scope 83:21,24
scott 7:12
207:25
screenshot
231:17
se 56:22
search 109:15
second 15:9
28:17 30:5,17
30:17 33:15
87:5,16,16,20
88:3 141:24
151:16 188:18
188:20 204:7
214:4 230:4,16
236:8,9
section 135:21
136:5,12,13
137:25 140:2,4
142:6,15,22
143:4,20 146:5
155:10 159:18
159:23 160:3
163:15 166:13
166:14 167:15
167:19 169:23
170:9,25
171:13 172:16
172:19,22
174:12,15,22
175:16 177:14
177:17 178:23
180:22,23
181:25 182:4
183:20 184:10
189:12,25
190:2,17,21,23
191:6,12,18
192:15,18,21
192:24 194:2
195:14,17
199:6,10,14,16
200:3,9,25
201:11,14
202:8,11,18
204:17,21
206:23,25
207:3,6 208:4,8
208:17,20
209:25 210:3
210:19 211:19
211:20 220:17
220:18,22
sections 85:16
114:16 135:18
187:18 200:7
security 66:3
66:16,21,22
67:5,8 83:17
147:18,21
149:23 163:23
see 12:11 13:2,4
21:6,14,19 22:6
22:12 24:6,19
25:21 26:22
27:11,22 28:6
46:13 92:16,19

93:20 94:13,16
100:16 117:7
126:2,6,9,12,15
126:18,21
127:5,12
135:20 138:6
139:13,19,25
140:4,8 141:24
143:7,12
146:25 151:14
155:12 157:20
158:25 159:20
162:10 167:15
167:18 170:8
171:13 172:16
177:13 179:4,8
181:3,24
183:20,23
184:7 185:17
187:7,10
188:18 189:12
190:2,17 191:6
191:11 192:14
192:18 193:9
194:2 195:14
195:17 199:6
199:16 200:3,9
200:25 201:12
202:11,18
204:24 205:4
207:3 208:4,17
209:24 210:3
210:19 211:18
211:19 215:24
215:25 216:4
217:8,15
221:24 222:19
229:24 230:8
231:5 232:5,8
232:16,19
234:20 236:9
236:15 248:4
seeking 58:2
seems 150:25
seen 13:25
172:23 190:21
seldomly 146:2
selected 77:12
79:3,6,10,16,20
149:7
selecting 149:6
210:12
selection 78:22
151:11
selections
151:15
senior 24:7
105:24 106:2,9
106:12 121:19
121:21
sense 56:6,14
65:3 70:15 95:6
116:16 119:9
160:25 162:7
163:7 165:10
166:2 181:10
182:22 194:7
218:14 231:12
senses 65:4
sent 133:22
sentence 28:23
30:17 143:8
separate 197:3
separated
140:21
separately
213:12
separation 6:14
139:7 140:2,7
140:10 141:7
141:11,17
september 5:22
72:15,23 91:5,7
91:17,21 92:4
92:17,20 94:14
serve 79:16
served 46:15,21
service 151:22
152:22 206:7
services 8:5
29:6 30:20
34:25 35:3,11
52:12,20,24,25
53:5 84:3 89:10
89:13,15,20
94:13 95:19
110:23 146:6
146:10,12,15
146:16,21
147:4,5,6,7,10
147:20,25
148:5,11,16,17
148:19,21,24
149:2,7,8,11,24
150:2,16,17,19
150:22 151:4,5
151:11,14,17
151:19,23
152:2,4,6,9,11
153:5,13,23
154:2,10,10,19
154:20 156:15
156:17 157:2
157:13,14,17
157:18,19
158:6 163:15
163:18,21,25
164:4,7,13
165:20 167:19
167:23 168:13
168:15,18,19
169:16,17,18
170:6 171:8,9
171:10 174:20
174:24 175:3
179:9,21,24
180:13 181:5,9
181:14 182:5
182:15,23
183:3,4,7,8
189:13,16,22
191:7,25 192:4
194:3,10,15,20
194:21 196:3
200:10,17,20
205:18 206:11

207:10,15,18 208:8 210:4,8 227:2
serving 25:7 26:3 73:19 76:5
session 20:13 20:14
set 12:16,17 87:6,16,16,19 87:20 88:2,3 90:25 95:5 121:20,21 129:8 143:18 234:8 251:15
sets 87:23 120:24
setting 224:4 229:10
seven 150:18
seventh 1:13 8:8
several 22:19 97:20 109:13 120:5 128:17
severance 188:8,9,12,14 188:17,17,19 188:20,21,22 190:14
shahnasarian 37:10,12,14 75:15
shares 29:2
shireen 16:13 17:2 77:6 96:14 97:4,16,24 98:24 99:3 100:13 105:21 106:11 121:14 122:8 126:9
shireen's 97:18
shopping 157:5 157:8,8,10 164:4
short 49:9 134:12 190:23
shorthand 1:10 251:9
shortly 91:3
show 102:10 147:18
showed 138:9
showing 144:21
shown 236:12
shows 149:22 239:18
siddique 104:9 107:12 118:10 124:20
sign 89:2
signature 251:21
signed 227:10
significant 121:22
similar 24:4,23 70:15 82:10 87:5 97:19 117:9 119:4 137:18 150:21 154:18,23 158:8,12 159:6 160:24 161:6 163:13 167:21 170:11 247:25
similarly 30:16
simple 215:13
simpler 215:8
simply 39:18 63:3 66:11 154:7 171:20 207:7 219:17
single 216:3 217:6,13
sister 209:7,12 211:3
sit 84:22 249:6
sitting 81:19 131:11 161:22 221:10 224:20 248:24
situation 239:20
six 237:5
size 210:14
sj 139:6
skipping 30:18
slightly 146:11 154:15 187:23
slip 121:11
small 228:18
smaller 80:10
smc 185:23 186:3
smith 3:18 104:2 107:10 118:6 124:17
social 66:2,16 66:20,22 67:5,8 83:17 147:18 147:21 149:23 163:23
solely 193:16
solvency 243:6 244:8,16
somebody 101:7 108:16 111:18,21,24 116:3 145:14
somebody's 145:8
soon 78:7
sorry 20:25 26:12,20 37:22 52:5 61:12 94:3 94:19 98:22 108:10 135:19 140:17 159:2 171:13 187:16 199:8 207:13 212:17 224:7 230:7 234:3 245:9

sort 46:5 234:14
sorted 231:24
sound 231:11
sounds 10:22 19:9 23:15 80:8 82:7
source 40:5 47:15 48:2 64:7 64:20 66:17,21 67:3 147:9 168:22 177:6
sources 48:25 49:2 83:2,12 118:4
south 3:13
southern 1:3
spaces 160:9,25 161:14
spare 13:23
speak 16:8,16 16:20
speaking 16:4 32:15,23 100:9 180:5 226:23
special 29:10 72:17
specialized 34:4
specializes 33:22
specialty 21:20
specific 15:15 23:16 32:16 37:14,16 40:2 41:2 48:9 51:4 55:25 63:24 64:24 67:20 85:22 109:15 110:15 111:23 116:17,18,25 119:10,17,23 152:4 157:16 189:7 193:22 228:25
specifically 11:13 83:13 111:19 193:19 245:12
spectrum 152:22
speculate 82:18 241:22
speculating 238:13
speculation 238:16,17
speculations 239:9
speculative 238:20
spencer 104:2 107:10 118:6 124:17
spend 150:15
spending 211:3 244:21 245:2,5
spent 117:5 118:7
spine 234:21
spoke 16:13,25 128:15
spoken 17:9,19 37:2,5
spot 85:4 116:5
spouse 176:10 176:15 236:5,9 236:13,16,20 237:10,25 238:4,8,18,25
spreadsheet 110:25 111:4 111:10,16 231:7,13,16,17 231:18,21 234:11 235:17 235:22
spreadsheets 12:17 111:13 113:5 120:14
ss 251:5
st 4:6 138:25 139:17,23
stability 244:4
staff 32:2,5 77:20 87:22 88:10 89:7 90:3 96:10,13,14,15 99:7 100:13,20 105:23,24,24 105:25 106:2,8 106:9,12,12 109:11,14 121:18,19 128:15 129:2,4
staller 75:25 76:3,9 87:18 133:14 136:19 137:9,19 138:4 138:12,21 146:9 147:2,15 150:12,24 152:3,15 153:2 153:15,18 156:11 158:19 158:21 159:7 160:10,18,22 161:4 162:2 173:3,24 174:7 174:19 175:2 175:22,24 178:2,6,21 188:5,15 189:3 189:18 192:25 194:9,22 195:7 209:16 211:13 220:13 227:25 228:5
staller's 136:13 136:17 138:2 143:24 146:8 147:24 149:5 149:14,16 151:9 152:21 154:5,18 155:18 159:4 159:24 161:11

167:22 169:25 170:5,12,19 173:2 174:19 175:20 178:22 182:10,11 187:14,25 190:7 193:12 194:5,12 195:10 199:21 208:13 220:10
stamp 91:14
stamps 91:9
stand 19:15 86:24 221:16 225:25
standard 112:9 185:3
stands 19:16
start 22:5 172:15
started 25:6 50:22 88:5 152:15 174:3
starting 203:10 229:25 230:2,4
starts 174:15
state 1:11 8:17 9:17 11:12,14 21:15,23 22:7 46:16 140:9 251:4,10
stated 73:24 129:20 132:23 147:19
statement 39:17 44:15 88:8
statements 226:15 245:3
states 1:2 2:19 5:13 9:3,6 13:14,17 143:4 146:21 160:23 249:23
statistical 28:7 164:9 228:8
statistics 83:16 85:21 109:21 116:22 118:4
status 145:8,9 243:21
statute 67:24 68:3,7
stay 43:4
stayed 80:6,9 247:21
stenographic 1:7 8:12 251:13
step 215:15
stephen 6:19 172:9
sticking 215:18
stock 28:25 29:2
stopped 147:21 173:10
stopping 49:8
straight 218:19
straightforward 215:17 216:2,5 218:7 219:2
strain 232:6,19 232:23 233:3 233:23
street 2:20 3:12
stretch 11:5
stricken 70:19 70:22 71:5
strike 229:19
student 22:9
subject 60:3 70:21 72:16 190:13
subjects 72:12
subpoena 14:9
subscribes 89:14
subsequent 135:10
subsequently 71:14
substance 14:22 17:6 36:12,16,21,24 74:14 77:14
subtract 216:9 233:12
subtracted 234:5
subtracting 215:6 229:13
successful 241:7
suddenly 217:10
suite 4:6
summarize 25:14 136:8,16 155:20 163:17 166:17 171:16 172:25 175:20 203:8
summarized 84:9
summary 18:4
sun 105:6 107:18 125:11
sun's 119:13
supervises 31:24
supervisor 71:20
supervisors 16:8
supplement 39:11 164:16
supplemental 6:7 18:12,16 129:11,13,18 130:5 131:2 133:6,20 246:21
supplementary 243:14

supplemented 221:12,16
supplied 18:16
support 32:20 116:11 160:12 193:7
supported 23:13 32:5
supporting 23:22 24:14
supposed 56:12 113:16
sure 10:18,24 14:15 23:9,21 24:11 36:7 37:6 49:10,11 61:19 69:19 73:21 79:24 87:24 107:5,9,11 113:2 114:4 120:11,23 132:10 135:17 136:19 142:13 148:3 173:3 176:7 180:11 184:15 188:3 192:25 203:10 212:4 218:25 229:8 233:21 241:13
swear 8:13
sworn 8:16 9:8 100:6
sydney 99:11 101:4 106:18 108:6,7 122:19 126:18
system 115:2 139:18 244:4 244:17
systems 17:25

t

t 3:5 5:8 6:2 7:2 8:15 9:7 100:2 100:5 251:2,2
tab 231:23 234:12,16 235:17
table 146:14 201:10 204:17 205:9 221:22 221:24 229:24
tables 212:24 215:13 218:5 218:19 228:25 229:4
tabulation 132:3
take 11:8 13:22 36:15 40:4 49:13 97:25 149:4 160:24 162:20 169:14 169:14 175:4 175:24 178:12 186:6,11 199:23 203:12 203:20 212:12 214:10 215:15 216:3,9,17
taken 1:9 29:13 49:22 59:15 88:2 99:20 159:13 188:12 210:14 219:23 251:13
takes 31:19
talk 82:24 110:17
talked 53:12 170:25 189:9
talking 10:23 32:14 44:7 51:6 144:19 152:15 162:8
tallying 94:23
targeted 117:3 117:4
task 33:4,14,14 84:22 116:17
tasks 32:22,24 33:9,10 78:17 84:12,15,16,19 85:7,18 86:6 87:22 98:12 99:6 100:14 106:8 109:15 157:9
taught 23:11
tax 160:17 178:11
taxes 221:25 222:6,20,23
teaching 20:20 189:5
team 82:12 84:18 89:19,22 115:4 120:7
teammates 16:8
teams 15:24,24
ted 4:8
tell 14:18 18:25 19:11 21:12 40:17 57:18 83:15 130:16 160:6
telling 14:17 15:2 71:10
tells 142:16,23
ten 86:14,14 150:18 223:8
tendonitis 232:6,20,24 233:3,23
termination 28:20 41:8
terms 32:11,12 50:25 52:13 64:4 81:8 97:13 147:12 162:13 175:23 176:18 178:2,3 186:19 189:15 194:16 196:20,24

203:25
testified 8:18 9:9 27:5 46:18 78:9 90:16 100:7 149:20 188:10 209:5
testify 10:12
testifying 23:23 24:16 25:7 26:4 26:11 76:19 79:17 249:4
testimony 19:23 26:15 27:3 45:5 68:9 68:15 69:3 70:19,22 71:4 85:13 135:4 140:24 141:8 147:17 166:22 168:4 171:7 175:7 188:7,10
text 92:15
thank 9:20 11:10 13:5 14:6 18:21 21:3 92:11 130:8 136:15 137:23 146:4 180:20 191:5 221:18 237:6 249:9,11
thanks 92:3
thies 102:15,16 102:17,25 107:2 114:23 115:10 116:13 117:10 123:21 126:24
thing 19:19 20:11 131:20 156:5 159:2 161:10 162:8 174:23 175:22 179:15 183:10 203:19
things 51:11,22 52:9 62:18,23 90:8 149:20 173:7 190:13 200:14 209:4
think 10:25 18:24 31:17 32:13 39:16 44:3 46:10 54:23 56:21 60:4 78:20,20 80:23 82:20 83:19 87:24 88:8 90:7 94:20 96:12 97:12 99:3 109:7,7 112:17 113:14 113:16 114:17 117:12 118:5 118:12,21 119:4 138:21 141:2 145:3 149:21,25 153:16 156:4 156:24 157:16 158:20 168:2 170:16,18 171:3,5 177:10 179:2,2 180:25 181:16 182:11 186:19 188:14 189:23 190:10 194:11 195:6 197:4,7 199:15 205:12 208:15 209:4 210:24 211:5 215:8 217:23 219:2 227:19 228:11 238:20 239:16
third 234:20
thorough 85:3
thousands 42:4
three 69:20 229:25 230:5 237:7,18
time 8:7 11:9 16:4 22:10 25:5 26:14,19 31:7 31:20 38:16 41:3,21,21 49:20,23 59:14 79:15 86:8 98:15,15 99:18 100:3 111:17 117:5 119:8 121:23 127:6 127:13,16 137:12 140:25 141:9 145:3,25 152:25 159:11 159:14 163:25 167:10 169:19 170:22 174:4 189:9 196:8,8 211:2 219:14 219:21,24 221:15 223:6 223:16 225:4 226:4 231:9,9 231:10 234:12 234:23 235:12 236:16,20 237:2 238:18 239:24 246:2 249:10,12,20 250:3,5 251:14
timeline 15:16
times 9:24 10:3 15:3,14 39:17 48:16 58:4 109:13 111:25
timing 17:4 141:11
title 18:2 106:3 200:9
titled 135:21 155:11 159:18 166:14 170:9 171:14 172:16 172:19 181:25 182:4 189:12

195:14 199:6
199:16 200:25
202:8 204:17
208:5 209:25
211:19,20
220:18 221:25
today 8:10,12
10:9,13,24
11:18 24:4
35:11 36:2 45:5
68:9 80:25
81:19 82:21
131:12 161:23
218:9 221:10
223:3,9,10,12
223:16,19,21
224:20 248:24
249:5,6
today's 8:6
14:10,14 15:5
16:7,15,19
17:10,23 18:23
19:17 31:9
130:10
together 166:12
205:11
told 128:20
took 147:15
194:22 195:7
209:16
top 92:15 93:20
171:13 181:3
207:4
topic 39:11,22
83:5 227:21
topics 17:2
25:13,14,15
226:7
tosic 1:8 5:5,12
5:17 6:8,10,15
6:18,21 7:5,8
7:11,14 8:1,10
9:1,12 10:1
11:1 12:1,2,6,8
13:1,16,20 14:1
15:1 16:1 17:1
18:1 19:1 20:1
20:6 21:1 22:1
23:1 24:1 25:1
26:1 27:1 28:1
29:1 30:1 31:1
31:24 32:1 33:1
34:1 35:1 36:1
37:1 38:1 39:1
40:1 41:1 42:1
43:1 44:1 45:1
46:1 47:1 48:1
49:1 50:1,2
51:1 52:1 53:1
54:1 55:1 56:1
57:1 58:1 59:1
60:1 61:1 62:1
63:1 64:1 65:1
66:1 67:1 68:1
69:1 70:1 71:1
72:1 73:1 74:1
75:1 76:1 77:1
78:1 79:1 80:1
81:1 82:1 83:1
84:1 85:1 86:1
87:1 88:1 89:1
90:1,9,24 91:1
91:9 92:1 93:1
94:1 95:1,6
96:1 97:1 98:1
99:1 100:1,9
101:1 102:1
103:1 104:1
105:1 106:1
107:1 108:1
109:1 110:1
111:1 112:1
113:1 114:1
115:1 116:1
117:1 118:1
119:1 120:1
121:1 122:1
123:1 124:1
125:1 126:1
127:1 128:1
129:1,12,14,17
130:1 131:1
132:1 133:1
134:1,2,6 135:1
136:1 137:1
138:1 139:1
140:1 141:1
142:1 143:1
144:1 145:1
146:1 147:1
148:1 149:1
150:1 151:1
152:1 153:1
154:1 155:1
156:1 157:1
158:1 159:1,17
160:1 161:1
162:1 163:1
164:1 165:1
166:1 167:1,6
168:1 169:1
170:1 171:1
172:1,9 173:1
174:1 175:1
176:1 177:1
178:1 179:1
180:1 181:1,21
182:1 183:1
184:1 185:1
186:1 187:1,3
188:1 189:1
190:1 191:1
192:1,11 193:1
194:1 195:1
196:1 197:1
198:1 199:1
200:1 201:1
202:1 203:1
204:1 205:1
206:1 207:1,25
208:1 209:1
210:1 211:1
212:1 213:1
214:1 215:1
216:1 217:1

218:1 219:1 220:1,6,9 221:1 222:1 223:1 224:1 225:1 226:1 227:1 228:1 229:1 230:1 231:1 232:1 233:1 234:1 235:1 236:1 237:1 238:1 239:1 240:1 241:1 242:1 243:1 244:1 245:1 246:1 247:1 248:1 249:1 250:1 251:14
tosic's 5:19,20 20:2,3 68:16,17
total 9:25 95:18 95:24 96:8,16 96:18,22 97:3 100:23 101:11 101:20 102:10 102:24 103:8 103:15,22 104:5,12,19 105:2,9,17 126:2,6,9,12,15 126:18,21,24 127:20,21,22 148:21 185:9 186:2 212:6 213:18,25
214:17,22 215:7 216:9,18 229:15 233:13 234:6
touch 131:18
training 47:2 63:10,24 64:24 67:13
transcript 1:7 118:2 119:18 251:13
transcripts 109:7,11,13,14 109:16 114:16 182:24 248:20
transition 27:16 159:2
transitioned 27:12 159:23
travel 164:4
treat 198:19,25
treatment 169:20
treats 198:6
trial 26:15 68:15 69:2 79:5 79:20,21 240:3 240:7
tricare 65:11 192:5 244:9
triwest 65:15 244:9
true 17:17 39:20 65:11,15 65:19 66:14 86:2 98:18,23 128:25 145:18 220:15 251:12
trust 243:15,22
trustees 243:18
trusts 243:19
truthfully 10:9 10:12
truzicka 4:10
try 59:24 125:25
tsp 177:14,23 178:3
tubin 2:23 9:4,4
turn 127:5 167:14 189:25 204:16 216:4
turning 208:4
twice 15:6,7 241:19,24
two 15:19 17:8 27:8 42:9,11,18 42:21 53:24 77:12 87:23 91:2 94:19 131:4,4 151:7 162:18 164:11 168:20 169:16 169:17 173:7 174:7 186:16 188:3 197:3 203:16,25 205:15 213:6
222:19 234:2,3 247:25
type 108:21 109:18 119:22 168:18 171:10 194:19,21 201:23 211:11
types 30:4,16 41:15 55:16 116:20 117:14 146:15 149:2,6 149:8 150:2 151:11,23 152:9 153:4 154:10 156:10 156:16 157:12 157:17 164:7 183:2,4 205:16
typical 19:5 64:14
typically 31:12 40:24 41:18,23 42:16 47:19,25 56:11 59:11,15 59:18,22 60:5 60:16,17 63:20 63:21 65:7 67:11 84:18 85:22,23 97:25 112:12 116:2 127:16 144:11 151:21 152:7 188:20 195:3

u

u 8:15 9:7 100:5
u.s. 2:18 9:2,4 184:7 211:20
uncertainty 176:14
uncompleted 142:14
under 10:6 20:12 21:6 22:4 22:25 23:2,3 26:23 27:21 48:24 61:24 62:10 77:20 92:15 94:12,23 115:16,19 126:3,12 127:20 137:24 139:14 148:13 165:6 174:11 191:18 199:20 217:18 222:18 244:9,12 249:24
underlying 66:20
understand 10:6,20 13:24 27:23 29:24 30:23 31:10 34:23 36:7 38:14 39:21 41:12 44:14 46:3 51:17 53:22 54:4,17 57:20,25 58:4 58:10,17 60:10 61:6,19 62:24 65:5 78:13 79:8 79:12 80:2,5,24 86:12 87:11 95:2 96:7 108:14 110:13 111:8 132:12 139:21 141:5 141:16 143:3 145:13 146:4 148:4,12 149:4 149:6 151:16 151:25 152:13 153:11 159:22 161:8,15 173:9 176:4 180:20 182:20 185:7 194:4,24 196:13 200:14 201:5 208:11 208:19 209:3 210:9 212:5 213:5 223:17 225:12 232:11 235:3,10,24 236:4,11
understanding 26:21 29:19 39:10,11 44:4,8 45:4 47:13 52:16,22 56:11 56:18 57:6 66:4 66:11 68:2 71:9 71:12 78:15 79:24 80:17 86:17,21 90:12 93:3 98:5,11 112:18 135:17 140:20 142:5 150:8 152:20 155:15,18 171:24 177:8 204:13 205:10 205:17 213:16 216:7,17 236:19,23 245:4
understood 54:14 168:2 182:8 189:23
unemployed 144:8 145:15 145:19,19
unemployment 143:21 144:12 144:15 160:14 160:15 163:10 189:2,8 190:15
unique 167:25 168:3,11 169:6 169:6,9 170:4 170:16 171:3,6 174:22,23 179:11,15 180:17 182:8 182:19,21 183:10 189:16 190:6,8 194:3,6 194:11 195:20 195:23 196:11 200:15 208:11 209:2,5 210:8 210:10,21,24
united 1:2 2:19 5:13 9:3,5 13:14,17 25:11 249:23
university 21:7 21:15,24 22:7
unreasonable 224:12,14,21 224:23
unrelated 213:9,19 214:18,21 215:3,19 216:11,16,19 217:19 229:15 233:13,15,18 234:5
upcoming 20:13,17
update 81:17 239:24
updated 239:6 239:7,8,12,17 239:17

updates 248:25
updating 20:12
upjohn 187:11
usdoj.gov 2:25 2:25
use 64:4 89:21 120:12 144:17 152:21 160:25 161:13 162:3 162:14,23 164:6,7 165:12 169:11 177:25 178:4 184:19 184:24 196:4,6 198:15 209:13 212:21 213:3 218:19 228:10 229:9
used 67:11 83:2 83:4,6,8,16,17 83:18 84:10 89:4,25 90:3 116:11 120:12 149:10 162:10 168:20 169:11 179:20 184:20 195:22 218:4 228:9 229:4
useful 209:12 209:19 211:7
uses 146:9,22 147:3,8 149:9 151:12,13 154:23,24 156:11 160:10 160:18 178:6 185:4 228:25
using 83:13 117:20 147:10 148:24 152:16 153:7 155:3 161:15,18 162:6 169:22 186:21 201:9 203:17,18,19 204:2,2,3,9,25 205:2,5,6,14,15 205:25 212:24 214:10 228:12
usually 33:5 45:18 85:3,13 113:8 227:3,13
utilize 227:24

v

v 2:22 8:15 9:7 100:5
va 64:24 65:3,5 65:6 69:18 83:6 109:22,24 184:8,16,20,22 185:4,4,11 186:20 191:12 191:16 202:11 202:16,20 203:5,14,22 204:6,14,24,25 205:14,19,22 206:3,7 211:21 212:23 214:2 214:10,12 215:23 217:2 217:10 218:2,3 221:13 228:19 228:24 240:9 241:7,14 244:4 245:11
vaguely 228:23 247:23
valente 2:14 8:22,22
valuation 151:5
valuations 202:7
value 29:5 30:20 31:3,4,7 31:8,9,11,11,13 31:14,15,19,21 34:24 35:9 36:16,20,22 37:18 38:3,7,21 39:24 40:4,5 41:24 49:16 51:2,6,10,13 54:21,25 55:2,6 56:24 57:4,10 60:7 63:3,7,15 63:17,21 66:2 84:3 110:14 112:8 132:3,9 132:13,20 147:4 148:23 148:24 155:25 157:19 163:24 164:6,12,15,25 165:8,16,18,22 166:8 168:14 168:24 169:22 179:5 181:4,7 181:12 184:22 184:24 185:8,9 185:13 186:2,4 186:21 201:2,6 201:8,15,24,25 202:19 205:25 206:4,15 210:13 215:5 221:25 222:9 222:23 223:6 223:16,18,22 224:12,15 225:2,6 241:18
values 201:22 222:5
vanslyke 2:7 5:6 8:19,20 9:10,14 11:24 13:13 19:25 49:11,18,25 68:14 74:16 77:16 82:4,7 90:20 91:4 92:3 92:11 93:7 99:17 100:8 129:10 133:25 134:12 135:2,8 139:4 159:10

159:16 167:3,9 172:6 181:18 186:24 192:8 207:22 219:20 220:2 229:18 231:20 234:9 249:7
various 25:10 28:9 29:22 65:9 67:10 73:2,23 75:2 78:16 99:4 144:9 150:15 150:16 151:6 169:8 175:25
vary 33:3,6
vba 7:18,20,22 38:9,15,19,22 51:13 55:3 63:10,15,20 69:14 83:11 214:15 219:5 227:23 229:4 229:11 230:5,8 230:17,23 231:3,7 232:3 233:11 234:18 235:20,25 237:8 238:7,19 239:2 240:16 240:19,23 241:9,14,15 242:11,24,25 245:18 248:23
vba's 38:11
vehicle 171:9
vehicles 164:3
verbally 78:19 78:20
verified 108:7 109:2,5
verifying 108:15
version 93:4 218:21
versions 18:5
versus 32:9 61:7 84:16 173:19 197:14 211:3 212:7 213:18 214:17
vested 173:10 173:22
veteran 235:25 236:2
veterans 184:8 185:5 211:20 228:25 229:4 244:16
vha 192:2 207:18
viability 244:8 244:16
victim 72:15
video 8:7
videoconfere... 3:8 4:2
videographer 3:6 8:2,4 49:20 49:23 99:18 100:3 159:11 159:14 219:21 219:24 237:4 249:12,16,20 250:3
view 42:9 51:24 153:17 164:15 173:12
viewed 45:25
vocational 194:7
voluntarily 140:21 142:25
voluntary 140:12 141:6 141:12,15,15 141:17

w

wage 40:9,13 40:16,19,23 41:13,16,18,23 42:2 43:5 146:24 147:3 149:3,10 152:19 153:21 154:13,14 156:14,20 164:8 165:20 181:11 209:17
wages 41:19 146:23 150:20 151:13 155:6 179:17,19 183:12 209:10 209:20
walk 21:4 135:16
wallace 130:18 130:20 131:6 131:18 225:14 246:13
want 50:2 70:10 79:24 82:2,4,18 134:14 177:11 209:10,14 221:13 249:16
wanted 120:12 249:22
wanting 210:22
wants 49:9
ward 3:18
wardandsmit... 3:23
washington 2:21 179:18
water 1:4 8:9 11:5
way 36:18 61:22 113:7 114:5 154:25 155:2 173:15 205:11 212:18 223:23 239:23 251:18

ways 59:2 154:14
we've 49:7 175:15 179:13 180:21 187:17 189:20,24 190:20 206:24 237:4
website 18:8,9 83:17,18 85:21 116:22
websites 83:6
week 147:5
weitz 2:3,11 8:20,23
weitzlux.com 2:9,15
went 115:25 218:2
west 2:5
westchester 251:6
wider 27:20 53:5
wife 71:2
william 2:22 8:25
william.v.klo... 2:25
wilmington 3:20
withdrawn 241:14
withholds 241:8
witness 5:4 8:14 37:22 82:5 82:8 92:10 134:14,19,21 135:6,12 245:9 249:8,11
word 20:17 51:17 52:16 92:16 116:23
wording 20:15
words 83:21 136:8
work 19:2,3,12 19:13 22:15 24:4,17 26:2 28:14 31:25 32:6,14,16,18 32:20,21 33:2,7 36:16,19 39:9 47:7 56:11,14 56:22 62:18 64:14 66:5 69:24 72:17,23 72:24 73:16 75:3 77:25 80:16,18,18,20 82:9 84:5,18 89:3,5,25 90:13 96:10 106:5,13 106:14 109:8 113:10,15 140:9 145:25 178:16 189:4 196:2 226:6,25 226:25 227:5,6 227:8
worked 23:9,21 24:11 25:8 71:24 72:10 75:10,12 118:18 119:2 144:21 146:2 196:3,8,8 197:6 198:2
workers 17:8
working 23:23 26:3 27:19 42:24 55:15 78:6,7,12 79:2 118:7 120:24 140:21 141:2,3 173:10
works 73:23
world 22:13 23:2,3
worse 235:11
worth 223:3,9 223:10,12
writing 78:18 85:9,15
written 12:23 22:22
wrong 45:12 89:2 94:21,21 102:14 152:20 197:11
wrongful 23:25 28:21 30:8,11 30:13 41:8 72:18
wukitsch 156:9 156:15 157:10 166:15,20,22

x

x 5:2,8 6:2 7:2

y

yeah 134:20 157:25
year 18:6 21:9 21:17 22:2 140:22 144:5,9 148:8 166:8,11 188:12,12,18 188:20 223:15 223:15
years 15:19 40:12,15 68:16 69:3 110:10,12 110:12 122:6 122:12 123:11 162:18 164:11 164:20,21 166:10,12 169:16,18 223:8
york 1:11,13,13 2:13,13 8:8,9 8:17 251:4,10

young 104:23
107:16 118:16
119:2,7 125:5
youngest
210:13
yount 248:8,8

z

zero 43:4
113:17 138:11
217:12
zeroes 230:17
zeros 229:25
230:5,9
zoom 15:22,24
15:24 101:7

Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate. The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

DISCLAIMER: THE FOREGOING FEDERAL PROCEDURE RULES ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY. THE ABOVE RULES ARE CURRENT AS OF APRIL 1, 2019. PLEASE REFER TO THE APPLICABLE FEDERAL RULES OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.

VERITEXT LEGAL SOLUTIONS

COMPANY CERTIFICATE AND DISCLOSURE STATEMENT

Veritext Legal Solutions represents that the foregoing transcript is a true, correct and complete transcript of the colloquies, questions and answers as submitted by the court reporter. Veritext Legal Solutions further represents that the attached exhibits, if any, are true, correct and complete documents as submitted by the court reporter and/or attorneys in relation to this deposition and that the documents were processed in accordance with our litigation support and production standards.

Veritext Legal Solutions is committed to maintaining the confidentiality of client and witness information, in accordance with the regulations promulgated under the Health Insurance Portability and Accountability Act (HIPAA), as amended with respect to protected health information and the Gramm-Leach-Bliley Act, as amended, with respect to Personally Identifiable Information (PII). Physical transcripts and exhibits are managed under strict facility and personnel access controls. Electronic files of documents are stored in encrypted form and are transmitted in an encrypted

fashion to authenticated parties who are permitted to access the material. Our data is hosted in a Tier 4 SSAE 16 certified facility.

Veritext Legal Solutions complies with all federal and State regulations with respect to the provision of court reporting services, and maintains its neutrality and independence regardless of relationship or the financial outcome of any litigation. Veritext requires adherence to the foregoing professional and ethical standards from all of its subcontractors in their independent contractor agreements.

Inquiries about Veritext Legal Solutions' confidentiality and security policies and practices should be directed to Veritext's Client Services Associates indicated on the cover of this document or at www.veritext.com.

Exhibit 788

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF NORTH CAROLINA
SOUTHERN DIVISION
Case No. 7:34-CV-00897

IN RE:)
CAMP LEJEUNE WATER LITIGATION)
)
This Document Relates to:)
ALL CASES)
_____)

V I D E O D E P O S I T I O N
o f
LARRY YOUNG,
taken on behalf of Plaintiffs

DATE: February 6, 2026

TIME: 9:22 a.m. to 2:53 p.m.

PLACE: - REMOTE -

BEFORE: Dawn A. Hillier, RMR, CRR
Stenographic Reporter
Notary Public - State of
Florida, at Large

JOB NO: 7867485

APPEARANCES:

ON BEHALF OF THE PLAINTIFFS:

WHITNEY WALLACE, ESQUIRE
WALLACE & GRAHAM
525 N. Main Street
Salisbury, North Carolina 28144
704.633.5244, ext. 199
wwallace@wallacegraham.com
- and -
JENNA F. BUTLER, ESQUIRE
WARD AND SMITH, P.A.
127 Racine Drive
Wilmington, North Carolina 28406
910.794.4829
jfb@wardandsmith.com
- and -
LESLIE LAMACCHIA, ESQUIRE
BELL LEGAL GROUP
219 Ridge Street
Georgetown, South Carolina 29440
843.386.5284
llamacchia@belllegalgroup.com

APPEARANCES: (continued)

ON BEHALF OF THE DEFENDANTS:

GIOVANNI ANTONUCCI, ESQUIRE
JOSHUA CARPENITO, ESQUIRE
DAVID ORTIZ, ESQUIRE
UNITED STATES DEPARTMENT OF JUSTICE
1100 L Street, N.W.
Washington, D.C. 20005
202.616.8367
giovanni.antonucci@usdoj.com
joshua.g.carpenito@usdoj.com
david.ortiz@usdoj.gov

APPEARANCES: (continued)

ON BEHALF OF U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES:

JILL STEINBERG, ESQUIRE
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
2250 JFK Federal Building
Boston, Massachussetts 02203
jill.steinberg@hhs.gov
- and -
GARY KURZ, ESQUIRE
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
61 Forsyth Street, Suite 5M60
Atlanta, Georgia 30303
gary.kurz@hhs.gov

ALSO PRESENT:

Jason Novak, videographer

INDEX PAGE

WITNESS - LARRY YOUNG 8
EXAMINATION BY MS. WALLACE 9
EXAMINATION BY MR. ANTONUCCI 154
FURTHER EXAMINATION BY MS. WALLACE 157
FURTHER EXAMINATION BY MR. ANTONUCCI 166
CERTIFICATE OF OATH 169
REPORTER'S CERTIFICATE 170

EXHIBITS

Exhibit 1 2025.12.15 - United States' Damages Disclosures.pdf 16
Exhibit 2 NOD Larry Young.pdf 16
Exhibit 3 2026.01.30 Young (CMS) Production Cover Letter.pdf 16
Exhibit 4 2026.01.30 Young (CMS) Subpoena Responses and Objections.pdf 16
Exhibit 5 Larry Young.CV.CLJA_USA_YOUNG_0000000001 - 0000000006.pdf 17
Exhibit 6 2025AnnualReport.CLJA_USA_YOUNG_0000000007 - 0000000273.pdf 67

REPORTER'S KEY TO PUNCTUATION:

-- At end of question or answer references interruption.

... References a trail-off by the speaker. No testimony omitted.

"Uh-huh" "Um-hum" References affirmative sound.

"Huh-uh" "Um-um" References negative sound.

CERTIFIED STENOGRAPHER'S NOTE: All quotations from exhibits are reflected in the manner in which they were read into the record and do not necessarily denote an exact quote from the document.

VIDEOGRAPHER: Good morning. We are going on the record at 9:22 a.m. on February 6th, 2026.

Please note that this deposition is being conducted virtually. Quality of recording depends on the quality of camera and internet connection of participants. What is seen from the witness and heard on screen is what will be recorded. Audio and video recording will continue to take place unless all parties agree to go off the record.

This is media unit number one of the video deposition of Larry Young taken in the matter of, In Re, Camp Lejeune Water Litigation, filed in the United States District Court for the Eastern District of North Carolina, Southern Division, Case No. 7:23-CV-897.

I'm the videographer and I represent Golkow Court Reporting. I am not authorized to administer an oath. I'm not related to any party in this action, nor am I financially interested in the outcome. If there are any objections to proceeding, please state them now.

Hearing no objections, all counsel will be

noted on the stenographic record. The court reporter will swear in the witness and we may proceed.

CERTIFIED STENOGRAPHER: Mr. Young, can you hear us?

VIDEOGRAPHER: Mr. Young, we lost your audio.

LARRY YOUNG,

was called as a witness and, having first been duly sworn, was examined and testified as follows.

THE WITNESS: I do.

MS. WALLACE: Good morning, Mr. Young.

THE WITNESS: Good morning.

MS. WALLACE: My name is Whitney Wallace. I'm an attorney for the plaintiff Leadership Group in the Camp LeJeune litigation and I am going to be deposing you today.

THE WITNESS: Great.

MS. WALLACE: Before we start, I was just telling defense counsel that Case Management Order 3 requires he and I to affirm on the record that we verbally agree with the following statement, so I will read it for the record.

"The parties agree that no communication

with the deponent by any means, including but not limited to text messaging will occur out of the view of the other parties while deposition is proceeding on the record."

And I verbally note that I affirm that I will not do that.

MR. ANTONUCCI: As do I.

MS. WALLACE: Great. All right. That is out of the way. And we're going to start.

EXAMINATION

BY MS. WALLACE:

Q Will you please state your full name for the record.

A Larry Young.

Q What is your date of birth?

A [redacted], 1966?

Q Who is your current employer?

A The Centers for Medicare and Medicare services.

Q Will you state your job title, please?

A Yes. I am the deputy chief financial officer and deputy director for the Office of Financial Management.

Q For CMS?

A For CMS.

Q Is there any reason you will not be able to testify fully and truthfully today?
A No. No.
Q For the record, will you tell us where you're physically located?
A Yes. I'm at 7500 Security Boulevard here in Baltimore, Maryland. That's our main office.
Q Is there anyone else in the room with you today?
A No.
Q Do you understand what defense counsel and I just affirmed, that you're not to communicate with anyone via text or other electronic means during the course and scope of the deposition?
A Yes.
Q Do you have any materials there with you available to you today?
A No.
Q Are you familiar, generally, with the Camp Lejeune Water Litigation?
A I'm familiar that -- excuse me. I have a -- I'm familiar with it in a general sense. I'm aware that Congress passed a law that allows individuals to sue the government for the toxic water that apparently existed at some point at Camp

Lejeune. And beyond that, that's -- that's about it.

Q Do you have any understanding of the size of the claimants who have filed claims?

MR. ANTONUCCI: Objection.

You can go ahead.

THE WITNESS: I do not.

BY MS. WALLACE:

Q Do you know anyone personally who's filed a Camp Lejeune Justice Act claim?

A No, I do not.

Q Have you ever given a deposition before?

A No.

Q Have you ever been a party in any civil litigation?

A No.

Q Have you ever been an expert witness before in any sense?

A I would have to say yes. I mean, I've had to fill out signed affidavits on behalf of the government.

Q What were the circumstances of your expert testimony or opinions?

A They were similar to this as far as providing background on the Medicare program, in

general, I would say.

Q And were you testifying before Congress or just some other body or company?

A It was -- I think it was just another court case. It was not before Congress or anything.

Q And so you had to provide an affidavit in a -- in a court case but did not have to provide an expert report or similar testimony other than the affidavit?

MR. ANTONUCCI: Objection.

THE WITNESS: Correct.

BY MS. WALLACE:

Q Do you remember what type of litigation that was?

A I do not.

Q Without telling me the content of any confidential communications with counsel, can you tell me how you were first contacted regarding this litigation?

A I recall I received an email note.

Q From who?

A From some of my colleagues I worked with in the past and in HHS/OGC.

MS. WALLACE: Madam court reporter, did you hear that? It cut out just a touch on my

end.

CERTIFIED STENOGRAPHER: I did hear that, yes.

MS. WALLACE: Thank you.

Can you repeat it for me? I'm sorry.

CERTIFIED STENOGRAPHER: Sure.

(The Court Reporter is directed to read back the previous question and/or answer.)

BY MS. WALLACE:

Q Approximately when was that, Mr. Young?

A I believe it was in the fall of last year, 2025.

Q And after the email, were there phone calls or in-person meetings?

A We had a -- I think we had one -- one or two Zoom calls.

Q And who were those Zoom calls with, please?

A I prob -- I'm sure I can't recall everybody that was on the Zoom calls. Like, I know counsel here, Gio, was on the call, Jill was on the call, Gary was on the call, and I believe Joshua. There may have been others but I don't -- I didn't take an inventory of names.

Q Have you seen your designations in this

case, what you have been designated to testify about in the Camp Lejeune litigation?

A Yes.

Q Were you involved in preparing those designations?

A Yes.

Q What did you do to prepare for today's deposition?

A I simply reread my written designation information as far as what I was going to be speaking to. And I also reviewed the trustees' report which I -- I'd used to prepare some of my designation narrative.

Q The trustees' report is approximately a 300-page document; is that right?

A That sounds about right. I -- I didn't read it all verbatim. I -- I looked at the introduction.

Q Did you meet with anyone outside of counsel to prepare for your deposition today?

A No.

Q Can you tell me how many times you met with counsel to prepare for today's deposition?

A It was twice.

Q Can you tell me how long, approximately,

each meeting was?

A Yes. I believe the first meeting was about an hour and a half and the second meeting was 45 minutes.

Q And if I understand your testimony, it was only with you and counsel, no one else with CMS or any other individuals?

A Yes, that's correct. No one else.

Q Are there any other documents besides the trustees' report that you reviewed to prepare for your testimony today?

A No. There's nothing else I reviewed to prepare for today.

Q All right. I am going to -- when we do depositions via Zoom, we -- the way that I share exhibits with you is, I and counsel and the court reporter, is I upload into the Chat feature. So I'm going to upload five exhibits -- and they're premarked -- into the Chat feature. And I'm going to tell you what they are as I upload them, if that works for you.

A Yes.

Q All right. You should see in the Chat feature, as well as counsel for the defendant and the court reporter, five exhibits that have been

uploaded. And I'm going to verbally describe for the record what each of them are. The document entitled Young Exhibit 1, 2025, December 15, United States damages disclosures. That is the document we're gong to look at shortly. That's your -- what you were designated to be an expert witness in, those disclosures.

(Exhibit 1 was marked.)

MS. WALLACE: Young Exhibit 2 is your notice of deposition issued to Larry Young.

(Exhibit 2 was marked.)

MS. WALLACE: Exhibit 3 is a cover letter -- excuse me, a cover letter issued by counsel for the defendant, dated January 30th, 2026, wherein they provide the document disclosures with reference to your deposition.

(Exhibit 3 was marked.)

MS. WALLACE: Young Exhibit 4 is the -- your response to the notice of deposition and the subpoena responses and objections that was issued by your counsel.

(Exhibit 4 was marked.)

MS. WALLACE: And Exhibit 5 is your CV that was provided with Bates numbers CLJA_USA_YOUNG_1 through 6.

(Exhibit 5 was marked.)
BY MS. WALLACE:
Q And we are going to -- before I get into the exhibits, I wanted to first ask you. You testified earlier you're currently employed by CMS; correct?
Can you hear me?
A Oh, can you not hear me?
Q I can hear you now. Sorry. The audio's a little touch and go.
A Yeah. Yeah. The way it cuts out.
VIDEOGRAPHER: Counsel, do you want to go off for a second? I can maybe try to help him make a quick adjustment.
MS. WALLACE: That would be -- yes.
VIDEOGRAPHER: Okay. The time is now 9:38. We're going off the video record.
(Off the record.)
VIDEOGRAPHER: The time is now 9:41. We're back on the video record. You may proceed.
MS. WALLACE: Thank you very much for all the corrections that were made during the break. I really appreciate that.

BY MS. WALLACE:

Q Mr. Young, the last question I asked you and I believe your answer was "yes," is, you are currently employed by CMS?

A Correct.

Q And CMS is an agency of the federal government. Do you agree?

A Yes.

Q Are you aware that the federal government is the defendant in the Camp Lejeune litigation?

A Yes.

Q And as you testify here today, you are a full-time federal employee?

A Yes.

Q Is your salary paid by the federal government?

A Yes.

Q Did you enter into a private retainer agreement to testify in this litigation?

A No.

Q Are you being paid any additional expert fee beyond your federal salary for your testimony in this litigation?

A No.

Q How are you being compensated for your

testimony today?

A I'm not being compensated at all besides my regular federal salary.

Q And you testified earlier your designation as an expert occurred in the fall of 2025?

MR. ANTONUCCI: Objection.

THE WITNESS: I was -- I was approached by counsel, my counsel, asking if I would be able to provide testimony in this case in the fall of 2025. Can't tell you exactly what month or day it was off the top of my head.

BY MS. WALLACE:

Q Is it your understanding that you were a non-retained expert in this case?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know exactly what you mean by non-retained expert, what that definition means.

BY MS. WALLACE:

Q When I use the word "non-retained," it means you didn't sign a retainer agreement specific to this litigation.

MR. ANTONUCCI: Objection.

THE WITNESS: I did not -- I did not sign any retainer agreement with respect to this

specific litigation.

BY MS. WALLACE:

Q Do you have any personal knowledge of the facts or allegations of the bellwether plaintiffs in the Track 1 litigation for Camp Lejeune that's currently before the court in North Carolina?

A No. I don't even know who that is.

Q So none of your testimony today has to do with anything specific related to the individuals who are before the court in North Carolina? It's more generalized Medicare knowledge?

MR. ANTONUCCI: Objection.

THE WITNESS: I simply have no knowledge of that particular case or party that you referenced. That's all I could say.

BY MS. WALLACE:

Q Let's take a look, if you don't mind, at Exhibit 4. And what I'm going to do is -- it's been uploaded but I'm going to put it on the screen for you.

I'm looking for the CV. It actually might be -- it's Exhibit 5.

Mr. Young, can you -- oops -- can you see my screen? Let's see.

A I can see the screen, but it would help my

old eyes if you could make it a little bigger.

Q My pleasure. One moment. How's that look?

A Much better. Thank you.

Q All right. Do you recognize this document?

A Yes.

Q What is it, please?

A It's my -- my resumé.

Q Did you prepare this document?

A Yes.

Q And did you prepare it for this litigation or do you keep your CV updated?

A I keep it updated. I didn't prepare it specifically for this.

Q And so despite working for CMS almost continually since 1988, you keep an updated CV?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. I generally update it periodically.

BY MS. WALLACE:

Q All right. And so your resumé highlights an extensive career, for the most part at CMS. Based on my review, it looks look you only did not work for CMS for approximately two years in, I think

it was '97 to '99, but let's look.

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q Yes. Do you see that?

MR. ANTONUCCI: Same objection.

THE WITNESS: Yes.

BY MS. WALLACE:

Q Is that right?

MR. ANTONUCCI: Same objection.

THE WITNESS: Yes. That's about the time period I worked for Kaiser Permanente.

BY MS. WALLACE:

Q And that was interpreting Medicare policy or how would you describe that position?

A Beyond what I've put on here, I don't know I would elaborate. It's been -- it's been a minute since that role. As far as working as their Medicare compliance officer, I generally -- I helped them with their application for a Medicare Advantage contract. I also help them stay in compliance with the Medicare rules and regulations associated with that contract.

Q Throughout your career at CMS, based on your resumé, it looks like you worked in administering Medicare Fee-For-Service. Do you

agree?

A I spent the majority of my time administering the Medicare Fee-For-Service program, yes.

Q Tell the court what that is, please.

A The Medicare Fee-For-Service program is what probably most people would refer to as the original Medicare program where individuals receive healthcare and they -- their providers submit a claim to a Medicare administrative contractor which processes that claim and provides benefit payments to that provider. Where, in some limited cases, the beneficiary, they've already paid -- paid the provider.

Q And when you use the word "administering that program," what do you mean by that?

A Well, when I say administering the Medicare Fee-For-Service program, we contract with Medicare Administrative Contractors to perform certain functions for us, primarily receiving and processing Medicare claims for payment, adjudicating first-level appeals, doing audits on medical record reviews, accounting, financial management activities, things of that sort.

Q Yes. And so you mentioned auditing

medical record reviews. It also looked like, from your resumé, that many of your positions have been focused on program integrity, including identifying improper payments and vulnerabilities within the Medicare payment systems; is that correct?

A Yes. Some of my time was spent in those capacities.

Q Can you tell me about the process there, please?

MR. ANTONUCCI: Objection.

You can answer.

THE WITNESS: I can speak to my experience in those spaces. When I was working in the Dallas regional office, I partook in what we called program integrity contractor performance reviews.

We would review their medical review activities to see how they're prioritizing their work and making sure they're compliant with our regulations in that space, necessarily.

Since I've been in the chief financial officer's office, one of our groups here is focused on measuring the improper payment rates across the entire spectrum of programs which we

administer, including Medicare Fee-For-Service improper payments.

BY MS. WALLACE:

Q What causes improper payments within the Medicare system, to your knowledge and experience?

MR. ANTONUCCI: Objection.

You can answer.

THE WITNESS: Improper payments can be -- can stem from number of reasons. In some cases, it's fraudulent providers. In other cases, it's mistakes which providers make in how they submit their claims. In other cases, it's providers that do not keep up with the current documentation required in the medical records to support the claim.

BY MS. WALLACE:

Q Throughout your career, have there also been improper payments related to upcoding and miscoding from medical providers?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say yes, in my experience I've seen that.

BY MS. WALLACE:

Q Is that part of what your career that has been focused on program integrity has been meant to

develop solutions to address?

MR. ANTONUCCI: Objection.

THE WITNESS: When I was working in program integrity, it was -- my focus was more in the review and the responsibilities of the contractors. I was not -- I was not intimately involved in developing solutions for upcoding -- the challenge of upcoding, if you will.

BY MS. WALLACE:

Q Do you know when Medicare developed a system that encouraged the review of medical records to identify fraudulent billing practices?

MR. ANTONUCCI: Objection.

THE WITNESS: I cannot -- no. I don't know exactly when that started.

BY MS. WALLACE:

Q Can you describe that requirement or guideline from Medicare with regard to reviewing medical records to identify program integrity and vulnerabilities in Medicare payment systems?

MR. ANTONUCCI: Objection.

THE WITNESS: I can say that the -- one of the compliant part -- compliance parts for the Medicare program is that in submitting a claim

for benefits on behalf of a beneficiary, part of -- part of the calculus in assuming that claim is that you, a provider, are truthfully certifying that everything submitted on that claim is supportable by the medical record.

Part of the medical review process is -- involves actually asking for medical records because we don't -- we don't receive medical records for every claim that we receive. That's not -- that's not practical. We receive over a billion claims. If we identify a suspect claim, then it can be suspended and a request for medical records will go out for that provider to submit those medical records.

And then a review is done by a nurse or physician or both to see if the medical record supports what's submitted on the claim.

BY MS. WALLACE:

Q It's more of an audit process?

MR. ANTONUCCI: Objection.

THE WITNESS: I would -- I would just say it's what I just described. I'm not sure how you would define "audit," per se.

BY MS. WALLACE:

Q Well, you were just testifying that you

don't look at the medical records for every claim submitted. It's more of a -- you check it with an audit or your contractors check it?

MR. ANTONUCCI: Objection.

THE WITNESS: What I alluded to was that there's a process for identifying suspect claims for which we then request the medical records.

BY MS. WALLACE:

Q Do you know this year's approximate estimated improper payment rate --

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q -- in the Medicare Fee-For-Service program?

MR. ANTONUCCI: Same objection.

THE WITNESS: As I recall -- I may be off by a half percent or so -- it's -- it's somewhere a little short of 7 percent. It's like 6.9 percent, I believe, improper -- the most current improper payment rate, I believe, is just under 7 percent, I thought, for the Medicare Fee-For-Service program.

BY MS. WALLACE:

Q Yes. And so according to the CMS

documents that I reviewed, does 6.55 percent, representing $28.83 billion in improper payments, sound approximately accurate?

MR. ANTONUCCI: Objection.

THE WITNESS: That sounds about right.

BY MS. WALLACE:

Q Okay. Is there a program that has been created to address the error rate -- and I'm referring to the Comprehensive Error Rate Testing program known as CERT.

MR. ANTONUCCI: Objection.

THE WITNESS: Oh, the CERT program is the -- is a program on the Fee-For-Service side as well. At least that's what we use to measure the improper payment rates.

BY MS. WALLACE:

Q How large is CERT, that program? How many persons or funding, if you know?

MR. ANTONUCCI: Objection.

THE WITNESS: Off the top of my head, I don't know for certain.

BY MS. WALLACE:

Q Does that fall under -- or has it ever fallen under your purview throughout your career at CMS?

A Yes. It is currently under the umbrella of our work here in the Office of Financial Management.

Q But you don't have an approximate number as to how many persons work in that program?

A I could give you an approximation. I thought you were asking for something precise. I mean, there's approximately, I would say, 40 people within -- within our office which support the improper payment rate measurement program. And that's inclusive of every program, so they're measuring the improper payment rate for not just Medicare Fee-For-Service, but for Managed Care as well as the Marketplace and Medicaid as well. And they also support several contractors which actually do the improper payment rate reviews for us as far as looking at samples of claims and whatnot. So I couldn't tell you. Inclusive of the contractor staff, like, I don't -- off the top of my head, I don't know how many contractors are supporting the 40-odd people we have here.

Q CMS also has a recovery audit contract program which I understand is based on claims that were already paid but may later be found to have been coded incorrectly. Do you have an awareness of

that program?

A Yes. I'm aware of the recovery audit program. We call them the RACs, R-A-C, if you will.

Q And does RACs help to identify incorrectly coded Medicare submissions?

A Well, RACs, they don't fall under my umbrella, first of all, in the Office of Financial Management. Those are run by the Center for Program Integrity here within the agency.

But my -- my general knowledge of them, experience has been that their -- they don't identify -- they don't identify error rates, per se. They identify and try to collect and recover improper payments made on behalf of the program. And they're reimbursed on the contingency as far as the amount that they may collect.

MR. ANTONUCCI: Excuse me. I meant to object to the last question.

MS. WALLACE: No problem. Thank you.

BY MS. WALLACE:

Q So would you agree with me that based on your understanding and career, CMS has long recognized risks involved in program integrity and oversight functions with regard to identifying reducing coding and documentation errors in the

Medicare system?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say that -- that program integrity is and always will be the component function of this agency and organization, trying to stop abusive and fraudulent billers in all of our programs.

BY MS. WALLACE:

Q All right. Let's talk about your role starting in 2014. You -- let's see if -- I'll scroll to it on the screen.

Your resumé indicates that from 2014 to June of 2023, you worked as the SES group director for the Medicare contractor management group. Can you briefly describe that position and your roles?

A Yeah. So in that capacity, I was leading a group of about 110 federal employees. And we were managing the Medicare Administrative Contractors. I'd alluded to them earlier. They're the contractors which basically administer the Fee-For-Service benefit on behalf of -- on behalf of the government.

In that capacity, I spent a large part of my time dealing with -- developing the contracts for competition, helping work on their content, managing

their performance, assessing their performance, and running the day-to-day operations of the Fee-For-Service program and the different functions which they administer for us.

Q And did much of that role involve overseeing Medicare contractor operations and financial management?

A I would say some of that role was involved in overseeing Medicare contractor financial management operations.

Q In that role, did you prepare corrective action plans for your contractors?

A Yes. We would -- we would work with the contractors when we found fault or errors in some of their operations and they weren't meeting our performance metrics. We would work with them to develop corrective action plans.

Q What time of -- what type of fault or errors do you recall finding? Just a couple examples.

A Just as an example, more often than not, it's a function of workload processing. So, for example, a contractor could -- could get hit with more provider enrollment applications in a given period of time that they would necessarily expect,

or they could have staff attrition unexpectedly occur so that they would get behind in processing provider enrollment applications and would not be able to meet our performance-level metrics.

So we would work with them to see what kind of corrective actions they could come with up to either increase their staffing, increase their productivity, develop timelines for when we expected them to get back in -- to come back in compliance with our -- with our requirements.

Q Since 2023, June to be exact, according to your resumé, you have been in the chief financial officer, CFO, and deputy director role that you hold today; correct?

A Yes. It's the deputy chief financial officer and deputy director. Correct.

Q Thank you. Yes. Meaning there is also a CFO above you? Or how does that work? Is it above you or the same level?

A It's -- she's technically my boss, yes. There's a CFO above me.

Q Okay. Tell me about some of the responsibilities you hold in your current role.

A So in my current capacity, we're -- we oversee the groups responsible for remaining --

managing the range of different financial management functions, including the accounting services, accounting for all the benefit payments and administrative dollars which flow in and outside the agency, maintaining the accounting system, HIGLAS, which captures all those accounting functions, collecting overpayments, running the Medicare secondary program, payment program, and measuring the improper payment rates for the three different programs which the agency administers.

Q And all of that financial accounting, who -- how do you report that regularly to -- what do you prepare in order to report your findings regularly and who do you report them to?

MR. ANTONUCCI: Objection.

THE WITNESS: I say the -- the biggest thing which we report is the annual financial statement that the agency provides as part of the department's report. And this year we -- we produced our -- our -- I believe it's our 27th consecutive year without any significant findings or material weaknesses. It's an annual report.

BY MS. WALLACE:

Q And does that -- is that for CMS

internally or is that used by Congress or who views that? Who relies and needs that annual financial statement?

A It's a public report which many people have an interest in and Congress views it, public view it, the department views it.

Q How does your work in the role you have now support Medicare's long-term stability?

A I would say as far as the stability of the program, a lot of what we do is to provide confidence that the benefit dollars and administrative dollars are accurately accounted for and that the integrity of the accounting process is reliable. That helps ensure confidence that -- that this program is running as efficiently as it can, necessarily. To the extent that that provides stability to the program...

Q So it sounds like your -- your focus is to try to ensure to the general public and/or to Congress or policymakers that confidence in the way Medicare is currently running?

MR. ANTONUCCI: Objection. And the witness hadn't finish answering your last question.

BY MS. WALLACE:

Q Oh, I'm sorry. Mr. Young, did you not finish?

A I -- you know, I think I had necessarily kind of left a dangling answer for you.

To the extent that -- that the confidence we provide in the stewardship of this agency's benefit dollars and administrative dollars provides stability of the Medicare program, we're doing that.

Q I'm going to stop sharing your resumé and I'm going to pull up your designations.

THE WITNESS: Would you mind if we took a little break?

MS. WALLACE: Not at all. I was going to do one on the hour but I'm happy to do one now.

VIDEOGRAPHER: The time -- the time's now 10:10. We're going off the video record. This completes media unit number one.

(A brief recess is had from 10:10 a.m. to 10:16 a.m.)

VIDEOGRAPHER: The time is now 10:16. We're back on the video record. This begins media unit number two.

You may proceed.

MS. WALLACE: Thank you.

BY MS. WALLACE:

Q Mr. Young, I'm going to show you what has been uploaded as Young Exhibit 1. It is a copy of the disclosures that we were provided for your testimony by your counsel. Do you recognize this document?

A Can you make it a little bigger for me?

Q Certainly. Do you recognize this document so far?

A I believe so. I've seen it quickly. It's hard to tell from just the title page.

Q No problem.

So I will represent to you this is a 46-page document that is titled the United States Second Disclosure of Expert Testimony for Phase III in the Camp Lejeune Litigation.

And the section having to do with your designation, it repeats for each disease category, but for the first disease category, which is bladder cancer, your disclosures starts on page five.

Do you see that on the screen?

A I do.

Q I believe you testified earlier that you helped to prepare this section?

A Yes.

Q Did you write it or review it?

A I wrote part of it and reviewed all of it.
Q Which part did you write? And I'll scroll down. I'm happy to scroll down. It looks like your designations actually start -- they're identified as A through I on pages six and seven.
MR. ANTONUCCI: I'm going to object.
Mr. Young, please be careful not to divulge confidential communications with attorneys in answering this question.
THE WITNESS: I can't honestly recall exactly which part that I had -- or parts that I had amended from things that -- so it's hard -- it's hard for me to tell you exactly which -- which parts. But I reviewed it and, again, it's all true and correct.
BY MS. WALLACE:
Q Thank you. Does A through I accurately represent the entirety of the scope of your expert testimony in the Camp Lejeune litigation that you would be expected to provide?
A Yes.
Q And you were able to make edits to confirm that all of these, A through I, is within the scope of your knowledge and expertise in this litigation?
A Yes, absolutely.

Q If we walk through several of these designations, many of these are pretty basic background on the Medicare program. Do you agree with me on that?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say they provide a basic background of the Medicare -- the original Medicare program.

BY MS. WALLACE:

Q Yes. And so, for example, A, B, and C states that "Medicare is a federally funded program of health insurance for the aged, the disabled, and persons suffering from end-stage renal disease."

"Medicare parts A and B, (also known as original Medicare) was established under Title 13 [sic] of the Social Security Act in 1965. Medicare" --

A Eighteen.

Q Thank you. I'm sorry.

"Medicare Part A helps pay for inpatient care in hospitals, skilled nursing facilities, hospice, and some outpatient home healthcare."

I do want to clarify. You don't have any role in the healthcare component of Medicare; correct? More finance and administration?

A I would say, yeah. I'm not directly involved in providing healthcare to people. It's the -- in my current capacity is -- it's the financial management component piece.

Q And then you describe that "Part B helps pay for items and services, such as doctor visits, physical, occupational and speech therapy services, home health service, outpatient hospital services, and durable medical equipment, prosthetics, orthotics, and supplies for those who have voluntarily enrolled."

A Correct.

Q And then in C, your designation, you describe the Part D program "Provides subsidized access to prescription drug insurance coverage on a voluntary basis for all enrolled beneficiaries. It also provides premium and cost-sharing subsidies for low-income enrollees."

And then you indicate when it went into effect which was January 1st, 2006.

A Yes.

Q Am I correct that both the Medicares Part B and D are voluntary enrollment programs?

A Yes.

Q And both of those programs are supported

by premiums from the Medicare recipient that opted into those programs?

A Yes. For people which enroll, they have -- they have to pay a premium.

Q And my understanding is that if you have 10 years of earnings, you do not have to pay any type of a premium for Part A? It's a waived premium?

A For Part A of Medicare, if you have earned -- earned 40 quarters of credit under social security, which is 10 years of work, then you are entitled to Medicare Part A premium free.

There are some individuals who have not worked that long and they have to pay a premium for Part A. Everyone pays a premium for Part B.

Q And some of the premiums are scaled based on your earning capacity?

A Yes. Correct.

Q Does that go for Part B, A, and D?

A It goes for Part B, I know for sure. For Part D, I cannot recall off the top of my head.

Q Does Medicare, if you know, does it keep track of how many -- of how much premiums an enrollee has paid over time?

A We -- off the top of my head, we don't --

I don't know. I mean, we keep track of whether or not people pay their premiums, certainly, so there would be a record of -- of them paying their premiums over time.

Q And so premiums paid or patient pay would be documented within the CMS system?

MR. ANTONUCCI: Objection.

THE WITNESS: Exactly how we account for their premiums, I'm -- I can't tell you at this moment.

BY MS. WALLACE:

Q Can you answer yes or no if premiums paid would be in the CMS system?

MR. ANTONUCCI: Objection.

THE WITNESS: The premium collections are, as I recall -- I believe they're captured through social security, primarily, so there's a distinction here. Social security manages the enrollment in Medicare for the agency and the collections of benefit premiums.

BY MS. WALLACE:

Q Would premiums pay be accessible by Medicare?

MR. ANTONUCCI: Objection.

THE WITNESS: I think generally, yes, it

would be, but we'd have to work with social security in some capacity.

BY MS. WALLACE:

Q Which one of these programs has copays for beneficiaries?

MR. ANTONUCCI: Objection.

THE WITNESS: In my experience and recollection, they all have copays. Different benefits have different levels of copays and some of the benefits have no copays so it depends on the type of service that we're speaking to.

BY MS. WALLACE:

Q But all Part A, Part B, Part D, have copays. Yes?

A No. You can't say all because there are some benefits for which there are no copays.

Q But portions of Part A, B, and D are likely to have copays?

A Yes.

Q Would that information be accessible by Medicare --

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q -- the amount of copays paid by any given

beneficiary?

MR. ANTONUCCI: Same objection.

THE WITNESS: I do not know.

BY MS. WALLACE:

Q Is that housed copays in the social security program or would it be housed in Medicare, to your knowledge?

MR. ANTONUCCI: Objection.

THE WITNESS: I cannot say for certain.

BY MS. WALLACE:

Q Your designations in paragraph E describe how these different parts of the Medicare program are funded. And it's very interesting.

So you describe that Part A is funded with a trust called the Hospital Insurance trust. And then you go on to explain that "The HI trust is funded primarily through payroll taxes, but also income taxes, interest earned on trust fund investments, and Medicare Part A premiums collected from those not entitled to premium free"; is that right?

A Yes.

Q And so in common sense, Part A of Medicare is primarily funded by taxpayers who are employed and paying percentages of their payroll taxes to the

government; is that right?

A Just Part A is funded through a payroll tax. It's 1.45 percent of a person's payroll.

Q Did you agree with my statement?

A I said yes. Did you not hear me?

Q Oh, no. I'm sorry. It might have been a delay. Thank you for that.

And I also understand it's a little more for self-employed earners than the 1.45 percent?

A I think it's -- I believe that's correct, that you'll have -- it's a combination of funds, so it's the payroll tax on individuals 1.45 percent, then the employer pays 1.45 percent. If you're self-employed, then you get to pay the full -- full amount, I believe.

Q And my understanding is that this is based on -- it's kind of like a pay-it-forward program. So the workers of today are paying for essentially the retirees of tomorrow for their Medicare coverage, and it's this pay-it-forward kind of taxpayer approach to Medicare funding. Can you explain that better than me?

A Well, I don't know if I would call it a pay-it-forward program. I mean, it's a trust fund and it exists by -- based on historical payroll

taxes which have been collected over time. And then it's offset all the time by benefit payouts which go out all the time, necessarily. To the extent that there's fewer workers paying payroll taxes that, you know, you can consider that perhaps a go-forward funding situation, but it depends on how you want to characterize it.

Q For the most part, the individuals paying payroll taxes are not probably disabled or usually over 65; right?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say people -- it's a matter -- it's function of who's receiving an income through payroll, be it through being self-employed or not.

There are certainly disabled individuals which may have some part-time work. There's certainly aged individuals which continue to work as well.

BY MS. WALLACE:

Q But by -- in large part, Medicare's being funded by the people working today for their retirement later in life or someone else's retirement?

MR. ANTONUCCI: Objection.

THE WITNESS: As a general matter, you could say that.

BY MS. WALLACE:

Q All right. And then Part B is kind of a -- it's a completely different trust fund. It's called the Supplementary Medical Insurance, SMI trust fund. And it is not paid from payroll taxes. It's paid through a combination of premiums from the beneficiary who enrolled in it and a combination of other tax revenues that the government holds in the treasury. Is that fair?

A Generally, yes. It's funded through the general -- it's a combination of both general tax revenues, income taxes, if you will, for example, and premiums. And it's a formula so that the premium is set every year such that it's actuarially comprised, I believe it's 25 percent of the expected benefit payout. And then the trust fund and tax revenues have to make up the other 75 percent.

Q So Part B is being funded by the beneficiary of the Medicare themselves by them paying premiums. That's about 25 percent of the funding generally. And then the other 75 percent is from taxpayer funding flowing through the government. Is that true?

A That's generally correct.

Q All right. And I wanted to ask you about your paragraph D. It says "To be covered under original Medicare, an item or service must be eligible for coverage and reasonable and necessary for the diagnosis of treatment of an injury or illness."

Tell me about the "reasonable and necessary" requirement for eligibility, please.

A The operating principle as outlined in the Social Security Act is that in order to be covered, an item or service has to be medically reasonable and necessary for the diagnosis, treatment of an illness or injury or, I believe it goes on to say, or to correct the function of a malformed body member, something along those lines.

So that's how you end up with coverage for things like prosthetics, for example, as a part of the durable medical equipment benefit.

The test as to whether or not something is medically reasonable and necessary, that's a clinical decision. And beyond that, I can -- I mean, I'm not a clinician so it's hard for me to expound on that beyond that, really.

Q Do you know if Medicare payment can be

denied if an auditor or contractor deems that the service was not reasonable and -- medically reasonable and necessary?

A Yes. I mean, if it doesn't meet that general test, then an item of service can be denied.

Q And do you know if contractors, when they evaluate claims, do they have a physician or a nurse on hand that helps to make that determination in questionable cases?

A Yes. For my -- my experience has been with -- for example, the Medicare administrative contractors, they have -- we require them to employ chief medical officers, chief medical directors, if you will, as well as a number of nurses that are working in concert with the chief medical director performing medical review on specific claims.

Q Do you agree that the reasonable and necessary determination is made at the time the service is provided based on the patient's condition and the applicable coverage rules at that time?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know that I would agree with that. At the time the patient's being seen, they're being seen by their provider and their physician. They're making a

medical judgment, not the Medicare program, per se.

BY MS. WALLACE:

Q Your testimony is that it's later -- it later can be subject to review for -- whether -- as to whether it was reasonable or medically necessary?

MR. ANTONUCCI: Objection.

THE WITNESS: I mean, the Medicare program's making the decision as to whether or not it's meeting that coverage criteria. That's happening most often after the fact that the service has been provided. So they're not -- they're not -- we're not in the room making a decision with the clinician, is my point.

BY MS. WALLACE:

Q I understand.

It can happen -- that audit or review can happen after the visit, and sometimes treatment can be denied on that basis?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say yes.

BY MS. WALLACE:

Q Would you agree that whether Medicare will cover a particular service as reasonable and

necessary, that cannot be a decision that's made in advance?

MR. ANTONUCCI: Objection.

THE WITNESS: I won't say that across the board.

There are -- there are a few different programs we have in place that would require providers to receive prior authorization for a service so that they would be actually engaging with our Medicare administrative contractors to receive prior authorization before they receive the service necessarily. Those are kind of targeted programs with specific benefits.

BY MS. WALLACE:

Q Outside of a pre-approval process, would you agree that whether a Medicare service will be deemed reasonably and medically necessary can't be known years or decades in advance?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't feel like I can answer that question because, again, I'm not in the clinician clinical space.

BY MS. WALLACE:

Q All right. Your designation does say that "An item or service must be eligible for coverage

and reasonable and necessary for the diagnosis or treatment of an injury or illness." And I'm trying to understand, are you saying that that can occur limitedly in a pre-approval process and then it can be subsequently reviewed?

MR. ANTONUCCI: Objection.

THE WITNESS: What I'm saying is that if it's -- if it's something as reviewed prior -- prior approval, it's not -- it's not reviewed after the fact. But the things which are reviewed for prior approval are very limited and narrow. We don't do much of that in the Medicare Fee-For-Service program.

BY MS. WALLACE:

Q So pre-approval would be limited. And other than pre-approval, Medicare does not make that determination based on the service needed years in advance. That's not the process?

MR. ANTONUCCI: Objection.

THE WITNESS: Again, I can't really speak to your full characterization because I'm not a clinician. It's not my area of expertise, that space.

BY MS. WALLACE:

Q But you -- but you are an administrator of

the Medicare rules that would be responsible for administering the reasonable and necessary component?

MR. ANTONUCCI: Objection.

THE WITNESS: I'm an administrator and I've spoken to the general -- based on my experience how we handle claims, both on a pre-payment basis and a post-payment basis. That's all I can really speak to.

BY MS. WALLACE:

Q If a -- if a plaintiff knew -- okay. When you say, in the next sentence, "The item of service must also not be specifically excluded by the Social Security Act," what do you mean by that sentence?

A So there are specific things that the Social Security Act specifically excludes us from being able to cover or provide services for; routine foot care, for example, dental services, to the extent that they don't require somebody to be hospitalized for those dental services are excluded. Things of that sort, those are specific things which Congress just carved out and said, no, those are not available for -- for any kind of Medicare coverage.

Q And are those the types of carved-out

coverage that are usually picked up by Part C?

A There are some of those services where if an individual enrolls in Medicare Part C, which is a Medicare + Choice plan typically administered by what we would call a health maintenance organization, they can offer additional benefits from what the original Medicare Fee-For-Service program can offer. And many times they do choose to provide some of those supplemental benefits that we do not, are not allowed to provide under the original Fee-For-Service program.

Q How is Part C -- Medicare Part C funded?

A My knowledge and recollection of how Part C is funded is -- is not as deep as it is on the A and B side, or the D side, necessarily. But I think it's probably -- I don't want to speculate. I'm going to have to tell you I can't remember.

Q Do you know if it's funded by the government?

A I would say yes, it's -- I believe it's funded by the government. That part, I do know.

Q Do you know if it's ran through private insurance companies?

A Yes. Those programs are run by private insurance companies, most commonly, as I said,

health maintenance organizations. There are some PPO organizations as well; providers. UnitedHealth, for example, would be one.

Q But you are not designated to talk about how Part C is funded?

MR. ANTONUCCI: Objection.

THE WITNESS: That's not my area of expertise. So beyond saying that it's paid for by the federal government in the -- I can't, off the top of my head, recall if it's subsidized by the A and B trust funds, if you will.

BY MS. WALLACE:

Q All right. And let's look at your last several designations.

Part G, "Medicare Part B is available to individuals who are eligible for Part A at no cost by paying a monthly premium."

Do you mean -- I think you mean Medicare part -- as worded, it's a slight bit confusing. Would you explain it?

A Well, I mean, if you -- if an individual is enrolled in Part A, they're available -- Part B is available to that individual enrolled in part -- Part A.

Q But they are paying a cost, a monthly premium?

A The Part B -- yeah. Maybe -- maybe this sentence is isn't as artfully worded. But, correct. Part B is -- you pay -- everybody's paying a premium for Part B. Unless there are some low-income individuals which get Part B premium-free subsidized through -- there are dual eligibles that are Medicare and Medicaid eligible.

Their premiums get subsidized but there's a -- everyone pays a premium for Part B.

Q All right. And let's look at I. "Since its enactment, Medicare has expanded to include additional benefits, such as Part D." And you testified earlier Part D is the prescription drug plan?

A Yes, correct.

Q And Part D does have beneficiary contribution in the form of a premium; correct?

A Yes.

Q And it's also a voluntary enrollment program?

A Yes.

Q And then you have this last sentence "Generally speaking, since Mr. Young has been

employed at CMS, benefit coverage has expanded, not constricted."

And so when you say "generally speaking," I think that you mean not every benefit coverage has expanded, but for the most part, benefits coverages have expanded, not constricted?

MR. ANTONUCCI: Objection.

THE WITNESS: I mean -- I mean what it says. I mean, in my experience the program has tended to accrue or accrete additional coverage over time. The big one being the addition of the Part D benefit program for the drug benefit in 2006. There's also a tendency to expand eligibility groups. For example, when I first started, we did not have -- we did not have an eligibility opportunity for people with Lou Gehrig's disease.

That got subsequently added. I can't recall which year, but now if somebody develops Lou Gehrig's disease, ALS, you would -- that individual would be entitled to Medicare coverage, even if they weren't age 65. That's just an example of that.

BY MS. WALLACE:

Q Yeah. So Lou Gehrig's, and then end-stage

renal disease are, you know, specified diseases that fall under Part A coverage?

A Correct.

Q So Medicare is governed by federal statutes enacted by Congress; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: It's governed -- Medicare is primarily governed by Title 18 of the Social Security Act.

BY MS. WALLACE:

Q And that's a statute enacted by Congress?

A It's a statute enacted by Congress, signed into law by the President.

Q In your role, you do not get to make Medicare policy decisions. Would you agree?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say yes, generally, I do not get to make policy decisions. That's generally correct.

BY MS. WALLACE:

Q Who makes those, please?

MR. ANTONUCCI: Objection.

THE WITNESS: Overall, the policy decisions, to the extent that they are -- they are -- that the law allows flexibility in

making policy decisions are made by the political leadership of the agency.

BY MS. WALLACE:

Q And who would that be?

A Well, at this very moment, it would be the administrator, Dr. Oz, as well as -- as well as many of the different political appointees that have been appointed to the agency under the new administration. I can't -- I can't name them all.

Q Would you agree with me that Congress has the authority to amend Medicare statutes, including the eligibility rules, the benefits and scope, and the payment methodologies?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I would generally agree with you.

BY MS. WALLACE:

Q Do you agree that Congress can enact changes that affect the future Medicare coverage and reimbursement levels --

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q -- of Medicare beneficiaries?

MR. ANTONUCCI: Same objection.

THE WITNESS: I would say yes, they can.

BY MS. WALLACE:

Q And so future Medicare coverage and payment levels depend on decisions made by Congress and not necessarily CMS. Is that accurate?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say, in my experience, yes, that's generally accurate.

BY MS. WALLACE:

Q All right. And so I took the designations off the screen for a moment. And I just wanted to talk about -- just clear up what you're not designated to offer opinions on and make sure it's really clear for the Camp Lejeune litigation.

So you testified earlier, you don't know anything about the individual plaintiffs who are in litigation currently; correct?

A Yes, correct.

Q And so you are not designated to offer opinions about any individual plaintiff or their damages; correct?

A Yes, that's correct.

Q The plaintiffs have been previously provided CMS documents in this case. Were you involved in preparing any of those documents?

A No.

Q And just for the record, I'm referring to Bates range document CLJA_CMS_1 through 135.

You have not viewed and had no role in preparing those documents; correct?

A I have no idea what that is, what you just read.

Q Okay. Do you know who Kathleen Hunter is?

A No, I do not.

Q Okay. She testified previously in the Camp Lejeune litigation on behalf of CMS; however, she's a contract worker with BRBC. Do you know what BRBC is?

MR. ANTONUCCI: Objection.

THE WITNESS: Off the top of my head, I don't remember what the -- the acronym stands for. We have lots of acronyms, as you can imagine.

BY MS. WALLACE:

Q Absolutely.

Do you recognize that as a contractor of CMS, that -- just that acronym without...

A I actually do not.

Q Do you recognize this name, Benefits Coordination & Recovery Center, BCRC, Medicare contractor that supports the Medicare Secondary

Payer, MSP program?
A Yes.
Q Is that a contractor for CMS?
A Yes.
Q What does that department or program do?
MR. ANTONUCCI: Objection.
THE WITNESS: So the benefit -- the BCRC contractor for us helps us with our benefit coordination recovery work. And I'm not as steeped in that. But the -- it helps us administer the Medicare Secondary Payer program, where Medicare is not the primary payer for benefits.
BY MS. WALLACE:
Q Do they have a role in lien resolution, that entity, if you know?
MR. ANTONUCCI: Objection.
THE WITNESS: Off the top of my head, I can't recall. We have a -- we have a couple of different contractors help -- help us with our MSP space, some of which deal with education-run Medicare Secondary Payer work. Some of -- some of them involve working on subrogation cases. And off the -- again, I wasn't prepared for that, that discussion so I

can't say for certain.
BY MS. WALLACE:
Q You have not been designated to give an opinion on any offsets in this litigation. Is that true?
MR. ANTONUCCI: Objection.
THE WITNESS: I cannot speak to any offsets.
BY MS. WALLACE:
Q And you are not designated to testify that Medicare will pay for any future care for any of the individual plaintiffs?
MR. ANTONUCCI: Objection.
THE WITNESS: I could not speak to that.
BY MS. WALLACE:
Q And you're not offering an opinion predicting any future Medicare reimbursement rates or fee schedules. Is that true?
MR. ANTONUCCI: Objection.
THE WITNESS: I cannot speak to Medicare future payment rates or fee schedules.
BY MS. WALLACE:
Q And you're not designated to testify that Medicare coverage is guaranteed for any future beneficiaries of the program?

MR. ANTONUCCI: Objection.

THE WITNESS: Again, I could not speak to that either.

BY MS. WALLACE:

Q None of the opinions you've identified in your disclosures guarantee the scope, duration, or payment level of any future Medicare benefits for any individual. Would you agree?

MR. ANTONUCCI: Objection.

THE WITNESS: I would agree that I cannot speculate on what the future may hold with respect to the Medicare program.

BY MS. WALLACE:

Q And you are not offering any opinions on the accuracy of the Medicare coding or billing data for any of the plaintiffs in the Camp Lejeune litigation; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I'm not privy to any of that information so I cannot really speak to any of that.

BY MS. WALLACE:

Q And you're not offering any opinions on whether services paid for by Medicare were related to their Camp Lejeune exposure for the bellwether

plaintiffs in the Camp Lejeune litigation?

MR. ANTONUCCI: Objection.

THE WITNESS: I cannot speak to that either.

BY MS. WALLACE:

Q And so the scope of your testimony has to do with -- you've had -- with the history of Medicare, as you've known it, and you're not making speculation about the future -- future of Medicare?

MR. ANTONUCCI: Objection.

THE WITNESS: Correct. I can only speak to my experience and what's -- what's under current law, to my recollection.

MS. WALLACE: All right. We are going to -- let me know if you want a break because we're going to start taking a look at the trustees' report. Would you like a brief break before we do that?

THE WITNESS: Yeah. Let's take a little break. I'm going to have to reconfigure my --

MS. WALLACE: Okay. Sure.

THE WITNESS: -- computer.

MS. WALLACE: Okay. Thank you, Mr. Young.

VIDEOGRAPHER: The time is now 11:00. We're going off the video record. This

completes media unit number two.

(A brief recess is had from 11:00 a.m. to 11:11 a.m.)

VIDEOGRAPHER: The time is now 11:11. We're back on the video record. This beginning media unit number three. You may proceed.

BY MS. WALLACE:

Q Mr. Young, I'm going to upload a document into the Chat feature that has been previously marked as Young Exhibit 6, 2025 Annual Report. And it bears the Bates stamped numbers CLJA_USA_YOUNG_7 through 273.

(Exhibit 6 was marked.)

BY MS. WALLACE:

Q And I'm going to put it on the screen for you as well, sir.

Mr. Young, do you recognize this document?

A Yes.

Q What is it?

A This is the '25 annual report of the board of trustees on the status of the Medicare programs' financial situation.

Q Did you -- well, you produced this document in response to the plaintiff's request for materials you reviewed, considered, or relied upon

in developing your opinions in this case; is that correct?

A Yes.

Q And in paragraph nine of your responses to our notice, you also disclosed this document as one that you reviewed in connection with the Camp Lejeune litigation; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes.

BY MS. WALLACE:

Q Can you tell me which components of this document that you relied upon related to the Camp Lejeune litigation?

A Just reviewed the -- primarily the introduction component piece. It's a kind of lengthy document. So I focused --

Q And it's your testimony that -- oh, I'm so sorry. Please continue.

A No. I'm sorry.

I focused on the introduction and the Highlights section that gives you kind of an overview of their conclusions and recommendations.

Q So just as background for the court, explain to the court, what is this document? Who prepares it? What's it for? What's it used for?

MR. ANTONUCCI: Objection.

THE WITNESS: So I can speak to generally what it is and who prepares it. I mean, it's prepared by the board of trustees for the Medicare program, if you will. It's a annual report that I believe that's required by Congress. They have to report on the financial stability and actuarial projections for the different trust funds which fund the different parts of Medicare.

BY MS. WALLACE:

Q What does Congress do with this document?

MR. ANTONUCCI: Objection.

THE WITNESS: I have no idea what Congress does with this document. I simply know that it's required by law to be provided to Congress, I believe, on an annual basis.

BY MS. WALLACE:

Q Were you an author in this document?

A No.

Q When you stated earlier that you relied -- you rely upon the introduction or the Highlights section of this document to support your testimony in the Camp Lejeune litigations, which parts, specifically?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know if I can point you to an exact paragraph, per se. I read the entire introduction of it.

BY MS. WALLACE:

Q And that supports your opinions in the Camp Lejeune litigation?

A It supports my -- what I've -- what I have provided as terms of written narrative as well as my oral comments today.

Q The intended recipient of this document is Congress and the policymakers and not CMS. Is that your testimony?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know that I would care to speculate on what the intent of this was. I simply know what I believe that's required by law as a report to Congress.

BY MS. WALLACE:

Q And it's prepared for Congress, based on your understanding, not for CMS; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: That's my understanding, yes.

BY MS. WALLACE:

Q Would you agree with me that the trustees' report generally discusses Medicare's overall financial condition?

A Generally, yes.

Q All right. And what is -- based on the Highlights and Summary section, can you tell me what the current financial position is of the HI fund?

A Well, from what I recall based on the trustees' report was the, the HI supplement -- the HI trust fund, if you will, it's -- it's facing several headwinds and challenges in terms of its being able to continue to be financially solvent. I believe the report indicated that they would -- the benefits would exceed the collections as early as 2027 and that the fund could be depleted by 2033.

Q And so the trustees' report is a warning of that dire financial position of the HI fund?

MR. ANTONUCCI: Objection.

THE WITNESS: You can characterize it the way you like. It's just -- I think it's a factual portrayal based on actuarial projections of -- and assumptions that they're aware at this moment in time of the financial stability of the Medicare A and B trust funds.

BY MS. WALLACE:

Q Let's take a look at the summary section, page two on the document itself, and Bates number 14.

Oh, first of all, actually, let's look at this page. This is Bates number nine. And it's -- who is -- who are the -- can you tell me what this page tells us about who prepared this document?

A I don't know that -- that you could conclude, necessarily, that this would tell you who prepared the document.

This is simply -- my understanding would be simply who is on the boards responsible for the content and who's submitting it to Congress.

Q So these are the Medicare trustees?

A I believe so.

Q And this is the trustees' report?

A Yes.

Q And these trustees, do you understand that -- are they appointed by federal statute?

A I think some of them are appointed by statute, as far as required to be on the board on different capacities. The administrator, I believe, is required to be the secretary of the board. But then there's two -- two -- you see them on there -- vacancies. Those are -- I believe those are

appointed by the President, the public trustees.

Q Okay. Let's look at page four.

Can you read, on -- and this is page four of the document, Bates number 16. Could you read the first paragraph under Summary of Projections, please?

A Yes. "Current-law projections indicate that Medicare still faces a substantial financial shortfall that needs to be addressed with further legislation. Such legislation should be enacted sooner rather than later to maximize the impact on beneficiaries" -- excuse me -- "minimize the impact on beneficiaries, providers, and taxpayers."

Q Do you agree with that statement?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know that it matters if I agree or not but it seems like it would be a good idea.

BY MS. WALLACE:

Q Meaning Congress makes the decision. Is that why you say it doesn't matter if you agree with it or not?

MR. ANTONUCCI: Objection.

THE WITNESS: Correct. It's not my decision to make.

BY MS. WALLACE:

Q Do you -- let's take a look at page three. Do you see the sentence that starts with -- yes. In the third -- let's see. I'm going to highlight it for you on this document so we can follow each along.

Do you see the highlighted text on the screen? Do you want me to zoom in?

A No. I can see it.

Q Okay. Will you read that paragraph for me, please?

A "If the health sector cannot transition to more efficient care delivery and if the provider reimbursement rates paid by commercial insurers continue to be based on the same negotiated process, then the availability, particularly with respect to physician services, and quality of healthcare received by Medicare beneficiaries, will, under current law, fall over time compared to that received by those with private health insurance."

Q Can you explain to me in your own words what that paragraph is intended to convey, to the best of your knowledge?

MR. ANTONUCCI: Objection, foundation.

THE WITNESS: I mean, it says what it

says. I mean, if the -- if the -- if the -- if the Medicare program healthcare providers are unable to become more efficient in delivering the care that they provide, then there will be a growing disparity between what Medicare beneficiaries receive and what commercial private health insurance beneficiaries receive.

BY MS. WALLACE:

Q And the quality of healthcare received by Medicare beneficiaries will, under current law, fall over time compared to that received by those with private health insurance? Meaning it's possible that the quality of healthcare received by Medicare beneficiaries could fall under the current law?

MR. ANTONUCCI: Objection.

THE WITNESS: It's possible.

BY MS. WALLACE:

Q Isn't -- is that -- isn't that one of the warnings being issued in this summary of the report?

A Yes, I would say so.

Q The trust -- the HI trust fund depletion that you talked about earlier on page five, will you read and explain to the best of your knowledge the first paragraph on page five that I just highlighted? And this is Bates number 17.

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. "The expenditure projections reflect the cost-reduction provisions required under current law but not the payment reductions and/or delays that would result from the HI trust fund depletion, which is projected in this report to occur in 2033. At that point, HI revenues are projected to cover 89 percent of incurred program costs."

What exactly did you want me to explain again?

BY MS. WALLACE:

Q Well, let's start with the last sentence. So when it says at the point that the HI trust fund has depleted, which is projected currently to occur in 2033, is it my understanding that at that point only -- the HI revenues are only sufficient to cover 89 percent of the estimated program costs, meaning there's -- there would be an unfunded 11 percent of Part A Medicare costs?

MR. ANTONUCCI: Objection.

THE WITNESS: The language is what it is, but that's the way I would interpret that. It would be a deficit.

BY MS. WALLACE:

Q And so what happens in the event of a deficit? There's -- I understand there's, like, a number of ways that Congress could decide to fix that. Could one of those ways be to decrease eligibility or offerings under the Medicare Part A program?

MR. ANTONUCCI: Objection.

THE WITNESS: I mean, it's -- you can speculate on different things that Congress at the time could elect to do. You either increase benefits, lower benefits, increase revenues, lower revenues -- well, you wouldn't lower revenues. You want to increase revenues, certainly. But there's this fixed number of variables with which they have to deal to address the issue.

BY MS. WALLACE:

Q So Congress will have to do something to avoid trust fund depletion of the HI trust fund. And what it does is unknown at this point in time; is that right?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know that I would agree with that statement completely. It's -- it's still -- these are projections. And

it's -- it's unknowable what's going to happen with respect to the economy, the practice of medicine, et cetera. I think the language in the report speaks for itself as far as what may or may not happen.

BY MS. WALLACE:

Q But if the current law stays as is, the whole purpose of this report is to warn that HI trust fund depletion will occur if no changes are made to the program or the law.

MR. ANTONUCCI: Objection.

THE WITNESS: I think that's a little bit of an oversimplification. But generally it is -- it is -- it is a bit of a cautionary note to explain that the financial viability of the HI trust fund is in danger under current law, assuming certain assumptions hold true, which are only assumptions. Nobody knows exactly what the future holds.

BY MS. WALLACE:

Q Let's take a look at page six. This is the Highlights section that you indicated you reviewed in preparation for your testimony.

A Yes.

Q All right. And will you read the

highlighted parts that I just highlighted on the screen for you, please, and the title, if you will? I'm sorry.

A Yes. It says "Short-range results. The estimated depletion date for the HI trust fund in 2033 is" --

Q It's "is"; right?

A Excuse me.

Q Of course.

A "The estimated depletion date for the HI trust fund is 2033" -- excuse me -- "three years earlier than projected last year, primarily due to the change in projected expenditures. HI expenditures through the short-range period are projected to be higher than last year's estimates."

Q And so does that mean that compared to last year, they actually moved up the completion date by three years due to increased short-range expenditures in the HI fund in the 2024 time period?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. That's the way I would read that.

BY MS. WALLACE:

Q Meaning the problem is getting worse rather than better from last year's report to this

year's report?
MR. ANTONUCCI: Objection.
THE WITNESS: I mean, it means that they've had to move up the -- the depletion dates by three years. That's what it means.
BY MS. WALLACE:
Q Because the H fund trust deficit has gotten predictably worse over the last fiscal year?
MR. ANTONUCCI: Objection.
BY MS. WALLACE:
Q Worse than anticipated. Is that a better way of saying it?
MR. ANTONUCCI: Same objection.
THE WITNESS: No. Wait. I refrain from -- hesitate to say better, worse, good, or bad. It's simply a matter of fact that the expenditures increased in a short period of time more quickly than they thought and so they had to move up by three years.
BY MS. WALLACE:
Q Do you know, based on your position, why those expenditures increased greater than expected?
MR. ANTONUCCI: Objection.
THE WITNESS: I do not. I'm not intricately involved in the ex rel side of --

of the demographic drivers.

BY MS. WALLACE:

Q All right. We are going to take a look at page 27 of the report, which is Bates stamp number 39.

All right. Have you -- do you see the chart on the screen there? This is Figure II.E1. And it's entitled HI Trust Fund Balance at Beginning of Year as a Percentage of Annual Expenditures.

A Yes, I can see it.

Q Is this the solvency chart for Medicare Part A?

MR. ANTONUCCI: Objection.

THE WITNESS: I mean, I don't know if you want to call it the solvency chart. It's just illustrating the trust fund balance as a percentage of expenditures. It is what it is.

BY MS. WALLACE:

Q Okay. And what does that -- what does that line that starts "declining in approximately 2007 all the way down to zero in 2033," what does that line indicate to us?

MR. ANTONUCCI: Objection.

THE WITNESS: So I -- I believe it indicates the balance of the HI trust fund over

time, both historically and where it's currently being projected to end.

BY MS. WALLACE:

Q And does this chart show the trust fund ratio declining to zero around 2033 under intermediate assumptions?

MR. ANTONUCCI: Objection.

THE WITNESS: I'm sorry. Could you repeat the question?

BY MS. WALLACE:

Q Sure. Does this chart show the trust fund ratio declining to zero around 2033 under intermediate assumptions?

MR. ANTONUCCI: Same objection.

THE WITNESS: In my reading, what's in the chart and the narrative below it? I would say yes.

BY MS. WALLACE:

Q All right. And in the narrative below it, can you read the sentence that I highlighted, please?

A Yes. It says "However, under the high-cost assumptions, asset depletion would occur in 2029."

Q And so that depletion down to zero -- to a

zero trust fund balance, under high-cost assumptions could occur as early as 2029, three years from where we are now? Is that true?

MR. ANTONUCCI: Objection.

THE WITNESS: That is what that sentence says. But I will also add that the sentence at the beginning of the paragraph points out "There is substantial uncertainty in the economic, demographic, and healthcare projection factors for the HI trust fund expenditures and revenues."

So it's very difficult to say with a degree of certainty what will or will not happen, necessarily.

BY MS. WALLACE:

Q But these are the best actuarial projections of CMS; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I was not involved in putting this together so I can't speculate as to whether or not it was the best effort or not. I like to hope so.

BY MS. WALLACE:

Q Good. These are the actu -- I'm sorry, that word -- actuarial projections of CMS; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Again, I was not involved in compiling a report so I don't have direct knowledge of the degree to which CMS actuaries put this together versus others that may work as part of the board of trustees.

BY MS. WALLACE:

Q The report states that "After depletion, Medicare can only pay benefits to the extent allowed by ongoing revenues."

Do you agree with that statement?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't think I have a foundation to either agree or disagree with it.

BY MS. WALLACE:

Q Okay. Based on your understanding, if assets are depleted, one of the possibilities is that the full schedule of benefits would not be able to be paid under the program. Would you agree with that sentence?

MR. ANTONUCCI: Objection.

THE WITNESS: I would have to say I guess that's possible.

BY MS. WALLACE:

Q Let's look at another chart, if you don't

mind. Let's look at page 71, which is also Bates stamp number 83. This is -- I'll highlight it. The figure on the screen is III.B5. And it says -- oops. That's okay. Now, the whole -- the whole page is now highlighted. Figure III.B5, Present Value of Cumulative HI Taxes Less Expenditures through Year Shown, Evaluated Under Current-Law Tax Rates and Legislated Expenditures.

Can you tell me what the line on the screen is depicting in the chart?

MR. ANTONUCCI: Objection.

THE WITNESS: Well, I'm not an actuary. But based on, by quickly looking at this, it's indicating the present value of the trust fund taxes, minus expenditures out into the future starts to run into a negative value around 2033, I would say.

BY MS. WALLACE:

Q And if you look down below, the chart reflects -- if you agree with me -- a long-term unfunded obligation of approximately $3.1 trillion. And I'm highlighting that sentence.

A It simply says that, "As noted previously, over the full 75-year period, the fund has a projected present value unfunded obligation of 3.1

trillion." No more, no less.

Q So if no changes are made to the program and the current law is maintained, in the long-term, viewed as the "75 period" that was analyzed by the actuaries, the gap in funding would reach $3.1 trillion. Am I reading that correctly?

MR. ANTONUCCI: Objection.

THE WITNESS: I think that's how I would read it.

BY MS. WALLACE:

Q Would you agree with me that the HI fund potentially has a substantial financial burden facing Congress and the public?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say that the -- the HI trust fund faces several challenges and headwinds with respect to its financial solvency going forward.

BY MS. WALLACE:

Q Let's look at one more chart on page 72. This is Bates number 84. And I'll highlight the title. This is Figure III.B6, Comparison of HI Cost and Income Rate Projections: Current Versus Prior Years.

And below, it states in Figure III.B6

indicate -- "As Figure III.B6 indicates, the intermediate HI cost rate projections in this year's report are higher than in the 2024 report and the projected income rates in this report are fairly similar to those in the 2024 report. The higher cost projections are primarily a result of higher-than-anticipated 2024 expenditures and higher projected spending for inpatient hospital and hospice services. These impacts are partially offset by lower payment updates."

Do you see that? I'll highlight it just because I read it.

Do you see that text?

A Yes. Yes.

Q Would you agree with me that this chart is showing that the HI costs are exceeding the income for the foreseeable future?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say yes.

BY MS. WALLACE:

Q And what's the concern there, based on your accounting knowledge and background?

MR. ANTONUCCI: Objection.

THE WITNESS: Well, I think any time that the income revenues are being outpaced by the

expenditures, it becomes unsustainable for the long term.

BY MS. WALLACE:

Q And unsustainable in the sense that the changes must be made in order to sustain the program?

A I would say yes, in order to maintain the financial -- the financial viability in the long term, correct, something has to change.

MR. ANTONUCCI: Excuse me. I meant to object to the last question.

BY MS. WALLACE:

Q Can you tell me, and it's contained within the document, what a Medicare funding warning is. And I'd be happy to show it to you, if you'd like.

A I think it would be helpful if you refresh my memory. I think I do know what it is, but --

Q Okay. Let's --

A -- it would be helpful if you could go to it.

Q Yeah. Absolutely. There's actually a Definitions section so I will take you right to that. There's a glossary on the document that takes us to the definition of a Medicare funding warning. And I'll let you read it. All right. And I'm going

to -- this is on page 245 of the trustees' report and the Bates number ends with 257. And I will highlight the text on the screen.

Will you read the Medicare funding warning definition, please?

A Yes.

Q I was just going to say, out loud, if you don't mind.

A Yeah. Gotcha. "Medicare funding warning, a warning triggered when a determination of excess general revenue Medicare funding has occurred in two consecutive years. Such a warning requires the President to submit to Congress within 15 days after the date of the budget submission for the succeeding year, proposed legislation to respond to the warning. The law also requires Congress to consider the legislation proposed in response to Medicare Funding Warnings on an expedited basis. See also excess general revenue Medicare funding."

Q Do you know if this report indicates that we are currently in a Medicare funding warning has been issued?

MR. ANTONUCCI: Objection.

THE WITNESS: As I recall, in reviewing the highlights and the conclusory summary, I

believe it did result in a funding -- or I think it may mention that this is -- it's not the first funding warning that's been generated. There's been many funding warnings generated over the last few years.

BY MS. WALLACE:

Q Yes. That's right.

And so I am turning your attention to page seven, which is Bates stamp numbers ending in 19. And I wanted to point your attention to the paragraph I'm highlighting on the screen.

Here we go.

Will you read and/or summarize the text that's highlighted on the screen, please?

MR. ANTONUCCI: Objection.

THE WITNESS: So out loud, it goes, "As required by law, the trustees are issuing a determination of projected excess general revenue Medicare funding in this report because the difference between Medicare's total expenditures and its dedicated financing sources is projected to exceed 45 percent of expenditures within seven years. Since this determination was made last year as well, this year's determination triggers a Medicare

funding warning, which requires the following: The President to submit to Congress proposed legislation to respond to the warning within 15 days after the fiscal year 2027 budget submission; and Congress to consider the legislation on an expedited basis. This is the ninth consecutive year that a determination of excess general revenue Medicare funding has been issued and the eighth consecutive year that a Medicare funding warning has been issued."

BY MS. WALLACE:

Q Based on your understanding of the definition of the Medicare funding warning and also the knowledge that this is the ninth consecutive year that a determination of an excess general revenue Medicare funding has been issued, would you expect that in the near future, Congress will need to make some changes to current law to ensure Medicare sustainability in the future?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say yes, I would agree with that. I think that's what the language here is projecting.

BY MS. WALLACE:

Q Let's take a look at page five. I'm highlighting a sentence on the bottom paragraph. Would you read that out loud, please?

A "Medicare's actual future costs are highly uncertain for reasons apart from the inherent challenges in projecting healthcare cost growth over time."

Q Do you, based on your career and role, would you be able to further explain why Medicare's actual future costs are so highly uncertain?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't think I could speculate.

BY MS. WALLACE:

Q That's not a part of your role in finance?

A Correct. I don't work in our office of the actuaries, so projecting the demographics and the economic variables involved in making that kind of projection, it's not -- not in my bailiwick.

Q But based on your role, you don't have any reason to disagree with the text that "Medicare's actual future costs are highly uncertain"?

MR. ANTONUCCI: Objection.

THE WITNESS: I have -- I have no reason to doubt the plain language of what's in the

trustees' report here.

BY MS. WALLACE:

Q Okay.

A That's all I can say.

Q Thank you.

We're going to take a look at page 31 of the document. And this is corresponding to Bates number ending in 43. The title of this section is Addressing the Long-Range Financial Imbalance. And it states that "Lawmakers have many options to address the long-range financial imbalance and keep the HI trust fund solvent throughout the 75-year projection period. Two potential approaches, with either immediate or gradual implementation, illustrate the magnitude of the changes needed to eliminate the deficit. One, the standard 2.90 percent payroll tax could be immediately increased by the amount of the actuarial deficit to 3.32 percent, or" -- and this is the part I wanted to highlight -- "expenditures could be reduced immediately by 9 percent."

When they say "reduced expenditures," would -- could that involve paying providers less, nearing eligibility, reducing covered services? What is your understanding, based on your career at

CMS, of what reducing expenditures by 9 percent could include?

MR. ANTONUCCI: Objection.

THE WITNESS: I mean, based on my experience, there's the -- you know, the reducing expenditures and benefit payouts is -- I mean, it's -- it's pretty straightforward. It is what it is. I mean, we've been under different scenarios where we've had to apply sequestration, the sequestration of benefit payment dollars, for example, in different periods of time as required by law. I think we're still under a current position where we sequestered 2 percent of benefit payments just because of appropriation law requirements.

So that's the thing I'm most familiar with is where we just simply cut back benefit payments by a fixed percentage as dictated by statute.

BY MS. WALLACE:

Q And -- and I'm not super familiar with -- I'll have to apologize -- with sequestration. Are you saying that would cut it off from paying the provider, that would cut off the access to that benefit? Help me understand that.

A Right. It doesn't cut off access to the benefit. It just simply reduces the amount that's being paid to the provider by a percentage. Like, the current sequestration we're under is a 2 percent sequestration.

Q My understanding of medical provider reimbursement is that Medicare already pays the lowest rates to their providers in the country. Is that also your understanding?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't have a -- I don't think I'm in a position to confirm or deny that we pay the lowest rates across the country. I have heard providers complain that Medicare pays the lowest rates across the country but I don't have any statistical or data to back that up, necessarily. So it's all anecdotal.

BY MS. WALLACE:

Q Yes. Can we agree that provider reimbursement for Medicare is among the lowest in the country?

MR. ANTONUCCI: Objection.

THE WITNESS: Again, I don't think I can posit to agree to that or not. I think that would -- the answer to that question is going

to vary by which parts of the country you're in and locality and different circumstances. So it's hard to generalize.

BY MS. WALLACE:

Q Providers accepting Medicare payment is optional. It's not mandatory by statute. Is that true?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. My understanding, a provider does not have to sign up and participate in the Medicare program. It's their choice.

BY MS. WALLACE:

Q And providers can either enroll, partially enroll, or not enroll at all in taking Medicare coverage?

MR. ANTONUCCI: Objection.

THE WITNESS: No. Based on my experience, the provider has a choice to enroll or not enroll. If you agree to participate in the Medicare program, then you agree to accept payment on behalf of the beneficiaries that you choose to provide services to.

BY MS. WALLACE:

Q Is one of the risks of sequestration, that

a provider could stop accepting Medicare rates because they are too low to compensate them for their work?

MR. ANTONUCCI: Objection.

THE WITNESS: I mean, I would have to say, I mean, it's one possibility one could think of among many.

BY MS. WALLACE:

Q The sentence on the screen, "Expenditures could be reduced immediately by 9 percent," you testified that you have experience with sequestration, which is, you know, reducing the amount providers are compensated even further under the Medicare program. Could another example of reduced expenditures be narrowing a recipient's eligibility for a Medicare service?

MR. ANTONUCCI: Objection.

THE WITNESS: I'd say, you know, many different things are possible, I guess, based on whatever Congress would like to do, necessarily.

In my experience over these many years, I have not encountered a situation where we actually started to limit eligibility beyond what's in the current statute. As I had said

before, the trend has been to actually increase the scope of eligibility for beneficiaries under different circumstances.

BY MS. WALLACE:

Q And so, based on your experience, you haven't seen a narrowing of eligibility, but that would be a potential reduced expenditure option that would be available to Congress; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Again, I hate to speculate too much on what Congress's options are, necessarily.

BY MS. WALLACE:

Q Would -- I understand.

Would reducing covered services also be a way to reduce expenditures?

MR. ANTONUCCI: Objection.

THE WITNESS: Again, there's many possible variables that Congress could choose to -- choose to elect.

BY MS. WALLACE:

Q And that's one of them?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say yes, it's a possibility.

BY MS. WALLACE:

Q If providers are paid less under Medicare, could that decrease access or quality of care to patients that are in the Medicare system?

MR. ANTONUCCI: Objection.

THE WITNESS: It's hard for me to speculate on what possibly could or could not happen to the quality of care should their reimbursement rates go down.

I'm not privy to any data or analyses or anything that would confirm that trend or not, necessarily.

BY MS. WALLACE:

Q And the sentence that we read earlier in your deposition about "The quality of care received by Medicare beneficiaries will, under current law, fall over time compared to that received by those with private health insurance," would it seem to you that that is a possibility that the trustees are considering in this report?

MR. ANTONUCCI: Objection.

THE WITNESS: I would have to say yes, just based on the plain language that's in the report. That seems to be what they're saying.

BY MS. WALLACE:

Q Is there a possibility, under the HI fund, which is having solvency issues, is there a possibility that costs could be shifted to beneficiaries through premiums under that program?

MR. ANTONUCCI: Objection.

THE WITNESS: Again, that's one of the -- I suppose that's one of the options that Congress could consider. I just don't know.

BY MS. WALLACE:

Q Okay. And so --

MS. WALLACE: Yes? You -- is it time for a break?

MR. ANTONUCCI: We're coming up on -- actually, I think we're over the hour. Do you mind?

MS. WALLACE: I'm sorry. Not at all. Not at all.

MR. ANTONUCCI: Thanks.

VIDEOGRAPHER: The time is now 12:03. We're going off the video record. This completes media unit number three.

(A luncheon recess is had from 12:03 p.m. to 1:05 p.m.)

VIDEOGRAPHER: The time is now 1:05. We're back on the video record. This begins

media unit number four.

You may proceed.

BY MS. WALLACE:

Q All right, Mr. Young. We are back on the record after a lunch break.

Did you talk to any of your counsel over the lunch break?

A No.

Q Okay. Other than when Jill called you and asked if you were coming?

A Correct. Sorry. I mean --

Q No. No. No. It's totally fine.

A Yeah. I didn't -- I didn't talk to anybody over lunch right there. It's deserted here, so...

Q Got it. Okay. Great.

All right. We left off talking about -- we had had some conversations about medical providers and what they're paid under Medicare. Do you remember that conversation between the two of us?

A Yes.

Q All right. And we were looking at the trustee's document and I'm going to share that document again for you.

MS. WALLACE: Please let the record reflect that this is deposition Exhibit 6 that I'm showing the witness, the trustees' report.

BY MS. WALLACE:

Q Mr. Young, I wanted to direct your attention -- there's a section in the back of the report, and it's entitled -- it's on the screen before you, highlighted. It's entitled Illustrative Alternative Projections. Was this section a part of the report that you reviewed?

A No. I didn't look at this.

Q Okay. You didn't get to this section of the report?

A Correct.

Q All right. I am going to -- do you recall the testimony that you gave earlier? Neither you and I -- neither you nor I were quite sure what percentage reimbursement a Medicare provider received comparable to/from an insured reimbursement payer?

A Correct. Yes. Yes.

Q All right. So I'll ask you to read the sentence on the screen there and then I'm going to scroll you to a paragraph that talks about that. So the first paragraph you're reading is, for the

record, on page 194 of the report, Bates number ending with 206.

A Can you make it a little bigger, please?

Q Yes, sir. Oops. That might have been too big. There.

A That's too big. There you go.

Q Is that -- okay.

A So it reads "As discussed in the introduction, there is substantial uncertainty regarding the adequacy of future Medicare payment rates under current law. This section illustrates the higher Medicare expenditures that would result if certain statutory payment provisions were not fully implemented in all future years."

Q All right. And then the report goes on. I'm going to scroll down. Can you read this paragraph, please?

A Yes. "Over time, unless providers could alter their use of inputs to reduce their cost per service correspondingly, Medicare's payments for health services would fall increasingly below providers' costs. Providers could not sustain continuing negative margins and would have to withdraw from serving Medicare beneficiaries or (if total facility margins remained positive) shift

substantial portions of Medicare costs to their non-Medicare, non-Medicaid payers."

Q And so what is this -- based on your read, what is this identifying as a potential issue in the future related to medical Medicare provider rates?

MR. ANTONUCCI: Object to form and foundation.

THE WITNESS: So overall, I would say it's -- I mean, the language just kind of speaks for itself, I think. But the trend is that if Medicare payment rates don't change from their current format, that they're going to be -- fall below the providers' actual cost to provide the care to put negative pressure on their ability to serve Medicare beneficiaries.

BY MS. WALLACE:

Q All right. And let's scroll down one more page. For the record, this is page 196 with Bates number ending in 208.

Will you read the highlighted sections in this section, please?

A Yes. "Absent a change in the delivery system or level of update by subsequent legislation, the trustees expect access to Medicare-participating physicians to become a significant issue in the

long-term.

"A comparison with private rates provides some context. Medicare payment levels for physician services were roughly 82 percent of private health insurance rates in 2011. Medicare payment levels dropped to 71 percent of private rates by 2023 and are estimated to continue to fall to 64 percent of private rates by 2025. If Medicare rates continue to follow the prescribed current-law updates and private rates increase with Medicare economics" -- excuse me -- "with Medicare economic index growth, then the Medicare rates will fall to 23 percent of private rates by the end of the 75-year projection period."

Q And so does that give us a better understanding of how Medicare providers are being compensated compared to private health insurance rates?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say it provided some specific information, yes, with respect to the current level of reimbursement rates.

BY MS. WALLACE:

Q And so from 2023 to 2025, Medicare providers were paid 71 percent of private rates in

2023 and then it dropped to 64 percent just in two years in 2025; is that correct?

A That's what the language says.

Q And unless physicians do something to increase their costs, the projections of the actuaries in this report have indicated that it, in the long term, it could -- their reimbursement rate compared to private payers could fall to just 23 percent; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I just go by the plain language as far as what it says. If they continue to follow prescribed current law updates and private rates increase with Medicare economic index growth, then you're correct, the Medicare rates will fall 23 percent of the private rates by the end of the 75-year period.

BY MS. WALLACE:

Q And it looks like the concern that's being identified here in the plain language is that there's a possibility acknowledged by the trustees that access to Medicare-participating physicians may become a significant issue in the long-term. And one of those reasons has to do with the rates that

they are paid and the projections thereof. Is that a fair conclusion from what you've read?

MR. ANTONUCCI: Objection.

THE WITNESS: I think reading it in a general way, yes, that's a fair conclusion.

BY MS. WALLACE:

Q And we talked earlier. There's nothing that requires these providers to stay in the Medicare system. It's a -- it's voluntary participation; correct?

MR. ANTONUCCI: Object to the form and foundation.

THE WITNESS: Correct, under current law. The united -- we, the federal government, do not require or compel a physician to participate in the program. It's a voluntary choice.

BY MS. WALLACE:

Q And so provider participation can -- and beneficiary access to that care can depend on payment adequacy in its system -- in the current system?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say -- I would say yes. I mean, it can depend upon -- that's one

variable a physician undoubtedly would consider, I would imagine.

BY MS. WALLACE:

Q Okay. Do you recall us talking earlier about deductibles and premiums that may be paid under the Part A, Part B, Part D Medicare programs?

A Yes.

Q I'm going to turn your attention to the report that you provided on page 199. Did you -- I'm showing --

MS. WALLACE: Please let the record reflect I'm showing the witness page 199, Bates number 211.

BY MS. WALLACE:

Q Did you have a chance to -- in the report that you cited -- review this section entitled Average Medicare Expenditures Per Beneficiary?

A No, I did not. As I said before, I did not get past the -- the highlights and introductory section.

Q Okay. I'm going to scroll down two pages to page 201. 201 includes a table that lists the HI Fund and SMI Fund Average Incurred Per Beneficiary Costs.

Do you have any reason -- I understand

that this isn't something that you compiled, but do you have any reason to disagree with the costs that are identified in this section of the report?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say no. I have no -- personally have no reason to doubt the validity of the numbers.

BY MS. WALLACE:

Q And these should be accurate based upon your understanding of who prepared this report and who it was prepared for? This should be well-done CMS documentation of the beneficiary costs. Would you agree with that?

MR. ANTONUCCI: Objection.

THE WITNESS: Again, I did not prepare the report and don't know who did it, necessarily. But I have no reason to doubt that they didn't put forward their best effort and that it's reliable.

BY MS. WALLACE:

Q Okay. And you would make the same assumption -- I'm just going to scroll down two more pages. There's a section Medicare Cost-Sharing and Premium Amounts. And there's another chart that includes the HI Cost-Sharing and Premium Amounts.

Likewise, do you have any reason to doubt or question the reliability of this information on page 203?

MR. ANTONUCCI: Same objection.

THE WITNESS: No.

BY MS. WALLACE:

Q And so those charts indicate that there are deductibles applicable to Part A that have increased over time. There, additionally, are coinsurance amounts over and above the deductible amounts in these -- in the chart that I'm showing on the screen. Would you agree?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes.

BY MS. WALLACE:

Q There are also monthly premiums identified. And all of the above continues into the present, 2034 as intermediate estimates. Do you agree with that?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes.

BY MS. WALLACE:

Q Okay. I wanted to finish up a couple questions on the HI fund and then I want to talk briefly about the SMI fund.

I wanted to show you page 26 of this report. And I'm going to ask you to read the bottom highlighted text, if you would.

A It reads "If assets were depleted, Medicare could pay health plans and providers of Part A services only to the extent allowed by ongoing tax revenues - and these revenues would be inadequate to fully cover costs. Beneficiary access to healthcare services could be rapidly reduced. To date, Congress has never allowed the title" -- excuse me -- "allowed the HI trust fund to become depleted."

Q Okay. And my question is: We talked earlier about that 89 percent figure. Do you remember that with respect to the depletion date?

A I do.

Q Is this -- when it says "beneficiary to access healthcare services could become rapidly reduced," is that related to the 89 percent figure?

MR. ANTONUCCI: Objection.

THE WITNESS: Well, I -- it's related in the respect that I believe the context was that by 2033, the HI trust fund would only be able to reimburse 89 percent of the expected benefits at the time. So, yes.

BY MS. WALLACE:

Q And it -- thank you.

And it looks like the conclusion in this sentence is that as a result, beneficiary access, meaning patient access to healthcare services could be rapidly reduced.

That's what the trustees are concerned about with respect to the HI trust fund depletion.

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. I think so. But they go on to add that Congress has never allowed the HI trust fund to become depleted.

BY MS. WALLACE:

Q Yes. Which means, as we've talked about earlier, something has to be done by Congress to address this depletion deficit and whether -- what we don't know yet is whether that change that is needed will have an effect on beneficiaries paying more premiums, whether it will be a reduction in provider rates, or whether it will be some type of additional taxpayer contribution to help the HI trust fund remain afloat. Is that true?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say it's true that we don't know all the variables that Congress

could play with to try and address the potential deficit.

BY MS. WALLACE:

Q Would you agree with me that addressing that deficit identified in the trustees' report will require congressional action? In other words, it cannot be resolved administratively within CMS without that occurring?

MR. ANTONUCCI: Objection.

THE WITNESS: I couldn't agree with that simply because we don't know what the future holds.

I know that these are projections and some of them are dire, but we don't have a crystal ball with respect to the -- how the economy may perform, how payrolls' tax revenues may change or not, how efficient healthcare providers may or may not become. So, again, it's hard to say conclusive -- with conclusivity what you're asking me to agree to.

BY MS. WALLACE:

Q Yes. I think the point that you're making -- tell me if I understand -- is that we don't -- let me ask it a different way.

If the projections continue as is

indicated in the trustees' report, assuming the economy continues to perform at expected rates, this deficit will not be able to be addressed administratively. It would require congressional action if things remain the same as projected in the trustee report?

MR. ANTONUCCI: Objection.

THE WITNESS: Again, it's -- I mean, generally, I could agree with that statement.

BY MS. WALLACE:

Q Okay. Last question on the HI trust fund. I know you're excited.

Okay. This paragraph here, which I will highlight for you -- and I'll read it for you. "The trustees project that HI tax income and other non-interest income will fall short of HI incurred expenditures beginning in 2027," meaning it will start to be upside down in 2027. "The HI trust fund does not meet either the trustees' test of short-range financial adequacy or their test of long-range close actuarial balance."

What does that sentence mean to you from the trustees' perspective, please?

MR. ANTONUCCI: Objection.

THE WITNESS: Well, I really don't know if

I can say conclusively simply because I'm -- again, I'm not in the actuary's office or did not prepare this report. So the definitions of their short-range financial adequacy, and what that means specifically, as well as their long-range -- excuse me -- actuarial balance, I'm not familiar with them enough to be able to conclusively say one way or the other.

BY MS. WALLACE:

Q Okay. Can you tell me the -- your understanding of the first sentence, then?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. I read that to mean that the -- in 2027, the expenditures will outpace the income being generated by tax income and non-interest income in the trust fund.

BY MS. WALLACE:

Q Okay. And that's just -- is that -- that's next year?

A That is next year.

Q And so, again, we would expect some type of immediate action to occur from Congress in order to address some of these concerns and deficiencies that have been noted in the trustees' report?

MR. ANTONUCCI: Objection.

THE WITNESS: Were you asking me a question? I'm sorry.

BY MS. WALLACE:

Q Yes, sir. Would you agree with that?

MR. ANTONUCCI: Same objection.

THE WITNESS: I would say that the trustees' report is prompting Congress, putting them on notice that there's an issue to be addressed.

BY MS. WALLACE:

Q In the short-term?

A In the short-term.

MR. ANTONUCCI: Objection.

THE WITNESS: Yes.

BY MS. WALLACE:

Q Thank you.

Okay. I want to talk about -- we've talked a lot about the concerns about the HI fund which is connected to Part A Medicare. Let's switch gears and talk about the SMI funding which funds parts of Part B Medicare and Part D Medicare.

And I wanted to first ask you, do you -- in your career at CMS, do you have an understanding on which expenditures are highest for CMS if you had

to rank Part A, Part B, Part D --

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q -- just to give us some scale of the programs?

MR. ANTONUCCI: Same objection.

THE WITNESS: Just giving you a ballpark, I mean, the -- on the Part A and B side, we pay out over -- I think the most current year available is over $450 billion in benefits. But the higher percentage of that would be on the hospital insurance side, the Part A side, than on the Part B side.

BY MS. WALLACE:

Q And Part D would be a much smaller piece?

MR. ANTONUCCI: Objection.

THE WITNESS: That, I can't recall off the top of my head. It's smaller than the Part A side, yes. But I can't recall the exact percentages as a breakout. The Part A side is the bigger driver of the three.

BY MS. WALLACE:

Q I'm going to show you page 22 of the trustees' report. And I think it might give us -- I'm sorry. Excuse me, 10. It's Bates number 22.

This chart here, does this give us the total -- and I'll highlight it for you -- the total expenditures for each program? So Part A, 422.5 billion; Part B, 553.4 billion; Part D, 146.2 billion; for a total of 1.1 trillion?

MR. ANTONUCCI: Objection.

THE WITNESS: Yeah. Just add the 422 and the 563 [sic] and the 146. That aggregates, so you've got -- you also have -- it includes Part C health plans in here as well, so that's a little -- that's distorting a little bit the total expenditure numbers. I wasn't including Part C.

What I had said earlier, that the bulk of the expenditures on the Part A side, relative to Part B, that's still true. But if you -- you have -- you have to parse this out a little bit to get to that.

BY MS. WALLACE:

Q Is it your testimony that Part C is rolled into these numbers, even though it's not on the chart?

A It's on the chart. It says "Private health plans, Part C."

Q Oh, here.

A Right there. See?
Q Yeah.
A Exactly.
Q I do see that. I do see it. I gotcha.
Okay. So -- and that's why the numbers are higher than you stated earlier?
A Correct.
Q Will you say that answer one more time? I'm sorry.
A Yes. Correct.
Q Okay. Thank you.
MR. ANTONUCCI: Can we go off the record, please?
MS. WALLACE: Sure.
VIDEOGRAPHER: The time is now 1:32. We're going off the video record.
(Off the record.)
VIDEOGRAPHER: The time is now 1:38. We're back on the video record.
You may proceed.
BY MS. WALLACE:
Q Mr. Young, we were talking about SMI funding of Parts B and D. And we were looking at the chart on the screen, Table II.B1, which is page 10 of the trustees' document. And we were

confirming that it does appear to include Part C benefits. Do you recall that from before the break?

A Yes.

Q Thank you. Now, I want to talk specifically about -- and I was trying to understand the scale of Part B, and I think we've -- we've concluded that based on how it's categorized in the trustee report, Part B looks -- if you include -- if you include Part C, it looks like it's a little bit larger of a total expenditure than Part A. But I think if you don't include Part C, I think the numbers that you gave me earlier in your testimony are accurate. Part A is a little bit higher. Is that a fair representation?

MR. ANTONUCCI: Objection.

VIDEOGRAPHER: Yeah. Mr. Young -- I don't think we heard a word he just said.

All right. I'm going to go back off. One moment, please.

The time is 1:39. We're going off the video record.

(Off the record.)

VIDEOGRAPHER: The time is now 1:44. We're back on the video record. You may proceed.

BY MS. WALLACE:

Q Mr. Young, before the audio issues, do you recall the question that I asked you or would you like for me to rephrase?

A Please. Please rephrase.

Q Okay. No problem.

We were just trying to -- I was -- for the last several minutes, I've just been trying to get an understanding of the scale of the two different programs, Part A versus Part B. Will you answer that for me with or without the chart?

A Oh. The scale of the Part A versus the Part B program? I mean, the -- the -- again, the -- off the top of my head, we -- more recent benefit payouts were around somewhere over $450 billion. And the larger percentage of that would be on the Part A side than on the Part B side, not including this -- that number does not include the Part C health plan.

Q Understood.

A Yeah.

Q Okay. Thank you.

Now, we talked about, at length, about the funding source of Part A which is the HI trust fund which relies on payroll taxes and/or premiums for

people that didn't pay payroll taxes for the necessary requisite period of time; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes.

BY MS. WALLACE:

Q All right. And so we're moving to talk about the SMI trust fund, which sources Part B and Part D. And I believe you testified earlier that approximately 25 percent of that funding is through beneficiary premiums; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. It's my understanding the premium's set so that annually it's expected to cover 25 percent of the annual expenditures.

BY MS. WALLACE:

Q All right. And the SMI fund does not -- is not in the same core financial outlook and position as the HI fund based on the trustee report. Do you agree with that, generally?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say it's generally not in the same position simply because of the formula for the way the SMI trust fund is funded. Specifically, a portion of it's based

on premium receipts with the balance being on general tax revenue receipts. So as the -- whatever delta there is from the premium collections, we simply draw more from the other funding streams needing to make it whole as far as, you know, general income -- income taxes from people.

BY MS. WALLACE:

Q Yes. And that's precisely what the trustee report says. Directing your attention to page 36 of the document, which is also Bates 48, and in the very first paragraph, it states "Financing for the SMI trust fund is adequate because beneficiary premiums and government contributions for both Part B and Part D are established annually to cover the expected costs for the upcoming year."

And the chart on the screen demonstrates that. Do you agree with that -- the statement I just read?

MR. ANTONUCCI: Objection.

THE WITNESS: I agree with what the chart represents and the language in the -- in the trust -- the trust fund summary -- the trustees' report. Excuse me.

BY MS. WALLACE:

Q And so what the chart in front of you shows is that starting since the 1960s, as the expenditures for the SMI fund for Part B and D have increased, so have premiums almost exactly on the same curve to cover increases in expenditures for Part B and Part D. Do you agree?

MR. ANTONUCCI: Objection.

THE WITNESS: Well, again, I didn't make the report. I would -- I will just say, just looking at the graph, it looks -- it looks to be like the -- an ascending line such that the premiums and tax revenues are increasing to cover the increasing benefit costs over time.

BY MS. WALLACE:

Q The report states on page seven that the current Part B premium for 2025 is approximately $185 per month. Do you remember seeing that? Page seven is in the Summary section of the document. I'm happy to take you to it.

A No. I remember that. That's what the premium is.

Q All right. And that would be, in last fiscal year, 2025, that would be about $2,200 per year that each enrollee of Part B was paying for premiums. Is that true?

A You cut out in your question. If you could please ask again, Whitney.

Q No problem.

In 2025, the total amount of premiums paid by someone electing Part B Medicare would be 2,200 per year annually if you extrapolated the 185 per month for a calendar year.

A That sounds about right, but it's not -- it's not completely true because of the IRMAA test --

Q Yes.

A -- which is tied to income. So higher -- higher -- beneficiaries with higher incomes are going to pay higher premiums, if you recall.

Q Yes.

A Right?

Q So that's the base amount that --

A Correct.

Q The very -- the minimum amount someone would pay for premiums. If you made more, you pay more?

A Correct.

Q All right. And then also under that program, the chart we looked at earlier, there are deductibles and co-insurance also applicable to SPI

fund in Part B and D payments?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. There are deductibles and copays on some services on Part B and Part D.

As I had said earlier, not every service -- it depends on the service type -- has a copay.

BY MS. WALLACE:

Q The report reflects that premiums have increased over time and are expected to continue to increase into the future. Do you agree with that?

MR. ANTONUCCI: Objection.

THE WITNESS: All I can say is from based on the graph, that seems to be the implication but I didn't -- that's all I could confirm for you, I think.

BY MS. WALLACE:

Q And premiums are -- and growing premiums are a necessary component of what funds Part B and Part D. Do you agree with that?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say the premiums are, by law, required because they are -- they are statutorily required to cover a, again,

approximately 25 percent of the expected benefits, I believe.

BY MS. WALLACE:

Q Enrollment in Part B and Part D, you testified earlier, is voluntary; right?

A Yes.

Q And so if a recipient cannot afford to pay the premiums associated with their coverage, they lose coverage. Is that true?

A Yes, it's possible. They cannot -- if they cannot afford to pay their premiums -- as I mentioned earlier, for those people that are financially disadvantaged, and if you may be entitled to both Medicare and Medicaid, then Medicaid will actually help pay your premiums for the Medicare program.

Q For Medicare, there's no guarantee that an individual will remain enrolled in the Part B and D program?

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q Do you agree with that?

MR. ANTONUCCI: Same objection.

THE WITNESS: Yes.

BY MS. WALLACE:

Q The other tax contributions that source the SMI fund, the 75 percent of the funding, they -- those funds ultimately come from taxpayers to the government. Is that true?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say yes, they come from general tax revenues' interest.

BY MS. WALLACE:

Q The future Part B premiums that are identified on the chart, those will change, to the best of your knowledge, based on what factors?

MR. ANTONUCCI: Objection.

THE WITNESS: Well, again, I don't work in the actuary's office at CMS so it -- it's -- it's not worth me speculating everything that they -- they -- they fact -- used to factor in what the premiums should be, necessarily.

What I've said before is based on my understanding what's in the statute as far as the requirement that it be able to cover at least 25 percent of the expected benefit payments.

BY MS. WALLACE:

Q Your designation indicates that you are testifying with regard to the SMI fund in

addition -- and also to premiums associated with that fund --

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q -- but not to future premiums? I'm just trying to understand the scope of your testimony.

MR. ANTONUCCI: Same objection.

THE WITNESS: I'm simply saying that I don't -- I don't have firsthand knowledge of the premium calculation. I'm not an actuary, necessarily. I can confirm for you what is in the statute, which I've done, as far as the composition of 75/25 percent.

BY MS. WALLACE:

Q And that's the extent of your knowledge in that area?

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q Basically, like, past premiums, not future premiums?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know that I have anything else to add.

BY MS. WALLACE:

Q Okay. The -- your knowledge is how Part B

and D are funded; is that correct? Based on your designation, it's how it's funded but not -- not the future of how it will be funded?

I'm sorry. I'm just trying to understand your designation.

MR. ANTONUCCI: Objection.

THE WITNESS: I mean, what my -- what I've said is focused on what the funding sources are for different -- for Part A and Part B and Part D. I've said they're -- Part B and D come from the SMI fund. The SMI fund is funded through the combination of premiums and non-payroll tax revenues.

How the actuary is -- what they're doing as far as computing the expected benefit payouts for future premiums, I cannot speak to.

BY MS. WALLACE:

Q I wanted to ask you some general questions about the trustees' report. Does it have, to your knowledge, any sections that discuss the Camp Lejeune Justice Act?

A From the portion which I read, which is, again, the introduction and the highlights, I don't recall reading anything related to the Camp Lejeune Justice Act.

Q Do the projections in the trustees' report, do they have anything to do with offsets associated with litigation?

MR. ANTONUCCI: Objection, foundation.

THE WITNESS: I have the same answer. From what I'd read in the introduction and the highlights, I did not read anything with respect to offsets. That's as far as I could go as far as what's contained in the trustees' report.

BY MS. WALLACE:

Q In your career at CMS, have you ever been involved with overseeing or managing offsets for CMS?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say, as part of my work here in the Office of Financial Management, one of the groups underneath my umbrella, they do deal with offsets as a form of collecting overpayments owed by providers to the program.

BY MS. WALLACE:

Q And did you say that was under your direction or you had experience in that?

A I said it was under my direction. I've

had direct experience in working with helping to set up the offsets in some cases.

Q Do you -- you testified earlier -- have you also managed contractors that identified liens for CMS?

A I'm trying -- I directly -- I directly have not. I have a group with -- in the umbrella of our scope of reports, our financial services group. They deal with Medicare Secondary Payer as well as subrogation, collection on different cases. Sometimes that -- sometimes that involves liens, as you might imagine.

Q Based on your 35 years with CMS, do you have an understanding of the difference between liens and offsets and how CMS handles those in different ways?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say I have a cursory knowledge of the -- of offsets. The nuances and distinctions between offsets for overpayments versus a lien against someone or a subrogation case, I'm less familiar with.

BY MS. WALLACE:

Q And in a situation where a lien is recovered, is that the result of money, to your

knowledge, coming back to CMS, whereas an offset, no money actually comes back to CMS? It's withheld? Do you understand my question?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I understand your question. I mean -- and I think you're generally correct in that respect. I mean, an offset is a -- we offset a future payment to a provider to collect on a debt that provider may owe us.

So we're -- we're just capturing money back before it even actually goes out the door.

In a lien situation where there's a settlement and we have a subrogation right to a potential settlement, for example, we're -- we're collecting money back from a portion of a settlement between two parties.

BY MS. WALLACE:

Q Thank you. Would you agree with me that the purpose of an offset, as you are familiar with it, is to prevent the government from paying twice for the same loss?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't think I would agree with you in the context that I'm familiar with

it.

In our world, we're just simply trying to -- it's a mean by which we recover owed money. We're in -- we're in a situation where we're paying benefits out to providers over projected periods of time. They may develop overpayments. And the fact is we have a potential funding source of income for theirs, and we have direct control over, which we're able to attach, if you will, and recover overpayments owed to us.

We use other means too, in some cases. We don't -- we don't have the ability to an offset. Somebody may have already left the Medicare program and we had to pursue other traditional overpayment collection methods such as sending out overpayment demand letters and things like that.

BY MS. WALLACE:

Q And so your experience with offsets, really, is in the context of overpayment situations where you put a hold on future payments based on the identification of the overpayments so you don't pay that person twice?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say yes.
BY MS. WALLACE:
Q Have you ever dealt with liens in a -- or been assigned to deal with liens in a -- or account for liens in a litigation context?
MR. ANTONUCCI: Object to form.
THE WITNESS: No, not directly.
BY MS. WALLACE:
Q Do you have indirect knowledge of offsets in a litigation context?
MR. ANTONUCCI: Objection.
I'm sorry. Are you referring to liens or offsets?
MS. WALLACE: Offsets. Did I say it wrong? If I said lien, I meant offset.
THE WITNESS: Could you start from scratch and ask it again?
BY MS. WALLACE:
Q I'd be happy to. Do you have any indirect knowledge of offsets in a litigation context?
MR. ANTONUCCI: Objection.
THE WITNESS: I would have to say no.
BY MS. WALLACE:
Q And so any offsets associated with litigation, such as maybe the 9/11 litigation, that

did not come through you or your department?

A That did not come through me, is my personal experience. I cannot speak to whether or not it came through the department or whatnot. I'm just speaking from my personal experience.

Q Is it true that CMS outsources the handling of liens to a contractor such as -- such as the Benefits Coordination Recovery Center?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. I believe we do ask the BCRC to help us with recoveries, in that context.

BY MS. WALLACE:

Q And the offsets that you were speaking of previously related to overpayment compensation, that's handled internally still by CMS as opposed to outsourced to a contract agent?

MR. ANTONUCCI: Objection.

THE WITNESS: The offsets I was speaking to earlier, the way you characterized is generally correct with one proviso being that that's one of the functions that the Medicare administrative contractors help us with, as far as recovery and through offsets of provider payments. So they are involved in that as

well.

MS. WALLACE: Were we an hour -- is it time for an hour break?

MR. ANTONUCCI: Just about.

MS. WALLACE: Do you want to take a brief break? I don't have a ton left for you, Mr. Young.

THE WITNESS: Can we do five minutes?

MS. WALLACE: Yes.

VIDEOGRAPHER: The time is now 2:07. We're going off the video record. This completes media unit number four.

(A brief recess is had from 2:07 p.m. to 2:12 p.m.)

VIDEOGRAPHER: The time is now 2:12. We're back on the video record. This beginning media unit number five.

You may proceed.

BY MS. WALLACE:

Q Mr. Young, when we went over your CV earlier in your testimony this morning, you testified that you do have a background in program integrity, including improper payments and vulnerabilities in the Medicare payment systems; is that right?

A Yes.

Q Would you agree with me that despite the many oversight efforts of CMS, many of which you've undertaken to enforce, CMS does understand that some level of coding error is unavoidable in a system of this size?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know that I would agree with that characterization. I mean, there's -- will there -- will coding errors ever be fully eradicated? Probably not. But the -- the -- just using the Fee-For-Service error rate, for example, we talked earlier about it, it's sitting at right around six -- over six and a half percent, I believe is the most recent number.

You know, most of that percentage, about almost two-thirds of that are what we call no-documentation errors, meaning people haven't -- they either didn't provide the medical record fully or they only provided a portion of the medical record to substantiate and support the information that was on the claims.

So it wasn't the point being of the, you

know, the six and a half percent. You know, the bigger part of that is just no -- no documentation errors. It's not the other potential compliance issues of upcoding or miscoding or flatout abuse, for example.

BY MS. WALLACE:

Q Well, we talked earlier about that 6.55 percent represents 28.83 billion in improper payments. And I think you just testified that two-thirds of that requires additional documentation to be uploaded. But I would imagine that a large amount of improper payments do still have to do with upcoding or miscoding. It wouldn't be a small number. Would you agree?

MR. ANTONUCCI: Objection.

THE WITNESS: My characterization was, again, the larger percentage of the improper payment error rate for Fee-For-Service is related to no documentation errors, meaning the medical records did not contain the documentation supporting what was in the medical record, or they were only partially sufficient, or they didn't have the record at all. It wasn't a flatout miscoding issue, per se.

Well, there -- is there a -- you know, in a program which is paying out, you know, over $450 billion in benefits, small percentages do add up to large numbers. I get that point.

BY MS. WALLACE:

Q Catching a no-documentation error is a lot easier and more straightforward than catching a miscoding or an upcoding error. Would you agree with that?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know. Potentially, it is -- you know, the upcoding part, having actual -- actually having the medical record is what helps you determine whether or not something was upcoded inappropriately or appropriately. Or sometimes they also make errors the other way. They downcode things inappropriately. So it works both ways. And if you don't have the medical record, you couldn't make that decision one way or the other.

BY MS. WALLACE:

Q You testified earlier that you don't have the medical records for corroboration for all of the -- of the data extractions and billing coding

that CMS manages. Is that true?

MR. ANTONUCCI: Objection.

THE WITNESS: That's correct. We do not -- I'm sorry. Did I interrupt?

BY MS. WALLACE:

Q No. No. We didn't catch your first answer. Go ahead.

A That -- I mean, the answer is that's correct. We do not receive medical records for every single claim, all 1.13 billion claims we receive. It's not practical to do that. It's only in situations where we have a reason to review the claim for whatever reason that we go out and we actually ask for the medical records that support what was certified on the claim as being true and accurate and correct.

Q Would you agree with me that you're only able to really catch upcoding or miscoding errors if you do have the medical records for corroboration?

MR. ANTONUCCI: Objection.

THE WITNESS: Well, I would say my experience, that's the primary way we do it. For me to say that's the only absolute way to do it, I don't know that I can say that. I mean, there's other opportunities, I think,

through investigation for people to interview providers, beneficiaries, and whatnot that may also help -- help ferret that out.

BY MS. WALLACE:

Q But you agree that the primary way to catch upcoding and miscoding is to have an RN or a physician review the actual medical record associating -- associated with the CPT or HPC codes, or the ICD-9 or the ICD-10 codes?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I would agree with that.

BY MS. WALLACE:

Q And without doing that medical record corroboration, it's very difficult to catch miscoding and upcoding?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say it's harder, yes.

BY MS. WALLACE:

Q CMS policy, would you agree with me, it treats billing codes as information that requires validation --

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q -- as it relates to your program integrity?

MR. ANTONUCCI: Same objection.

THE WITNESS: I may not fully understand your question.

BY MS. WALLACE:

Q Does CMS policy encourage that billing codes require validation in order to ensure program integrity?

MR. ANTONUCCI: Excuse me.

Same objection.

THE WITNESS: I don't think I would characterize it that way. I mean, the -- again, as I'd said earlier, when a provider submits a claim form, they are certifying that what they're submitting on the claim form is a true and accurate representation of the service they provided and is supported by the medical records. That's what we rely on is that certification.

Does it always need to be verified and corroborated by somebody doing medical review? I would say no. That's not practical or feasible from a resource standpoint.

BY MS. WALLACE:

Q Are you aware of the governing bodies that oversee the Medicare system such as the HHS/Office of Inspector General and the OIG?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I'm aware of them.

BY MS. WALLACE:

Q Are you aware that they oversee Medicare?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes.

BY MS. WALLACE:

Q Have you reviewed the HHS/Office of Inspector General reports that have found widespread coding errors and upcoding errors in Medicare claims?

MR. ANTONUCCI: Objection.

THE WITNESS: No, I have not reviewed them.

BY MS. WALLACE:

Q Are you aware, generally, that they have found widespread coding errors and upcoding in Medicare claims?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I would say I am aware.

BY MS. WALLACE:

Q Are you aware that the OIG conducts

recurring audits of Medicare coding in documentation due to risks of upcoding and miscoding?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes.

BY MS. WALLACE:

Q Are you aware that the government accountability office has designated Medicare as a high-risk program due to persistent improper payments and billing complexity issues?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes.

BY MS. WALLACE:

Q Are you aware of CMS's position that the medical record is the primary source for verifying services rendered, medical necessity, and diagnostic support?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say yes, I'm aware of that.

BY MS. WALLACE:

Q If the medical record documentation does not support the codes, does CMS consider that payment improper or flag that as an improper payment?

MR. ANTONUCCI: Objection.

THE WITNESS: I cannot recall off the top of my head. There's nuances to that so I cannot remember.

BY MS. WALLACE:

Q If the documentation does not support the code, it might not be flagged as an improper payment?

MR. ANTONUCCI: Objection.

THE WITNESS: Again, it's -- there's -- there's a level of complexity and nuance to that that I'm not steeped in to say at what point it's going to be called an error or not.

BY MS. WALLACE:

Q Do you consider -- because you -- you testified earlier that a provider signs off on the coding before it's submitted to Medicare. Is it your position that that is sufficient for Medicare to pay that claim or does it require additional review outside of the coding itself?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't think I can answer that question because it may vary on the different circumstances and the type of claim. And it's been -- it's been a minute since I worked in actual program integrity cases.

BY MS. WALLACE:

Q Is there any instance where CMS protocol would not review claims only based on coding?

MR. ANTONUCCI: Objection.

I also want to note for the record that this questioning is going far beyond the scope of Mr. Young's disclosure as an unretained expert.

THE WITNESS: Could you ask the question again because it's --

BY MS. WALLACE:

Q Yes.

A -- it's been a minute.

Q Yes. Is there -- much of the CMS billing comes in the form of coding. Based on your career at CMS, is that also your understanding?

MR. ANTONUCCI: Same objection.

THE WITNESS: Based on my experience, the -- I mean, we deal with a lot of codes that come in on a claim so we use different codes for procedure codes, diagnosis codes, modifiers in conjunction with the CPT codes.

So, yes, I mean, our claims do involve a lot of different codes.

BY MS. WALLACE:

Q And my understanding of your background and experience is that you understand that there are many different programs that have been established to make sure those codes are accurate. You guys have a RACs program, a Comprehensive Error Rate Testing program, you have a medical record auditing program. So your goal -- my understanding is that the goal of CMS is to make sure those codes are accurate, they're medically necessary, they're reasonable, they're not subject to upcoding or miscoding, and that's part of your efforts on fraud detection under the CMS program.

And so I'm just trying to make sure that I understand correctly that CMS tries really, really hard to double-check these codes to make sure that they're accurate before and after they pay them to ensure the integrity of the program.

MR. ANTONUCCI: Objection.

THE WITNESS: So I would just say, in my experience that -- I mean, the -- we do make an effort to make sure that the -- the information billed on the claim is consistent with the medical record through different means. I mean, through -- again, through different selection of medical review records from

medical review, the experience of the recovery audit contractors, things of that sort.

I mean, it's -- it's been a minute since I worked on that space so it's hard for me to confirm your general -- just general statement.

BY MS. WALLACE:

Q In your experience, in your role, do you know what -- how much money is dedicated to fraud and abuse detection and improper billing detection?

MR. ANTONUCCI: Objection.

THE WITNESS: Off the -- off the top of my head, I don't.

BY MS. WALLACE:

Q Would it be millions?

MR. ANTONUCCI: Objection.

THE WITNESS: It would be in the millions, yes.

BY MS. WALLACE:

Q And so would you agree with me, then, that Medicare does not just take the coding as it comes from the provider; they have programs in place to ensure accuracy, and they do often find errors and improper coding when they perform their audits and apply the programs that they've designed?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say we do have means and measures by which we check to make sure codes that come in are accurate and valid as far as their descriptors. But we don't always catch every one or every thing.

BY MS. WALLACE:

Q Yeah. And that was my next question.

With a program of this scale and magnitude, it would be impossible -- difficult if not impossible to catch all errors in billing coding?

MR. ANTONUCCI: Objection.

THE WITNESS: It would be -- it would be difficult.

BY MS. WALLACE:

Q And the gold standard, if you -- would you agree, would be to confirm the coding with the medical records? If you had the chance to do that for everyone, that would be the gold standard?

MR. ANTONUCCI: Objection.

THE WITNESS: It's -- it's been a minute since I worked in program integrity so I don't really feel like I can speak to what the gold standard is right now.

BY MS. WALLACE:

Q Can you agree that that would be a helpful way to validate the claim coding?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say in my experience, that it's been a helpful way to validate whether or not the coding on a claim is supported by the medical record, yes.

BY MS. WALLACE:

Q And its identified in the program integrity manual for CMS publication 100-08 that the medical staff will review the documentation you submit of the claims to determine if the services billed are reasonable and necessary and meet all other requirements of Medicare coverage. Do you have that knowledge in your role?

MR. ANTONUCCI: Objection.

THE WITNESS: I do not have that knowledge in my role.

BY MS. WALLACE:

Q What about the -- complying with medical record documentation requirements that indicate that "We pay for services when the medical record documentation supports Medicare coverage, coding, and billing requirements"?

Is that within your scope or knowledge?

MR. ANTONUCCI: Objection.

THE WITNESS: That is not within my -- my scope right now, no.

BY MS. WALLACE:

Q Have you ever managed the medical record review program in your roles?

A No. I've -- I've not directly managed the medical record review function, per se.

Q Do you agree or disagree that billing codes alone are insufficient to determine clinical relatedness?

MR. ANTONUCCI: Objection.

THE WITNESS: I would have to say the -- I really can't opine or speculate on the appropriateness of the billing codes. I mean, we don't -- CMS doesn't even really own the CPT codes. That's something that's owned by the American Medical Association, I believe. And as far as the descriptors and their adequacy, that's -- that's something that's in their space, not ours, so I really can't comment on that.

BY MS. WALLACE:

Q And so that will not be a topic that you're opining on in this litigation?

A No. I could not speak to that.
Q As we sit here today, do you have any guarantee that Medicare benefits will remain unchanged in the future?
MR. ANTONUCCI: Objection.
THE WITNESS: I cannot -- I cannot speak to that. I have -- it's not possible for me to project what's going to happen in the future.
BY MS. WALLACE:
Q Do you have any guarantee that the reimbursement levels will remain the same in the future?
MR. ANTONUCCI: Objection.
THE WITNESS: Again, I can't -- there's -- there's the poss -- the possibility of the variables we talked about with respect to what Congress may or may not do with Medicare. I don't know. I can't predict that.
BY MS. WALLACE:
Q Would you agree that Medicare's future depends on legislative and policy decisions that have not yet been made? Is that a fair characterization of your testimony?
MR. ANTONUCCI: Objection.
THE WITNESS: Again, I think I have the

same answer. I mean, it may or may not depend on policy decisions that have yet to be made. I cannot predict the demographics of the country or the practice patterns of medicine and how efficient or inefficient it may be, or the evolution of medicine in terms of the efficacy of the services they provide so it's -- I don't really hazard a guess at what the future's going to bring.

MS. WALLACE: All right. Mr. Young, I don't think I have any further questions for you.

MR. ANTONUCCI: I have a few.

EXAMINATION

BY MR. ANTONUCCI:

Q So, Mr. Young, first of all, good afternoon. Thanks for bearing with us for longer than anticipated. I appreciate your patience and I'm going to try to make this quick.

You previously testified that you cannot guarantee the future of the Medicare program; right?

A Yes.

Q And you previously testified you can't guarantee the future of reimbursement levels within the Medicare program; right?

A Yes.
Q Mr. Young, how long have you worked at CMS?
A Just over 35 years.
Q And in your over 35 years at CMS, how much of that time was spent working on Medicare?
A Oh, all of it was working on Medicare, whether it be Medicare Fee-For-Service or the managed care side. It's always been on Medicare.
Q And if you know, when did the Medicare program begin?
A It was -- I can give you the date. It's 1965. I don't remember the month.
Q Okay. So doing the math, it's fair to say Medicare existed for your entire career at CMS; right?
A Yes.
Q And in your 35 years at CMS, you testified that you've observed Medicare expand benefits in coverage; right?
A Yeah. My experience has been that the propensity is for the program to -- to add benefits. The most -- as, again, the most telling one being the addition of the prescription drug benefit program in 2006.

Q To your knowledge, Mr. Young, has Medicare coverage ever been decreased?

A No, not to my knowledge or recollection.

Q To your knowledge, has the Medicare program ever been eliminated or discontinued?

A No, absolutely not.

Q Okay. So based on your 35 years of experience, is it fair to say that it's reasonably likely that Medicare will continue into the future?

A Yes. Based on my experience, what I've lived through, it's -- it's very reasonable to expect that the program is going to continue into the future.

Q And based on your 35 years of experience with Medicare, is it fair to say that it's reasonably likely that the programs Medicare currently covers will continue to be covered into the future?

MS. WALLACE: Objection, please, for the record. Leading and foundation.

THE WITNESS: Based on my experience, I would say it -- the program will continue into the future. As I've said before, the tendency is for the political leadership to accrue and accrete benefits and/or expand eligibility over

time.

That's -- that's been what I have lived and experienced.

MR. ANTONUCCI: Okay, thank you, Mr. Young. I have no further questions at this time.

MS. WALLACE: Shortly, Mr. Young, on redirect.

FURTHER EXAMINATION

BY MS. WALLACE:

Q You testified earlier that it is not within your scope to -- or your role to predict the future policy decisions of Congress as it relates to the Medicare program; is that right?

MR. ANTONUCCI: Objection.

THE WITNESS: I think I said something along the lines of it's not within my scope to predict what Congress is going to do, which I still believe.

BY MS. WALLACE:

Q And we always talk -- we also talked about the fact that Congress will need to make changes or the current funding of at least the Part A program will be depleted as soon as 2033 and as short as next year. Do you remember that testimony?

MR. ANTONUCCI: Objection.

THE WITNESS: I remember us -- what we reviewed in the trustees' report as far as the vulnerabilities for the trust funds.

BY MS. WALLACE:

Q And so it's not within your purview or scope to speculate as to how Congress might fix that problem. Do you agree with that?

MR. ANTONUCCI: Objection.

THE WITNESS: I agree that it's not within my purview to speculate how they may or may not fix the problem.

What I do believe in is based on my experience and what I've seen in terms of the addition of benefits and increasing eligibility requirements for the population that we serve. That tendency could reasonably continue into the future.

BY MS. WALLACE:

Q And it also might not continue into the future. They may also -- Congress may also decide to cut benefits or decrease provider pay as well. We don't know what -- how Congress will fix the problem within the current system. Is that true?

MR. ANTONUCCI: Objection, compound, and

calls for speculation.

THE WITNESS: It is correct that that would be speculative on my part. I do not want to predict what they may or may not do.

BY MS. WALLACE:

Q And so all of your testimony today has to do with the history of Medicare as you've known it in your 35 years at CMS, and you're not making any type of testimony or opinion related to what may or may not happen in the future with regard to the Medicare system; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: All I can say is I represented what I've seen and experienced in my lifetime here. And, again, what Congress may or may not do is unknown but to God, as they would say, I think.

BY MS. WALLACE:

Q Are you -- did you testify that you are aware of all of the policy changes as it relates to coverage eligibility and services covered in the Medicare system? Is that within your expertise?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't -- you're going to have to clarify the question a little bit for

me, Whitney. Because when you say "coverage eligibility decisions," what exactly are you trying to get at?

BY MS. WALLACE:

Q You testified earlier that in your time at CMS, you don't recall any coverage being decreased. But I didn't remember if you actually are -- I didn't think that that fell within your -- quite frankly, within your CV, the coverage, you know, eligibility. Obviously, Part D was -- started in 2006. But the menial details regarding services covered, I just didn't remember that being in your CV.

MR. ANTONUCCI: Objection.

THE WITNESS: Yeah. As far as -- excuse me.

As far as what's covered and what's not covered, I mean, it's -- it's through my 35 years of experience as far as what the program covers and doesn't cover.

BY MS. WALLACE:

Q So are you testifying that -- that all changes to the services provided and coverage, that is within your area of expertise over the course of the 35 years that you've been at CMS?

A No, I don't --

MR. ANTONUCCI: Objection, misstates prior testimony.

THE WITNESS: Yeah.

Yeah. I don't -- I don't think I can speak to that.

BY MS. WALLACE:

Q Okay. So the coverage and services provided is not within your area of expertise?

MR. ANTONUCCI: Same objection.

THE WITNESS: I'll just go back to what I had said earlier about -- and what's in my written narrative as far as the primary coverage principle as far as what's medically reasonable and necessary to treat an illness or injury or correct a malformed body member and the different categories which are excluded, necessarily. That's -- that's the basic outline of -- of the core of my experience.

BY MS. WALLACE:

Q And so there may be somebody more knowledgeable at CMS as it relates to the changes and services covered over the 35 years you've been there other than you?

A There might be.

Q Do you know which department that would fall under at CMS?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know. The place to start would be the Center for Medicare Services.

BY MS. WALLACE:

Q Is that the umbrella branch of CMS?

A Well, there's --

MR. ANTONUCCI: Objection.

THE WITNESS: No. It's one of the centers of the Centers for Medicare and Medicaid Services.

BY MS. WALLACE:

Q You were asked a question in -- by your counsel as to whether, in your experience, you'd ever known of coverage being decreased. Do you remember that question? And you said "No, I'm not aware of that"?

A Yes, I --

Q Who -- who would be the actual expert on that at CMS?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know that there would be one singular person.

BY MS. WALLACE:
Q Which department?
MR. ANTONUCCI: Objection.
THE WITNESS: Again, I don't know other than to point you to the Center for Medicare.
BY MS. WALLACE:
Q Can we agree that it would not be the financial management department?
MR. ANTONUCCI: Objection.
THE WITNESS: We can agree it would not be the CFO.
BY MS. WALLACE:
Q Okay. And that's not one of the topics that you were designated to talk about by the government; correct?
MR. ANTONUCCI: Objection.
THE WITNESS: What I was -- what I was asked to talk about was what my experience was with respect to the -- whether or not the benefits tended to expand or contract under the program, in my experience.
BY MS. WALLACE:
Q And are you, as a -- as a financial -- and as a CFO -- deputy CFO, you are looking at that from a macro level as opposed to a micro level of

understanding any changes in services, small changes over time. You're looking at it as a total -- total dollar or big -- or total program?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say I'm looking at that from my personal experience over 35 years working in different positions within the program.

BY MS. WALLACE:

Q And so is that a macro or a micro level?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't think I have anything else to add.

BY MS. WALLACE:

Q Can you tell me what parameters you're using to make that conclusion? Are you looking at programs? Are you looking at dollars?

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q Or are you looking at policy manuals that talk about services covered?

MR. ANTONUCCI: Same objection.

THE WITNESS: It's -- it's based on my experience and different positions with the organization, dealing with claims over time,

knowing what's -- what's covered and having read through the regulations and the Social Security Act, and experience.

BY MS. WALLACE:

Q So it's not related to -- to your analysis of dollars?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say no.

BY MS. WALLACE:

Q And you testified earlier that it would probably be the CMS division that would be in the best position to assess changes in services provided and benefits; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I said it would be the Center for -- it's called the Center for Medicare, singular, CM.

BY MS. WALLACE:

Q Ahh. And that is a division under the umbrella of CMS?

MR. ANTONUCCI: Asked and answered.

BY MS. WALLACE:

Q Did you answer? Sorry. It might have been a --

A No. It's -- yeah. It's yes. If you

look -- look at the CMS org chart.

Q Okay. But it's -- and if you could just tell me one more question. That's not beneath the CFO department --

A No.

Q -- on the org chart; is that right?

A Correct. Correct.

MR. ANTONUCCI: Objection.

MS. WALLACE: Okay. Great. I don't have any further questions for you, Mr. Young. Thank you for your time today.

MR. ANTONUCCI: I have one more, sorry. A couple more, excuse me.

FURTHER EXAMINATION

BY MR. ANTONUCCI:

Q You testified that someone from the Center for Medicare services, CM -- excuse me if I'm getting the acronym wrong -- would be best positioned to answer Ms. Wallace's question about benefits coverage; right?

A Yes.

Q Can you also answer that question?

A I'm sorry.

MS. WALLACE: Objection.

BY MR. ANTONUCCI:

Q Are you also able to answer that question?
A I'm sorry. What's the question you want me to also answer?
Q Are you able to speak to benefits coverage under Medicare?
A At a high level, I can, as I've already said today. The primary principle for coverage is an item or service has to be medically reasonable or necessary -- and necessary to improve an illness or injury or correct a malformed body member, as I said.
That's under -- it's in the Social Security Act, 1862.
Q Okay, thank you, Mr. Young. I have no further questions.
MS. WALLACE: I don't either, Mr. Young. Thank you.
VIDEOGRAPHER: The time is now 2:53 and this completes media unit number five in this videotaped deposition.
CERTIFIED STENOGRAPHER: Counsel, may I get your transcript orders?
MS. WALLACE: Yes.
MR. ANTONUCCI: Yeah. We have a standing order.

MS. WALLACE: We do. And we -- plaintiff wanted a rough.

CERTIFIED STENOGRAPHER: Okay.

MS. WALLACE: Please.

CERTIFIED STENOGRAPHER: And, Mr. Antonucci, you as well?

MS. WALLACE: Will you make sure there's a condensed? That's my very favorite.

MR. ANTONUCCI: Sorry. Dawn, were you saying something?

CERTIFIED STENOGRAPHER: Yes. Did you want a rough draft?

MR. ANTONUCCI: Yes, please.

CERTIFIED STENOGRAPHER: Okay.

(The reading and signing of the deposition is not waived.)

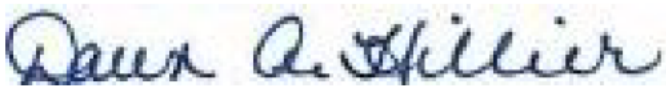
(At 2:53 p.m. the deposition was concluded.)

CERTIFICATE OF OATH

STATE OF FLORIDA)
COUNTY OF PINELLAS)

I, the undersigned authority, certify that LARRY YOUNG appeared before me remotely and was duly sworn.

WITNESS my hand and official seal this 16th day of February 2026.



DAWN A. HILLIER, RMR, CRR, CLR
Notary Public - State of Florida
My Commission No.: HH 300744
Expires: 12-15-2026

CERTIFICATE

STATE OF FLORIDA)
COUNTY OF PINELLAS)

I, DAWN A. HILLIER, RMR, CRR, CLR certify that I was authorized to and did stenographically report the deposition of LARRY YOUNG; that a review of the transcript was requested; and that the transcript is a true and complete record of my stenographic notes.

I further certify that I am not a relative, employee, attorney, or counsel of any of the parties, nor am I a relative or employee of any of the parties' attorney or counsel connected with the action, nor am I financially interested in the action.

DATED this 16th day of February 2026.

_____

DAWN A. HILLIER, RMR, CRR, CLR

February 16, 2026

IN RE: CAMP LEJEUNE WATER LITIGATION

Dear Mr. Young:

Herein, you will find the transcript of your deposition taken on February 6, 2026, and a Errata Sheet for your use in entering any changes to the deposition.

Please do not edit or make marks on the transcript itself. If you desire to make any changes, they should be noted on the Errata Sheet. If no changes are to be noted, please indicate that on the Errata Sheet so counsel are aware that no changes were made.

After reading the transcript, please execute the Errata Sheet, including date and place of signing and return to Golkow, a Veritext Company at the address indicated below.

Thank you for your prompt attention.

Sincerely,

Dawn A. Hillier, RMR, CRR, CLR
GOLKOW, A VERITEXT COMPANY
1650 Market Street, Suite 5150
Philadelphia, PA 19103
877.370.3377

ERRATA SHEET

I, LARRY YOUNG, have read the foregoing pages of my deposition given on February 6, 2026 in the case of IN RE: CAMP LEJEUNE WATER LITIGATION, Case No. 7:34-CV-00897, and wish to make the following additions, deletions or corrections:

PAGE	LINE	CHANGE AND REASON FOR CHANGE
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____
____	____	_____

In all other respects, the transcript is true and accurate.

_____

LARRY YOUNG

&

& 2:5 62:24

0

000000 5:13
0000000006.... 5:14
0000000007 5:15
0000000273.... 5:16
0001 5:14
00897 1:2 172:5
02203 4:8

1

1 5:7 16:3,8,25 20:5 38:2 62:2
1.1 118:5
1.13 141:10
1.45 46:3,9,12 46:13
10 42:6,11 117:25 119:25 142:9
100-08 151:10
10:10 37:16,18
10:16 37:19,20
11 76:19
110 32:17
1100 3:8
11:00 66:24 67:2
11:11 67:3,4
12-15-2026 169:15
127 2:13
12:03 100:19 100:22
13 40:15
135 62:2
14 72:3
146 118:8
146.2 118:4
15 16:3 89:13 91:4
154 5:3
157 5:3
16 5:7,8,9,11 73:4 171:1
1650 171:22
166 5:4
169 5:4
16th 169:9 170:18
17 5:13 75:25
170 5:5
18 59:8
185 124:17 125:6
1862 167:13
19 90:9
19103 171:23
194 103:1
196 104:18
1960s 124:2
1965 40:16 155:13
1966 9:16
1988 21:17
199 2:8 108:9 108:12
19th 9:16
1:05 100:23,24
1:32 119:15
1:38 119:18
1:39 120:20
1:44 120:23
1st 41:20

2

2 5:8 16:9,11 94:14 95:4
2,200 124:23 125:5
2.90 93:17
20005 3:9
2006 41:20 58:13 155:25 160:11
2007 81:21
201 108:22,22
2011 105:5
2014 32:10,12
202.616.8367 3:10
2023 32:13 34:11 105:6,24 106:1
2024 79:19 87:3,5,7
2025 13:12 16:3 19:5,10 67:10 105:8,24 106:2 124:16 124:23 125:4
2025.12.15 5:7
2025annualre... 5:15
2026 1:12 7:3 16:15 169:10 170:18 171:1,7 172:3
2026.01.30 5:9 5:11
2027 71:15 91:4 114:17,18 115:14
2029 82:24 83:2
203 110:3
2033 71:15 76:7,16 79:6 79:11 81:21 82:5,12 85:17 111:23 157:24
2034 110:18
206 103:2
208 104:19
211 108:13
219 2:20
22 117:23,25

22312 169:12 170:20
2250 4:7
23 105:12 106:9,17
245 89:1
25 48:17,22 67:20 122:9,14 127:1 128:21
257 89:2
26 111:1
27 81:4
273 67:12
27th 35:21
28.83 29:2 139:8
28144 2:7
28406 2:14
29440 2:21
2:07 137:10,13
2:12 137:14,15
2:53 1:13 167:18 168:17

3

3 5:9 8:21 16:12,17
3.1 85:21,25 86:6
3.32 93:19
300 14:15
300744 169:14
30303 4:14
30th 16:14
31 93:6
35 132:13 155:4,5,18 156:7,14 159:8 160:18,25 161:23 164:6
36 123:11
39 81:5

4

4 5:11 16:18,22 20:18
40 30:8,21 42:10
422 118:7
422.5 118:3
43 93:8
45 15:4 90:22
450 117:10 121:15 140:3
46 38:13
48 123:11

5

5 5:13 16:23 17:1 20:22
5150 171:22
525 2:6
553.4 118:4
563 118:8
5m60 4:13

6

6 1:12 5:15 16:25 67:10,13 102:2 171:7 172:3
6.55 29:1 139:8
6.9 28:20
61 4:13
64 105:7 106:1
65 47:10 58:22
67 5:15
6th 7:2

7

7 28:19,22 67:12
704.633.5244 2:8
71 85:1 105:6 105:25
72 86:20
75 48:19,23 85:24 86:4 93:12 105:13 106:18 128:2
75/25 129:13
7500 10:6
7867485 1:18
7:23 7:17
7:34 1:2 172:5

8

8 5:2
82 105:4
83 85:2
84 86:21
843.386.5284 2:22
877.370.3377 171:23
89 76:9,18 111:14,19,24
897 7:17

9

9 5:2 93:21 94:1 97:10 142:9
9/11 135:25
910.794.4829 2:15
97 22:1
99 22:1
9:22 1:13 7:2
9:38 17:17
9:41 17:19

a

a.m. 1:13 7:2 37:18,19 67:2 67:3
ability 104:15 134:13
able 10:1 19:8 34:4 39:22 54:18 71:12 84:18 92:9 111:23 114:3

115:7 128:20 134:10 141:18 167:1,4
above 34:18,18 34:21 110:10 110:17
absent 104:22
absolute 141:23
absolutely 39:25 62:19 88:21 156:6
abuse 139:5 149:9
abusive 32:6
accept 96:21
accepting 96:5 97:1
access 41:15 94:24 95:1 99:3 104:24 106:23 107:20 111:8,18 112:4 112:5
accessible 43:22 44:21
account 43:8 135:4
accountability 145:7
accounted 36:12
accounting 23:23 35:2,3,5 35:6,11 36:13 87:22
accrete 58:10 156:25
accrue 58:10 156:24
accuracy 65:15 149:22
accurate 29:3 61:4,7 109:9 120:13 141:16 143:17 148:4,9 148:16 150:3 172:24
accurately 36:12 39:17
acknowledged 106:22
acronym 62:15 62:21 166:18
acronyms 62:16
act 11:10 40:16 49:11 54:14,17 59:9 130:21,25 165:3 167:13
action 7:21 33:12,17 113:6 114:5 115:23 170:15,16
actions 34:6
activities 23:24 24:18
actu 83:24
actual 92:4,10 92:22 104:13 140:13 142:7 146:25 162:21
actually 20:21 27:7 30:15 39:4 52:9 62:22 72:4 79:17 88:21 97:24 98:1 100:14 127:15 133:2,12 140:13 141:14 160:7
actuarial 69:8 71:21 83:16,25 93:18 114:21 115:6
actuarially 48:16
actuaries 84:4 86:5 92:17 106:6
actuary 85:12 129:10 130:14
actuary's 115:2 128:14
add 83:6 112:11 118:7 129:23 140:4 155:22 164:13
added 58:18
addition 58:11 129:1 155:24 158:15
additional 18:21 55:6 57:14 58:10 112:21 139:10 146:18
additionally 110:9
additions 172:6
address 26:1 29:8 77:16 93:11 112:16 113:1 115:24 171:14
addressed 73:9 114:3 116:10
addressing 93:9 113:4
adequacy 103:10 107:21 114:20 115:4 152:19
adequate 123:13
adjudicating 23:21
adjustment 17:14
administer 7:20 25:1 32:20 33:4 63:11

administered 55:4
administering 22:25 23:3,15 23:17 54:2
administers 35:10
administration 40:25 60:9
administrative 23:10,19 32:18 35:4 36:12 37:7 50:11 52:10 136:23
administrativ... 113:7 114:4
administrator 53:25 54:5 60:6 72:22
advance 52:2 52:18 53:18
advantage 22:19
affect 60:19
affidavit 12:6,9
affidavits 11:20
affirm 8:21 9:5
affirmative 6:7
affirmed 10:12
afford 127:7,11
afloat 112:22
afternoon 154:17
age 58:22
aged 40:12 47:18
agency 18:6 31:9 32:5 35:5 35:10,18 43:19 60:2,8
agency's 37:6
agent 136:17
aggregates 118:8
agree 7:10 8:22 8:25 18:7 23:1 31:21 40:3 46:4 50:17,23 51:24 52:16 59:15 60:10,15 60:18 65:8,10 71:1 73:14,17 73:21 77:24 84:11,14,19 85:20 86:11 87:15 91:23 95:19,24 96:20 96:21 109:13 110:12,19 113:4,10,20 114:9 116:5 122:20 123:18 123:21 124:6 126:12,21 127:22 133:19 133:24 138:2,9 139:14 140:8 141:17 142:5 142:11,21 149:19 150:17 151:1 152:9 153:20 158:8 158:10 163:7 163:10
agreement 18:19 19:21,25
ahead 11:6 141:7
ahh 165:19
allegations 20:4
allowed 55:10 84:9 111:6,10 111:11 112:11
allows 10:23 59:25
alluded 28:5 32:19
als 58:20
alter 103:19
alternative 102:9
amend 60:11
amended 39:12
american 152:18
amount 31:16 44:25 46:15 93:18 95:2 97:13 125:4,17 125:19 139:12
amounts 109:24,25 110:10,11
analyses 99:10
analysis 165:5
analyzed 86:4
anecdotal 95:17
annual 35:17 35:23 36:2 67:10,20 69:5 69:17 81:9 122:14
annually 122:13 123:15 125:6
answer 6:3 13:8 18:3 24:11 25:7 37:4 43:12 52:21 95:25 119:8 121:10 131:5 141:7,8 146:21 154:1 165:23 166:19 166:22 167:1,3
answered 165:21
answering 36:23 39:9
anticipated 80:11 87:7 154:18

antonucci 3:4 5:3,4 9:7 11:5 12:10 19:6,15 19:23 20:12 21:18 22:2,5,9 24:10 25:6,20 26:2,14,22 27:20 28:4,12 28:16 29:4,11 29:19 31:17 32:2 35:15 36:22 39:6 40:5 43:7,14 43:24 44:6,23 45:2,8 47:11 47:25 50:21 51:7,21 52:3 52:19 53:6,19 54:4 56:6 58:7 59:6,16,22 60:14,21,24 61:5 62:13 63:6,17 64:6 64:13,19 65:1 65:9,18 66:2 66:10 68:8 69:1,13 70:1 70:14,22 71:18 73:15,23 74:24 75:15 76:1,21 77:7,22 78:11 79:20 80:2,9 80:13,23 81:13 81:23 82:7,14 83:4,18 84:1 84:12,21 85:11 86:7,14 87:18 87:23 88:10 89:23 90:15 91:21 92:11,23 94:3 95:10,22 96:8,17 97:4 97:17 98:9,17 98:23 99:5,21 100:5,13,18 104:6 105:19 106:10 107:3 107:11,23 109:4,14 110:4 110:13,20 111:20 112:9 112:23 113:9 114:7,24 115:12 116:1,6 116:14 117:2,6 117:16 118:6 119:12 120:15 122:3,11,21 123:20 124:7 126:2,13,22 127:20,23 128:5,12 129:3 129:7,17,21 130:6 131:4,15 132:17 133:4 133:23 134:25 135:6,11,21 136:9,18 137:4 138:7 139:15 140:10 141:2 141:20 142:10 142:17,24 143:3,10 144:4 144:8,15,22 145:3,10,17,25 146:8,20 147:4 147:17 148:18 149:10,15,25 150:12,20 151:3,16 152:1 152:12 153:5 153:13,24 154:13,15 157:4,15 158:1 158:9,25 159:12,23 160:14 161:2 161:10 162:3 162:10,23 163:3,9,16 164:4,11,18,22 165:7,14,21 166:8,12,15,25 167:24 168:6,9 168:13
anybody 101:14
apart 92:5
apologize 94:22
apparently 10:25
appeals 23:22
appear 120:1
appearances 2:1 3:1 4:1
appeared 169:7
applicable 50:20 110:8 125:25
application 22:19
applications 33:24 34:3
apply 94:9 149:24
appointed 60:8 72:19,20 73:1
appointees 60:7
appreciate 17:24 154:18
approach 46:21
approached 19:7
approaches 93:13
appropriately 140:16
appropriaten... 152:15
appropriation 94:15
approval 52:15 53:4,9,11,15,16

approximate 28:10 30:4
approximately 13:10 14:14,25 21:25 29:3 30:8 81:20 85:21 122:9 124:16 127:1
approximation 30:6
april 9:16
area 53:22 56:7 129:16 160:24 161:9
artfully 57:4
ascending 124:11
asked 18:2 101:10 121:3 162:15 163:18 165:21
asking 19:8 27:7 30:7 113:20 116:2
assess 165:12
assessing 33:1
asset 82:23
assets 84:17 111:4
assigned 135:4
associated 22:21 127:8 129:1 131:3 135:24 142:8
associating 142:8
association 152:18
assuming 27:2 78:17 114:1
assumption 109:22
assumptions 71:22 78:17,18 82:6,13,23 83:1
atlanta 4:14
attach 134:10
attention 90:8 90:10 102:6 108:8 123:10 171:15
attorney 8:15 170:12,14
attorneys 39:9
attrition 34:1
audio 7:9 8:7 121:2
audio's 17:9
audit 27:19,23 28:3 30:22 31:2 51:18 149:2
auditing 23:25 148:6
auditor 50:1
audits 23:22 145:1 149:23
author 69:19
authority 60:11 169:6
authorization 52:8,11
authorized 7:19 170:6
availability 74:16
available 10:17 54:24 56:16,23 56:24 98:8 117:10
average 108:17 108:23
avoid 77:19
aware 10:23 18:9 31:2 71:23 144:1,5 144:7,19,23,25 145:6,13,18 159:20 162:19 171:11
awareness 30:25

b

b 40:10,14 41:5 41:23 42:15,19 42:20 44:14,18 48:4,20 55:15 56:11,16,23 57:3,5,6,7,11 71:24 108:6 116:22 117:1,8 117:13 118:4 118:16 119:23 120:6,8 121:10 121:13,17 122:7 123:15 124:3,6,16,24 125:5 126:1,4 126:20 127:4 127:18 128:9 129:25 130:9 130:10
back 13:8 17:20 34:9,9 37:21 67:5 94:17 95:16 100:25 101:4 102:6 119:19 120:18,24 133:1,2,12,16 137:16 161:11
background 11:25 40:3,7 68:23 87:22 137:22 148:1
bad 80:16
bailiwick 92:19
balance 81:8,16 81:25 83:1 114:21 115:6 123:1
ball 113:15
ballpark 117:7

baltimore 10:7
base 125:17
based 21:24 22:23 30:23 31:21 42:16 46:16,25 50:19 53:17 54:6 70:20 71:5,8 71:21 74:15 80:21 84:16 85:13 87:21 91:13 92:8,20 93:25 94:4 96:18 97:19 98:5 99:23 104:3 109:9 120:7 122:19 122:25 126:14 128:11,18 130:1 132:13 134:22 147:3 147:15,18 156:7,10,14,21 158:13 164:23
basic 40:2,7 161:18
basically 32:20 129:19
basis 41:16 51:20 54:8,8 69:17 89:18 91:6
bates 16:24 62:2 67:11 72:2,5 73:4 75:25 81:4 85:1 86:21 89:2 90:9 93:7 103:1 104:18 108:12 117:25 123:11
bcrc 62:24 63:7 136:11
bearing 154:17
bears 67:11
beginning 67:5 81:8 83:7 114:17 137:16
begins 37:21 100:25
behalf 1:11 2:3 3:3 4:3 11:20 27:1 31:14 32:21,21 62:10 96:22
believe 13:11 13:22 15:2 18:3 28:20,21 35:20 38:9,22 43:16 46:10,15 48:17 49:14 55:20 69:6,17 70:17 71:13 72:15,22,25 81:24 90:1 111:22 122:8 127:2 136:10 138:15 152:18 157:19 158:13
bell 2:19
belllegalgrou... 2:23
bellwether 20:4 65:25
beneath 166:3
beneficiaries 41:16 44:5 60:23 64:25 73:12,13 74:18 75:6,7,10,14 96:22 98:2 99:16 100:4 103:24 104:15 112:18 125:13 142:2
beneficiary 23:13 27:1 45:1 48:9,21 57:18 107:20 108:17,23 109:12 111:8 111:17 112:4 122:10 123:14
benefit 23:11 32:21 35:3 36:11 37:7 43:20 47:2 48:18 49:19 58:1,4,12,12 63:7,8 94:6,10 94:14,17,25 95:2 121:14 124:13 128:21 130:15 155:24
benefits 27:1 44:9,10,17 52:13 55:6,9 57:14 58:5 60:12 62:23 63:13 65:7 71:14 77:11,11 84:9,18 111:25 117:10 120:2 127:2 134:5 136:8 140:3 153:3 155:19 155:22 156:25 158:15,22 163:20 165:13 166:20 167:4
best 74:23 75:23 83:16,21 109:18 128:11 165:12 166:18
better 21:4 46:22 79:25 80:11,15 105:15
beyond 11:1 18:22 22:15 49:22,24 56:8 97:24 147:6
big 58:11 103:5 103:6 164:3
bigger 21:1 38:6 103:3

117:21 139:2
biggest 35:16
billed 148:22 151:13
billers 32:7
billing 26:13 65:15 140:25 142:22 143:7 145:9 147:14 149:9 150:10 151:24 152:9 152:15
billion 27:11 29:2 117:10 118:4,4,5 121:15 139:8 140:3 141:10
birth 9:15
bit 56:20 78:12 78:14 118:11 118:18 120:9 120:13 159:25
bladder 38:18
board 52:5 67:20 69:4 72:21,23 84:6
boards 72:12
bodies 144:1
body 12:3 49:15 161:16 167:10
boss 34:20
boston 4:8
bottom 92:2 111:2
boulevard 10:6
branch 162:8
brbc 62:11,12
break 17:24 37:12 66:15,17 66:20 100:12 101:5,7 120:2 137:3,6
breakout 117:20
brief 37:18 66:17 67:2 137:5,13
briefly 32:15 110:25
bring 154:9
budget 89:14 91:4
building 4:7
bulk 118:14
burden 86:12
butler 2:11

c

c 31:3 40:10 41:13 55:1,3 55:12,12,14 56:5 118:10,13 118:20,24 120:1,9,11 121:18
calculation 129:10
calculus 27:2
calendar 125:7
call 13:21,22,22 31:3 46:23 55:5 81:15 138:18
called 8:9 24:15 45:15 48:6 101:9 146:12 165:16
calls 13:14,16 13:17,20 159:1
camera 7:6
camp 1:4 7:14 8:16 10:19,25 11:10 14:2 18:10 20:5 38:15 39:19 61:13 62:10 65:16,25 66:1 68:6,12 69:24 70:7 130:20,24 171:3 172:4
cancer 38:19
capacities 24:7 72:22
capacity 32:16 32:23 34:24 41:3 42:17 44:2
captured 43:16
captures 35:6
capturing 133:11
care 30:13 40:21 54:19 64:11 70:16 74:13 75:4 99:3,8,15 104:14 107:20 155:9
career 21:23 22:23 25:17,24 29:24 31:22 92:8 93:25 116:24 131:12 147:15 155:15
careful 39:7
carolina 1:1 2:7 2:14,21 7:16 20:6,10
carpenito 3:5
carved 54:23 54:25
case 1:2 7:17 8:20 12:5,7 14:1 19:9,14 20:14 61:23 68:1 132:22 172:4,4
cases 1:6 23:12 25:10,11,12 50:9 63:24 132:2,10 134:12 146:25

catch 141:6,18 142:6,15 150:5 150:10
catching 140:6 140:7
categories 161:17
categorized 120:7
category 38:17 38:18
causes 25:4
cautionary 78:14
center 31:8 62:24 136:8 162:5 163:5 165:16,16 166:16
centers 9:18 162:11,12
cert 29:10,12 29:17
certain 23:20 29:21 45:9 64:1 78:17 103:13
certainly 38:7 43:2 47:16,18 77:14
certainty 83:13
certificate 5:4,5 169:1 170:1
certification 143:20
certified 6:13 8:4 13:2,6 141:15 167:21 168:3,5,11,14
certify 169:6 170:5,11
certifying 27:4 143:15
cetera 78:3
cfo 34:13,18,21 163:11,24,24 166:4
challenge 26:8
challenges 71:11 86:16 92:6
chance 108:15 150:18
change 79:13 88:9 104:11,22 112:17 113:16 128:10 172:7,7
changes 60:19 78:9 86:2 88:5 91:19 93:15 157:22 159:20 160:23 161:22 164:1,1 165:12 171:7,10,10,11
characterizati... 53:21 138:9 139:16 153:23
characterize 47:7 71:19 143:13
characterized 136:20
chart 81:7,11 81:15 82:4,11 82:16 84:25 85:10,19 86:20 87:15 109:24 110:11 118:1 118:22,23 119:24 121:11 123:17,21 124:1 125:24 128:10 166:1,6
charts 110:7
chat 15:17,19 15:23 67:9
check 28:2,3 148:15 150:2
chief 9:21 24:22 34:12,15 50:13,13,15
choice 55:4 96:12,19 107:17
choose 55:8 96:23 98:19,20
circumstances 11:22 96:2 98:3 146:23
cited 108:16
civil 11:14
claim 11:10 23:10,11 25:15 26:25 27:3,5,9 27:12,17 28:1 141:10,13,15 143:15,16 146:18,23 147:20 148:22 151:2,6
claimants 11:4
claims 11:4 23:21 25:12 27:11 28:7 30:17,23 50:7 50:16 54:7 138:24 141:10 144:14,21 147:3,23 151:12 164:25
clarify 40:23 159:25
clear 61:11,13
clinical 49:22 52:22 152:10
clinician 49:23 51:14 52:22 53:22
clja 16:25 62:2 67:11
close 114:21
clr 169:13 170:5,21 171:21

cm 165:17 166:17
cms 5:9,11 9:24 9:25 15:6 17:5 18:4,6 21:16 21:23,25 22:23 28:25 29:25 30:22 31:22 35:25 43:6,13 58:1 61:4,23 62:2,10,21 63:3 70:12,21 83:17,25 84:4 94:1 109:12 113:7 116:24 116:25 128:14 131:12,14 132:5,13,15 133:1,2 136:6 136:16 138:3,4 141:1 142:21 143:7 145:22 147:2,14,16 148:8,12,14 151:10 152:16 155:3,5,15,18 159:8 160:6,25 161:22 162:2,8 162:22 165:11 165:20 166:1
cms's 145:13
code 146:6
coded 30:25 31:5
codes 142:8,9 142:22 143:8 145:22 147:19 147:20,21,21 147:22,24 148:4,8,15 150:3 152:10 152:15,17
coding 31:25 65:15 138:5,10 140:25 144:13 144:20 145:1 146:16,19 147:3,15 149:20,23 150:11,17 151:2,6,23
coinsurance 110:10
colleagues 12:22
collect 31:13,16 133:9
collected 45:19 47:1
collecting 35:7 131:20 133:16
collection 132:10 134:16
collections 43:15,20 71:14 123:4
combination 46:11 48:8,9 48:13 130:12
come 34:6,9 128:3,6 130:10 136:1,2 147:20 150:3
comes 133:2 147:15 149:20
coming 100:13 101:10 133:1
comment 152:21
comments 70:10
commercial 74:14 75:6
commission 169:14
common 45:23
commonly 55:25
communicate 10:12
communication 8:25
communicati... 12:17 39:8
companies 55:23,25
company 12:3 171:13,22
comparable 102:19
compared 74:19 75:11 79:16 99:17 105:17 106:8
comparison 86:22 105:2
compel 107:15
compensate 97:2
compensated 18:25 19:2 97:13 105:17
compensation 136:15
competition 32:25
compiled 109:1
compiling 84:3
complain 95:14
complete 170:9
completely 48:5 77:24 125:9
completes 37:17 67:1 100:21 137:12 167:19
completion 79:17
complexity 145:9 146:10
compliance 22:18,20 26:24 34:9 139:4
compliant 24:19 26:24

complying 151:20
component 32:5 40:24 41:4 54:3 68:15 126:20
components 68:11
composition 129:13
compound 158:25
comprehensive 29:9 148:5
comprised 48:17
computer 66:22
computing 130:15
concern 87:21 106:20
concerned 112:7
concerns 115:24 116:19
concert 50:15
conclude 72:9
concluded 120:7 168:18
conclusion 107:2,5 112:3 164:16
conclusions 68:22
conclusive 113:19
conclusively 115:1,8
conclusivity 113:19
conclusory 89:25
condensed 168:8
condition 50:19 71:3
conducted 7:5
conducts 144:25
confidence 36:11,14,20 37:5
confidential 12:17 39:8
confirm 39:22 95:12 99:11 126:16 129:11 149:5 150:17
confirming 120:1
confusing 56:20
congress 10:23 12:2,5 36:1,5 36:20 54:23 59:5,11,12 60:10,18 61:3 69:7,12,14,17 70:12,18,20 72:13 73:20 77:3,9,18 86:13 89:13,16 91:2,5,18 97:20 98:8,19 100:8 111:10 112:11,15,25 115:23 116:8 153:17 157:13 157:18,22 158:7,21,23 159:15
congress's 98:11
congressional 113:6 114:4
conjunction 147:22
connected 116:20 170:14
connection 7:7 68:6
consecutive 35:21 89:12 91:7,9,15
consider 47:5 89:16 91:5 100:8 108:2 145:22 146:14
considered 67:25
considering 99:20
consistent 148:22
constricted 58:2,6
contacted 12:18
contain 139:20
contained 88:13 131:9
content 12:16 32:25 72:13
context 105:3 111:22 133:25 134:21 135:5 135:10,20 136:12
contingency 31:15
continually 21:17
continue 7:10 47:18 68:18 71:12 74:15 105:7,8 106:13 113:25 126:11 156:9,12,17,22 158:17,20
continued 3:1 4:1
continues 110:17 114:2

continuing 103:23
contract 22:20 22:22 23:18 30:22 62:11 136:17 163:20
contractor 23:10 24:15 30:18 32:14 33:6,9,23 50:1 62:20,25 63:3 63:8 136:7
contractors 23:19 26:6 28:3 30:15,20 32:18,20 33:12 33:14 50:6,12 52:10 63:20 132:4 136:23 149:2
contracts 32:24
contribution 57:19 112:21
contributions 123:14 128:1
control 134:9
conversation 101:20
conversations 101:18
convey 74:22
coordination 62:24 63:9 136:8
copay 126:8
copays 44:4,8,9 44:10,15,17,19 44:25 45:5 126:4
copy 38:2
core 122:18 161:19
correct 12:11 15:8 17:6 18:5 24:5 34:14,16 39:15 40:25 41:12,22 42:18 46:10 49:1,15 57:4,17,19 59:3,5,19 61:16,17,20,21 62:4 65:17 66:11 68:2,7 70:21 73:24 83:17,25 88:9 92:16 98:8 101:11 102:14 102:21 106:2,9 106:16 107:10 107:13 119:7 119:10 122:2 122:10 125:18 125:22 130:1 133:7 136:21 141:3,9,16 159:2,11 161:16 163:15 165:13 166:7,7 167:10
corrections 17:23 172:6
corrective 33:11,17 34:6
correctly 86:6 148:14
corresponding 93:7
correspondin... 103:20
corroborated 143:22
corroboration 140:24 141:19 142:15
cost 41:17 56:17 57:1 76:3 82:23 83:1 86:22 87:2,6 92:6 103:19 104:13 109:23,25
costs 76:9,18 76:20 87:16 92:4,10,22 100:3 103:22 104:1 106:5 108:24 109:2 109:12 111:8 123:16 124:13
counsel 7:25 8:20 10:11 12:17 13:21 14:20,23 15:6 15:16,24 16:14 16:21 17:12 19:8,8 38:4 101:6 162:16 167:21 170:12 170:14 171:11
country 95:8 95:13,15,21 96:1 154:4
county 169:4 170:4
couple 33:19 63:19 110:23 166:13
course 10:14 79:9 160:24
court 1:1 7:15 7:19 8:1 12:5,7 12:24 13:7 15:16,25 20:6 20:10 23:5 68:23,24
cover 5:10 16:12,13 51:25 54:18 76:9,17 111:8 122:14 123:16 124:5 124:13 126:25 128:20 160:20
coverage 41:15 46:20 49:5,17 50:20 51:10 52:25 54:24

55:1 58:1,4,10 58:22 59:2 60:19 61:2 64:24 96:16 127:8,9 151:14 151:23 155:20 156:2 159:21 160:1,6,9,23 161:8,14 162:17 166:20 167:4,7
coverages 58:5
covered 49:3 49:11 93:24 98:15 156:17 159:21 160:12 160:17,18 161:23 164:21 165:1
covers 156:17 160:20
cpt 142:8 147:22 152:16
created 29:8
credit 42:10
criteria 51:10
crr 1:15 169:13 170:5,21 171:21
crystal 113:14
cumulative 85:6
current 9:17 25:14 28:21 34:23,24 41:3 66:13 71:7 73:7 74:19 75:10,14 76:4 78:7,16 85:7 86:3,23 91:19 94:13 95:4 97:25 99:16 103:11 104:12 105:9,22 106:13 107:13 107:21 117:9 124:16 157:23 158:24
currently 17:5 18:4 20:6 30:1 36:21 61:16 76:15 82:2 89:21 156:17
cursory 132:18
curve 124:5
cut 12:25 94:17 94:23,24 95:1 125:1 158:22
cuts 17:11
cv 1:2 7:17 16:23 20:21 21:13,17 137:20 160:9 160:13 172:5

d

d 1:8,8 41:14 41:23 42:19,21 44:14,18 49:3 55:15 57:14,15 57:18 58:12 108:6 116:22 117:1,15 118:4 119:23 122:8 123:15 124:3,6 126:1,5,21 127:4,18 130:1 130:10,10 160:10
d.c. 3:9
dallas 24:14
damages 5:7 16:4 61:20
danger 78:16
dangling 37:4
data 65:15 95:16 99:10 140:25
date 1:12 9:15 79:5,10,18 89:14 111:10 111:15 155:12 171:13
dated 16:14 170:18
dates 80:5
david 3:6
david.ortiz 3:13
dawn 1:15 168:9 169:13 170:5,21 171:21
day 19:11 33:2 33:2 169:9 170:18
days 89:13 91:4
deal 63:21 77:15 131:19 132:9 135:4 147:19
dealing 32:24 164:25
dealt 135:3
dear 171:5
debt 133:9
decades 52:18
december 16:3
decide 77:3 158:21
decision 49:22 51:9,14 52:1 73:20,25 140:20
decisions 59:15 59:18,24 60:1 61:3 153:21 154:2 157:13 160:2
declining 81:20 82:5,12
decrease 77:4 99:3 158:22
decreased 156:2 160:6 162:17

dedicated 90:21 149:8
deductible 110:10
deductibles 108:5 110:8 125:25 126:3
deemed 52:17
deems 50:1
deep 55:14
defendant 15:24 16:14 18:10
defendants 3:3
defense 8:20 10:11
deficiencies 115:24
deficit 76:24 77:2 80:7 93:16,18 112:16 113:2,5 114:3
define 27:23
definition 19:18 88:24 89:5 91:14
definitions 88:22 115:3
degree 83:13 84:4
delay 46:7
delays 76:5
deletions 172:6
delivering 75:3
delivery 74:13 104:22
delta 123:3
demand 134:17
demographic 81:1 83:9
demographics 92:17 154:3
demonstrates 123:17
denied 50:1,5 51:20
denote 6:14
dental 54:19,21
deny 95:12
department 3:7 4:3,6,12 36:6 63:5 136:1,4 162:1 163:2,8 166:4
department's 35:19
depend 61:3 107:20,25 154:1
depends 7:6 44:11 47:6 126:7 153:21
depicting 85:10
depleted 71:15 76:15 84:17 111:4,12 112:12 157:24
depletion 75:21 76:6 77:19 78:9 79:5,10 80:4 82:23,25 84:8 111:15 112:8,16
deponent 9:1
deposing 8:17
deposition 7:4 7:13 9:3 10:14 11:12 14:8,20 14:23 16:10,16 16:19 99:15 102:2 167:20 168:15,17 170:7 171:7,8 172:3
depositions 15:15
deputy 9:21,22 34:13,15,16 163:24
describe 16:1 22:14 26:18 32:15 41:5,14 45:11,14
described 27:22
descriptors 150:4 152:19
deserted 101:14
designated 14:1 16:6 56:4 61:12,18 64:3 64:10,23 145:7 163:14
designation 14:9,13 19:4 38:17 41:13 52:24 128:24 130:2,5
designations 13:25 14:5 37:10 39:4 40:2 45:11 56:15 61:9
designed 149:24
desire 171:9
despite 21:16 138:2
details 160:11
detection 148:12 149:9,9
determination 50:8,18 53:17 89:10 90:18,24 90:25 91:7,16
determine 140:14 151:12 152:10
develop 26:1 33:17 34:8 134:6

developed 26:11
developing 26:7 32:24 68:1
develops 58:19
diagnosis 49:6 49:13 53:1 147:21
diagnostic 145:15
dictated 94:18
difference 90:20 132:14
different 33:3 35:1,9 44:8,9 45:12 48:5 52:6 60:7 63:20 69:9,9 72:22 77:9 94:9,11 96:2 97:19 98:3 113:24 121:9 130:9 132:10 132:16 146:23 147:20,24 148:3,23,24 161:17 164:7 164:24
difficult 83:12 142:15 150:9 150:14
dire 71:17 113:14
direct 84:3 102:5 132:1 134:9
directed 13:7
directing 123:10
direction 131:24,25
directly 41:1 132:6,6 135:7 152:7
director 9:22 32:13 34:13,16 50:15
directors 50:13
disabled 40:12 47:9,16
disadvantaged 127:13
disagree 84:14 92:21 109:2 152:9
disclosed 68:5
disclosure 38:14 147:7
disclosures 16:4,7,16 38:3 38:19 65:6
disclosures.pdf 5:7
discontinued 156:5
discuss 130:20
discussed 103:8
discusses 71:2
discussion 63:25
disease 38:17 38:18 40:13 58:17,20 59:1
diseases 59:1
disparity 75:5
distinction 43:18
distinctions 132:20
distorting 118:11
district 1:1,1 7:15,16
division 1:2 7:17 165:11,19
divulge 39:8
doctor 41:6
document 1:5 6:14 14:15 16:2,4,15 21:6 21:10 38:5,7 38:13 62:2 67:8,17,24 68:5,12,16,24 69:12,15,19,23 70:11 72:2,7 72:10 73:4 74:5 88:14,23 93:7 101:24,25 119:25 123:11 124:18
documentation 25:14 31:25 109:12 138:19 139:3,10,19,21 140:6 145:1,21 146:5 151:11 151:21,23
documented 43:6
documents 15:9 29:1 61:23,24 62:4
doing 23:22 37:8 130:14 142:14 143:22 155:14
dollar 164:3
dollars 35:4 36:11,12 37:7 37:7 94:11 164:17 165:6
door 133:12
double 148:15
doubt 92:25 109:6,17 110:1
downcode 140:17
dr 60:6
draft 168:12
draw 123:4
drive 2:13
driver 117:21

drivers 81:1
dropped 105:6 106:1
drug 41:15 57:15 58:12 155:24
dual 57:8
due 79:12,18 145:2,8
duly 8:9 169:7
durable 41:9 49:19
duration 65:6

e

e 1:8,8 45:11
earlier 17:5 19:4 32:19 38:22 57:15 61:14 69:21 75:22 79:12 99:14 102:16 107:7 108:4 111:14 112:15 118:14 119:6 120:12 122:8 125:24 126:6 127:5,12 132:3 136:20 137:21 138:13 139:7 140:23 143:14 146:15 157:11 160:5 161:12 165:10
early 71:14 83:2
earned 42:10 42:10 45:18
earners 46:9
earning 42:17
earnings 42:6
easier 140:7
eastern 1:1 7:16
economic 83:9 92:18 105:11 106:15
economics 105:10
economy 78:2 113:15 114:2
edit 171:9
edits 39:22
education 63:22
effect 41:20 112:18
efficacy 154:7
efficient 74:13 75:3 113:17 154:5
efficiently 36:15
effort 83:21 109:18 148:21
efforts 138:3 148:11
eighteen 40:18
eighth 91:9
either 34:7 65:3 66:4 77:10 84:14 93:14 96:14 114:19 138:20 167:16
elaborate 22:16
elect 77:10 98:20
electing 125:5
electronic 10:13
eligibility 49:9 58:14,16 60:12 77:5 93:24 97:16,24 98:2 98:6 156:25 158:15 159:21 160:2,10
eligible 49:5 52:25 56:17 57:9
eligibles 57:8
eliminate 93:16
eliminated 156:5
else's 47:23
email 12:20 13:13
employ 50:12
employed 17:5 18:4 45:24 46:9,14 47:15 58:1
employee 18:13 170:12,13
employees 32:17
employer 9:17 46:13
enact 60:18
enacted 59:5,11 59:12 73:10
enactment 57:13
encountered 97:23
encourage 143:7
encouraged 26:12
ends 89:2
enforce 138:4
engaging 52:9
enroll 42:3 96:14,15,15,19 96:20
enrolled 41:11 41:16 48:9 56:23,24 127:18
enrollee 42:24 124:24
enrollees 41:18
enrollment 33:24 34:3 41:23 43:19

57:21 127:4
enrolls 55:3
ensure 36:14 36:19 91:19 143:8 148:17 149:22
enter 18:18
entering 171:7
entire 24:25 70:4 155:15
entirety 39:18
entitled 16:3 42:12 45:20 58:21 81:8 102:7,8 108:16 127:14
entity 63:16
equipment 41:9 49:19
eradicated 138:11
errata 171:7,10 171:11,13 172:1
error 29:8,9 31:12 138:5,13 139:18 140:6,8 146:12 148:5
errors 31:25 33:14,19 138:10,19 139:3,19 140:17 141:18 144:13,13,20 149:22 150:10
esquire 2:4,11 2:18 3:4,5,6 4:5,11
essentially 46:18
established 40:15 123:15 148:3
estimated 28:11 76:18 79:5,10 105:7
estimates 79:15 110:18
et 78:3
evaluate 50:7
evaluated 85:7
event 77:1
everybody 13:20
everybody's 57:5
evolution 154:6
ex 80:25
exact 6:14 34:11 70:3 117:19
exactly 19:10 19:16 26:16 39:11,13 43:8 76:10 78:18 119:3 124:4 160:2
examination 5:2,3,3,4 9:10 154:14 157:9 166:14
examined 8:10
example 33:21 33:23 40:10 48:14 49:18 50:11 54:19 56:3 58:14,23 94:11 97:14 133:15 138:13 139:5
examples 33:20
exceed 71:14 90:22
exceeding 87:16
excess 89:10,19 90:18 91:8,16
excited 114:12
excluded 54:14 54:21 161:17
excludes 54:17
excuse 10:21 16:13 31:17 73:12 79:8,11 88:10 105:11 111:11 115:6 117:25 123:24 143:10 160:15 166:13,17
execute 171:12
exhibit 5:7,8,9 5:11,13,15 16:3,8,9,11,12 16:17,18,22,23 17:1 20:18,22 38:2 67:10,13 102:2
exhibits 5:6 6:13 15:16,18 15:25 17:4
existed 10:25 155:15
exists 46:25
expand 58:13 155:19 156:25 163:20
expanded 57:13 58:1,5,6
expect 33:25 91:18 104:24 115:22 156:12
expected 34:8 39:20 48:17 80:22 111:24 114:2 122:14 123:16 126:11 127:1 128:21 130:15
expedited 89:18 91:6
expenditure 76:2 98:7 118:12 120:10

expenditures 79:13,14,19 80:17,22 81:9 81:17 83:11 85:6,8,15 87:7 88:1 90:21,23 93:20,22 94:1 94:6 97:9,15 98:16 103:12 108:17 114:17 115:14 116:25 118:3,15 122:15 124:3,5
experience 24:12 25:5,22 31:11 44:7 50:10 54:7 58:9 61:7 66:12 94:5 96:18 97:11,22 98:5 131:24 132:1 134:20 136:3,5 141:22 147:18 148:2 148:20 149:1,7 151:5 155:21 156:8,10,14,21 158:14 160:19 161:19 162:16 163:18,21 164:6,24 165:3
experienced 157:3 159:14
expert 11:17,22 12:8 16:6 18:21 19:5,14 19:17 38:14 39:18 147:8 162:21
expertise 39:24 53:22 56:8 159:22 160:24 161:9
expires 169:15
explain 45:16 46:22 56:21 68:24 74:21 75:23 76:10 78:15 92:9
exposure 65:25
expound 49:24
ext 2:8
extensive 21:23
extent 36:16 37:5 47:3 54:20 59:24 84:9 111:6 129:15
extractions 140:25
extrapolated 125:6
eyes 21:1

f

f 1:9 2:11
faces 73:8 86:16
facilities 40:21
facility 103:25
facing 71:10 86:13
fact 51:11 53:10 80:16 128:16 134:7 157:22
factor 128:16
factors 83:10 128:11
facts 20:4
factual 71:21
fair 48:11 107:2,5 120:14 153:22 155:14 156:8,15
fairly 87:4
fall 13:11 19:5 19:9 29:23 31:6 59:2 74:19 75:10,14 99:17 103:21 104:13 105:7 105:12 106:8 106:16 114:16 162:2
fallen 29:24
familiar 10:19 10:21,22 94:16 94:21 115:7 132:22 133:20 133:25
far 11:24 14:10 22:17 30:16 31:15 36:9 38:8 72:21 78:4 106:12 123:5 128:19 129:12 130:15 131:8,9 136:23 147:6 150:4 152:19 158:3 160:15,17,19 161:13,14
fault 33:14,18
favorite 168:8
feasible 143:24
feature 15:17 15:19,24 67:9
february 1:12 7:2 169:10 170:18 171:1,7 172:3
federal 4:7 18:6 18:9,13,15,22 19:3 32:17 56:9 59:4 72:19 107:14
federally 40:11
fee 18:22 22:25 23:3,6,18 25:1 28:14,23 29:13 30:13 32:21 33:3 53:13 55:7,11 64:18

64:21 138:12 139:18 155:8
feel 52:20 150:23
fell 160:8
ferret 142:3
fewer 47:4
figure 81:7 85:3,5 86:22 86:25 87:1 111:14,19
filed 7:14 11:4 11:9
fill 11:20
finance 40:25 92:15
financial 9:21 9:23 23:23 24:22 30:2 31:7 33:7,9 34:12,15 35:1 35:11,17 36:2 41:4 67:22 69:7 71:3,7,17 71:23 73:8 78:15 86:12,17 88:8,8 93:9,11 114:20 115:4 122:18 131:17 132:8 163:8,23
financially 7:21 71:12 127:13 170:15
financing 90:21 123:12
find 149:22 171:6
finding 33:19
findings 35:13 35:22
fine 101:12
finish 36:23 37:2 110:23
first 8:9 12:18 15:2 17:4 23:22 31:7 38:18 58:14 72:4 73:5 75:24 90:3 102:25 115:11 116:23 123:12 141:6 154:16
firsthand 129:9
fiscal 80:8 91:4 124:23
five 15:18,25 38:19 75:22,24 92:1 137:8,17 167:19
fix 77:3 158:7 158:12,23
fixed 77:14 94:18
flag 145:23
flagged 146:6
flatout 139:5 139:24
flexibility 59:25
florida 1:17 169:3,14 170:3
flow 35:4
flowing 48:24
focus 26:4 36:18
focused 24:3,24 25:25 68:16,20 130:8
follow 74:5 105:9 106:13
following 8:23 91:1 172:5
follows 8:10
foot 54:19
foregoing 172:2
foreseeable 87:17
form 57:19 104:6 107:11 131:19 135:6 143:15,16 147:15
format 104:12
formula 48:15 122:24
forsyth 4:13
forward 46:17 46:20,24 47:5 86:18 109:18
found 30:24 33:14 144:12 144:20
foundation 74:24 84:14 104:7 107:12 131:4 156:20
four 73:2,3 101:1 137:12
frankly 160:9
fraud 148:11 149:8
fraudulent 25:10 26:13 32:7
free 42:12 45:20 57:7
front 124:1
full 9:12 18:13 46:14,14 53:21 84:18 85:24
fully 10:2 103:14 111:8 138:11,21 143:4
function 32:5 33:22 47:13 49:15 152:8
functions 23:20 31:24 33:3 35:2,6 136:22
fund 45:18 46:24 48:5,7 48:18 69:9

71:7,10,15,17 75:21 76:6,14 77:19,19 78:9 78:16 79:5,11 79:19 80:7 81:8,16,25 82:4,11 83:1 83:10 85:14,24 86:11,16 93:12 100:1 108:23 108:23 110:24 110:25 111:11 111:23 112:8 112:12,22 114:11,18 115:17 116:19 121:24 122:7 122:17,19,24 123:13,23 124:3 126:1 128:2,25 129:2 130:11,11
funded 40:11 45:13,14,17,24 46:2 47:22 48:12,20 55:12 55:14,18,21 56:5 122:25 130:1,2,3,11
funding 29:18 46:21 47:6 48:23,24 86:5 88:14,24 89:4 89:9,11,18,19 89:21 90:1,3,4 90:19 91:1,8 91:10,14,17 116:21 119:23 121:24 122:9 123:5 128:2 130:8 134:8 157:23
funds 46:11 56:11 69:9 71:24 116:21 126:20 128:3 158:4
further 5:3,4 73:9 92:9 97:13 154:11 157:5,9 166:10 166:14 167:15 170:11
future 60:19 61:2 64:11,17 64:21,24 65:7 65:11 66:9,9 78:19 85:15 87:17 91:18,20 92:4,10,22 103:10,14 104:5 113:11 126:12 128:9 129:5,19 130:3 130:16 133:8 134:22 153:4,8 153:12,20 154:21,24 156:9,13,18,23 157:13 158:18 158:21 159:10
future's 154:9

g

g 56:16
gap 86:5
gary 4:11 13:22
gary.kurz 4:15
gears 116:21
gehrig's 58:17 58:20,25
general 10:22 12:1 31:10 36:19 48:1,13 48:13 50:5 54:6 89:11,19 90:18 91:8,16 107:5 123:2,6 128:7 130:18 144:3,12 149:5 149:5
generalize 96:3
generalized 20:11
generally 10:19 21:19 22:18 43:25 48:12,23 49:1 57:25 58:3 59:17,19 60:15 61:7 69:2 71:2,4 78:13 114:9 122:20,22 133:7 136:21 144:19
generated 90:4 90:5 115:15
georgetown 2:21
georgia 4:14
getting 79:24 166:18
gio 13:21
giovanni 3:4
giovanni.ant... 3:11
give 30:6 64:3 105:15 117:4 117:24 118:1 155:12
given 11:12 33:24 44:25 172:3
gives 68:21
giving 117:7
glossary 88:23
go 7:11 11:6 17:10,12 27:13 42:19 45:16 47:2,5 88:19 90:12 99:9 103:6 106:11 112:11 119:12 120:18 131:9 141:7,13 161:11

goal 148:7,8
god 159:16
goes 42:20 49:14 90:16 103:15 133:12
going 7:1 8:17 9:9 14:10 15:14,18,19 16:1 17:3,17 20:18,19 37:9 37:10,13,16 38:1 39:6 55:17 66:14,16 66:20,25 67:8 67:15 74:4 78:1 81:3 86:18 88:25 89:7 93:6 95:25 100:20 101:24 102:15 102:23 103:16 104:12 108:8 108:21 109:22 111:2 117:23 119:16 120:18 120:20 125:14 137:11 146:12 147:6 153:8 154:9,19 156:12 157:18 159:24
gold 150:16,19 150:23
golkow 7:19 171:13,22
gong 16:5
good 7:1 8:12 8:13 73:18 80:15 83:24 154:16
gotcha 89:9 119:4
gotten 80:8
governed 59:4 59:7,8
governing 144:1
government 10:24 11:21 18:7,9,16 32:22 46:1 48:10,25 55:19 55:21 56:9 107:14 123:14 128:4 133:21 145:6 163:15
gradual 93:14
graham 2:5
graph 124:10 126:15
great 8:18 9:8 101:16 166:9
greater 80:22
group 2:19 8:16 32:13,14 32:17 132:7,8
groups 24:23 34:25 58:14 131:18
growing 75:5 126:19
growth 92:6 105:11 106:15
guarantee 65:6 127:17 153:3 153:10 154:21 154:24
guaranteed 64:24
guess 84:22 97:19 154:8
guideline 26:19
guys 148:4

h

h 80:7
half 15:3 28:18 138:15 139:1
hand 50:8 169:9
handle 54:7
handled 136:16
handles 132:15
handling 136:7
happen 51:18 51:19 78:1,5 83:14 99:8 153:8 159:10
happening 51:11
happens 77:1
happy 37:14 39:3 88:15 124:19 135:19
hard 38:10 39:13,13 49:23 96:3 99:6 113:18 148:15 149:4
harder 142:18
hate 98:10
hazard 154:8
head 19:11 29:20 30:19 42:21,25 56:10 62:14 63:18 117:18 121:14 146:2 149:12
headwinds 71:11 86:17
health 4:3,6,12 40:12 41:8 55:5 56:1 74:12,20 75:7 75:12 99:18 103:21 105:4 105:17 111:5 118:10,24 121:19
healthcare 23:9 40:22,24 41:2 74:17 75:2,9 75:13 83:9 92:6 111:9,18

112:5 113:17
hear 8:5 12:25 13:2 17:7,8,9 46:5
heard 7:8 95:14 120:17
hearing 7:25
help 17:13 20:25 22:20 31:4 63:20,20 94:25 112:21 127:15 136:11 136:23 142:3,3
helped 22:18 38:23
helpful 88:16 88:19 151:1,5
helping 32:25 132:1
helps 36:14 40:20 41:5 50:8 63:8,10 140:14
hesitate 80:15
hh 169:14
hhs 12:23 144:2,11
hhs.gov 4:9,15
hi 45:16 71:7,9 71:10,17 75:21 76:6,8,14,17 77:19 78:8,16 79:5,10,13,19 81:8,25 83:10 85:6 86:11,16 86:22 87:2,16 93:12 100:1 108:22 109:25 110:24 111:11 111:23 112:8 112:12,21 114:11,15,16 114:18 116:19 121:24 122:19
high 82:23 83:1 145:8 167:6
higher 79:15 87:3,5,7,7 103:12 117:11 119:6 120:13 125:12,13,13 125:14
highest 116:25
highlight 74:4 85:2 86:21 87:11 89:3 93:20 114:14 118:2
highlighted 74:7 75:25 79:1,1 82:20 85:5 90:14 102:8 104:20 111:3
highlighting 85:22 90:11 92:2
highlights 21:22 68:21 69:22 71:6 78:22 89:25 108:19 130:23 131:7
highly 92:4,10 92:22
higlas 35:5
hillier 1:15 169:13 170:5 170:21 171:21
historical 46:25
historically 82:1
history 66:7 159:7
hit 33:23
hold 34:13,23 65:11 78:17 134:22
holds 48:10 78:19 113:12
home 40:22 41:8
honestly 39:10
hope 83:22
hospice 40:22 87:9
hospital 41:8 45:15 87:8 117:12
hospitalized 54:21
hospitals 40:21
hour 15:3 37:14 100:14 137:2,3
housed 45:5,6
how's 21:2
hpc 142:8
huh 6:7,8
hum 6:7
human 4:3,6,12
hunter 62:7

i

icd 142:9,9
idea 62:5 69:14 73:18
identification 134:23
identified 39:4 65:5 106:21 109:3 110:17 113:5 128:10 132:4 151:9
identify 26:13 26:20 27:11 31:4,12,12,13
identifying 24:3 28:6 31:24 104:4
ii.b1 119:24
ii.e1. 81:7
iii 38:14
iii.b5 85:5

iii.b5. 85:3
iii.b6 86:22,25 87:1
illness 49:7,14 53:2 161:15 167:9
illustrate 93:15
illustrates 103:11
illustrating 81:16
illustrative 102:8
imagine 62:17 108:2 132:12 139:11
imbalance 93:9 93:11
immediate 93:14 115:23
immediately 93:17,21 97:10
impact 73:11 73:12
impacts 87:9
implementati... 93:14
implemented 103:14
implication 126:15
impossible 150:9,10
improper 24:4 24:24 25:2,4,8 25:18 28:11,20 28:21 29:2,15 30:10,12,16 31:14 35:9 137:23 139:8 139:12,17 145:8,23,23 146:6 149:9,23
improve 167:9
inadequate 111:8
inappropriately 140:15,18
include 57:13 94:2 120:1,8,9 120:11 121:18
includes 108:22 109:25 118:9
including 9:1 24:3 25:1 35:2 60:11 118:12 121:17 137:23 171:13
inclusive 30:11 30:18
income 41:18 45:18 47:14 48:14 57:6 86:23 87:4,16 87:25 114:15 114:16 115:15 115:16,16 123:6,6 125:12 134:8
incomes 125:13
incorrectly 30:25 31:4
increase 34:7,7 77:11,11,13 98:1 105:10 106:5,14 126:12
increased 79:18 80:17,22 93:18 110:9 124:4 126:11
increases 124:5
increasing 124:12,13 158:15
increasingly 103:21
incurred 76:9 108:23 114:16
index 5:1 105:11 106:15
indicate 41:19 73:7 81:22 87:1 110:7 151:21 171:10
indicated 71:13 78:22 106:6 114:1 171:14
indicates 32:12 81:25 87:1 89:20 128:24
indicating 85:14
indirect 135:9 135:19
individual 55:3 56:22,24 58:21 61:15,19 64:12 65:8 127:18
individuals 10:24 15:7 20:9 23:8 42:13 46:12 47:8,16,18 56:17 57:7
inefficient 154:5
information 14:10 44:21 65:20 105:21 110:2 138:23 142:22 148:21
inherent 92:5
injury 49:6,14 53:2 161:16 167:10
inpatient 40:20 87:8
inputs 103:19
inspector 144:3 144:12
instance 147:2
insufficient 152:10

insurance 40:12 41:15 45:15 48:6 55:23,25 74:20 75:7,12 99:18 105:5,17 117:12 125:25
insured 102:19
insurers 74:14
integrity 24:3 24:15 25:25 26:4,20 31:9 31:23 32:4 36:13 137:23 143:2,9 146:25 148:17 150:22 151:10
intended 70:11 74:22
intent 70:16
interest 36:5 45:18 114:16 115:16 128:7
interested 7:22 170:15
interesting 45:13
intermediate 82:6,13 87:2 110:18
internally 36:1 136:16
internet 7:6
interpret 76:23
interpreting 22:13
interrupt 141:4
interruption 6:4
interview 142:1
intimately 26:6
intricately 80:25
introduction 14:18 68:15,20 69:22 70:4 103:9 130:23 131:6
introductory 108:19
inventory 13:24
investigation 142:1
investments 45:19
involve 33:5 63:23 93:23 147:23
involved 14:4 26:7 31:23 33:8 41:2 61:24 80:25 83:19 84:2 92:18 131:13 136:25
involves 27:7 132:11
irmaa 125:9
issue 77:16 104:4,25 106:24 116:9 139:24
issued 16:10,13 16:21 75:19 89:22 91:9,11 91:17
issues 100:2 121:2 139:4 145:9
issuing 90:17
item 49:4,12 50:5 52:25 54:13 167:8
items 41:6

j

january 16:14 41:20
jason 4:22
jenna 2:11
jfb 2:16
jfk 4:7
jill 4:5 13:21 101:9
jill.steinberg 4:9
job 1:18 9:20
joshua 3:5 13:22
joshua.g.carp... 3:12
judgment 51:1
june 32:13 34:11
justice 3:7 11:10 130:21 130:25

k

kaiser 22:11
kathleen 62:7
keep 21:13,14 21:17 25:13 42:22 43:1 93:11
key 6:2
kind 34:6 37:4 46:17,20 48:4 52:12 54:24 68:15,21 92:18 104:9
knew 54:11
know 11:9 13:20 19:16 20:7 22:15 26:11,16 28:10 29:18,21 30:20 37:3 42:20,22 43:1 45:3 46:23 47:5 49:25 50:6,22 55:18,21,22 59:1 61:14

62:7,11 63:16 66:15 69:15 70:2,15,17 72:8 73:16 77:23 80:21 81:14 88:17 89:20 94:5 97:12,18 100:8 109:16 112:17 112:25 113:11 113:13 114:12 114:25 123:6 129:22 138:8 138:17 139:1,1 140:1,2,11,12 141:24 149:8 153:18 155:10 158:23 160:9 162:1,4,24 163:4
knowing 165:1
knowledge 20:3,11,13 25:5 31:10 39:24 45:7 55:13 74:23 75:23 84:4 87:22 91:15 128:11 129:9 129:15,25 130:20 132:19 133:1 135:9,20 151:15,17,25 156:1,3,4
knowledgeable 161:22
known 29:10 40:14 52:18 66:8 159:7 162:17
knows 78:18
kurz 4:11

l

l 3:8
lamacchia 2:18
language 76:22 78:3 91:24 92:25 99:23 104:9 106:3,12 106:21 123:22
large 1:17 29:17 32:23 47:21 139:11 140:4
larger 120:10 121:16 139:17
larry 1:10 5:2,8 5:13 7:13 8:8 9:14 16:10 169:7 170:7 172:2,25
law 10:23 59:13,25 66:13 69:16 70:18 73:7 74:19 75:10,14 76:4 78:7,10,16 85:7 86:3 89:16 90:17 91:19 94:12,15 99:16 103:11 105:9 106:13 107:13 126:24
lawmakers 93:10
leadership 8:15 60:2 156:24
leading 32:16 156:20
left 37:4 101:17 134:14 137:6
legal 2:19
legislated 85:8
legislation 73:10,10 89:15 89:17 91:3,6 104:23
legislative 153:21
lejeune 1:4 7:14 8:16 10:20 11:1,10 14:2 18:10 20:5 38:15 39:19 61:13 62:10 65:16,25 66:1 68:7,13 69:24 70:7 130:21,24 171:3 172:4
length 121:23
lengthy 68:16
leslie 2:18
letter 16:13,13
letter.pdf 5:10
letters 134:17
level 23:22 34:4 34:19 65:7 104:23 105:22 138:5 146:10 163:25,25 164:10 167:6
levels 44:9 60:20 61:3 105:3,5 153:11 154:24
lien 63:15 132:21,24 133:13 135:15
liens 132:4,11 132:15 135:3,4 135:5,12 136:7
life 47:23
lifetime 159:15
likely 44:19 156:9,16
likewise 110:1
limit 97:24
limited 9:2 23:12 53:11,15
limitedly 53:4
line 81:20,22 85:9 124:11 172:7

lines 49:16 157:17
lists 108:22
litigation 1:4 7:14 8:16 10:20 11:15 12:13,19 14:2 18:10,19,23 19:22 20:1,5 21:12 38:15 39:19,24 61:13 61:16 62:10 64:4 65:17 66:1 68:7,13 70:7 131:3 135:5,10,20,25 135:25 152:25 171:3 172:4
litigations 69:24
little 17:10 21:1 28:19 37:12 38:6 46:8 66:19 78:12 103:3 118:11 118:11,17 120:9,13 159:25
lived 156:11 157:2
llamacchia 2:23
locality 96:2
located 10:5
long 14:25 31:22 36:8 42:14 85:20 86:3 88:2,8 93:9,11 105:1 106:7,24 114:21 115:6 155:2
longer 154:17
look 16:5 20:17 21:3,24 22:1 28:1 56:14 57:12 66:16 72:1,4 73:2 74:2 78:21 81:3 84:25 85:1,19 86:20 92:1 93:6 102:11 166:1,1
looked 14:17 24:1 125:24
looking 20:21 30:17 85:13 101:23 119:23 124:10 163:24 164:2,5,16,17 164:20
looks 21:24 22:24 39:3 106:20 112:3 120:8,9 124:10 124:10
lose 127:9
loss 133:22
lost 8:6
lot 36:10 116:19 140:6 147:19,24
lots 62:16
lou 58:16,20,25
loud 89:7 90:16 92:3
low 41:18 57:6 97:2
lower 77:11,12 77:13 87:10
lowest 95:8,13 95:15,20
lunch 101:5,7 101:14
luncheon 100:22

m

macro 163:25 164:10
madam 12:24
made 17:23 31:14 50:18 52:1 60:1 61:3 78:10 86:2 88:5 90:24 125:20 153:22 154:2 171:11
magnitude 93:15 150:9
main 2:6 10:7
maintain 88:7
maintained 86:3
maintaining 35:5
maintenance 55:5 56:1
majority 23:2
make 17:14 21:1 25:11 38:6 39:22 48:19 50:8 53:16 59:14,18 61:12 73:25 91:19 103:3 109:21 123:5 124:8 140:16 140:20 148:4,8 148:13,15,20 148:21 150:2 154:19 157:22 164:16 168:7 171:9,9 172:5
makes 59:21 73:20
making 24:19 50:25 51:9,14 60:1 66:8 92:18 113:23 159:8
malformed 49:15 161:16 167:10

managed 30:13 132:4 152:5,7 155:9
management 8:20 9:23 23:23 30:3 31:8 32:14 33:7,10 35:1 41:4 131:18 163:8
manages 43:18 141:1
managing 32:18,25 35:1 131:13
mandatory 96:6
manner 6:13
manual 151:10
manuals 164:20
margins 103:23 103:25
marked 16:8 16:11,17,22 17:1 67:10,13
market 171:22
marketplace 30:14
marks 171:9
maryland 10:7
massachussetts 4:8
material 35:22
materials 10:16 67:25
math 155:14
matter 7:13 47:13 48:1 73:21 80:16
matters 73:16
maximize 73:11
mean 11:19 19:17 23:16 30:8 43:1 46:24 49:23 50:4 51:8 54:15 56:19,19 56:22 58:4,8,8 58:9 69:3 74:25 75:1 77:8 79:16 80:3 81:14 94:4,7,8 97:5,6 101:11 104:9 107:25 114:8 114:22 115:13 117:8 121:13 130:7 133:6,7 134:3 138:9 141:8,25 143:13 147:19 147:23 148:20 148:24 149:3 152:15 154:1 160:18
meaning 34:17 73:20 75:12 76:18 79:24 112:5 114:17 138:19 139:19
means 9:1 10:13 19:18,21 80:3,5 112:14 115:5 134:12 148:23 150:1
meant 25:25 31:17 88:10 135:15
measure 29:15
measurement 30:10
measures 150:2
measuring 24:24 30:12 35:8
media 7:12 37:17,22 67:1 67:6 100:21 101:1 137:12 137:17 167:19
medicaid 30:14 57:9 104:2 127:14,15 162:12
medical 23:22 24:1,17 25:14 25:19 26:12,20 27:5,6,7,8,13 27:14,16 28:1 28:7 41:9 48:6 49:19 50:13,13 50:15,16 51:1 95:6 101:18 104:5 138:21 138:22 139:20 139:22 140:13 140:19,24 141:9,14,19 142:7,14 143:18,22 145:14,15,21 148:6,23,25 149:1 150:18 151:7,11,20,22 152:5,8,18
medically 49:12,21 50:2 51:6 52:17 148:9 161:14 167:8
medicare 9:18 9:18 11:25 20:11 22:13,18 22:19,21,25 23:3,6,8,10,18 23:19,21 24:5 25:1,5 26:11 26:19,21,25 28:14,23 30:13 31:5 32:1,14 32:18 33:6,9 35:7 36:21 37:8 40:3,7,8

40:11,14,15,17
40:20,24 42:1
42:9,12,22
43:19,23 44:22
45:6,12,19,23
46:19,21 48:21
49:4,25 50:11
51:1,8,24
52:10,16 53:13
53:16 54:1,24
55:3,4,7,12
56:16,19 57:9
57:13 58:21
59:4,7,15
60:11,19,23
61:2 62:24,25
63:11,12,22
64:11,17,20,24
65:7,12,15,24
66:8,9 67:21
69:5,10 71:24
72:14 73:8
74:18 75:2,5
75:10,13 76:20
77:5 81:11
84:9 88:14,24
89:4,9,11,17,19
89:21 90:19,25
91:8,10,14,17
91:20 95:7,14
95:20 96:5,11
96:15,21 97:1
97:14,16 99:2
99:4,16 101:19
102:18 103:10
103:12,24
104:1,2,5,11,15
104:24 105:3,5
105:8,10,11,12
105:16,24
106:15,16,23
107:9 108:6,17
109:23 111:5
116:20,22,22
125:5 127:14
127:16,17
132:9 134:15
136:22 137:24
144:2,7,13,21
145:1,7 146:16
146:17 149:20
151:14,23
153:3,17
154:21,25
155:6,7,8,9,10
155:15,19
156:1,4,9,15,16
157:14 159:7
159:11,22
162:5,12 163:5
165:17 166:17
167:5
medicare's 36:8 47:21 71:2 90:20 92:4,9,21 103:20 153:20
medicares 41:22
medicine 78:3 154:4,6
meet 14:19 34:4 50:4 114:19 151:13
meeting 15:1,2 15:3 33:15 51:10
meetings 13:14
member 49:16 161:16 167:10
memory 88:17
menial 160:11
mention 90:2
mentioned 23:25 127:12
messaging 9:2
met 14:22
methodologies 60:13
methods 134:16
metrics 33:16 34:4
micro 163:25 164:10
millions 149:14 149:16
mind 20:17 37:11 85:1 89:8 100:15
minimize 73:12
minimum 125:19
minus 85:15
minute 22:16 146:24 147:13 149:3 150:21
minutes 15:4 121:8 137:8
miscoding 25:19 139:5,13 139:24 140:8 141:18 142:6 142:16 145:2 148:11
misstates 161:2
mistakes 25:11
modifiers 147:21
moment 21:2 43:10 60:5 61:10 71:23 120:19
money 132:25 133:2,11,16 134:4 149:8
month 19:10 124:17 125:7 155:13
monthly 56:18 57:1 110:16
morning 7:1 8:12,13 137:21

move 80:4,19
moved 79:17
moving 122:6
msp 63:1,21

n

n 1:8 2:6
n.w. 3:8
name 8:14 9:12 60:9 62:23
names 13:24
narrative 14:13 70:9 82:16,19 161:13
narrow 53:12
narrowing 97:15 98:6
near 91:18
nearing 93:24
necessarily 6:14 24:21 33:25 36:16 37:3 47:3 52:12 55:15 61:4 72:9 83:14 95:17 97:21 98:12 99:12 109:16 128:17 129:11 161:18
necessary 49:5 49:9,13,21 50:3,18 51:6 52:1,17 53:1 54:2 122:2 126:20 148:9 151:13 161:15 167:9,9
necessity 145:15
need 91:18 143:21 157:22
needed 53:17 93:15 112:18
needing 123:5
needs 36:2 73:9
negative 6:8 85:16 103:23 104:14
negotiated 74:15
neither 102:16 102:17
never 111:10 112:11
new 60:8
nine 68:4 72:5
ninth 91:7,15
nod 5:8
non 19:14,17 19:20 104:2,2 114:16 115:16 130:12
north 1:1 2:7 2:14 7:16 20:6 20:10
notary 1:16 169:14
note 6:13 7:4 9:5 12:20 78:14 147:5
noted 8:1 85:23 115:25 171:10 171:10
notes 170:9
notice 16:10,19 68:5 116:9
novak 4:22
nuance 146:10
nuances 132:19 146:2
number 7:12 25:9 30:4 37:17,22 50:14 67:1,6 72:2,5 73:4 75:25 77:3,14 81:4 85:2 86:21 89:2 93:8 100:21 101:1 103:1 104:19 108:13 117:25 121:18 137:12 137:17 138:16 139:14 167:19
numbers 16:24 67:11 90:9 109:7 118:12 118:21 119:5 120:12 140:4
nurse 27:15 50:7
nurses 50:14
nursing 40:21

o

o 1:8,8,8,9
oath 5:4 7:20 169:1
object 31:18 39:6 88:11 104:6 107:11 135:6
objection 11:5 12:10 19:6,15 19:23 20:12 21:18 22:2,5,9 24:10 25:6,20 26:2,14,22 27:20 28:4,12 28:16 29:4,11 29:19 32:2 35:15 36:22 40:5 43:7,14 43:24 44:6,23 45:2,8 47:11 47:25 50:21 51:7,21 52:3 52:19 53:6,19 54:4 56:6 58:7 59:6,16,22 60:14,21,24 61:5 62:13 63:6,17 64:6 64:13,19 65:1 65:9,18 66:2

66:10 68:8
69:1,13 70:1
70:14,22 71:18
73:15,23 74:24
75:15 76:1,21
77:7,22 78:11
79:20 80:2,9
80:13,23 81:13
81:23 82:7,14
83:4,18 84:1
84:12,21 85:11
86:7,14 87:18
87:23 89:23
90:15 91:21
92:11,23 94:3
95:10,22 96:8
96:17 97:4,17
98:9,17,23
99:5,21 100:5
105:19 106:10
107:3,23 109:4
109:14 110:4
110:13,20
111:20 112:9
112:23 113:9
114:7,24
115:12 116:1,6
116:14 117:2,6
117:16 118:6
120:15 122:3
122:11,21
123:20 124:7
126:2,13,22
127:20,23
128:5,12 129:3
129:7,17,21
130:6 131:4,15
132:17 133:4
133:23 134:25
135:11,21
136:9,18 138:7
139:15 140:10
141:2,20
142:10,17,24
143:3,11 144:4
144:8,15,22
145:3,10,17,25
146:8,20 147:4
147:17 148:18
149:10,15,25
150:12,20
151:3,16 152:1
152:12 153:5
153:13,24
156:19 157:15
158:1,9,25
159:12,23
160:14 161:2
161:10 162:3
162:10,23
163:3,9,16
164:4,11,18,22
165:7,14 166:8
166:24
objections 7:23
7:25 16:20
objections.pdf
5:12
obligation
85:21,25
observed
155:19
obviously
160:10
occupational
41:7
occur 9:2 34:2
53:3 76:7,15
78:9 82:23
83:2 115:23
occurred 19:5
89:11
occurring
113:8
odd 30:21
offer 55:6,8
61:12,18
offering 64:16
65:14,23
offerings 77:5
office 9:22 10:7
24:14,23 30:2
30:9 31:7
92:16 115:2
128:14 131:17
144:2,11 145:7
officer 9:22
22:18 34:13,16
officer's 24:23
officers 50:13
official 169:9
offset 47:2
87:10 133:1,8
133:8,20
134:14 135:15
offsets 64:4,8
131:2,8,13,19
132:2,15,19,20
134:20 135:9
135:13,14,20
135:24 136:14
136:19,24
ogc 12:23
oh 17:8 29:12
37:1 46:6
68:17 72:4
118:25 121:12
155:7
oig 144:3,25
okay 17:16
29:7 34:22
54:11 62:7,9
66:21,23 73:2
74:10 81:19
84:16 85:4
88:18 93:3
100:10 101:9
101:16 102:12
103:7 108:4,21
109:21 110:23
111:13 114:11
114:13 115:10
115:19 116:18
119:5,11 121:6
121:22 129:25

155:14 156:7 157:4 161:8 163:13 166:2,9 167:14 168:3 168:14
old 21:1
omitted 6:6
ongoing 84:10 111:7
oops 20:23 85:4 103:4
operating 49:10
operations 33:2 33:6,10,15
opine 152:14
opining 152:25
opinion 64:4,16 159:9
opinions 11:23 61:12,19 65:5 65:14,23 68:1 70:6
opportunities 141:25
opportunity 58:16
opposed 136:16 163:25
opted 42:1
option 98:7
optional 96:6
options 93:10 98:11 100:7
oral 70:10
order 8:21 35:13 49:11 88:5,7 115:23 143:8 167:25
orders 167:22
org 166:1,6
organization 32:6 55:6 164:25
organizations 56:1,2
original 23:8 40:8,15 49:4 55:7,11
orthotics 41:10
ortiz 3:6
outcome 7:22
outline 161:19
outlined 49:10
outlook 122:18
outpace 115:15
outpaced 87:25
outpatient 40:22 41:8
outside 14:19 35:4 52:15 146:19
outsourced 136:17
outsources 136:6
overall 59:23 71:2 104:8
overpayment 134:16,17,21 136:15
overpayments 35:7 131:20 132:21 134:7 134:11,23
oversee 34:25 144:2,7
overseeing 33:6 33:9 131:13
oversight 31:24 138:3
oversimplific... 78:13
overview 68:22
owe 133:10
owed 131:20 134:3,11
own 74:21 152:16
owned 152:17
oz 60:6

p

p 1:8
p.a. 2:12
p.m. 1:13 100:22,23 137:13,14 168:17
pa 171:23
page 5:1 14:15 38:10,13,19 72:2,5,7 73:2,3 74:2 75:22,24 78:21 81:4 85:1,5 86:20 89:1 90:8 92:1 93:6 103:1 104:18,18 108:9,12,22 110:3 111:1 117:23 119:25 123:11 124:15 124:17 172:7
pages 39:5 108:21 109:23 172:2
paid 18:15,21 23:13,13 30:24 42:24 43:5,12 44:25 48:7,8 56:8 65:24 74:14 84:19 95:3 99:2 101:19 105:25 107:1 108:5 125:4
paragraph 45:11 49:3 68:4 70:3 73:5 74:10,22 75:24 83:7 90:11 92:2 102:24,25 103:17 114:13 123:12

parameters 164:15
parse 118:17
part 21:23 25:24 26:24 27:1,2,6 32:23 35:18 39:1,2 39:11 40:20 41:5,14,23 42:7,9,12,15,15 42:19,20,21 44:14,14,14,18 45:14,19,23 46:2 47:8,17 47:21 48:4,20 49:18 55:1,3 55:12,12,14,21 56:5,16,16,17 56:20,23,23,24 56:25 57:3,5,6 57:7,11,14,15 57:18 58:5,12 59:2 76:20 77:5 81:12 84:6 92:15 93:19 102:9 108:6,6,6 110:8 111:6 116:20,22,22 117:1,1,1,8,12 117:13,15,18 117:20 118:3,4 118:4,10,13,15 118:16,20,24 120:1,6,8,9,10 120:11,13 121:10,10,12 121:13,17,17 121:18,24 122:7,8 123:15 123:15 124:3,6 124:6,16,24 125:5 126:1,4 126:5,20,21 127:4,4,18 128:9 129:25 130:9,9,9,10 131:16 139:2 140:12 148:11 157:23 159:3 160:10
partially 87:9 96:14 139:22
participants 7:7
participate 96:11,20 107:16
participating 104:24 106:23
participation 107:10,19
particular 20:14 51:25
particularly 74:16
parties 7:10 8:25 9:3 133:17 170:13 170:14
partook 24:14
parts 26:24 39:11,14 40:14 45:12 69:10,24 79:1 96:1 116:22 119:23
party 7:21 11:14 20:14
passed 10:23
past 12:23 108:19 129:19
patience 154:18
patient 43:5 112:5
patient's 50:19 50:23
patients 99:4
patterns 154:4
pay 40:20 41:6 42:4,6,14 43:2 43:5,22 46:14 46:17,20,24 57:5 64:11 84:9 95:13 111:5 117:8 122:1 125:14 125:20,20 127:7,11,15 134:23 146:18 148:16 151:22 158:22
payer 63:1,11 63:13,22 102:20 132:9
payers 104:2 106:8
paying 43:3 45:25 46:18 47:4,8 48:22 56:18 57:1,5 93:23 94:23 112:18 124:24 133:21 134:5 140:2
payment 23:21 24:5,24 26:21 28:11,21 29:15 30:10,12,16 35:8,9 49:25 54:8,8 60:13 61:3 64:21 65:7 76:5 87:10 94:11 96:5,22 103:10 103:13 104:11 105:3,5 107:21 133:8 137:24 139:18 145:23 145:24 146:7
payments 23:11 24:4 25:2,4,8,18 29:2 31:14 35:3 94:14,18 103:20 126:1

128:22 134:22 136:25 137:23 139:9,12 145:9
payout 48:18
payouts 47:2 94:6 121:15 130:16
payroll 45:17 45:25 46:2,3 46:12,25 47:4 47:9,14 48:7 93:17 121:25 122:1 130:12
payrolls 113:16
pays 42:15 46:13 57:11 95:7,15
people 23:7 30:8,21 36:4 41:2 42:3 43:2 47:12,22 58:16 122:1 123:7 127:12 138:19 142:1
percent 28:18 28:19,20,22 29:1 46:3,9,12 46:13 48:17,19 48:22,23 76:9 76:18,19 90:22 93:17,19,21 94:1,14 95:4 97:10 105:4,6 105:7,12,25 106:1,9,17 111:14,19,24 122:9,14 127:1 128:2,21 129:13 138:15 139:1,8
percentage 81:9,17 94:18 95:3 102:18 117:11 121:16 138:17 139:17
percentages 45:25 117:20 140:3
perform 23:19 113:16 114:2 149:23
performance 24:15 33:1,1 33:16 34:4
performing 50:16
period 22:11 33:25 79:14,19 80:17 85:24 86:4 93:13 105:14 106:18 122:2
periodically 21:20
periods 94:12 134:6
permanente 22:11
persistent 145:8
person 13:14 134:24 162:25
person's 46:3
personal 20:3 136:3,5 164:6
personally 11:9 109:6
persons 29:18 30:5 40:13
perspective 114:23
phase 38:14
philadelphia 171:23
phone 13:13
physical 41:7
physically 10:5
physician 27:16 50:7,25 74:17 105:3 107:15 108:1 142:7
physicians 104:25 106:4 106:23
picked 55:1
piece 41:4 68:15 117:15
pinellas 169:4 170:4
place 1:14 7:10 52:7 149:21 162:4 171:13
plain 92:25 99:23 106:11 106:21
plaintiff 8:15 54:11 61:19 168:1
plaintiff's 67:24
plaintiffs 1:11 2:3 20:4 61:15 61:22 64:12 65:16 66:1
plan 55:4 57:16 121:19
plans 33:12,17 111:5 118:10 118:24
play 113:1
please 7:4,23 9:12,20 13:18 21:8 23:5 24:9 39:7 49:9 59:21 68:18 73:6 74:11 79:2 82:21 89:5 90:14 92:3 102:1 103:3,17 104:21 108:11 114:23 119:13 120:19 121:5,5 125:2 156:19 168:4,13 171:9

171:10,12
pleasure 21:2
point 10:25 51:15 70:2 76:8,14,16 77:20 90:10 113:22 138:25 140:4 146:12 163:5
points 83:7
policy 22:13 59:15,18,23 60:1 142:21 143:7 153:21 154:2 157:13 159:20 164:20
policymakers 36:20 70:12
political 60:2,7 156:24
population 158:16
portion 122:25 130:22 133:16 138:22
portions 44:18 104:1
portrayal 71:21
posit 95:24
position 22:14 32:15 71:7,17 80:21 94:13 95:12 122:19 122:23 145:13 146:17 165:12
positioned 166:19
positions 24:2 164:7,24
positive 103:25
poss 153:15
possibilities 84:17
possibility 97:6 98:25 99:19 100:1,3 106:22 153:15
possible 75:12 75:16 84:23 97:19 98:18 127:10 153:7
possibly 99:7
post 54:8
potential 93:13 98:7 104:4 113:2 133:15 134:8 139:4
potentially 86:12 140:11
ppo 56:2
practical 27:10 141:11 143:23
practice 78:2 154:4
practices 26:13
pre 52:15 53:4 53:15,16 54:8
precise 30:7
precisely 123:9
predict 153:18 154:3 157:12 157:18 159:4
predictably 80:8
predicting 64:17
premarked 15:19
premium 41:17 42:4,7,8,12,14 42:15 43:15 45:20 48:16 56:18 57:2,5,7 57:11,19 109:24,25 123:1,3 124:16 124:21 129:10
premium's 122:13
premiums 42:1 42:16,23 43:2 43:4,5,9,12,20 43:22 45:19 48:8,15,22 57:10 100:4 108:5 110:16 112:19 121:25 122:10 123:14 124:4,12,25 125:4,14,20 126:10,19,19 126:23 127:8 127:11,15 128:9,17 129:1 129:5,19,20 130:12,16
preparation 78:23
prepare 14:7 14:12,20,23 15:10,13 21:10 21:12,14 33:11 35:13 38:23 109:15 115:3
prepared 63:25 69:4 70:20 72:7,10 109:10 109:11
prepares 68:25 69:3
preparing 14:4 61:24 62:4
prescribed 105:9 106:13
prescription 41:15 57:15 155:24
present 4:21 85:5,14,25 110:18
president 59:13 73:1 89:13 91:2
pressure 104:14

pretty 40:2 94:7
prevent 133:21
previous 13:8
previously 61:22 62:9 67:9 85:23 136:15 154:20 154:23
primarily 23:20 43:17 45:17,24 59:8 68:14 79:12 87:6
primary 63:12 141:22 142:5 145:14 161:13 167:7
principle 49:10 161:14 167:7
prior 52:8,11 53:8,9,11 86:23 161:2
prioritizing 24:18
private 18:18 55:22,24 74:20 75:7,12 99:18 105:2,4,6,8,10 105:13,17,25 106:8,14,17 118:23
privy 65:19 99:10
prob 13:19
probably 23:7 47:9 55:16 138:11 165:11
problem 31:19 38:11 79:24 121:6 125:3 158:8,12,24
procedure 147:21
proceed 8:3 17:21 37:23 67:6 101:2 119:20 120:25 137:18
proceeding 7:23 9:4
process 24:8 27:6,19 28:6 36:13 52:15 53:4,18 74:15
processes 23:11
processing 23:21 33:22 34:2
produced 35:20 67:23
production 5:10
productivity 34:8
program 11:25 23:3,6,8,16,18 24:3,15 25:25 26:4,20,25 28:15,23 29:7 29:10,12,13,17 30:5,10,11,23 31:1,3,8,14,23 32:4 33:3 35:8 35:8 36:10,15 36:17 37:8 40:3,8,11 41:14 45:6,12 46:17,24 51:1 53:13 55:8,11 57:22 58:9,12 63:1,5,12 64:25 65:12 69:5 75:2 76:9 76:18 77:6 78:10 84:19 86:2 88:6 96:11,21 97:14 100:4 107:16 118:3 121:13 125:24 127:16 127:19 131:21 134:15 137:22 140:2 143:1,8 145:8 146:25 148:5,6,7,12,17 150:8,22 151:9 152:6 154:21 154:25 155:11 155:22,25 156:5,12,22 157:14,23 160:19 163:21 164:3,8
program's 51:9
programs 24:25 32:7 35:10 41:23,25 42:2 44:4 52:7 52:13 55:24 67:21 108:6 117:5 121:10 148:3 149:21 149:24 156:16 164:17
project 114:15 153:8
projected 76:7 76:8,15 79:12 79:13,15 82:2 85:25 87:4,8 90:18,22 114:5 134:6
projecting 91:24 92:6,17
projection 83:10 92:19 93:13 105:13
projections 69:8 71:22 73:5,7 76:3 77:25 83:17,25 86:23 87:2,6 102:9 106:5 107:1 113:13 113:25 131:1

prompt 171:15
prompting 116:8
propensity 155:22
proposed 89:15 89:17 91:2
prosthetics 41:9 49:18
protocol 147:2
provide 12:6,7 16:15 19:9 36:10 37:6 39:20 40:6 54:18 55:9,10 75:4 96:23 104:14 138:20 154:7
provided 16:24 38:3 50:19 51:12 61:23 69:16 70:9 105:20 108:9 138:21 143:18 160:23 161:9 165:12
provider 23:12 23:14 27:3,14 33:24 34:3 50:25 74:13 94:24 95:3,6 95:19 96:10,19 97:1 102:18 104:5 107:19 112:20 133:9,9 136:24 143:14 146:15 149:21 158:22
providers 23:9 25:10,11,13,19 52:8 56:2 73:13 75:2 93:23 95:8,14 96:5,14 97:13 99:2 101:19 103:18,22,22 104:13 105:16 105:25 107:8 111:5 113:17 131:20 134:5 142:2
provides 23:11 35:18 36:16 37:7 41:14,17 105:2
providing 11:25 41:2
provisions 76:4 103:13
proviso 136:21
public 1:16 36:4,5,19 73:1 86:13 169:14
publication 151:10
pull 37:10
punctuation 6:2
purpose 78:8 133:20
pursue 134:15
purview 29:24 158:6,11
put 20:19 22:15 67:15 84:5 104:14 109:18 134:22
putting 83:20 116:8

q

quality 7:5,6 74:17 75:9,13 99:3,8,15
quarters 42:10
question 6:3 13:8 18:2 31:18 36:24 39:9 52:21 82:9 88:11 95:25 110:2 111:13 114:11 116:3 121:3 125:1 133:3,6 143:5 146:22 147:9 150:7 159:25 162:15 162:18 166:3 166:19,22 167:1,2
questionable 50:9
questioning 147:6
questions 110:24 130:18 154:11 157:5 166:10 167:15
quick 17:14 154:19
quickly 38:9 80:18 85:13
quite 102:17 160:8
quotations 6:13
quote 6:14

r

r 31:3
racine 2:13
racs 31:3,4,6 148:5
ran 55:22
range 35:1 62:2 79:4,14,18 93:9,11 114:20 114:21 115:4,6
rank 117:1
rapidly 111:9 111:18 112:6
rate 28:11,21 29:8,9 30:10 30:12,16 86:23 87:2 106:7 138:13 139:18 148:5

rates 24:24 29:15 31:12 35:9 64:17,21 74:14 85:8 87:4 95:8,13 95:15 97:1 99:9 103:11 104:5,11 105:2 105:5,6,8,8,10 105:12,13,18 105:22,25 106:14,16,17 106:25 112:20 114:2
rather 73:11 79:25
ratio 82:5,12
reach 86:5
read 6:14 8:23 13:7 14:17 62:6 70:3 73:3 73:4 74:10 75:23 78:25 79:22 82:20 86:9 87:12 88:25 89:4 90:13 92:3 99:14 102:22 103:16 104:3 104:20 107:2 111:2 114:14 115:13 123:19 130:22 131:6,7 165:2 172:2
reading 82:15 86:6 102:25 107:4 130:24 168:15 171:12
reads 103:8 111:4
really 17:24 49:24 53:20 54:9 61:13 65:20 114:25 134:21 141:18 148:14,14 150:23 152:14 152:16,21 154:8
reason 10:1 92:21,24 108:25 109:2,6 109:17 110:1 141:12,13 172:7
reasonable 49:5,8,12,21 50:2,3,17 51:6 51:25 53:1 54:2 148:10 151:13 156:11 161:15 167:8
reasonably 52:17 156:8,16 158:17
reasons 25:9 92:5 106:25
recall 12:20 13:19 28:17 33:19 39:10 42:21 43:16 56:10 58:19 63:19 71:8 89:24 102:15 108:4 117:17 117:19 120:2 121:3 125:14 130:24 146:1 160:6
receipts 123:1 123:2
receive 23:8 27:8,9,10 52:8 52:11,11 75:6 75:7 141:9,11
received 12:20 74:18,20 75:9 75:11,13 99:15 99:17 102:19
receiving 23:20 47:13
recent 121:14 138:16
recess 37:18 67:2 100:22 137:13
recipient 42:1 70:11 127:7
recipient's 97:15
recognize 21:5 38:4,7 62:20 62:23 67:17
recognized 31:23
recollection 44:8 55:13 66:13 156:3
recommendat... 68:22
reconfigure 66:20
record 6:14 7:2 7:11 8:1,22,24 9:4,13 10:4 16:2 17:17,18 17:20 23:22 24:1 27:5,16 37:16,21 43:3 62:1 66:25 67:5 100:20,25 101:5 102:1 103:1 104:18 108:11 119:12 119:16,17,19 120:21,22,24 137:11,16 138:21,22 139:22,23 140:13,19 142:7,14 145:14,21 147:5 148:6,23 151:7,21,22

152:5,8 156:20 170:9
recorded 7:9
recording 7:5,9
records 25:15 26:12,20 27:7 27:9,13,14 28:1,8 139:20 140:24 141:9 141:14,19 143:19 148:25 150:18
recover 31:13 134:3,10
recovered 132:25
recoveries 136:11
recovery 30:22 31:2 62:24 63:9 136:8,24 149:1
recurring 145:1
redirect 157:8
reduce 98:16 103:19
reduced 93:20 93:22 97:10,15 98:7 111:9,19 112:6
reduces 95:2
reducing 31:25 93:24 94:1,6 97:12 98:15
reduction 76:3 112:19
reductions 76:5
refer 23:7
reference 16:16
referenced 20:15
references 6:3 6:5,7,8
referring 29:9 62:1 135:12
reflect 76:3 102:2 108:12
reflected 6:13
reflects 85:20 126:10
refrain 80:14
refresh 88:16
regard 26:19 31:24 128:25 159:10
regarding 12:18 103:10 160:11
regional 24:14
regular 19:3
regularly 35:12 35:14
regulations 22:21 24:20 165:2
reimburse 111:24
reimbursed 31:15
reimbursement 60:20 64:17 74:14 95:7,20 99:9 102:18,19 105:22 106:7 153:11 154:24
rel 80:25
related 7:20 20:9 25:18 65:24 68:12 104:5 111:19 111:21 130:24 136:15 139:19 159:9 165:5
relatedness 152:11
relates 1:5 143:1 157:13 159:20 161:22
relative 118:15 170:11,13
reliability 110:2
reliable 36:14 109:19
relied 67:25 68:12 69:21
relies 36:2 121:25
rely 69:22 143:19
remain 112:22 114:5 127:18 153:3,11
remained 103:25
remaining 34:25
remember 12:13 55:17 62:15 101:20 111:15 124:17 124:20 146:3 155:13 157:25 158:2 160:7,12 162:18
remote 1:14
remotely 169:7
renal 40:13 59:1
rendered 145:15
repeat 13:5 82:8
repeats 38:17
rephrase 121:4 121:5
report 12:8 14:12,14 15:10 35:12,13,14,17 35:19,23 36:4 66:17 67:10,20 69:6,7 70:18 71:2,9,13,16 72:16 75:19

76:7 78:4,8 79:25 80:1 81:4 84:3,8 87:3,3,4,5 89:1 89:20 90:19 93:1 99:20,24 102:3,7,10,13 103:1,15 106:6 108:9,15 109:3 109:10,16 111:2 113:5 114:1,6 115:3 115:25 116:8 117:24 120:8 122:19 123:10 123:24 124:9 124:15 126:10 130:19 131:2 131:10 158:3 170:6
reporter 1:16 8:2 12:24 13:7 15:17,25
reporter's 5:5 6:2
reporting 7:19
reports 132:8 144:12
represent 7:18 38:12 39:18
representation 120:14 143:17
represented 159:14
representing 29:2
represents 123:22 139:8
request 27:13 28:7 67:24
requested 170:8
require 50:12 52:7 54:20 107:15 113:6 114:4 143:8 146:18
required 25:14 69:6,16 70:18 72:21,23 76:4 90:17 94:12 126:24,25
requirement 26:18 49:9 128:20
requirements 34:10 94:15 151:14,21,24 158:16
requires 8:21 89:12,16 91:1 107:8 139:10 142:22
requisite 122:2
reread 14:9
resolution 63:15
resolved 113:7
resource 143:24
respect 19:25 65:12 74:16 78:2 86:17 105:21 111:15 111:22 112:8 113:15 131:8 133:7 153:16 163:19
respects 172:24
respond 89:15 91:3
response 16:19 67:24 89:17
responses 5:11 16:20 68:4
responsibilities 26:5 34:23
responsible 34:25 54:1 72:12
result 76:6 87:6 90:1 103:12 112:4 132:25
results 79:4
resumé 21:9,22 22:24 24:2 32:12 34:12 37:9
retained 19:14 19:17,20
retainer 18:18 19:21,25
retirees 46:19
retirement 47:23,24
return 171:13
revenue 89:11 89:19 90:19 91:8,17 123:2
revenues 48:10 48:14,19 76:8 76:17 77:12,12 77:13,13 83:11 84:10 87:25 111:7,7 113:16 124:12 128:7 130:13
review 21:24 24:17,17 26:5 26:12 27:6,15 38:25 50:16 51:5,18 108:16 141:12 142:7 143:22 146:19 147:3 148:25 149:1 151:11 152:6,8 170:7
reviewed 14:11 15:10,12 29:1 39:1,14 53:5,8 53:9,11 67:25 68:6,14 78:23 102:10 144:11 144:16 158:3

reviewing 26:19 89:24
reviews 23:23 24:1,16 30:16
ridge 2:20
right 9:8 14:15 14:16 15:14,23 21:5,22 22:8 29:5 32:9 45:21 46:1 47:10 48:4 49:2 52:24 56:14 57:12 61:9 66:14 71:5 77:21 78:25 79:7 81:3,6 82:19 88:22,25 90:7 95:1 101:4,14 101:17,23 102:15,22 103:15 104:17 119:1 120:18 122:6,17 124:22 125:8 125:16,23 127:5 133:14 137:25 138:14 150:24 152:3 154:10,21,25 155:16,20 157:14 166:6 166:20
risk 145:8
risks 31:23 96:25 145:2
rmr 1:15 169:13 170:5 170:21 171:21
rn 142:6
role 22:17 32:9 33:5,8,11 34:13,23 36:7 40:24 59:14 62:3 63:15 92:8,15,20 149:7 151:15 151:18 157:12
roles 32:15 152:6
rolled 118:20
room 10:8 51:13
rough 168:2,12
roughly 105:4
routine 54:18
rules 22:21 50:20 54:1 60:12
run 31:8 55:24 63:22 85:16
running 33:2 35:7 36:15,21

s

s 1:8
salary 18:15,22 19:3
salisbury 2:7
samples 30:17
saying 53:3,7 56:8 80:12 94:23 99:24 129:8 168:10
says 49:3 58:9 74:25 75:1 76:14 79:4 82:22 83:6 85:3,23 106:3 106:12 111:17 118:23 123:10
scale 117:4 120:6 121:9,12 150:8
scaled 42:16
scenarios 94:9
schedule 84:18
schedules 64:18,21
scope 10:14 39:18,23 60:12 65:6 66:6 98:2 129:6 132:8 147:6 151:25 152:3 157:12 157:17 158:7
scratch 135:16
screen 7:8 20:19,24,25 32:11 38:20 61:10 67:15 74:8 79:2 81:7 85:3,10 89:3 90:11,14 97:9 102:7,23 110:12 119:24 123:17
scroll 32:11 39:2,3 102:24 103:16 104:17 108:21 109:22
se 27:23 31:12 51:2 70:3 139:25 152:8
seal 169:9
second 15:3 17:13 38:14
secondary 35:8 62:25 63:11,22 132:9
secretary 72:23
section 38:16 38:23 68:21 69:23 71:6 72:1 78:22 88:22 93:8 102:6,9,12 103:11 104:21 108:16,20 109:3,23 124:18
sections 104:20 130:20

sector 74:12
security 10:6 40:16 42:11 43:17,18 44:2 45:6 49:11 54:14,17 59:9 165:3 167:13
see 15:23 20:23 20:24,25 22:4 24:18 27:16 32:10 34:5 38:20 72:24 74:3,4,7,9 81:6 81:10 87:11,13 89:18 119:1,4 119:4
seeing 124:17
seem 99:18
seems 73:17 99:24 126:15
seen 7:7 13:25 25:22 38:9 50:24,24 98:6 158:14 159:14
selection 148:25
self 46:9,14 47:15
sending 134:17
sense 10:22 11:18 45:23 88:4
sentence 54:12 54:15 57:4,24 74:3 76:13 82:20 83:5,6 84:20 85:22 92:2 97:9 99:14 102:23 112:4 114:22 115:11
sequestered 94:14
sequestration 94:10,10,22 95:4,5 96:25 97:12
serve 104:15 158:16
service 22:25 23:3,6,18 25:1 28:14,23 29:13 30:13 32:21 33:3 41:8 44:11 49:4,12 50:2,5,19 51:12,25 52:9 52:12,16,25 53:13,17 54:13 55:7,11 97:16 103:20 126:7,7 138:12 139:18 143:17 155:8 167:8
services 4:4,6 4:12 9:19 35:2 41:6,7,8 54:18 54:19,21 55:2 65:24 74:17 87:9 93:24 96:23 98:15 103:21 105:4 111:6,9,18 112:5 126:4 132:8 145:15 151:12,22 154:7 159:21 160:11,23 161:8,23 162:6 162:13 164:1 164:21 165:12 166:17
serving 103:24
ses 32:13
set 48:16 122:13 132:1
settlement 133:14,15,17
seven 39:5 90:9 90:23 124:15 124:18
several 30:15 40:1 56:15 71:11 86:16 121:8
share 15:15 101:24
sharing 37:9 41:17 109:23 109:25
sheet 171:7,10 171:11,13 172:1
shift 103:25
shifted 100:3
short 28:19 79:4,14,18 80:17 114:16 114:20 115:4 116:12,13 157:24
shortfall 73:9
shortly 16:5 157:7
show 38:1 82:4 82:11 88:15 111:1 117:23
showing 87:16 102:3 108:10 108:12 110:11
shown 85:7
shows 124:2
sic 40:16 118:8
side 29:13 55:15,15 80:25 117:8,12,12,13 117:19,20 118:15 121:17 121:17 155:9
sign 19:21,24 96:10
signature 169:12 170:20
signed 11:20 59:12

significant 35:21 104:25 106:24
signing 168:15 171:13
signs 146:15
similar 11:24 12:8 87:5
simply 14:9 20:13 69:15 70:17 72:11,12 80:16 85:23 94:17 95:2 113:11 115:1 122:23 123:4 129:8 134:2
sincerely 171:18
single 141:10
singular 162:25 165:17
sir 67:16 103:4 116:5
sit 153:2
sitting 138:14
situation 47:6 67:22 97:23 132:24 133:13 134:4
situations 134:21 141:12
six 39:5 78:21 138:14,15 139:1
size 11:3 138:6
skilled 40:21
slight 56:20
small 139:13 140:3 164:1
smaller 117:15 117:18
smi 48:6 108:23 110:25 116:21 119:22 122:7 122:17,24 123:13 124:3 128:2,25 130:11,11
smith 2:12
social 40:16 42:10 43:17,18 44:1 45:5 49:11 54:14,17 59:8 165:2 167:12
solutions 26:1 26:7
solvency 81:11 81:15 86:18 100:2
solvent 71:12 93:12
somebody 54:20 58:19 134:14 143:22 161:21
soon 157:24
sooner 73:11
sorry 13:5 17:9 37:1 40:19 46:6 68:18,19 79:3 82:8 83:24 100:16 101:11 116:3 117:25 119:9 130:4 135:12 141:4 165:23 166:12,23 167:2 168:9
sort 23:24 54:22 149:2
sound 6:7,8 29:3
sounds 14:16 29:5 36:18 125:8
source 121:24 128:1 134:8 145:14
sources 90:22 122:7 130:8
south 2:21
southern 1:2 7:16
space 24:20 52:22 53:23 63:21 149:4 152:21
spaces 24:13
speak 24:12 53:20 54:9 64:7,14,20 65:2,20 66:3 66:11 69:2 130:16 136:3 150:23 153:1,6 161:6 167:4
speaker 6:5
speaking 14:11 44:12 57:25 58:3 136:5,14 136:19
speaks 78:4 104:10
specific 19:21 20:1,9 50:16 52:13 54:16,22 105:21
specifically 21:15 54:13,17 69:25 115:5 120:5 122:25
specified 59:1
spectrum 24:25
speculate 55:16 65:11 70:16 77:9 83:20 92:13 98:10 99:7 152:14 158:7,11
speculating 128:15
speculation 66:9 159:1

speculative 159:3
speech 41:7
spending 87:8
spent 23:2 24:6 32:23 155:6
spi 125:25
spoken 54:6
stability 36:8,9 36:17 37:8 69:8 71:24
staff 30:19 34:1 151:11
staffing 34:7
stage 40:13 58:25
stamp 81:4 85:2 90:9
stamped 67:11
standard 93:16 150:16,19,24
standing 167:24
standpoint 143:24
stands 62:15
start 8:19 9:9 39:4 66:16 76:13 114:18 135:16 162:5
started 26:16 58:15 97:24 160:10
starting 32:10 124:2
starts 38:19 74:3 81:20 85:16
state 1:16 7:23 9:12,20 169:3 169:14 170:3
stated 69:21 119:6
statement 8:23 35:18 36:3 46:4 73:14 77:24 84:11 114:9 123:18 149:5
states 1:1 3:7 5:7 7:15 16:4 38:13 40:11 84:8 86:25 93:10 123:12 124:15
statistical 95:16
status 67:21
statute 59:11 59:12 72:19,21 94:19 96:6 97:25 128:19 129:12
statutes 59:5 60:11
statutorily 126:25
statutory 103:13
stay 22:20 107:8
stays 78:7
steeped 63:10 146:11
steinberg 4:5
stem 25:9
stenographer 8:4 13:2,6 167:21 168:3,5 168:11,14
stenographer's 6:13
stenographic 1:16 8:1 170:9
stenographic... 170:6
stewardship 37:6
stop 32:6 37:9 97:1
straightforward 94:7 140:7
streams 123:5
street 2:6,20 3:8 4:13 171:22
subject 51:5 148:10
submission 89:14 91:5
submissions 31:5
submit 23:9 25:12 27:14 89:13 91:2 151:12
submits 143:15
submitted 27:4 27:17 28:2 146:16
submitting 26:25 72:13 143:16
subpoena 5:11 16:20
subrogation 63:24 132:10 132:22 133:14
subsequent 104:23
subsequently 53:5 58:18
subsidies 41:17
subsidized 41:14 56:11 57:7,10
substantial 73:8 83:8 86:12 103:9 104:1
substantiate 138:22
succeeding 89:14

sue 10:24
suffering 40:13
sufficient 76:17 139:23 146:17
suite 4:13 171:22
summarize 90:13
summary 71:6 72:1 73:5 75:19 89:25 123:23 124:18
super 94:21
supplement 71:9
supplemental 55:9
supplementary 48:6
supplies 41:10
support 25:15 30:9,15 36:8 69:23 138:23 141:14 145:16 145:22 146:5
supportable 27:5
supported 41:25 143:18 151:7
supporting 30:20 139:21
supports 27:17 62:25 70:6,8 151:23
suppose 100:7
sure 13:6,19 24:19 27:22 42:20 61:12 66:21 82:11 102:17 119:14 148:4,8,13,15 148:21 150:2 168:7
suspect 27:12 28:6
suspended 27:12
sustain 88:5 103:22
sustainability 91:20
swear 8:2
switch 116:20
sworn 8:10 169:8
system 25:5 26:12 32:1 35:5 43:6,13 99:4 104:23 107:9,21,22 138:5 144:2 158:24 159:11 159:22
systems 24:5 26:21 137:24

t

t 1:8
table 108:22 119:24
take 7:10 13:24 20:17 66:19 72:1 74:2 78:21 81:3 88:22 92:1 93:6 124:19 137:5 149:20
taken 1:11 7:13 171:7
takes 88:23
talk 32:9 56:4 61:11 101:6,13 110:24 116:18 116:21 120:4 122:6 157:21 163:14,18 164:21
talked 75:22 107:7 111:13 112:14 116:19 121:23 138:13 139:7 153:16 157:21
talking 101:17 108:4 119:22
talks 102:24
targeted 52:13
tax 46:3,12 48:10,13,18 85:7 93:17 111:7 113:16 114:15 115:15 123:2 124:12 128:1,7 130:12
taxes 45:17,18 45:25 47:1,4,9 48:7,14 85:6 85:15 121:25 122:1 123:6
taxpayer 46:21 48:24 112:21
taxpayers 45:24 73:13 128:3
technically 34:20
tell 10:4 12:18 14:22,25 15:20 19:10 23:5 24:8 30:18 34:22 38:10 39:13 43:9 49:8 55:17 68:11 71:6 72:6,9 85:9 88:13 113:23 115:10 164:15 166:3
telling 8:20 12:16 155:23
tells 72:7
tended 58:10 163:20

tendency 58:13 156:23 158:17
term 36:8 85:20 86:3 88:2,9 105:1 106:7,24 116:12,13
terms 70:9 71:11 154:6 158:14
test 49:20 50:5 114:19,20 125:10
testified 8:10 17:5 19:4 38:22 57:15 61:14 62:9 97:11 122:8 127:5 132:3 137:22 139:9 140:23 146:15 154:20,23 155:18 157:11 160:5 165:10 166:16
testify 10:2 14:1 18:12,19 64:10,23 159:19
testifying 12:2 27:25 128:25 160:22
testimony 6:6 11:23 12:8 15:5,11 18:22 19:1,9 20:8 38:4,14 39:19 51:4 66:6 68:17 69:23 70:13 78:23 102:16 118:20 120:12 129:6 137:21 153:23 157:25 159:6,9 161:3
testing 29:9 148:6
text 9:2 10:13 74:7 87:13 89:3 90:13 92:21 111:3
thank 13:4 17:22 21:4 31:19 34:17 37:24 39:17 40:19 46:7 66:23 93:5 112:2 116:17 119:11 120:4 121:22 133:19 157:4 166:11 167:14,17 171:15
thanks 100:18 154:17
theirs 134:8
therapy 41:7
thereof 107:1
thing 35:17 94:16 150:5
things 23:24 39:12 49:18 53:10 54:16,22 54:22 77:9 97:19 114:5 134:18 140:17 149:2
think 12:4 13:15 21:25 37:3 43:25 46:10 55:16 56:19 58:4 71:20 72:20 78:3,12 84:13 86:8 87:24 88:16,17 90:2 91:23 92:12 94:12 95:12,23 95:24 97:6 100:14 104:10 107:4 112:10 113:22 117:9 117:24 120:6 120:11,11,17 126:17 133:6 133:24 139:9 141:25 143:12 146:21 153:25 154:11 157:16 159:17 160:8 161:5 164:12
third 74:4
thirds 138:18 139:10
thought 28:22 30:7 80:18
three 35:9 67:6 74:2 79:11,18 80:5,19 83:2 100:21 117:21
tied 125:12
time 1:13 17:16 17:19 18:13 22:10 23:2 24:6 32:24 33:18,25 37:15 37:20 42:24 43:4 47:1,2,3 47:17 50:18,20 50:23 58:11 66:24 67:4 71:23 74:19 75:11 77:10,20 79:19 80:18 82:1 87:24 92:7 94:12 99:17 100:11 100:19,24 103:18 110:9 111:25 119:8 119:15,18 120:20,23 122:2 124:13 126:11 134:6 137:3,10,15

155:6 157:1,6 160:5 164:2,25 166:11 167:18
time's 37:15
timelines 34:8
times 14:22 55:8
title 9:20 38:10 40:15 59:8 79:2 86:22 93:8 111:10
titled 38:13
today 8:17 10:2 10:9,17 14:20 15:11,13 18:12 19:1 20:8 34:14 46:18 47:22 70:10 153:2 159:6 166:11 167:7
today's 14:7,23
together 83:20 84:5
tomorrow 46:19
ton 137:6
took 37:11 61:9
top 19:11 29:20 30:19 42:21,25 56:10 62:14 63:18 117:18 121:14 146:1 149:11
topic 152:24
topics 163:13
total 90:20 103:25 118:2,2 118:5,12 120:10 125:4 164:2,2,3
totally 101:12
touch 12:25 17:10
toxic 10:24
track 20:5 42:23 43:1
traditional 134:16
trail 6:5
transcript 167:22 170:8,8 171:6,9,12 172:24
transition 74:12
treasury 48:11
treat 161:15
treatment 49:6 49:13 51:19 53:2
treats 142:22
trend 98:1 99:11 104:10
tries 148:14
triggered 89:10
triggers 90:25
trillion 85:21 86:1,6 118:5
true 39:15 48:25 64:5,18 78:17 83:3 96:7 112:22,24 118:16 124:25 125:9 127:9 128:4 136:6 141:1,15 143:17 158:24 170:9 172:24
trust 45:15,15 45:16,18 46:24 48:5,7,18 56:11 69:9 71:10,24 75:21 75:21 76:6,14 77:19,19 78:9 78:16 79:5,11 80:7 81:8,16 81:25 82:4,11 83:1,10 85:14 86:16 93:12 111:11,23 112:8,12,22 114:11,18 115:16 121:24 122:7,24 123:13,23,23 158:4
trustee 114:6 120:8 122:19 123:10
trustee's 101:24
trustees 14:11 14:14 15:10 66:17 67:21 69:4 71:1,9,16 72:14,16,18 73:1 84:6 89:1 90:17 93:1 99:19 102:3 104:24 106:22 112:7 113:5 114:1,15,19,23 115:25 116:8 117:24 119:25 123:24 130:19 131:1,9 158:3
truthfully 10:2 27:3
try 17:13 31:13 36:19 113:1 154:19
trying 32:6 53:2 120:5 121:7,8 129:6 130:4 132:6 134:2 148:13 160:3
turn 108:8
turning 90:8
twice 14:24 133:21 134:24
two 13:16 21:25 37:22

67:1 72:2,24 72:24 89:11 93:13 101:20 106:1 108:21 109:22 121:9 133:17 138:18 139:10
type 12:13 33:18 42:7 44:11 112:20 115:22 126:7 146:23 159:9
types 54:25
typically 55:4

u

u.s. 4:3,6,12
uh 6:7,8
ultimately 128:3
um 6:7,8,8
umbrella 30:1 31:7 131:19 132:7 162:8 165:20
unable 75:3
unavoidable 138:5
uncertain 92:5 92:10,22
uncertainty 83:8 103:9
unchanged 153:4
under 28:22 29:23,24 30:1 31:6 40:15 42:10 49:3 55:10 59:2 60:8 66:12 73:5 74:18 75:10,14 76:4 77:5 78:16 82:5,12,22 83:1 84:19 85:7 94:8,13 95:4 97:13 98:3 99:2,16 100:1,4 101:19 103:11 107:13 108:6 125:23 131:23,25 148:12 162:2 163:20 165:19 167:5,12
underneath 131:18
undersigned 169:6
understand 10:11 15:5 30:23 46:8 51:17 53:3 72:18 77:2 94:25 98:14 108:25 113:23 120:5 129:6 130:4 133:3,5 138:4 143:4 148:2,14
understanding 11:3 19:13 31:22 42:5 46:16 70:21,23 72:11 76:16 84:16 91:13 93:25 95:6,9 96:9 105:16 109:10 115:11 116:24 121:9 122:12 128:19 132:14 147:16 148:1,7 164:1
understood 121:20
undertaken 138:4
undoubtedly 108:1
unexpectedly 34:1
unfunded 76:19 85:21,25
ung 5:15
unit 7:12 37:17 37:22 67:1,6 100:21 101:1 137:12,17 167:19
united 1:1 3:7 5:7 7:15 16:3 38:13 107:14
unitedhealth 56:2
unknowable 78:1
unknown 77:20 159:16
unretained 147:7
unsustainable 88:1,4
upcoded 140:15
upcoding 25:18 26:8,8 139:4 139:13 140:8 140:12 141:18 142:6,16 144:13,20 145:2 148:10
upcoming 123:16
update 21:19 104:23
updated 21:13 21:14,17
updates 87:10 105:9 106:14
upload 15:17 15:18,20 67:8
uploaded 16:1 20:19 38:2 139:11
upside 114:18

usa 5:13,15 16:25 67:11
usdoj.com 3:11 3:12
usdoj.gov 3:13
use 19:20 23:15 29:14 103:19 134:12 147:20 171:7
used 14:12 36:1 68:25 128:16
using 138:12 164:16
usually 47:9 55:1

v

v 1:8
vacancies 72:25
valid 150:3
validate 151:2 151:6
validation 142:23 143:8
validity 109:7
value 85:6,14 85:16,25
variable 108:1
variables 77:15 92:18 98:19 112:25 153:16
vary 96:1 146:22
verbally 8:22 9:5 16:1
verbatim 14:17
verified 143:21
verifying 145:14
veritext 171:13 171:22
versus 84:5 86:23 121:10 121:12 132:21
viability 78:15 88:8
video 7:9,12 17:17,20 37:16 37:21 66:25 67:5 100:20,25 119:16,19 120:21,24 137:11,16
videographer 4:22 7:1,18 8:6 17:12,16,19 37:15,20 66:24 67:4 100:19,24 119:15,18 120:16,23 137:10,15 167:18
videotaped 167:20
view 9:3 36:6
viewed 62:3 86:4
views 36:1,5,6
virtually 7:5
visit 51:19
visits 41:6
voluntarily 41:11
voluntary 41:16,23 57:21 107:9,16 127:5
vulnerabilities 24:4 26:21 137:24 158:4

w

wait 80:14
waived 42:7 168:16
walk 40:1
wallace 2:4,5 5:2,3 8:12,14 8:14,19 9:8,11 11:8 12:12,24 13:4,9 16:9,12 16:18,23 17:2 17:15,22 18:1 19:12,19 20:2 20:16 21:21 22:3,7,12 25:3 25:16,23 26:10 26:17 27:18,24 28:9,13,24 29:6,16,22 31:19,20 32:8 35:24 36:25 37:13,24,25 39:16 40:9 43:11,21 44:3 44:13,24 45:4 45:10 47:20 48:3 51:3,16 51:23 52:14,23 53:14,24 54:10 56:13 58:24 59:10,20 60:3 60:17,22 61:1 61:8 62:18 63:14 64:2,9 64:15,22 65:4 65:13,22 66:5 66:14,21,23 67:7,14 68:10 69:11,18 70:5 70:19,25 71:25 73:19 74:1 75:8,17 76:12 76:25 77:17 78:6,20 79:23 80:6,10,20 81:2,18 82:3 82:10,18 83:15 83:23 84:7,15 84:24 85:18 86:10,19 87:20 88:3,12 90:6 91:12,25 92:14 93:2 94:20 95:18 96:4,13 96:24 97:8

98:4,13,21
99:1,13,25
100:9,11,16
101:3 102:1,4
104:16 105:23
106:19 107:6
107:18 108:3
108:11,14
109:8,20 110:6
110:15,22
112:1,13 113:3
113:21 114:10
115:9,18 116:4
116:11,16
117:3,14,22
118:19 119:14
119:21 121:1
122:5,16 123:8
123:25 124:14
126:9,18 127:3
127:21,25
128:8,23 129:4
129:14,18,24
130:17 131:11
131:22 132:23
133:18 134:19
135:2,8,14,18
135:23 136:13
137:2,5,9,19
139:6 140:5,22
141:5 142:4,13
142:20,25
143:6,25 144:6
144:10,18,24
145:5,12,20
146:4,13 147:1
147:11,25
149:6,13,18
150:6,15,25
151:8,19 152:4
152:23 153:9
153:19 154:10
156:19 157:7
157:10,20
158:5,19 159:5
159:18 160:4
160:21 161:7
161:20 162:7
162:14 163:1,6
163:12,22
164:9,14,19
165:4,9,18,22
166:9,24
167:16,23
168:1,4,7
wallace's 166:19
wallacegraha... 2:9
want 17:12 40:23 47:6 55:16 66:15 74:8 76:10 77:13 81:15 110:24 116:18 120:4 137:5 147:5 159:3 167:2 168:12
wanted 17:4 49:2 61:10 90:10 93:19 102:5 110:23 111:1 116:23 130:18 168:2
ward 2:12
wardandsmit... 2:16
warn 78:8
warning 71:16 88:14,24 89:4 89:9,10,12,16 89:21 90:3 91:1,3,10,14
warnings 75:19 89:18 90:4
washington 3:9
water 1:4 7:14 10:20,25 171:3 172:4
way 9:9 15:15 17:11 36:20 71:20 76:23 79:21 80:12 81:21 98:16 107:5 113:24 115:8 122:24 136:20 140:17 140:20 141:22 141:23 142:5 143:13 151:2,5
ways 77:3,4 132:16 140:18
we've 94:8,9 112:14 116:18 120:6,6
weaknesses 35:22
went 41:19 137:20
whatnot 30:17 136:4 142:2
whitney 2:4 8:14 125:2 160:1
widespread 144:12,20
wilmington 2:14
wish 172:5
withdraw 103:24
withheld 133:2
witness 5:2 7:8 8:2,9,11,13,18 11:7,17 12:11 16:6 19:7,16 19:24 20:13 21:19 22:6,10 24:12 25:8,21 26:3,15,23 27:21 28:5,17 29:5,12,20 32:3 35:16 36:23 37:11 39:10 40:6 43:8,15,25

44:7 45:3,9
47:12 48:1
50:22 51:8,22
52:4,20 53:7
53:20 54:5
56:7 58:8 59:7
59:17,23 60:15
60:25 61:6
62:14 63:7,18
64:7,14,20
65:2,10,19
66:3,11,19,22
68:9 69:2,14
70:2,15,23
71:19 73:16,24
74:25 75:16
76:2,22 77:8
77:23 78:12
79:21 80:3,14
80:24 81:14,24
82:8,15 83:5
83:19 84:2,13
84:22 85:12
86:8,15 87:19
87:24 89:24
90:16 91:22
92:12,24 94:4
95:11,23 96:9
96:18 97:5,18
98:10,18,24
99:6,22 100:6
102:3 104:8
105:20 106:11
107:4,13,24
108:12 109:5
109:15 110:5
110:14,21
111:21 112:10
112:24 113:10
114:8,25
115:13 116:2,7
116:15 117:7
117:17 118:7
122:4,12,22
123:21 124:8
126:3,14,23
127:24 128:6
128:13 129:8
129:22 130:7
131:5,16
132:18 133:5
133:24 135:1,7
135:16,22
136:10,19
137:8 138:8
139:16 140:11
141:3,21
142:11,18
143:4,12 144:5
144:9,16,23
145:4,11,18
146:1,9,21
147:9,18
148:19 149:11
149:16 150:1
150:13,21
151:4,17 152:2
152:13 153:6
153:14,25
156:21 157:16
158:2,10 159:2
159:13,24
160:15 161:4
161:11 162:4
162:11,24
163:4,10,17
164:5,12,23
165:8,15 169:9
word 19:20
23:15 83:25
120:17
worded 56:20
57:4
words 74:21
113:6
work 21:25
24:19 30:2,5
32:25 33:13,16
34:5,18 36:7
42:11 44:1
47:17,19 63:9
63:22 84:5
92:16 97:3
128:13 131:17
worked 12:22
22:11,24 32:13
42:14 146:25
149:4 150:22
155:2
worker 62:11
workers 46:18
47:4
working 21:16
22:17 24:13
26:3 47:22
50:15 63:23
132:1 155:6,7
164:7
workload
33:22
works 15:21
140:18
world 134:2
worse 79:24
80:8,11,15
worth 128:15
write 38:25
39:2
written 14:9
70:9 161:13
wrong 135:15
166:18
wrote 39:1
wwallace 2:9

y

yeah 17:11,11
32:16 41:1
57:3 58:25
66:19 88:21
89:9 101:13
118:7 119:2
120:16 121:21
150:7 155:21
160:15 161:4,5
165:25 167:24

year 13:11 35:19,21 48:16 58:19 79:12,17 80:8 81:9 85:7 85:24 89:15 90:24 91:4,7,9 91:16 93:12 105:13 106:18 115:20,21 117:9 123:16 124:23,24 125:6,7 157:25
year's 28:10 79:15,25 80:1 87:2 90:25
years 21:25 42:6,11 52:18 53:17 79:11,18 80:5,19 83:2 86:24 89:12 90:5,23 97:22 103:14 106:2 132:13 155:4,5 155:18 156:7 156:14 159:8 160:19,25 161:23 164:6
yo 5:15
young 1:10 5:2 5:9,11,13 7:13 8:4,6,8,12 9:14 13:10 16:3,9 16:10,18,25 18:2 20:23 37:1 38:1,2 39:7 57:25 66:23 67:8,10 67:11,17 101:4 102:5 119:22 120:16 121:2 137:7,20 154:10,16 155:2 156:1 157:5,7 166:10 167:14,16 169:7 170:7 171:5 172:2,25
young's 147:7
young.cv.clja 5:13
young.pdf 5:8

z

zero 81:21 82:5 82:12,25 83:1
zoom 13:16,17 13:20 15:15 74:8

Exhibit 789

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF NORTH CAROLINA
SOUTHERN DIVISION
Case No. 7:34-CV-00897

IN RE:)
CAMP LEJEUNE WATER LITIGATION)
)
This Document Relates to:)
ALL CASES)
_____)

V I D E O D E P O S I T I O N
o f
LARRY YOUNG,
taken on behalf of Plaintiffs

DATE: February 6, 2026

TIME: 9:22 a.m. to 2:53 p.m.

PLACE: - REMOTE -

BEFORE: Dawn A. Hillier, RMR, CRR
Stenographic Reporter
Notary Public - State of
Florida, at Large

JOB NO: 7867485

APPEARANCES:

ON BEHALF OF THE PLAINTIFFS:

WHITNEY WALLACE, ESQUIRE
WALLACE & GRAHAM
525 N. Main Street
Salisbury, North Carolina 28144
704.633.5244, ext. 199
wwallace@wallacegraham.com
- and -
JENNA F. BUTLER, ESQUIRE
WARD AND SMITH, P.A.
127 Racine Drive
Wilmington, North Carolina 28406
910.794.4829
jfb@wardandsmith.com
- and -
LESLIE LAMACCHIA, ESQUIRE
BELL LEGAL GROUP
219 Ridge Street
Georgetown, South Carolina 29440
843.386.5284
llamacchia@belllegalgroup.com

APPEARANCES: (continued)

ON BEHALF OF THE DEFENDANTS:

GIOVANNI ANTONUCCI, ESQUIRE
JOSHUA CARPENITO, ESQUIRE
DAVID ORTIZ, ESQUIRE
UNITED STATES DEPARTMENT OF JUSTICE
1100 L Street, N.W.
Washington, D.C. 20005
202.616.8367
giovanni.antonucci@usdoj.com
joshua.g.carpenito@usdoj.com
david.ortiz@usdoj.gov

APPEARANCES: (continued)

ON BEHALF OF U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES:

JILL STEINBERG, ESQUIRE
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
2250 JFK Federal Building
Boston, Massachussetts 02203
jill.steinberg@hhs.gov
- and -
GARY KURZ, ESQUIRE
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
61 Forsyth Street, Suite 5M60
Atlanta, Georgia 30303
gary.kurz@hhs.gov

ALSO PRESENT:

Jason Novak, videographer

INDEX PAGE

WITNESS - LARRY YOUNG 8
EXAMINATION BY MS. WALLACE 9
EXAMINATION BY MR. ANTONUCCI 154
FURTHER EXAMINATION BY MS. WALLACE 157
FURTHER EXAMINATION BY MR. ANTONUCCI 166
CERTIFICATE OF OATH 169
REPORTER'S CERTIFICATE 170

EXHIBITS

Exhibit 1 2025.12.15 - United States' Damages Disclosures.pdf 16
Exhibit 2 NOD Larry Young.pdf 16
Exhibit 3 2026.01.30 Young (CMS) Production Cover Letter.pdf 16
Exhibit 4 2026.01.30 Young (CMS) Subpoena Responses and Objections.pdf 16
Exhibit 5 Larry Young.CV.CLJA_USA_YOUNG_0000000001 - 0000000006.pdf 17
Exhibit 6 2025AnnualReport.CLJA_USA_YOUNG_0000000007 - 0000000273.pdf 67

REPORTER'S KEY TO PUNCTUATION:

-- At end of question or answer references interruption.

... References a trail-off by the speaker. No testimony omitted.

"Uh-huh" "Um-hum" References affirmative sound.

"Huh-uh" "Um-um" References negative sound.

CERTIFIED STENOGRAPHER'S NOTE: All quotations from exhibits are reflected in the manner in which they were read into the record and do not necessarily denote an exact quote from the document.

VIDEOGRAPHER: Good morning. We are going on the record at 9:22 a.m. on February 6th, 2026.

Please note that this deposition is being conducted virtually. Quality of recording depends on the quality of camera and internet connection of participants. What is seen from the witness and heard on screen is what will be recorded. Audio and video recording will continue to take place unless all parties agree to go off the record.

This is media unit number one of the video deposition of Larry Young taken in the matter of, In Re, Camp Lejeune Water Litigation, filed in the United States District Court for the Eastern District of North Carolina, Southern Division, Case No. 7:23-CV-897.

I'm the videographer and I represent Golkow Court Reporting. I am not authorized to administer an oath. I'm not related to any party in this action, nor am I financially interested in the outcome. If there are any objections to proceeding, please state them now.

Hearing no objections, all counsel will be

noted on the stenographic record. The court reporter will swear in the witness and we may proceed.

CERTIFIED STENOGRAPHER: Mr. Young, can you hear us?

VIDEOGRAPHER: Mr. Young, we lost your audio.

LARRY YOUNG,

was called as a witness and, having first been duly sworn, was examined and testified as follows.

THE WITNESS: I do.

MS. WALLACE: Good morning, Mr. Young.

THE WITNESS: Good morning.

MS. WALLACE: My name is Whitney Wallace. I'm an attorney for the plaintiff Leadership Group in the Camp LeJeune litigation and I am going to be deposing you today.

THE WITNESS: Great.

MS. WALLACE: Before we start, I was just telling defense counsel that Case Management Order 3 requires he and I to affirm on the record that we verbally agree with the following statement, so I will read it for the record.

"The parties agree that no communication

with the deponent by any means, including but not limited to text messaging will occur out of the view of the other parties while deposition is proceeding on the record."

And I verbally note that I affirm that I will not do that.

MR. ANTONUCCI: As do I.

MS. WALLACE: Great. All right. That is out of the way. And we're going to start.

EXAMINATION

BY MS. WALLACE:

Q Will you please state your full name for the record.

A Larry Young.

Q What is your date of birth?

A [redacted], 1966?

Q Who is your current employer?

A The Centers for Medicare and Medicare services.

Q Will you state your job title, please?

A Yes. I am the deputy chief financial officer and deputy director for the Office of Financial Management.

Q For CMS?

A For CMS.

Q Is there any reason you will not be able to testify fully and truthfully today?
A No. No.
Q For the record, will you tell us where you're physically located?
A Yes. I'm at 7500 Security Boulevard here in Baltimore, Maryland. That's our main office.
Q Is there anyone else in the room with you today?
A No.
Q Do you understand what defense counsel and I just affirmed, that you're not to communicate with anyone via text or other electronic means during the course and scope of the deposition?
A Yes.
Q Do you have any materials there with you available to you today?
A No.
Q Are you familiar, generally, with the Camp Lejeune Water Litigation?
A I'm familiar that -- excuse me. I have a -- I'm familiar with it in a general sense. I'm aware that Congress passed a law that allows individuals to sue the government for the toxic water that apparently existed at some point at Camp

Lejeune. And beyond that, that's -- that's about it.

Q Do you have any understanding of the size of the claimants who have filed claims?

MR. ANTONUCCI: Objection.

You can go ahead.

THE WITNESS: I do not.

BY MS. WALLACE:

Q Do you know anyone personally who's filed a Camp Lejeune Justice Act claim?

A No, I do not.

Q Have you ever given a deposition before?

A No.

Q Have you ever been a party in any civil litigation?

A No.

Q Have you ever been an expert witness before in any sense?

A I would have to say yes. I mean, I've had to fill out signed affidavits on behalf of the government.

Q What were the circumstances of your expert testimony or opinions?

A They were similar to this as far as providing background on the Medicare program, in

general, I would say.

Q And were you testifying before Congress or just some other body or company?

A It was -- I think it was just another court case. It was not before Congress or anything.

Q And so you had to provide an affidavit in a -- in a court case but did not have to provide an expert report or similar testimony other than the affidavit?

MR. ANTONUCCI: Objection.

THE WITNESS: Correct.

BY MS. WALLACE:

Q Do you remember what type of litigation that was?

A I do not.

Q Without telling me the content of any confidential communications with counsel, can you tell me how you were first contacted regarding this litigation?

A I recall I received an email note.

Q From who?

A From some of my colleagues I worked with in the past and in HHS/OGC.

MS. WALLACE: Madam court reporter, did you hear that? It cut out just a touch on my

end.

CERTIFIED STENOGRAPHER: I did hear that, yes.

MS. WALLACE: Thank you.

Can you repeat it for me? I'm sorry.

CERTIFIED STENOGRAPHER: Sure.

(The Court Reporter is directed to read back the previous question and/or answer.)

BY MS. WALLACE:

Q Approximately when was that, Mr. Young?

A I believe it was in the fall of last year, 2025.

Q And after the email, were there phone calls or in-person meetings?

A We had a -- I think we had one -- one or two Zoom calls.

Q And who were those Zoom calls with, please?

A I prob -- I'm sure I can't recall everybody that was on the Zoom calls. Like, I know counsel here, Gio, was on the call, Jill was on the call, Gary was on the call, and I believe Joshua. There may have been others but I don't -- I didn't take an inventory of names.

Q Have you seen your designations in this

case, what you have been designated to testify about in the Camp Lejeune litigation?

A Yes.

Q Were you involved in preparing those designations?

A Yes.

Q What did you do to prepare for today's deposition?

A I simply reread my written designation information as far as what I was going to be speaking to. And I also reviewed the trustees' report which I -- I'd used to prepare some of my designation narrative.

Q The trustees' report is approximately a 300-page document; is that right?

A That sounds about right. I -- I didn't read it all verbatim. I -- I looked at the introduction.

Q Did you meet with anyone outside of counsel to prepare for your deposition today?

A No.

Q Can you tell me how many times you met with counsel to prepare for today's deposition?

A It was twice.

Q Can you tell me how long, approximately,

each meeting was?

A Yes. I believe the first meeting was about an hour and a half and the second meeting was 45 minutes.

Q And if I understand your testimony, it was only with you and counsel, no one else with CMS or any other individuals?

A Yes, that's correct. No one else.

Q Are there any other documents besides the trustees' report that you reviewed to prepare for your testimony today?

A No. There's nothing else I reviewed to prepare for today.

Q All right. I am going to -- when we do depositions via Zoom, we -- the way that I share exhibits with you is, I and counsel and the court reporter, is I upload into the Chat feature. So I'm going to upload five exhibits -- and they're premarked -- into the Chat feature. And I'm going to tell you what they are as I upload them, if that works for you.

A Yes.

Q All right. You should see in the Chat feature, as well as counsel for the defendant and the court reporter, five exhibits that have been

uploaded. And I'm going to verbally describe for the record what each of them are. The document entitled Young Exhibit 1, 2025, December 15, United States damages disclosures. That is the document we're gong to look at shortly. That's your -- what you were designated to be an expert witness in, those disclosures.

(Exhibit 1 was marked.)

MS. WALLACE: Young Exhibit 2 is your notice of deposition issued to Larry Young.

(Exhibit 2 was marked.)

MS. WALLACE: Exhibit 3 is a cover letter -- excuse me, a cover letter issued by counsel for the defendant, dated January 30th, 2026, wherein they provide the document disclosures with reference to your deposition.

(Exhibit 3 was marked.)

MS. WALLACE: Young Exhibit 4 is the -- your response to the notice of deposition and the subpoena responses and objections that was issued by your counsel.

(Exhibit 4 was marked.)

MS. WALLACE: And Exhibit 5 is your CV that was provided with Bates numbers CLJA_USA_YOUNG_1 through 6.

(Exhibit 5 was marked.)

BY MS. WALLACE:

Q And we are going to -- before I get into the exhibits, I wanted to first ask you. You testified earlier you're currently employed by CMS; correct?

Can you hear me?

A Oh, can you not hear me?

Q I can hear you now. Sorry. The audio's a little touch and go.

A Yeah. Yeah. The way it cuts out.

VIDEOGRAPHER: Counsel, do you want to go off for a second? I can maybe try to help him make a quick adjustment.

MS. WALLACE: That would be -- yes.

VIDEOGRAPHER: Okay. The time is now 9:38. We're going off the video record.

(Off the record.)

VIDEOGRAPHER: The time is now 9:41. We're back on the video record. You may proceed.

MS. WALLACE: Thank you very much for all the corrections that were made during the break. I really appreciate that.

BY MS. WALLACE:

Q Mr. Young, the last question I asked you and I believe your answer was "yes," is, you are currently employed by CMS?

A Correct.

Q And CMS is an agency of the federal government. Do you agree?

A Yes.

Q Are you aware that the federal government is the defendant in the Camp Lejeune litigation?

A Yes.

Q And as you testify here today, you are a full-time federal employee?

A Yes.

Q Is your salary paid by the federal government?

A Yes.

Q Did you enter into a private retainer agreement to testify in this litigation?

A No.

Q Are you being paid any additional expert fee beyond your federal salary for your testimony in this litigation?

A No.

Q How are you being compensated for your

testimony today?

A I'm not being compensated at all besides my regular federal salary.

Q And you testified earlier your designation as an expert occurred in the fall of 2025?

MR. ANTONUCCI: Objection.

THE WITNESS: I was -- I was approached by counsel, my counsel, asking if I would be able to provide testimony in this case in the fall of 2025. Can't tell you exactly what month or day it was off the top of my head.

BY MS. WALLACE:

Q Is it your understanding that you were a non-retained expert in this case?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know exactly what you mean by non-retained expert, what that definition means.

BY MS. WALLACE:

Q When I use the word "non-retained," it means you didn't sign a retainer agreement specific to this litigation.

MR. ANTONUCCI: Objection.

THE WITNESS: I did not -- I did not sign any retainer agreement with respect to this

specific litigation.

BY MS. WALLACE:

Q Do you have any personal knowledge of the facts or allegations of the bellwether plaintiffs in the Track 1 litigation for Camp Lejeune that's currently before the court in North Carolina?

A No. I don't even know who that is.

Q So none of your testimony today has to do with anything specific related to the individuals who are before the court in North Carolina? It's more generalized Medicare knowledge?

MR. ANTONUCCI: Objection.

THE WITNESS: I simply have no knowledge of that particular case or party that you referenced. That's all I could say.

BY MS. WALLACE:

Q Let's take a look, if you don't mind, at Exhibit 4. And what I'm going to do is -- it's been uploaded but I'm going to put it on the screen for you.

I'm looking for the CV. It actually might be -- it's Exhibit 5.

Mr. Young, can you -- oops -- can you see my screen? Let's see.

A I can see the screen, but it would help my

old eyes if you could make it a little bigger.

Q My pleasure. One moment. How's that look?

A Much better. Thank you.

Q All right. Do you recognize this document?

A Yes.

Q What is it, please?

A It's my -- my resumé.

Q Did you prepare this document?

A Yes.

Q And did you prepare it for this litigation or do you keep your CV updated?

A I keep it updated. I didn't prepare it specifically for this.

Q And so despite working for CMS almost continually since 1988, you keep an updated CV?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. I generally update it periodically.

BY MS. WALLACE:

Q All right. And so your resumé highlights an extensive career, for the most part at CMS. Based on my review, it looks look you only did not work for CMS for approximately two years in, I think

it was '97 to '99, but let's look.

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q Yes. Do you see that?

MR. ANTONUCCI: Same objection.

THE WITNESS: Yes.

BY MS. WALLACE:

Q Is that right?

MR. ANTONUCCI: Same objection.

THE WITNESS: Yes. That's about the time period I worked for Kaiser Permanente.

BY MS. WALLACE:

Q And that was interpreting Medicare policy or how would you describe that position?

A Beyond what I've put on here, I don't know I would elaborate. It's been -- it's been a minute since that role. As far as working as their Medicare compliance officer, I generally -- I helped them with their application for a Medicare Advantage contract. I also help them stay in compliance with the Medicare rules and regulations associated with that contract.

Q Throughout your career at CMS, based on your resumé, it looks like you worked in administering Medicare Fee-For-Service. Do you

agree?

A I spent the majority of my time administering the Medicare Fee-For-Service program, yes.

Q Tell the court what that is, please.

A The Medicare Fee-For-Service program is what probably most people would refer to as the original Medicare program where individuals receive healthcare and they -- their providers submit a claim to a Medicare administrative contractor which processes that claim and provides benefit payments to that provider. Where, in some limited cases, the beneficiary, they've already paid -- paid the provider.

Q And when you use the word "administering that program," what do you mean by that?

A Well, when I say administering the Medicare Fee-For-Service program, we contract with Medicare Administrative Contractors to perform certain functions for us, primarily receiving and processing Medicare claims for payment, adjudicating first-level appeals, doing audits on medical record reviews, accounting, financial management activities, things of that sort.

Q Yes. And so you mentioned auditing

medical record reviews. It also looked like, from your resumé, that many of your positions have been focused on program integrity, including identifying improper payments and vulnerabilities within the Medicare payment systems; is that correct?

A Yes. Some of my time was spent in those capacities.

Q Can you tell me about the process there, please?

MR. ANTONUCCI: Objection.

You can answer.

THE WITNESS: I can speak to my experience in those spaces. When I was working in the Dallas regional office, I partook in what we called program integrity contractor performance reviews.

We would review their medical review activities to see how they're prioritizing their work and making sure they're compliant with our regulations in that space, necessarily.

Since I've been in the chief financial officer's office, one of our groups here is focused on measuring the improper payment rates across the entire spectrum of programs which we

administer, including Medicare Fee-For-Service improper payments.

BY MS. WALLACE:

Q What causes improper payments within the Medicare system, to your knowledge and experience?

MR. ANTONUCCI: Objection.

You can answer.

THE WITNESS: Improper payments can be -- can stem from number of reasons. In some cases, it's fraudulent providers. In other cases, it's mistakes which providers make in how they submit their claims. In other cases, it's providers that do not keep up with the current documentation required in the medical records to support the claim.

BY MS. WALLACE:

Q Throughout your career, have there also been improper payments related to upcoding and miscoding from medical providers?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say yes, in my experience I've seen that.

BY MS. WALLACE:

Q Is that part of what your career that has been focused on program integrity has been meant to

develop solutions to address?

MR. ANTONUCCI: Objection.

THE WITNESS: When I was working in program integrity, it was -- my focus was more in the review and the responsibilities of the contractors. I was not -- I was not intimately involved in developing solutions for upcoding -- the challenge of upcoding, if you will.

BY MS. WALLACE:

Q Do you know when Medicare developed a system that encouraged the review of medical records to identify fraudulent billing practices?

MR. ANTONUCCI: Objection.

THE WITNESS: I cannot -- no. I don't know exactly when that started.

BY MS. WALLACE:

Q Can you describe that requirement or guideline from Medicare with regard to reviewing medical records to identify program integrity and vulnerabilities in Medicare payment systems?

MR. ANTONUCCI: Objection.

THE WITNESS: I can say that the -- one of the compliant part -- compliance parts for the Medicare program is that in submitting a claim

for benefits on behalf of a beneficiary, part of -- part of the calculus in assuming that claim is that you, a provider, are truthfully certifying that everything submitted on that claim is supportable by the medical record.

Part of the medical review process is -- involves actually asking for medical records because we don't -- we don't receive medical records for every claim that we receive. That's not -- that's not practical. We receive over a billion claims. If we identify a suspect claim, then it can be suspended and a request for medical records will go out for that provider to submit those medical records.

And then a review is done by a nurse or physician or both to see if the medical record supports what's submitted on the claim.

BY MS. WALLACE:

Q It's more of an audit process?

MR. ANTONUCCI: Objection.

THE WITNESS: I would -- I would just say it's what I just described. I'm not sure how you would define "audit," per se.

BY MS. WALLACE:

Q Well, you were just testifying that you

don't look at the medical records for every claim submitted. It's more of a -- you check it with an audit or your contractors check it?

MR. ANTONUCCI: Objection.

THE WITNESS: What I alluded to was that there's a process for identifying suspect claims for which we then request the medical records.

BY MS. WALLACE:

Q Do you know this year's approximate estimated improper payment rate --

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q -- in the Medicare Fee-For-Service program?

MR. ANTONUCCI: Same objection.

THE WITNESS: As I recall -- I may be off by a half percent or so -- it's -- it's somewhere a little short of 7 percent. It's like 6.9 percent, I believe, improper -- the most current improper payment rate, I believe, is just under 7 percent, I thought, for the Medicare Fee-For-Service program.

BY MS. WALLACE:

Q Yes. And so according to the CMS

documents that I reviewed, does 6.55 percent, representing $28.83 billion in improper payments, sound approximately accurate?

MR. ANTONUCCI: Objection.

THE WITNESS: That sounds about right.

BY MS. WALLACE:

Q Okay. Is there a program that has been created to address the error rate -- and I'm referring to the Comprehensive Error Rate Testing program known as CERT.

MR. ANTONUCCI: Objection.

THE WITNESS: Oh, the CERT program is the -- is a program on the Fee-For-Service side as well. At least that's what we use to measure the improper payment rates.

BY MS. WALLACE:

Q How large is CERT, that program? How many persons or funding, if you know?

MR. ANTONUCCI: Objection.

THE WITNESS: Off the top of my head, I don't know for certain.

BY MS. WALLACE:

Q Does that fall under -- or has it ever fallen under your purview throughout your career at CMS?

A Yes. It is currently under the umbrella of our work here in the Office of Financial Management.

Q But you don't have an approximate number as to how many persons work in that program?

A I could give you an approximation. I thought you were asking for something precise. I mean, there's approximately, I would say, 40 people within -- within our office which support the improper payment rate measurement program. And that's inclusive of every program, so they're measuring the improper payment rate for not just Medicare Fee-For-Service, but for Managed Care as well as the Marketplace and Medicaid as well. And they also support several contractors which actually do the improper payment rate reviews for us as far as looking at samples of claims and whatnot. So I couldn't tell you. Inclusive of the contractor staff, like, I don't -- off the top of my head, I don't know how many contractors are supporting the 40-odd people we have here.

Q CMS also has a recovery audit contract program which I understand is based on claims that were already paid but may later be found to have been coded incorrectly. Do you have an awareness of

that program?

A Yes. I'm aware of the recovery audit program. We call them the RACs, R-A-C, if you will.

Q And does RACs help to identify incorrectly coded Medicare submissions?

A Well, RACs, they don't fall under my umbrella, first of all, in the Office of Financial Management. Those are run by the Center for Program Integrity here within the agency.

But my -- my general knowledge of them, experience has been that their -- they don't identify -- they don't identify error rates, per se. They identify and try to collect and recover improper payments made on behalf of the program. And they're reimbursed on the contingency as far as the amount that they may collect.

MR. ANTONUCCI: Excuse me. I meant to object to the last question.

MS. WALLACE: No problem. Thank you.

BY MS. WALLACE:

Q So would you agree with me that based on your understanding and career, CMS has long recognized risks involved in program integrity and oversight functions with regard to identifying reducing coding and documentation errors in the

Medicare system?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say that -- that program integrity is and always will be the component function of this agency and organization, trying to stop abusive and fraudulent billers in all of our programs.

BY MS. WALLACE:

Q All right. Let's talk about your role starting in 2014. You -- let's see if -- I'll scroll to it on the screen.

Your resumé indicates that from 2014 to June of 2023, you worked as the SES group director for the Medicare contractor management group. Can you briefly describe that position and your roles?

A Yeah. So in that capacity, I was leading a group of about 110 federal employees. And we were managing the Medicare Administrative Contractors. I'd alluded to them earlier. They're the contractors which basically administer the Fee-For-Service benefit on behalf of -- on behalf of the government.

In that capacity, I spent a large part of my time dealing with -- developing the contracts for competition, helping work on their content, managing

their performance, assessing their performance, and running the day-to-day operations of the Fee-For-Service program and the different functions which they administer for us.

Q And did much of that role involve overseeing Medicare contractor operations and financial management?

A I would say some of that role was involved in overseeing Medicare contractor financial management operations.

Q In that role, did you prepare corrective action plans for your contractors?

A Yes. We would -- we would work with the contractors when we found fault or errors in some of their operations and they weren't meeting our performance metrics. We would work with them to develop corrective action plans.

Q What time of -- what type of fault or errors do you recall finding? Just a couple examples.

A Just as an example, more often than not, it's a function of workload processing. So, for example, a contractor could -- could get hit with more provider enrollment applications in a given period of time that they would necessarily expect,

or they could have staff attrition unexpectedly occur so that they would get behind in processing provider enrollment applications and would not be able to meet our performance-level metrics.

So we would work with them to see what kind of corrective actions they could come with up to either increase their staffing, increase their productivity, develop timelines for when we expected them to get back in -- to come back in compliance with our -- with our requirements.

Q Since 2023, June to be exact, according to your resumé, you have been in the chief financial officer, CFO, and deputy director role that you hold today; correct?

A Yes. It's the deputy chief financial officer and deputy director. Correct.

Q Thank you. Yes. Meaning there is also a CFO above you? Or how does that work? Is it above you or the same level?

A It's -- she's technically my boss, yes. There's a CFO above me.

Q Okay. Tell me about some of the responsibilities you hold in your current role.

A So in my current capacity, we're -- we oversee the groups responsible for remaining --

managing the range of different financial management functions, including the accounting services, accounting for all the benefit payments and administrative dollars which flow in and outside the agency, maintaining the accounting system, HIGLAS, which captures all those accounting functions, collecting overpayments, running the Medicare secondary program, payment program, and measuring the improper payment rates for the three different programs which the agency administers.

Q And all of that financial accounting, who -- how do you report that regularly to -- what do you prepare in order to report your findings regularly and who do you report them to?

MR. ANTONUCCI: Objection.

THE WITNESS: I say the -- the biggest thing which we report is the annual financial statement that the agency provides as part of the department's report. And this year we -- we produced our -- our -- I believe it's our 27th consecutive year without any significant findings or material weaknesses. It's an annual report.

BY MS. WALLACE:

Q And does that -- is that for CMS

internally or is that used by Congress or who views that? Who relies and needs that annual financial statement?

A It's a public report which many people have an interest in and Congress views it, public view it, the department views it.

Q How does your work in the role you have now support Medicare's long-term stability?

A I would say as far as the stability of the program, a lot of what we do is to provide confidence that the benefit dollars and administrative dollars are accurately accounted for and that the integrity of the accounting process is reliable. That helps ensure confidence that -- that this program is running as efficiently as it can, necessarily. To the extent that that provides stability to the program...

Q So it sounds like your -- your focus is to try to ensure to the general public and/or to Congress or policymakers that confidence in the way Medicare is currently running?

MR. ANTONUCCI: Objection. And the witness hadn't finish answering your last question.

BY MS. WALLACE:

Q Oh, I'm sorry. Mr. Young, did you not finish?

A I -- you know, I think I had necessarily kind of left a dangling answer for you.

To the extent that -- that the confidence we provide in the stewardship of this agency's benefit dollars and administrative dollars provides stability of the Medicare program, we're doing that.

Q I'm going to stop sharing your resumé and I'm going to pull up your designations.

THE WITNESS: Would you mind if we took a little break?

MS. WALLACE: Not at all. I was going to do one on the hour but I'm happy to do one now.

VIDEOGRAPHER: The time -- the time's now 10:10. We're going off the video record. This completes media unit number one.

(A brief recess is had from 10:10 a.m. to 10:16 a.m.)

VIDEOGRAPHER: The time is now 10:16. We're back on the video record. This begins media unit number two.

You may proceed.

MS. WALLACE: Thank you.

BY MS. WALLACE:

Q Mr. Young, I'm going to show you what has been uploaded as Young Exhibit 1. It is a copy of the disclosures that we were provided for your testimony by your counsel. Do you recognize this document?

A Can you make it a little bigger for me?

Q Certainly. Do you recognize this document so far?

A I believe so. I've seen it quickly. It's hard to tell from just the title page.

Q No problem.

So I will represent to you this is a 46-page document that is titled the United States Second Disclosure of Expert Testimony for Phase III in the Camp Lejeune Litigation.

And the section having to do with your designation, it repeats for each disease category, but for the first disease category, which is bladder cancer, your disclosures starts on page five.

Do you see that on the screen?

A I do.

Q I believe you testified earlier that you helped to prepare this section?

A Yes.

Q Did you write it or review it?

A I wrote part of it and reviewed all of it.
Q Which part did you write? And I'll scroll down. I'm happy to scroll down. It looks like your designations actually start -- they're identified as A through I on pages six and seven.
MR. ANTONUCCI: I'm going to object.
Mr. Young, please be careful not to divulge confidential communications with attorneys in answering this question.
THE WITNESS: I can't honestly recall exactly which part that I had -- or parts that I had amended from things that -- so it's hard -- it's hard for me to tell you exactly which -- which parts. But I reviewed it and, again, it's all true and correct.
BY MS. WALLACE:
Q Thank you. Does A through I accurately represent the entirety of the scope of your expert testimony in the Camp Lejeune litigation that you would be expected to provide?
A Yes.
Q And you were able to make edits to confirm that all of these, A through I, is within the scope of your knowledge and expertise in this litigation?
A Yes, absolutely.

Q If we walk through several of these designations, many of these are pretty basic background on the Medicare program. Do you agree with me on that?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say they provide a basic background of the Medicare -- the original Medicare program.

BY MS. WALLACE:

Q Yes. And so, for example, A, B, and C states that "Medicare is a federally funded program of health insurance for the aged, the disabled, and persons suffering from end-stage renal disease."

"Medicare parts A and B, (also known as original Medicare) was established under Title 13 [sic] of the Social Security Act in 1965. Medicare" --

A Eighteen.

Q Thank you. I'm sorry.

"Medicare Part A helps pay for inpatient care in hospitals, skilled nursing facilities, hospice, and some outpatient home healthcare."

I do want to clarify. You don't have any role in the healthcare component of Medicare; correct? More finance and administration?

A I would say, yeah. I'm not directly involved in providing healthcare to people. It's the -- in my current capacity is -- it's the financial management component piece.

Q And then you describe that "Part B helps pay for items and services, such as doctor visits, physical, occupational and speech therapy services, home health service, outpatient hospital services, and durable medical equipment, prosthetics, orthotics, and supplies for those who have voluntarily enrolled."

A Correct.

Q And then in C, your designation, you describe the Part D program "Provides subsidized access to prescription drug insurance coverage on a voluntary basis for all enrolled beneficiaries. It also provides premium and cost-sharing subsidies for low-income enrollees."

And then you indicate when it went into effect which was January 1st, 2006.

A Yes.

Q Am I correct that both the Medicares Part B and D are voluntary enrollment programs?

A Yes.

Q And both of those programs are supported

by premiums from the Medicare recipient that opted into those programs?

A Yes. For people which enroll, they have -- they have to pay a premium.

Q And my understanding is that if you have 10 years of earnings, you do not have to pay any type of a premium for Part A? It's a waived premium?

A For Part A of Medicare, if you have earned -- earned 40 quarters of credit under social security, which is 10 years of work, then you are entitled to Medicare Part A premium free.

There are some individuals who have not worked that long and they have to pay a premium for Part A. Everyone pays a premium for Part B.

Q And some of the premiums are scaled based on your earning capacity?

A Yes. Correct.

Q Does that go for Part B, A, and D?

A It goes for Part B, I know for sure. For Part D, I cannot recall off the top of my head.

Q Does Medicare, if you know, does it keep track of how many -- of how much premiums an enrollee has paid over time?

A We -- off the top of my head, we don't --

I don't know. I mean, we keep track of whether or not people pay their premiums, certainly, so there would be a record of -- of them paying their premiums over time.

Q And so premiums paid or patient pay would be documented within the CMS system?

MR. ANTONUCCI: Objection.

THE WITNESS: Exactly how we account for their premiums, I'm -- I can't tell you at this moment.

BY MS. WALLACE:

Q Can you answer yes or no if premiums paid would be in the CMS system?

MR. ANTONUCCI: Objection.

THE WITNESS: The premium collections are, as I recall -- I believe they're captured through social security, primarily, so there's a distinction here. Social security manages the enrollment in Medicare for the agency and the collections of benefit premiums.

BY MS. WALLACE:

Q Would premiums pay be accessible by Medicare?

MR. ANTONUCCI: Objection.

THE WITNESS: I think generally, yes, it

would be, but we'd have to work with social security in some capacity.

BY MS. WALLACE:

Q Which one of these programs has copays for beneficiaries?

MR. ANTONUCCI: Objection.

THE WITNESS: In my experience and recollection, they all have copays. Different benefits have different levels of copays and some of the benefits have no copays so it depends on the type of service that we're speaking to.

BY MS. WALLACE:

Q But all Part A, Part B, Part D, have copays. Yes?

A No. You can't say all because there are some benefits for which there are no copays.

Q But portions of Part A, B, and D are likely to have copays?

A Yes.

Q Would that information be accessible by Medicare --

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q -- the amount of copays paid by any given

beneficiary?

MR. ANTONUCCI: Same objection.

THE WITNESS: I do not know.

BY MS. WALLACE:

Q Is that housed copays in the social security program or would it be housed in Medicare, to your knowledge?

MR. ANTONUCCI: Objection.

THE WITNESS: I cannot say for certain.

BY MS. WALLACE:

Q Your designations in paragraph E describe how these different parts of the Medicare program are funded. And it's very interesting.

So you describe that Part A is funded with a trust called the Hospital Insurance trust. And then you go on to explain that "The HI trust is funded primarily through payroll taxes, but also income taxes, interest earned on trust fund investments, and Medicare Part A premiums collected from those not entitled to premium free"; is that right?

A Yes.

Q And so in common sense, Part A of Medicare is primarily funded by taxpayers who are employed and paying percentages of their payroll taxes to the

government; is that right?

A Just Part A is funded through a payroll tax. It's 1.45 percent of a person's payroll.

Q Did you agree with my statement?

A I said yes. Did you not hear me?

Q Oh, no. I'm sorry. It might have been a delay. Thank you for that.

And I also understand it's a little more for self-employed earners than the 1.45 percent?

A I think it's -- I believe that's correct, that you'll have -- it's a combination of funds, so it's the payroll tax on individuals 1.45 percent, then the employer pays 1.45 percent. If you're self-employed, then you get to pay the full -- full amount, I believe.

Q And my understanding is that this is based on -- it's kind of like a pay-it-forward program. So the workers of today are paying for essentially the retirees of tomorrow for their Medicare coverage, and it's this pay-it-forward kind of taxpayer approach to Medicare funding. Can you explain that better than me?

A Well, I don't know if I would call it a pay-it-forward program. I mean, it's a trust fund and it exists by -- based on historical payroll

taxes which have been collected over time. And then it's offset all the time by benefit payouts which go out all the time, necessarily. To the extent that there's fewer workers paying payroll taxes that, you know, you can consider that perhaps a go-forward funding situation, but it depends on how you want to characterize it.

Q For the most part, the individuals paying payroll taxes are not probably disabled or usually over 65; right?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say people -- it's a matter -- it's function of who's receiving an income through payroll, be it through being self-employed or not.

There are certainly disabled individuals which may have some part-time work. There's certainly aged individuals which continue to work as well.

BY MS. WALLACE:

Q But by -- in large part, Medicare's being funded by the people working today for their retirement later in life or someone else's retirement?

MR. ANTONUCCI: Objection.

THE WITNESS: As a general matter, you could say that.

BY MS. WALLACE:

Q All right. And then Part B is kind of a -- it's a completely different trust fund. It's called the Supplementary Medical Insurance, SMI trust fund. And it is not paid from payroll taxes. It's paid through a combination of premiums from the beneficiary who enrolled in it and a combination of other tax revenues that the government holds in the treasury. Is that fair?

A Generally, yes. It's funded through the general -- it's a combination of both general tax revenues, income taxes, if you will, for example, and premiums. And it's a formula so that the premium is set every year such that it's actuarially comprised, I believe it's 25 percent of the expected benefit payout. And then the trust fund and tax revenues have to make up the other 75 percent.

Q So Part B is being funded by the beneficiary of the Medicare themselves by them paying premiums. That's about 25 percent of the funding generally. And then the other 75 percent is from taxpayer funding flowing through the government. Is that true?

A That's generally correct.

Q All right. And I wanted to ask you about your paragraph D. It says "To be covered under original Medicare, an item or service must be eligible for coverage and reasonable and necessary for the diagnosis of treatment of an injury or illness."

Tell me about the "reasonable and necessary" requirement for eligibility, please.

A The operating principle as outlined in the Social Security Act is that in order to be covered, an item or service has to be medically reasonable and necessary for the diagnosis, treatment of an illness or injury or, I believe it goes on to say, or to correct the function of a malformed body member, something along those lines.

So that's how you end up with coverage for things like prosthetics, for example, as a part of the durable medical equipment benefit.

The test as to whether or not something is medically reasonable and necessary, that's a clinical decision. And beyond that, I can -- I mean, I'm not a clinician so it's hard for me to expound on that beyond that, really.

Q Do you know if Medicare payment can be

denied if an auditor or contractor deems that the service was not reasonable and -- medically reasonable and necessary?

A Yes. I mean, if it doesn't meet that general test, then an item of service can be denied.

Q And do you know if contractors, when they evaluate claims, do they have a physician or a nurse on hand that helps to make that determination in questionable cases?

A Yes. For my -- my experience has been with -- for example, the Medicare administrative contractors, they have -- we require them to employ chief medical officers, chief medical directors, if you will, as well as a number of nurses that are working in concert with the chief medical director performing medical review on specific claims.

Q Do you agree that the reasonable and necessary determination is made at the time the service is provided based on the patient's condition and the applicable coverage rules at that time?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know that I would agree with that. At the time the patient's being seen, they're being seen by their provider and their physician. They're making a

medical judgment, not the Medicare program, per se.

BY MS. WALLACE:

Q Your testimony is that it's later -- it later can be subject to review for -- whether -- as to whether it was reasonable or medically necessary?

MR. ANTONUCCI: Objection.

THE WITNESS: I mean, the Medicare program's making the decision as to whether or not it's meeting that coverage criteria. That's happening most often after the fact that the service has been provided. So they're not -- they're not -- we're not in the room making a decision with the clinician, is my point.

BY MS. WALLACE:

Q I understand.

It can happen -- that audit or review can happen after the visit, and sometimes treatment can be denied on that basis?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say yes.

BY MS. WALLACE:

Q Would you agree that whether Medicare will cover a particular service as reasonable and

necessary, that cannot be a decision that's made in advance?

MR. ANTONUCCI: Objection.

THE WITNESS: I won't say that across the board.

There are -- there are a few different programs we have in place that would require providers to receive prior authorization for a service so that they would be actually engaging with our Medicare administrative contractors to receive prior authorization before they receive the service necessarily. Those are kind of targeted programs with specific benefits.

BY MS. WALLACE:

Q Outside of a pre-approval process, would you agree that whether a Medicare service will be deemed reasonably and medically necessary can't be known years or decades in advance?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't feel like I can answer that question because, again, I'm not in the clinician clinical space.

BY MS. WALLACE:

Q All right. Your designation does say that "An item or service must be eligible for coverage

and reasonable and necessary for the diagnosis or treatment of an injury or illness." And I'm trying to understand, are you saying that that can occur limitedly in a pre-approval process and then it can be subsequently reviewed?

MR. ANTONUCCI: Objection.

THE WITNESS: What I'm saying is that if it's -- if it's something as reviewed prior -- prior approval, it's not -- it's not reviewed after the fact. But the things which are reviewed for prior approval are very limited and narrow. We don't do much of that in the Medicare Fee-For-Service program.

BY MS. WALLACE:

Q So pre-approval would be limited. And other than pre-approval, Medicare does not make that determination based on the service needed years in advance. That's not the process?

MR. ANTONUCCI: Objection.

THE WITNESS: Again, I can't really speak to your full characterization because I'm not a clinician. It's not my area of expertise, that space.

BY MS. WALLACE:

Q But you -- but you are an administrator of

the Medicare rules that would be responsible for administering the reasonable and necessary component?

MR. ANTONUCCI: Objection.

THE WITNESS: I'm an administrator and I've spoken to the general -- based on my experience how we handle claims, both on a pre-payment basis and a post-payment basis. That's all I can really speak to.

BY MS. WALLACE:

Q If a -- if a plaintiff knew -- okay.

When you say, in the next sentence, "The item of service must also not be specifically excluded by the Social Security Act," what do you mean by that sentence?

A So there are specific things that the Social Security Act specifically excludes us from being able to cover or provide services for; routine foot care, for example, dental services, to the extent that they don't require somebody to be hospitalized for those dental services are excluded. Things of that sort, those are specific things which Congress just carved out and said, no, those are not available for -- for any kind of Medicare coverage.

Q And are those the types of carved-out

coverage that are usually picked up by Part C?

A There are some of those services where if an individual enrolls in Medicare Part C, which is a Medicare + Choice plan typically administered by what we would call a health maintenance organization, they can offer additional benefits from what the original Medicare Fee-For-Service program can offer. And many times they do choose to provide some of those supplemental benefits that we do not, are not allowed to provide under the original Fee-For-Service program.

Q How is Part C -- Medicare Part C funded?

A My knowledge and recollection of how Part C is funded is -- is not as deep as it is on the A and B side, or the D side, necessarily. But I think it's probably -- I don't want to speculate. I'm going to have to tell you I can't remember.

Q Do you know if it's funded by the government?

A I would say yes, it's -- I believe it's funded by the government. That part, I do know.

Q Do you know if it's ran through private insurance companies?

A Yes. Those programs are run by private insurance companies, most commonly, as I said,

health maintenance organizations. There are some PPO organizations as well; providers. UnitedHealth, for example, would be one.

Q But you are not designated to talk about how Part C is funded?

MR. ANTONUCCI: Objection.

THE WITNESS: That's not my area of expertise. So beyond saying that it's paid for by the federal government in the -- I can't, off the top of my head, recall if it's subsidized by the A and B trust funds, if you will.

BY MS. WALLACE:

Q All right. And let's look at your last several designations.

Part G, "Medicare Part B is available to individuals who are eligible for Part A at no cost by paying a monthly premium."

Do you mean -- I think you mean Medicare part -- as worded, it's a slight bit confusing. Would you explain it?

A Well, I mean, if you -- if an individual is enrolled in Part A, they're available -- Part B is available to that individual enrolled in part -- Part A.

Q But they are paying a cost, a monthly premium?

A The Part B -- yeah. Maybe -- maybe this sentence is isn't as artfully worded. But, correct. Part B is -- you pay -- everybody's paying a premium for Part B. Unless there are some low-income individuals which get Part B premium-free subsidized through -- there are dual eligibles that are Medicare and Medicaid eligible.

Their premiums get subsidized but there's a -- everyone pays a premium for Part B.

Q All right. And let's look at I. "Since its enactment, Medicare has expanded to include additional benefits, such as Part D." And you testified earlier Part D is the prescription drug plan?

A Yes, correct.

Q And Part D does have beneficiary contribution in the form of a premium; correct?

A Yes.

Q And it's also a voluntary enrollment program?

A Yes.

Q And then you have this last sentence "Generally speaking, since Mr. Young has been

employed at CMS, benefit coverage has expanded, not constricted."

And so when you say "generally speaking," I think that you mean not every benefit coverage has expanded, but for the most part, benefits coverages have expanded, not constricted?

MR. ANTONUCCI: Objection.

THE WITNESS: I mean -- I mean what it says. I mean, in my experience the program has tended to accrue or accrete additional coverage over time. The big one being the addition of the Part D benefit program for the drug benefit in 2006. There's also a tendency to expand eligibility groups. For example, when I first started, we did not have -- we did not have an eligibility opportunity for people with Lou Gehrig's disease.

That got subsequently added. I can't recall which year, but now if somebody develops Lou Gehrig's disease, ALS, you would -- that individual would be entitled to Medicare coverage, even if they weren't age 65. That's just an example of that.

BY MS. WALLACE:

Q Yeah. So Lou Gehrig's, and then end-stage

renal disease are, you know, specified diseases that fall under Part A coverage?

A Correct.

Q So Medicare is governed by federal statutes enacted by Congress; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: It's governed -- Medicare is primarily governed by Title 18 of the Social Security Act.

BY MS. WALLACE:

Q And that's a statute enacted by Congress?

A It's a statute enacted by Congress, signed into law by the President.

Q In your role, you do not get to make Medicare policy decisions. Would you agree?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say yes, generally, I do not get to make policy decisions. That's generally correct.

BY MS. WALLACE:

Q Who makes those, please?

MR. ANTONUCCI: Objection.

THE WITNESS: Overall, the policy decisions, to the extent that they are -- they are -- that the law allows flexibility in

making policy decisions are made by the political leadership of the agency.

BY MS. WALLACE:

Q And who would that be?

A Well, at this very moment, it would be the administrator, Dr. Oz, as well as -- as well as many of the different political appointees that have been appointed to the agency under the new administration. I can't -- I can't name them all.

Q Would you agree with me that Congress has the authority to amend Medicare statutes, including the eligibility rules, the benefits and scope, and the payment methodologies?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I would generally agree with you.

BY MS. WALLACE:

Q Do you agree that Congress can enact changes that affect the future Medicare coverage and reimbursement levels --

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q -- of Medicare beneficiaries?

MR. ANTONUCCI: Same objection.

THE WITNESS: I would say yes, they can.

BY MS. WALLACE:

Q And so future Medicare coverage and payment levels depend on decisions made by Congress and not necessarily CMS. Is that accurate?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say, in my experience, yes, that's generally accurate.

BY MS. WALLACE:

Q All right. And so I took the designations off the screen for a moment. And I just wanted to talk about -- just clear up what you're not designated to offer opinions on and make sure it's really clear for the Camp Lejeune litigation.

So you testified earlier, you don't know anything about the individual plaintiffs who are in litigation currently; correct?

A Yes, correct.

Q And so you are not designated to offer opinions about any individual plaintiff or their damages; correct?

A Yes, that's correct.

Q The plaintiffs have been previously provided CMS documents in this case. Were you involved in preparing any of those documents?

A No.

Q And just for the record, I'm referring to Bates range document CLJA_CMS_1 through 135.

You have not viewed and had no role in preparing those documents; correct?

A I have no idea what that is, what you just read.

Q Okay. Do you know who Kathleen Hunter is?

A No, I do not.

Q Okay. She testified previously in the Camp Lejeune litigation on behalf of CMS; however, she's a contract worker with BRBC. Do you know what BRBC is?

MR. ANTONUCCI: Objection.

THE WITNESS: Off the top of my head, I don't remember what the -- the acronym stands for. We have lots of acronyms, as you can imagine.

BY MS. WALLACE:

Q Absolutely.

Do you recognize that as a contractor of CMS, that -- just that acronym without...

A I actually do not.

Q Do you recognize this name, Benefits Coordination & Recovery Center, BCRC, Medicare contractor that supports the Medicare Secondary

Payer, MSP program?

A Yes.

Q Is that a contractor for CMS?

A Yes.

Q What does that department or program do?

MR. ANTONUCCI: Objection.

THE WITNESS: So the benefit -- the BCRC contractor for us helps us with our benefit coordination recovery work. And I'm not as steeped in that. But the -- it helps us administer the Medicare Secondary Payer program, where Medicare is not the primary payer for benefits.

BY MS. WALLACE:

Q Do they have a role in lien resolution, that entity, if you know?

MR. ANTONUCCI: Objection.

THE WITNESS: Off the top of my head, I can't recall. We have a -- we have a couple of different contractors help -- help us with our MSP space, some of which deal with education-run Medicare Secondary Payer work. Some of -- some of them involve working on subrogation cases. And off the -- again, I wasn't prepared for that, that discussion so I

can't say for certain.
BY MS. WALLACE:
Q You have not been designated to give an opinion on any offsets in this litigation. Is that true?
MR. ANTONUCCI: Objection.
THE WITNESS: I cannot speak to any offsets.
BY MS. WALLACE:
Q And you are not designated to testify that Medicare will pay for any future care for any of the individual plaintiffs?
MR. ANTONUCCI: Objection.
THE WITNESS: I could not speak to that.
BY MS. WALLACE:
Q And you're not offering an opinion predicting any future Medicare reimbursement rates or fee schedules. Is that true?
MR. ANTONUCCI: Objection.
THE WITNESS: I cannot speak to Medicare future payment rates or fee schedules.
BY MS. WALLACE:
Q And you're not designated to testify that Medicare coverage is guaranteed for any future beneficiaries of the program?

MR. ANTONUCCI: Objection.

THE WITNESS: Again, I could not speak to that either.

BY MS. WALLACE:

Q None of the opinions you've identified in your disclosures guarantee the scope, duration, or payment level of any future Medicare benefits for any individual. Would you agree?

MR. ANTONUCCI: Objection.

THE WITNESS: I would agree that I cannot speculate on what the future may hold with respect to the Medicare program.

BY MS. WALLACE:

Q And you are not offering any opinions on the accuracy of the Medicare coding or billing data for any of the plaintiffs in the Camp Lejeune litigation; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I'm not privy to any of that information so I cannot really speak to any of that.

BY MS. WALLACE:

Q And you're not offering any opinions on whether services paid for by Medicare were related to their Camp Lejeune exposure for the bellwether

plaintiffs in the Camp Lejeune litigation?

MR. ANTONUCCI: Objection.

THE WITNESS: I cannot speak to that either.

BY MS. WALLACE:

Q And so the scope of your testimony has to do with -- you've had -- with the history of Medicare, as you've known it, and you're not making speculation about the future -- future of Medicare?

MR. ANTONUCCI: Objection.

THE WITNESS: Correct. I can only speak to my experience and what's -- what's under current law, to my recollection.

MS. WALLACE: All right. We are going to -- let me know if you want a break because we're going to start taking a look at the trustees' report. Would you like a brief break before we do that?

THE WITNESS: Yeah. Let's take a little break. I'm going to have to reconfigure my --

MS. WALLACE: Okay. Sure.

THE WITNESS: -- computer.

MS. WALLACE: Okay. Thank you, Mr. Young.

VIDEOGRAPHER: The time is now 11:00. We're going off the video record. This

completes media unit number two.

(A brief recess is had from 11:00 a.m. to 11:11 a.m.)

VIDEOGRAPHER: The time is now 11:11. We're back on the video record. This beginning media unit number three. You may proceed.

BY MS. WALLACE:

Q Mr. Young, I'm going to upload a document into the Chat feature that has been previously marked as Young Exhibit 6, 2025 Annual Report. And it bears the Bates stamped numbers CLJA_USA_YOUNG_7 through 273.

(Exhibit 6 was marked.)

BY MS. WALLACE:

Q And I'm going to put it on the screen for you as well, sir.

Mr. Young, do you recognize this document?

A Yes.

Q What is it?

A This is the '25 annual report of the board of trustees on the status of the Medicare programs' financial situation.

Q Did you -- well, you produced this document in response to the plaintiff's request for materials you reviewed, considered, or relied upon

in developing your opinions in this case; is that correct?

A Yes.

Q And in paragraph nine of your responses to our notice, you also disclosed this document as one that you reviewed in connection with the Camp Lejeune litigation; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes.

BY MS. WALLACE:

Q Can you tell me which components of this document that you relied upon related to the Camp Lejeune litigation?

A Just reviewed the -- primarily the introduction component piece. It's a kind of lengthy document. So I focused --

Q And it's your testimony that -- oh, I'm so sorry. Please continue.

A No. I'm sorry.

I focused on the introduction and the Highlights section that gives you kind of an overview of their conclusions and recommendations.

Q So just as background for the court, explain to the court, what is this document? Who prepares it? What's it for? What's it used for?

MR. ANTONUCCI: Objection.

THE WITNESS: So I can speak to generally what it is and who prepares it. I mean, it's prepared by the board of trustees for the Medicare program, if you will. It's a annual report that I believe that's required by Congress. They have to report on the financial stability and actuarial projections for the different trust funds which fund the different parts of Medicare.

BY MS. WALLACE:

Q What does Congress do with this document?

MR. ANTONUCCI: Objection.

THE WITNESS: I have no idea what Congress does with this document. I simply know that it's required by law to be provided to Congress, I believe, on an annual basis.

BY MS. WALLACE:

Q Were you an author in this document?

A No.

Q When you stated earlier that you relied -- you rely upon the introduction or the Highlights section of this document to support your testimony in the Camp Lejeune litigations, which parts, specifically?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know if I can point you to an exact paragraph, per se. I read the entire introduction of it.

BY MS. WALLACE:

Q And that supports your opinions in the Camp Lejeune litigation?

A It supports my -- what I've -- what I have provided as terms of written narrative as well as my oral comments today.

Q The intended recipient of this document is Congress and the policymakers and not CMS. Is that your testimony?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know that I would care to speculate on what the intent of this was. I simply know what I believe that's required by law as a report to Congress.

BY MS. WALLACE:

Q And it's prepared for Congress, based on your understanding, not for CMS; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: That's my understanding, yes.

BY MS. WALLACE:

Q Would you agree with me that the trustees' report generally discusses Medicare's overall financial condition?

A Generally, yes.

Q All right. And what is -- based on the Highlights and Summary section, can you tell me what the current financial position is of the HI fund?

A Well, from what I recall based on the trustees' report was the, the HI supplement -- the HI trust fund, if you will, it's -- it's facing several headwinds and challenges in terms of its being able to continue to be financially solvent. I believe the report indicated that they would -- the benefits would exceed the collections as early as 2027 and that the fund could be depleted by 2033.

Q And so the trustees' report is a warning of that dire financial position of the HI fund?

MR. ANTONUCCI: Objection.

THE WITNESS: You can characterize it the way you like. It's just -- I think it's a factual portrayal based on actuarial projections of -- and assumptions that they're aware at this moment in time of the financial stability of the Medicare A and B trust funds.

BY MS. WALLACE:

Q Let's take a look at the summary section, page two on the document itself, and Bates number 14.

Oh, first of all, actually, let's look at this page. This is Bates number nine. And it's -- who is -- who are the -- can you tell me what this page tells us about who prepared this document?

A I don't know that -- that you could conclude, necessarily, that this would tell you who prepared the document.

This is simply -- my understanding would be simply who is on the boards responsible for the content and who's submitting it to Congress.

Q So these are the Medicare trustees?

A I believe so.

Q And this is the trustees' report?

A Yes.

Q And these trustees, do you understand that -- are they appointed by federal statute?

A I think some of them are appointed by statute, as far as required to be on the board on different capacities. The administrator, I believe, is required to be the secretary of the board. But then there's two -- two -- you see them on there -- vacancies. Those are -- I believe those are

appointed by the President, the public trustees.

Q Okay. Let's look at page four.

Can you read, on -- and this is page four of the document, Bates number 16. Could you read the first paragraph under Summary of Projections, please?

A Yes. "Current-law projections indicate that Medicare still faces a substantial financial shortfall that needs to be addressed with further legislation. Such legislation should be enacted sooner rather than later to maximize the impact on beneficiaries" -- excuse me -- "minimize the impact on beneficiaries, providers, and taxpayers."

Q Do you agree with that statement?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know that it matters if I agree or not but it seems like it would be a good idea.

BY MS. WALLACE:

Q Meaning Congress makes the decision. Is that why you say it doesn't matter if you agree with it or not?

MR. ANTONUCCI: Objection.

THE WITNESS: Correct. It's not my decision to make.

BY MS. WALLACE:

Q Do you -- let's take a look at page three. Do you see the sentence that starts with -- yes. In the third -- let's see. I'm going to highlight it for you on this document so we can follow each along.

Do you see the highlighted text on the screen? Do you want me to zoom in?

A No. I can see it.

Q Okay. Will you read that paragraph for me, please?

A "If the health sector cannot transition to more efficient care delivery and if the provider reimbursement rates paid by commercial insurers continue to be based on the same negotiated process, then the availability, particularly with respect to physician services, and quality of healthcare received by Medicare beneficiaries, will, under current law, fall over time compared to that received by those with private health insurance."

Q Can you explain to me in your own words what that paragraph is intended to convey, to the best of your knowledge?

MR. ANTONUCCI: Objection, foundation.

THE WITNESS: I mean, it says what it

says. I mean, if the -- if the -- if the -- if the Medicare program healthcare providers are unable to become more efficient in delivering the care that they provide, then there will be a growing disparity between what Medicare beneficiaries receive and what commercial private health insurance beneficiaries receive.

BY MS. WALLACE:

Q And the quality of healthcare received by Medicare beneficiaries will, under current law, fall over time compared to that received by those with private health insurance? Meaning it's possible that the quality of healthcare received by Medicare beneficiaries could fall under the current law?

MR. ANTONUCCI: Objection.

THE WITNESS: It's possible.

BY MS. WALLACE:

Q Isn't -- is that -- isn't that one of the warnings being issued in this summary of the report?

A Yes, I would say so.

Q The trust -- the HI trust fund depletion that you talked about earlier on page five, will you read and explain to the best of your knowledge the first paragraph on page five that I just highlighted? And this is Bates number 17.

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. "The expenditure projections reflect the cost-reduction provisions required under current law but not the payment reductions and/or delays that would result from the HI trust fund depletion, which is projected in this report to occur in 2033. At that point, HI revenues are projected to cover 89 percent of incurred program costs."

What exactly did you want me to explain again?

BY MS. WALLACE:

Q Well, let's start with the last sentence. So when it says at the point that the HI trust fund has depleted, which is projected currently to occur in 2033, is it my understanding that at that point only -- the HI revenues are only sufficient to cover 89 percent of the estimated program costs, meaning there's -- there would be an unfunded 11 percent of Part A Medicare costs?

MR. ANTONUCCI: Objection.

THE WITNESS: The language is what it is, but that's the way I would interpret that. It would be a deficit.

BY MS. WALLACE:

Q And so what happens in the event of a deficit? There's -- I understand there's, like, a number of ways that Congress could decide to fix that. Could one of those ways be to decrease eligibility or offerings under the Medicare Part A program?

MR. ANTONUCCI: Objection.

THE WITNESS: I mean, it's -- you can speculate on different things that Congress at the time could elect to do. You either increase benefits, lower benefits, increase revenues, lower revenues -- well, you wouldn't lower revenues. You want to increase revenues, certainly. But there's this fixed number of variables with which they have to deal to address the issue.

BY MS. WALLACE:

Q So Congress will have to do something to avoid trust fund depletion of the HI trust fund. And what it does is unknown at this point in time; is that right?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know that I would agree with that statement completely. It's -- it's still -- these are projections. And

it's -- it's unknowable what's going to happen with respect to the economy, the practice of medicine, et cetera. I think the language in the report speaks for itself as far as what may or may not happen.

BY MS. WALLACE:

Q But if the current law stays as is, the whole purpose of this report is to warn that HI trust fund depletion will occur if no changes are made to the program or the law.

MR. ANTONUCCI: Objection.

THE WITNESS: I think that's a little bit of an oversimplification. But generally it is -- it is -- it is a bit of a cautionary note to explain that the financial viability of the HI trust fund is in danger under current law, assuming certain assumptions hold true, which are only assumptions. Nobody knows exactly what the future holds.

BY MS. WALLACE:

Q Let's take a look at page six. This is the Highlights section that you indicated you reviewed in preparation for your testimony.

A Yes.

Q All right. And will you read the

highlighted parts that I just highlighted on the screen for you, please, and the title, if you will? I'm sorry.

A Yes. It says "Short-range results. The estimated depletion date for the HI trust fund in 2033 is" --

Q It's "is"; right?

A Excuse me.

Q Of course.

A "The estimated depletion date for the HI trust fund is 2033" -- excuse me -- "three years earlier than projected last year, primarily due to the change in projected expenditures. HI expenditures through the short-range period are projected to be higher than last year's estimates."

Q And so does that mean that compared to last year, they actually moved up the completion date by three years due to increased short-range expenditures in the HI fund in the 2024 time period?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. That's the way I would read that.

BY MS. WALLACE:

Q Meaning the problem is getting worse rather than better from last year's report to this

year's report?

MR. ANTONUCCI: Objection.

THE WITNESS: I mean, it means that they've had to move up the -- the depletion dates by three years. That's what it means.

BY MS. WALLACE:

Q Because the H fund trust deficit has gotten predictably worse over the last fiscal year?

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q Worse than anticipated. Is that a better way of saying it?

MR. ANTONUCCI: Same objection.

THE WITNESS: No. Wait. I refrain from -- hesitate to say better, worse, good, or bad. It's simply a matter of fact that the expenditures increased in a short period of time more quickly than they thought and so they had to move up by three years.

BY MS. WALLACE:

Q Do you know, based on your position, why those expenditures increased greater than expected?

MR. ANTONUCCI: Objection.

THE WITNESS: I do not. I'm not intricately involved in the ex rel side of --

of the demographic drivers.

BY MS. WALLACE:

Q All right. We are going to take a look at page 27 of the report, which is Bates stamp number 39.

All right. Have you -- do you see the chart on the screen there? This is Figure II.E1. And it's entitled HI Trust Fund Balance at Beginning of Year as a Percentage of Annual Expenditures.

A Yes, I can see it.

Q Is this the solvency chart for Medicare Part A?

MR. ANTONUCCI: Objection.

THE WITNESS: I mean, I don't know if you want to call it the solvency chart. It's just illustrating the trust fund balance as a percentage of expenditures. It is what it is.

BY MS. WALLACE:

Q Okay. And what does that -- what does that line that starts "declining in approximately 2007 all the way down to zero in 2033," what does that line indicate to us?

MR. ANTONUCCI: Objection.

THE WITNESS: So I -- I believe it indicates the balance of the HI trust fund over

time, both historically and where it's currently being projected to end.

BY MS. WALLACE:

Q And does this chart show the trust fund ratio declining to zero around 2033 under intermediate assumptions?

MR. ANTONUCCI: Objection.

THE WITNESS: I'm sorry. Could you repeat the question?

BY MS. WALLACE:

Q Sure. Does this chart show the trust fund ratio declining to zero around 2033 under intermediate assumptions?

MR. ANTONUCCI: Same objection.

THE WITNESS: In my reading, what's in the chart and the narrative below it? I would say yes.

BY MS. WALLACE:

Q All right. And in the narrative below it, can you read the sentence that I highlighted, please?

A Yes. It says "However, under the high-cost assumptions, asset depletion would occur in 2029."

Q And so that depletion down to zero -- to a

zero trust fund balance, under high-cost assumptions could occur as early as 2029, three years from where we are now? Is that true?

MR. ANTONUCCI: Objection.

THE WITNESS: That is what that sentence says. But I will also add that the sentence at the beginning of the paragraph points out "There is substantial uncertainty in the economic, demographic, and healthcare projection factors for the HI trust fund expenditures and revenues."

So it's very difficult to say with a degree of certainty what will or will not happen, necessarily.

BY MS. WALLACE:

Q But these are the best actuarial projections of CMS; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I was not involved in putting this together so I can't speculate as to whether or not it was the best effort or not. I like to hope so.

BY MS. WALLACE:

Q Good. These are the actu -- I'm sorry, that word -- actuarial projections of CMS; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Again, I was not involved in compiling a report so I don't have direct knowledge of the degree to which CMS actuaries put this together versus others that may work as part of the board of trustees.

BY MS. WALLACE:

Q The report states that "After depletion, Medicare can only pay benefits to the extent allowed by ongoing revenues."

Do you agree with that statement?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't think I have a foundation to either agree or disagree with it.

BY MS. WALLACE:

Q Okay. Based on your understanding, if assets are depleted, one of the possibilities is that the full schedule of benefits would not be able to be paid under the program. Would you agree with that sentence?

MR. ANTONUCCI: Objection.

THE WITNESS: I would have to say I guess that's possible.

BY MS. WALLACE:

Q Let's look at another chart, if you don't

mind. Let's look at page 71, which is also Bates stamp number 83. This is -- I'll highlight it. The figure on the screen is III.B5. And it says -- oops. That's okay. Now, the whole -- the whole page is now highlighted. Figure III.B5, Present Value of Cumulative HI Taxes Less Expenditures through Year Shown, Evaluated Under Current-Law Tax Rates and Legislated Expenditures.

Can you tell me what the line on the screen is depicting in the chart?

MR. ANTONUCCI: Objection.

THE WITNESS: Well, I'm not an actuary. But based on, by quickly looking at this, it's indicating the present value of the trust fund taxes, minus expenditures out into the future starts to run into a negative value around 2033, I would say.

BY MS. WALLACE:

Q And if you look down below, the chart reflects -- if you agree with me -- a long-term unfunded obligation of approximately $3.1 trillion. And I'm highlighting that sentence.

A It simply says that, "As noted previously, over the full 75-year period, the fund has a projected present value unfunded obligation of 3.1

trillion." No more, no less.

Q So if no changes are made to the program and the current law is maintained, in the long-term, viewed as the "75 period" that was analyzed by the actuaries, the gap in funding would reach $3.1 trillion. Am I reading that correctly?

MR. ANTONUCCI: Objection.

THE WITNESS: I think that's how I would read it.

BY MS. WALLACE:

Q Would you agree with me that the HI fund potentially has a substantial financial burden facing Congress and the public?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say that the -- the HI trust fund faces several challenges and headwinds with respect to its financial solvency going forward.

BY MS. WALLACE:

Q Let's look at one more chart on page 72. This is Bates number 84. And I'll highlight the title. This is Figure III.B6, Comparison of HI Cost and Income Rate Projections: Current Versus Prior Years.

And below, it states in Figure III.B6

indicate -- "As Figure III.B6 indicates, the intermediate HI cost rate projections in this year's report are higher than in the 2024 report and the projected income rates in this report are fairly similar to those in the 2024 report. The higher cost projections are primarily a result of higher-than-anticipated 2024 expenditures and higher projected spending for inpatient hospital and hospice services. These impacts are partially offset by lower payment updates."

Do you see that? I'll highlight it just because I read it.

Do you see that text?

A Yes. Yes.

Q Would you agree with me that this chart is showing that the HI costs are exceeding the income for the foreseeable future?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say yes.

BY MS. WALLACE:

Q And what's the concern there, based on your accounting knowledge and background?

MR. ANTONUCCI: Objection.

THE WITNESS: Well, I think any time that the income revenues are being outpaced by the

expenditures, it becomes unsustainable for the long term.

BY MS. WALLACE:

Q And unsustainable in the sense that the changes must be made in order to sustain the program?

A I would say yes, in order to maintain the financial -- the financial viability in the long term, correct, something has to change.

MR. ANTONUCCI: Excuse me. I meant to object to the last question.

BY MS. WALLACE:

Q Can you tell me, and it's contained within the document, what a Medicare funding warning is. And I'd be happy to show it to you, if you'd like.

A I think it would be helpful if you refresh my memory. I think I do know what it is, but --

Q Okay. Let's --

A -- it would be helpful if you could go to it.

Q Yeah. Absolutely. There's actually a Definitions section so I will take you right to that. There's a glossary on the document that takes us to the definition of a Medicare funding warning. And I'll let you read it. All right. And I'm going

to -- this is on page 245 of the trustees' report and the Bates number ends with 257. And I will highlight the text on the screen.

Will you read the Medicare funding warning definition, please?

A Yes.

Q I was just going to say, out loud, if you don't mind.

A Yeah. Gotcha. "Medicare funding warning, a warning triggered when a determination of excess general revenue Medicare funding has occurred in two consecutive years. Such a warning requires the President to submit to Congress within 15 days after the date of the budget submission for the succeeding year, proposed legislation to respond to the warning. The law also requires Congress to consider the legislation proposed in response to Medicare Funding Warnings on an expedited basis. See also excess general revenue Medicare funding."

Q Do you know if this report indicates that we are currently in a Medicare funding warning has been issued?

MR. ANTONUCCI: Objection.

THE WITNESS: As I recall, in reviewing the highlights and the conclusory summary, I

believe it did result in a funding -- or I think it may mention that this is -- it's not the first funding warning that's been generated. There's been many funding warnings generated over the last few years.

BY MS. WALLACE:

Q Yes. That's right.

And so I am turning your attention to page seven, which is Bates stamp numbers ending in 19. And I wanted to point your attention to the paragraph I'm highlighting on the screen.

Here we go.

Will you read and/or summarize the text that's highlighted on the screen, please?

MR. ANTONUCCI: Objection.

THE WITNESS: So out loud, it goes, "As required by law, the trustees are issuing a determination of projected excess general revenue Medicare funding in this report because the difference between Medicare's total expenditures and its dedicated financing sources is projected to exceed 45 percent of expenditures within seven years. Since this determination was made last year as well, this year's determination triggers a Medicare

funding warning, which requires the following: The President to submit to Congress proposed legislation to respond to the warning within 15 days after the fiscal year 2027 budget submission; and Congress to consider the legislation on an expedited basis. This is the ninth consecutive year that a determination of excess general revenue Medicare funding has been issued and the eighth consecutive year that a Medicare funding warning has been issued."

BY MS. WALLACE:

Q Based on your understanding of the definition of the Medicare funding warning and also the knowledge that this is the ninth consecutive year that a determination of an excess general revenue Medicare funding has been issued, would you expect that in the near future, Congress will need to make some changes to current law to ensure Medicare sustainability in the future?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say yes, I would agree with that. I think that's what the language here is projecting.

BY MS. WALLACE:

Q Let's take a look at page five. I'm highlighting a sentence on the bottom paragraph. Would you read that out loud, please?

A "Medicare's actual future costs are highly uncertain for reasons apart from the inherent challenges in projecting healthcare cost growth over time."

Q Do you, based on your career and role, would you be able to further explain why Medicare's actual future costs are so highly uncertain?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't think I could speculate.

BY MS. WALLACE:

Q That's not a part of your role in finance?

A Correct. I don't work in our office of the actuaries, so projecting the demographics and the economic variables involved in making that kind of projection, it's not -- not in my bailiwick.

Q But based on your role, you don't have any reason to disagree with the text that "Medicare's actual future costs are highly uncertain"?

MR. ANTONUCCI: Objection.

THE WITNESS: I have -- I have no reason to doubt the plain language of what's in the

trustees' report here.

BY MS. WALLACE:

Q Okay.

A That's all I can say.

Q Thank you.

We're going to take a look at page 31 of the document. And this is corresponding to Bates number ending in 43. The title of this section is Addressing the Long-Range Financial Imbalance. And it states that "Lawmakers have many options to address the long-range financial imbalance and keep the HI trust fund solvent throughout the 75-year projection period. Two potential approaches, with either immediate or gradual implementation, illustrate the magnitude of the changes needed to eliminate the deficit. One, the standard 2.90 percent payroll tax could be immediately increased by the amount of the actuarial deficit to 3.32 percent, or" -- and this is the part I wanted to highlight -- "expenditures could be reduced immediately by 9 percent."

When they say "reduced expenditures," would -- could that involve paying providers less, nearing eligibility, reducing covered services? What is your understanding, based on your career at

CMS, of what reducing expenditures by 9 percent could include?

MR. ANTONUCCI: Objection.

THE WITNESS: I mean, based on my experience, there's the -- you know, the reducing expenditures and benefit payouts is -- I mean, it's -- it's pretty straightforward. It is what it is. I mean, we've been under different scenarios where we've had to apply sequestration, the sequestration of benefit payment dollars, for example, in different periods of time as required by law. I think we're still under a current position where we sequestered 2 percent of benefit payments just because of appropriation law requirements.

So that's the thing I'm most familiar with is where we just simply cut back benefit payments by a fixed percentage as dictated by statute.

BY MS. WALLACE:

Q And -- and I'm not super familiar with -- I'll have to apologize -- with sequestration. Are you saying that would cut it off from paying the provider, that would cut off the access to that benefit? Help me understand that.

A Right. It doesn't cut off access to the benefit. It just simply reduces the amount that's being paid to the provider by a percentage. Like, the current sequestration we're under is a 2 percent sequestration.

Q My understanding of medical provider reimbursement is that Medicare already pays the lowest rates to their providers in the country. Is that also your understanding?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't have a -- I don't think I'm in a position to confirm or deny that we pay the lowest rates across the country. I have heard providers complain that Medicare pays the lowest rates across the country but I don't have any statistical or data to back that up, necessarily. So it's all anecdotal.

BY MS. WALLACE:

Q Yes. Can we agree that provider reimbursement for Medicare is among the lowest in the country?

MR. ANTONUCCI: Objection.

THE WITNESS: Again, I don't think I can posit to agree to that or not. I think that would -- the answer to that question is going

to vary by which parts of the country you're in and locality and different circumstances. So it's hard to generalize.

BY MS. WALLACE:

Q Providers accepting Medicare payment is optional. It's not mandatory by statute. Is that true?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. My understanding, a provider does not have to sign up and participate in the Medicare program. It's their choice.

BY MS. WALLACE:

Q And providers can either enroll, partially enroll, or not enroll at all in taking Medicare coverage?

MR. ANTONUCCI: Objection.

THE WITNESS: No. Based on my experience, the provider has a choice to enroll or not enroll. If you agree to participate in the Medicare program, then you agree to accept payment on behalf of the beneficiaries that you choose to provide services to.

BY MS. WALLACE:

Q Is one of the risks of sequestration, that

a provider could stop accepting Medicare rates because they are too low to compensate them for their work?

MR. ANTONUCCI: Objection.

THE WITNESS: I mean, I would have to say, I mean, it's one possibility one could think of among many.

BY MS. WALLACE:

Q The sentence on the screen, "Expenditures could be reduced immediately by 9 percent," you testified that you have experience with sequestration, which is, you know, reducing the amount providers are compensated even further under the Medicare program. Could another example of reduced expenditures be narrowing a recipient's eligibility for a Medicare service?

MR. ANTONUCCI: Objection.

THE WITNESS: I'd say, you know, many different things are possible, I guess, based on whatever Congress would like to do, necessarily.

In my experience over these many years, I have not encountered a situation where we actually started to limit eligibility beyond what's in the current statute. As I had said

before, the trend has been to actually increase the scope of eligibility for beneficiaries under different circumstances.

BY MS. WALLACE:

Q And so, based on your experience, you haven't seen a narrowing of eligibility, but that would be a potential reduced expenditure option that would be available to Congress; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Again, I hate to speculate too much on what Congress's options are, necessarily.

BY MS. WALLACE:

Q Would -- I understand.

Would reducing covered services also be a way to reduce expenditures?

MR. ANTONUCCI: Objection.

THE WITNESS: Again, there's many possible variables that Congress could choose to -- choose to elect.

BY MS. WALLACE:

Q And that's one of them?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say yes, it's a possibility.

BY MS. WALLACE:

Q If providers are paid less under Medicare, could that decrease access or quality of care to patients that are in the Medicare system?

MR. ANTONUCCI: Objection.

THE WITNESS: It's hard for me to speculate on what possibly could or could not happen to the quality of care should their reimbursement rates go down.

I'm not privy to any data or analyses or anything that would confirm that trend or not, necessarily.

BY MS. WALLACE:

Q And the sentence that we read earlier in your deposition about "The quality of care received by Medicare beneficiaries will, under current law, fall over time compared to that received by those with private health insurance," would it seem to you that that is a possibility that the trustees are considering in this report?

MR. ANTONUCCI: Objection.

THE WITNESS: I would have to say yes, just based on the plain language that's in the report. That seems to be what they're saying.

BY MS. WALLACE:

Q Is there a possibility, under the HI fund, which is having solvency issues, is there a possibility that costs could be shifted to beneficiaries through premiums under that program?

MR. ANTONUCCI: Objection.

THE WITNESS: Again, that's one of the -- I suppose that's one of the options that Congress could consider. I just don't know.

BY MS. WALLACE:

Q Okay. And so --

MS. WALLACE: Yes? You -- is it time for a break?

MR. ANTONUCCI: We're coming up on -- actually, I think we're over the hour. Do you mind?

MS. WALLACE: I'm sorry. Not at all. Not at all.

MR. ANTONUCCI: Thanks.

VIDEOGRAPHER: The time is now 12:03. We're going off the video record. This completes media unit number three.

(A luncheon recess is had from 12:03 p.m. to 1:05 p.m.)

VIDEOGRAPHER: The time is now 1:05. We're back on the video record. This begins

media unit number four.

You may proceed.

BY MS. WALLACE:

Q All right, Mr. Young. We are back on the record after a lunch break.

Did you talk to any of your counsel over the lunch break?

A No.

Q Okay. Other than when Jill called you and asked if you were coming?

A Correct. Sorry. I mean --

Q No. No. No. It's totally fine.

A Yeah. I didn't -- I didn't talk to anybody over lunch right there. It's deserted here, so...

Q Got it. Okay. Great.

All right. We left off talking about -- we had had some conversations about medical providers and what they're paid under Medicare. Do you remember that conversation between the two of us?

A Yes.

Q All right. And we were looking at the trustee's document and I'm going to share that document again for you.

MS. WALLACE: Please let the record reflect that this is deposition Exhibit 6 that I'm showing the witness, the trustees' report.

BY MS. WALLACE:

Q Mr. Young, I wanted to direct your attention -- there's a section in the back of the report, and it's entitled -- it's on the screen before you, highlighted. It's entitled Illustrative Alternative Projections. Was this section a part of the report that you reviewed?

A No. I didn't look at this.

Q Okay. You didn't get to this section of the report?

A Correct.

Q All right. I am going to -- do you recall the testimony that you gave earlier? Neither you and I -- neither you nor I were quite sure what percentage reimbursement a Medicare provider received comparable to/from an insured reimbursement payer?

A Correct. Yes. Yes.

Q All right. So I'll ask you to read the sentence on the screen there and then I'm going to scroll you to a paragraph that talks about that. So the first paragraph you're reading is, for the

record, on page 194 of the report, Bates number ending with 206.

A Can you make it a little bigger, please?

Q Yes, sir. Oops. That might have been too big. There.

A That's too big. There you go.

Q Is that -- okay.

A So it reads "As discussed in the introduction, there is substantial uncertainty regarding the adequacy of future Medicare payment rates under current law. This section illustrates the higher Medicare expenditures that would result if certain statutory payment provisions were not fully implemented in all future years."

Q All right. And then the report goes on. I'm going to scroll down. Can you read this paragraph, please?

A Yes. "Over time, unless providers could alter their use of inputs to reduce their cost per service correspondingly, Medicare's payments for health services would fall increasingly below providers' costs. Providers could not sustain continuing negative margins and would have to withdraw from serving Medicare beneficiaries or (if total facility margins remained positive) shift

substantial portions of Medicare costs to their non-Medicare, non-Medicaid payers."

Q And so what is this -- based on your read, what is this identifying as a potential issue in the future related to medical Medicare provider rates?

MR. ANTONUCCI: Object to form and foundation.

THE WITNESS: So overall, I would say it's -- I mean, the language just kind of speaks for itself, I think. But the trend is that if Medicare payment rates don't change from their current format, that they're going to be -- fall below the providers' actual cost to provide the care to put negative pressure on their ability to serve Medicare beneficiaries.

BY MS. WALLACE:

Q All right. And let's scroll down one more page. For the record, this is page 196 with Bates number ending in 208.

Will you read the highlighted sections in this section, please?

A Yes. "Absent a change in the delivery system or level of update by subsequent legislation, the trustees expect access to Medicare-participating physicians to become a significant issue in the

long-term.

"A comparison with private rates provides some context. Medicare payment levels for physician services were roughly 82 percent of private health insurance rates in 2011. Medicare payment levels dropped to 71 percent of private rates by 2023 and are estimated to continue to fall to 64 percent of private rates by 2025. If Medicare rates continue to follow the prescribed current-law updates and private rates increase with Medicare economics" -- excuse me -- "with Medicare economic index growth, then the Medicare rates will fall to 23 percent of private rates by the end of the 75-year projection period."

Q And so does that give us a better understanding of how Medicare providers are being compensated compared to private health insurance rates?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say it provided some specific information, yes, with respect to the current level of reimbursement rates.

BY MS. WALLACE:

Q And so from 2023 to 2025, Medicare providers were paid 71 percent of private rates in

2023 and then it dropped to 64 percent just in two years in 2025; is that correct?

A That's what the language says.

Q And unless physicians do something to increase their costs, the projections of the actuaries in this report have indicated that it, in the long term, it could -- their reimbursement rate compared to private payers could fall to just 23 percent; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I just go by the plain language as far as what it says. If they continue to follow prescribed current law updates and private rates increase with Medicare economic index growth, then you're correct, the Medicare rates will fall 23 percent of the private rates by the end of the 75-year period.

BY MS. WALLACE:

Q And it looks like the concern that's being identified here in the plain language is that there's a possibility acknowledged by the trustees that access to Medicare-participating physicians may become a significant issue in the long-term. And one of those reasons has to do with the rates that

they are paid and the projections thereof. Is that a fair conclusion from what you've read?

MR. ANTONUCCI: Objection.

THE WITNESS: I think reading it in a general way, yes, that's a fair conclusion.

BY MS. WALLACE:

Q And we talked earlier. There's nothing that requires these providers to stay in the Medicare system. It's a -- it's voluntary participation; correct?

MR. ANTONUCCI: Object to the form and foundation.

THE WITNESS: Correct, under current law. The united -- we, the federal government, do not require or compel a physician to participate in the program. It's a voluntary choice.

BY MS. WALLACE:

Q And so provider participation can -- and beneficiary access to that care can depend on payment adequacy in its system -- in the current system?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say -- I would say yes. I mean, it can depend upon -- that's one

variable a physician undoubtedly would consider, I would imagine.

BY MS. WALLACE:

Q Okay. Do you recall us talking earlier about deductibles and premiums that may be paid under the Part A, Part B, Part D Medicare programs?

A Yes.

Q I'm going to turn your attention to the report that you provided on page 199. Did you -- I'm showing --

MS. WALLACE: Please let the record reflect I'm showing the witness page 199, Bates number 211.

BY MS. WALLACE:

Q Did you have a chance to -- in the report that you cited -- review this section entitled Average Medicare Expenditures Per Beneficiary?

A No, I did not. As I said before, I did not get past the -- the highlights and introductory section.

Q Okay. I'm going to scroll down two pages to page 201. 201 includes a table that lists the HI Fund and SMI Fund Average Incurred Per Beneficiary Costs.

Do you have any reason -- I understand

that this isn't something that you compiled, but do you have any reason to disagree with the costs that are identified in this section of the report?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say no. I have no -- personally have no reason to doubt the validity of the numbers.

BY MS. WALLACE:

Q And these should be accurate based upon your understanding of who prepared this report and who it was prepared for? This should be well-done CMS documentation of the beneficiary costs. Would you agree with that?

MR. ANTONUCCI: Objection.

THE WITNESS: Again, I did not prepare the report and don't know who did it, necessarily. But I have no reason to doubt that they didn't put forward their best effort and that it's reliable.

BY MS. WALLACE:

Q Okay. And you would make the same assumption -- I'm just going to scroll down two more pages. There's a section Medicare Cost-Sharing and Premium Amounts. And there's another chart that includes the HI Cost-Sharing and Premium Amounts.

Likewise, do you have any reason to doubt or question the reliability of this information on page 203?

MR. ANTONUCCI: Same objection.

THE WITNESS: No.

BY MS. WALLACE:

Q And so those charts indicate that there are deductibles applicable to Part A that have increased over time. There, additionally, are coinsurance amounts over and above the deductible amounts in these -- in the chart that I'm showing on the screen. Would you agree?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes.

BY MS. WALLACE:

Q There are also monthly premiums identified. And all of the above continues into the present, 2034 as intermediate estimates. Do you agree with that?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes.

BY MS. WALLACE:

Q Okay. I wanted to finish up a couple questions on the HI fund and then I want to talk briefly about the SMI fund.

I wanted to show you page 26 of this report. And I'm going to ask you to read the bottom highlighted text, if you would.

A It reads "If assets were depleted, Medicare could pay health plans and providers of Part A services only to the extent allowed by ongoing tax revenues - and these revenues would be inadequate to fully cover costs. Beneficiary access to healthcare services could be rapidly reduced. To date, Congress has never allowed the title" -- excuse me -- "allowed the HI trust fund to become depleted."

Q Okay. And my question is: We talked earlier about that 89 percent figure. Do you remember that with respect to the depletion date?

A I do.

Q Is this -- when it says "beneficiary to access healthcare services could become rapidly reduced," is that related to the 89 percent figure?

MR. ANTONUCCI: Objection.

THE WITNESS: Well, I -- it's related in the respect that I believe the context was that by 2033, the HI trust fund would only be able to reimburse 89 percent of the expected benefits at the time. So, yes.

BY MS. WALLACE:

Q And it -- thank you.

And it looks like the conclusion in this sentence is that as a result, beneficiary access, meaning patient access to healthcare services could be rapidly reduced.

That's what the trustees are concerned about with respect to the HI trust fund depletion.

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. I think so. But they go on to add that Congress has never allowed the HI trust fund to become depleted.

BY MS. WALLACE:

Q Yes. Which means, as we've talked about earlier, something has to be done by Congress to address this depletion deficit and whether -- what we don't know yet is whether that change that is needed will have an effect on beneficiaries paying more premiums, whether it will be a reduction in provider rates, or whether it will be some type of additional taxpayer contribution to help the HI trust fund remain afloat. Is that true?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say it's true that we don't know all the variables that Congress

could play with to try and address the potential deficit.

BY MS. WALLACE:

Q Would you agree with me that addressing that deficit identified in the trustees' report will require congressional action? In other words, it cannot be resolved administratively within CMS without that occurring?

MR. ANTONUCCI: Objection.

THE WITNESS: I couldn't agree with that simply because we don't know what the future holds.

I know that these are projections and some of them are dire, but we don't have a crystal ball with respect to the -- how the economy may perform, how payrolls' tax revenues may change or not, how efficient healthcare providers may or may not become. So, again, it's hard to say conclusive -- with conclusivity what you're asking me to agree to.

BY MS. WALLACE:

Q Yes. I think the point that you're making -- tell me if I understand -- is that we don't -- let me ask it a different way.

If the projections continue as is

indicated in the trustees' report, assuming the economy continues to perform at expected rates, this deficit will not be able to be addressed administratively. It would require congressional action if things remain the same as projected in the trustee report?

MR. ANTONUCCI: Objection.

THE WITNESS: Again, it's -- I mean, generally, I could agree with that statement.

BY MS. WALLACE:

Q Okay. Last question on the HI trust fund. I know you're excited.

Okay. This paragraph here, which I will highlight for you -- and I'll read it for you. "The trustees project that HI tax income and other non-interest income will fall short of HI incurred expenditures beginning in 2027," meaning it will start to be upside down in 2027. "The HI trust fund does not meet either the trustees' test of short-range financial adequacy or their test of long-range close actuarial balance."

What does that sentence mean to you from the trustees' perspective, please?

MR. ANTONUCCI: Objection.

THE WITNESS: Well, I really don't know if

I can say conclusively simply because I'm -- again, I'm not in the actuary's office or did not prepare this report. So the definitions of their short-range financial adequacy, and what that means specifically, as well as their long-range -- excuse me -- actuarial balance, I'm not familiar with them enough to be able to conclusively say one way or the other.

BY MS. WALLACE:

Q Okay. Can you tell me the -- your understanding of the first sentence, then?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. I read that to mean that the -- in 2027, the expenditures will outpace the income being generated by tax income and non-interest income in the trust fund.

BY MS. WALLACE:

Q Okay. And that's just -- is that -- that's next year?

A That is next year.

Q And so, again, we would expect some type of immediate action to occur from Congress in order to address some of these concerns and deficiencies that have been noted in the trustees' report?

MR. ANTONUCCI: Objection.

THE WITNESS: Were you asking me a question? I'm sorry.

BY MS. WALLACE:

Q Yes, sir. Would you agree with that?

MR. ANTONUCCI: Same objection.

THE WITNESS: I would say that the trustees' report is prompting Congress, putting them on notice that there's an issue to be addressed.

BY MS. WALLACE:

Q In the short-term?

A In the short-term.

MR. ANTONUCCI: Objection.

THE WITNESS: Yes.

BY MS. WALLACE:

Q Thank you.

Okay. I want to talk about -- we've talked a lot about the concerns about the HI fund which is connected to Part A Medicare. Let's switch gears and talk about the SMI funding which funds parts of Part B Medicare and Part D Medicare.

And I wanted to first ask you, do you -- in your career at CMS, do you have an understanding on which expenditures are highest for CMS if you had

to rank Part A, Part B, Part D --

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q -- just to give us some scale of the programs?

MR. ANTONUCCI: Same objection.

THE WITNESS: Just giving you a ballpark, I mean, the -- on the Part A and B side, we pay out over -- I think the most current year available is over $450 billion in benefits. But the higher percentage of that would be on the hospital insurance side, the Part A side, than on the Part B side.

BY MS. WALLACE:

Q And Part D would be a much smaller piece?

MR. ANTONUCCI: Objection.

THE WITNESS: That, I can't recall off the top of my head. It's smaller than the Part A side, yes. But I can't recall the exact percentages as a breakout. The Part A side is the bigger driver of the three.

BY MS. WALLACE:

Q I'm going to show you page 22 of the trustees' report. And I think it might give us -- I'm sorry. Excuse me, 10. It's Bates number 22.

This chart here, does this give us the total -- and I'll highlight it for you -- the total expenditures for each program? So Part A, 422.5 billion; Part B, 553.4 billion; Part D, 146.2 billion; for a total of 1.1 trillion?

MR. ANTONUCCI: Objection.

THE WITNESS: Yeah. Just add the 422 and the 563 [sic] and the 146. That aggregates, so you've got -- you also have -- it includes Part C health plans in here as well, so that's a little -- that's distorting a little bit the total expenditure numbers. I wasn't including Part C.

What I had said earlier, that the bulk of the expenditures on the Part A side, relative to Part B, that's still true. But if you -- you have -- you have to parse this out a little bit to get to that.

BY MS. WALLACE:

Q Is it your testimony that Part C is rolled into these numbers, even though it's not on the chart?

A It's on the chart. It says "Private health plans, Part C."

Q Oh, here.

A Right there. See?
Q Yeah.
A Exactly.
Q I do see that. I do see it. I gotcha.
Okay. So -- and that's why the numbers are higher than you stated earlier?
A Correct.
Q Will you say that answer one more time? I'm sorry.
A Yes. Correct.
Q Okay. Thank you.
MR. ANTONUCCI: Can we go off the record, please?
MS. WALLACE: Sure.
VIDEOGRAPHER: The time is now 1:32. We're going off the video record.
(Off the record.)
VIDEOGRAPHER: The time is now 1:38. We're back on the video record.
You may proceed.
BY MS. WALLACE:
Q Mr. Young, we were talking about SMI funding of Parts B and D. And we were looking at the chart on the screen, Table II.B1, which is page 10 of the trustees' document. And we were

confirming that it does appear to include Part C benefits. Do you recall that from before the break?

A Yes.

Q Thank you. Now, I want to talk specifically about -- and I was trying to understand the scale of Part B, and I think we've -- we've concluded that based on how it's categorized in the trustee report, Part B looks -- if you include -- if you include Part C, it looks like it's a little bit larger of a total expenditure than Part A. But I think if you don't include Part C, I think the numbers that you gave me earlier in your testimony are accurate. Part A is a little bit higher. Is that a fair representation?

MR. ANTONUCCI: Objection.

VIDEOGRAPHER: Yeah. Mr. Young -- I don't think we heard a word he just said.

All right. I'm going to go back off. One moment, please.

The time is 1:39. We're going off the video record.

(Off the record.)

VIDEOGRAPHER: The time is now 1:44. We're back on the video record. You may proceed.

BY MS. WALLACE:

Q Mr. Young, before the audio issues, do you recall the question that I asked you or would you like for me to rephrase?

A Please. Please rephrase.

Q Okay. No problem.

We were just trying to -- I was -- for the last several minutes, I've just been trying to get an understanding of the scale of the two different programs, Part A versus Part B. Will you answer that for me with or without the chart?

A Oh. The scale of the Part A versus the Part B program? I mean, the -- the -- again, the -- off the top of my head, we -- more recent benefit payouts were around somewhere over $450 billion. And the larger percentage of that would be on the Part A side than on the Part B side, not including this -- that number does not include the Part C health plan.

Q Understood.

A Yeah.

Q Okay. Thank you.

Now, we talked about, at length, about the funding source of Part A which is the HI trust fund which relies on payroll taxes and/or premiums for

people that didn't pay payroll taxes for the necessary requisite period of time; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes.

BY MS. WALLACE:

Q All right. And so we're moving to talk about the SMI trust fund, which sources Part B and Part D. And I believe you testified earlier that approximately 25 percent of that funding is through beneficiary premiums; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. It's my understanding the premium's set so that annually it's expected to cover 25 percent of the annual expenditures.

BY MS. WALLACE:

Q All right. And the SMI fund does not -- is not in the same core financial outlook and position as the HI fund based on the trustee report. Do you agree with that, generally?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say it's generally not in the same position simply because of the formula for the way the SMI trust fund is funded. Specifically, a portion of it's based

on premium receipts with the balance being on general tax revenue receipts. So as the -- whatever delta there is from the premium collections, we simply draw more from the other funding streams needing to make it whole as far as, you know, general income -- income taxes from people.

BY MS. WALLACE:

Q Yes. And that's precisely what the trustee report says. Directing your attention to page 36 of the document, which is also Bates 48, and in the very first paragraph, it states "Financing for the SMI trust fund is adequate because beneficiary premiums and government contributions for both Part B and Part D are established annually to cover the expected costs for the upcoming year."

And the chart on the screen demonstrates that. Do you agree with that -- the statement I just read?

MR. ANTONUCCI: Objection.

THE WITNESS: I agree with what the chart represents and the language in the -- in the trust -- the trust fund summary -- the trustees' report. Excuse me.

BY MS. WALLACE:

Q And so what the chart in front of you shows is that starting since the 1960s, as the expenditures for the SMI fund for Part B and D have increased, so have premiums almost exactly on the same curve to cover increases in expenditures for Part B and Part D. Do you agree?

MR. ANTONUCCI: Objection.

THE WITNESS: Well, again, I didn't make the report. I would -- I will just say, just looking at the graph, it looks -- it looks to be like the -- an ascending line such that the premiums and tax revenues are increasing to cover the increasing benefit costs over time.

BY MS. WALLACE:

Q The report states on page seven that the current Part B premium for 2025 is approximately $185 per month. Do you remember seeing that? Page seven is in the Summary section of the document. I'm happy to take you to it.

A No. I remember that. That's what the premium is.

Q All right. And that would be, in last fiscal year, 2025, that would be about $2,200 per year that each enrollee of Part B was paying for premiums. Is that true?

A You cut out in your question. If you could please ask again, Whitney.

Q No problem.

In 2025, the total amount of premiums paid by someone electing Part B Medicare would be 2,200 per year annually if you extrapolated the 185 per month for a calendar year.

A That sounds about right, but it's not -- it's not completely true because of the IRMAA test --

Q Yes.

A -- which is tied to income. So higher -- higher -- beneficiaries with higher incomes are going to pay higher premiums, if you recall.

Q Yes.

A Right?

Q So that's the base amount that --

A Correct.

Q The very -- the minimum amount someone would pay for premiums. If you made more, you pay more?

A Correct.

Q All right. And then also under that program, the chart we looked at earlier, there are deductibles and co-insurance also applicable to SPI

fund in Part B and D payments?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. There are deductibles and copays on some services on Part B and Part D.

As I had said earlier, not every service -- it depends on the service type -- has a copay.

BY MS. WALLACE:

Q The report reflects that premiums have increased over time and are expected to continue to increase into the future. Do you agree with that?

MR. ANTONUCCI: Objection.

THE WITNESS: All I can say is from based on the graph, that seems to be the implication but I didn't -- that's all I could confirm for you, I think.

BY MS. WALLACE:

Q And premiums are -- and growing premiums are a necessary component of what funds Part B and Part D. Do you agree with that?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say the premiums are, by law, required because they are -- they are statutorily required to cover a, again,

approximately 25 percent of the expected benefits, I believe.

BY MS. WALLACE:

Q Enrollment in Part B and Part D, you testified earlier, is voluntary; right?

A Yes.

Q And so if a recipient cannot afford to pay the premiums associated with their coverage, they lose coverage. Is that true?

A Yes, it's possible. They cannot -- if they cannot afford to pay their premiums -- as I mentioned earlier, for those people that are financially disadvantaged, and if you may be entitled to both Medicare and Medicaid, then Medicaid will actually help pay your premiums for the Medicare program.

Q For Medicare, there's no guarantee that an individual will remain enrolled in the Part B and D program?

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q Do you agree with that?

MR. ANTONUCCI: Same objection.

THE WITNESS: Yes.

BY MS. WALLACE:

Q The other tax contributions that source the SMI fund, the 75 percent of the funding, they -- those funds ultimately come from taxpayers to the government. Is that true?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say yes, they come from general tax revenues' interest.

BY MS. WALLACE:

Q The future Part B premiums that are identified on the chart, those will change, to the best of your knowledge, based on what factors?

MR. ANTONUCCI: Objection.

THE WITNESS: Well, again, I don't work in the actuary's office at CMS so it -- it's -- it's not worth me speculating everything that they -- they -- they fact -- used to factor in what the premiums should be, necessarily.

What I've said before is based on my understanding what's in the statute as far as the requirement that it be able to cover at least 25 percent of the expected benefit payments.

BY MS. WALLACE:

Q Your designation indicates that you are testifying with regard to the SMI fund in

addition -- and also to premiums associated with that fund --

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q -- but not to future premiums? I'm just trying to understand the scope of your testimony.

MR. ANTONUCCI: Same objection.

THE WITNESS: I'm simply saying that I don't -- I don't have firsthand knowledge of the premium calculation. I'm not an actuary, necessarily. I can confirm for you what is in the statute, which I've done, as far as the composition of 75/25 percent.

BY MS. WALLACE:

Q And that's the extent of your knowledge in that area?

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q Basically, like, past premiums, not future premiums?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know that I have anything else to add.

BY MS. WALLACE:

Q Okay. The -- your knowledge is how Part B

and D are funded; is that correct? Based on your designation, it's how it's funded but not -- not the future of how it will be funded?

I'm sorry. I'm just trying to understand your designation.

MR. ANTONUCCI: Objection.

THE WITNESS: I mean, what my -- what I've said is focused on what the funding sources are for different -- for Part A and Part B and Part D. I've said they're -- Part B and D come from the SMI fund. The SMI fund is funded through the combination of premiums and non-payroll tax revenues.

How the actuary is -- what they're doing as far as computing the expected benefit payouts for future premiums, I cannot speak to.

BY MS. WALLACE:

Q I wanted to ask you some general questions about the trustees' report. Does it have, to your knowledge, any sections that discuss the Camp Lejeune Justice Act?

A From the portion which I read, which is, again, the introduction and the highlights, I don't recall reading anything related to the Camp Lejeune Justice Act.

Q Do the projections in the trustees' report, do they have anything to do with offsets associated with litigation?

MR. ANTONUCCI: Objection, foundation.

THE WITNESS: I have the same answer. From what I'd read in the introduction and the highlights, I did not read anything with respect to offsets. That's as far as I could go as far as what's contained in the trustees' report.

BY MS. WALLACE:

Q In your career at CMS, have you ever been involved with overseeing or managing offsets for CMS?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say, as part of my work here in the Office of Financial Management, one of the groups underneath my umbrella, they do deal with offsets as a form of collecting overpayments owed by providers to the program.

BY MS. WALLACE:

Q And did you say that was under your direction or you had experience in that?

A I said it was under my direction. I've

had direct experience in working with helping to set up the offsets in some cases.

Q Do you -- you testified earlier -- have you also managed contractors that identified liens for CMS?

A I'm trying -- I directly -- I directly have not. I have a group with -- in the umbrella of our scope of reports, our financial services group. They deal with Medicare Secondary Payer as well as subrogation, collection on different cases. Sometimes that -- sometimes that involves liens, as you might imagine.

Q Based on your 35 years with CMS, do you have an understanding of the difference between liens and offsets and how CMS handles those in different ways?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say I have a cursory knowledge of the -- of offsets. The nuances and distinctions between offsets for overpayments versus a lien against someone or a subrogation case, I'm less familiar with.

BY MS. WALLACE:

Q And in a situation where a lien is recovered, is that the result of money, to your

knowledge, coming back to CMS, whereas an offset, no money actually comes back to CMS? It's withheld? Do you understand my question?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I understand your question. I mean -- and I think you're generally correct in that respect. I mean, an offset is a -- we offset a future payment to a provider to collect on a debt that provider may owe us.

So we're -- we're just capturing money back before it even actually goes out the door.

In a lien situation where there's a settlement and we have a subrogation right to a potential settlement, for example, we're -- we're collecting money back from a portion of a settlement between two parties.

BY MS. WALLACE:

Q Thank you. Would you agree with me that the purpose of an offset, as you are familiar with it, is to prevent the government from paying twice for the same loss?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't think I would agree with you in the context that I'm familiar with

it.

In our world, we're just simply trying to -- it's a mean by which we recover owed money. We're in -- we're in a situation where we're paying benefits out to providers over projected periods of time. They may develop overpayments. And the fact is we have a potential funding source of income for theirs, and we have direct control over, which we're able to attach, if you will, and recover overpayments owed to us.

We use other means too, in some cases. We don't -- we don't have the ability to an offset. Somebody may have already left the Medicare program and we had to pursue other traditional overpayment collection methods such as sending out overpayment demand letters and things like that.

BY MS. WALLACE:

Q And so your experience with offsets, really, is in the context of overpayment situations where you put a hold on future payments based on the identification of the overpayments so you don't pay that person twice?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say yes.
BY MS. WALLACE:
Q Have you ever dealt with liens in a -- or been assigned to deal with liens in a -- or account for liens in a litigation context?
MR. ANTONUCCI: Object to form.
THE WITNESS: No, not directly.
BY MS. WALLACE:
Q Do you have indirect knowledge of offsets in a litigation context?
MR. ANTONUCCI: Objection.
I'm sorry. Are you referring to liens or offsets?
MS. WALLACE: Offsets. Did I say it wrong? If I said lien, I meant offset.
THE WITNESS: Could you start from scratch and ask it again?
BY MS. WALLACE:
Q I'd be happy to. Do you have any indirect knowledge of offsets in a litigation context?
MR. ANTONUCCI: Objection.
THE WITNESS: I would have to say no.
BY MS. WALLACE:
Q And so any offsets associated with litigation, such as maybe the 9/11 litigation, that

did not come through you or your department?

A That did not come through me, is my personal experience. I cannot speak to whether or not it came through the department or whatnot. I'm just speaking from my personal experience.

Q Is it true that CMS outsources the handling of liens to a contractor such as -- such as the Benefits Coordination Recovery Center?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes. I believe we do ask the BCRC to help us with recoveries, in that context.

BY MS. WALLACE:

Q And the offsets that you were speaking of previously related to overpayment compensation, that's handled internally still by CMS as opposed to outsourced to a contract agent?

MR. ANTONUCCI: Objection.

THE WITNESS: The offsets I was speaking to earlier, the way you characterized is generally correct with one proviso being that that's one of the functions that the Medicare administrative contractors help us with, as far as recovery and through offsets of provider payments. So they are involved in that as

well.

MS. WALLACE: Were we an hour -- is it time for an hour break?

MR. ANTONUCCI: Just about.

MS. WALLACE: Do you want to take a brief break? I don't have a ton left for you, Mr. Young.

THE WITNESS: Can we do five minutes?

MS. WALLACE: Yes.

VIDEOGRAPHER: The time is now 2:07. We're going off the video record. This completes media unit number four.

(A brief recess is had from 2:07 p.m. to 2:12 p.m.)

VIDEOGRAPHER: The time is now 2:12. We're back on the video record. This beginning media unit number five.

You may proceed.

BY MS. WALLACE:

Q Mr. Young, when we went over your CV earlier in your testimony this morning, you testified that you do have a background in program integrity, including improper payments and vulnerabilities in the Medicare payment systems; is that right?

A Yes.

Q Would you agree with me that despite the many oversight efforts of CMS, many of which you've undertaken to enforce, CMS does understand that some level of coding error is unavoidable in a system of this size?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know that I would agree with that characterization. I mean, there's -- will there -- will coding errors ever be fully eradicated? Probably not. But the -- the -- just using the Fee-For-Service error rate, for example, we talked earlier about it, it's sitting at right around six -- over six and a half percent, I believe is the most recent number.

You know, most of that percentage, about almost two-thirds of that are what we call no-documentation errors, meaning people haven't -- they either didn't provide the medical record fully or they only provided a portion of the medical record to substantiate and support the information that was on the claims.

So it wasn't the point being of the, you

know, the six and a half percent. You know, the bigger part of that is just no -- no documentation errors. It's not the other potential compliance issues of upcoding or miscoding or flatout abuse, for example.

BY MS. WALLACE:

Q Well, we talked earlier about that 6.55 percent represents 28.83 billion in improper payments. And I think you just testified that two-thirds of that requires additional documentation to be uploaded. But I would imagine that a large amount of improper payments do still have to do with upcoding or miscoding. It wouldn't be a small number. Would you agree?

MR. ANTONUCCI: Objection.

THE WITNESS: My characterization was, again, the larger percentage of the improper payment error rate for Fee-For-Service is related to no documentation errors, meaning the medical records did not contain the documentation supporting what was in the medical record, or they were only partially sufficient, or they didn't have the record at all. It wasn't a flatout miscoding issue, per se.

Well, there -- is there a -- you know, in a program which is paying out, you know, over $450 billion in benefits, small percentages do add up to large numbers. I get that point.

BY MS. WALLACE:

Q Catching a no-documentation error is a lot easier and more straightforward than catching a miscoding or an upcoding error. Would you agree with that?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know. Potentially, it is -- you know, the upcoding part, having actual -- actually having the medical record is what helps you determine whether or not something was upcoded inappropriately or appropriately. Or sometimes they also make errors the other way. They downcode things inappropriately. So it works both ways. And if you don't have the medical record, you couldn't make that decision one way or the other.

BY MS. WALLACE:

Q You testified earlier that you don't have the medical records for corroboration for all of the -- of the data extractions and billing coding

that CMS manages. Is that true?

MR. ANTONUCCI: Objection.

THE WITNESS: That's correct. We do not -- I'm sorry. Did I interrupt?

BY MS. WALLACE:

Q No. No. We didn't catch your first answer. Go ahead.

A That -- I mean, the answer is that's correct. We do not receive medical records for every single claim, all 1.13 billion claims we receive. It's not practical to do that. It's only in situations where we have a reason to review the claim for whatever reason that we go out and we actually ask for the medical records that support what was certified on the claim as being true and accurate and correct.

Q Would you agree with me that you're only able to really catch upcoding or miscoding errors if you do have the medical records for corroboration?

MR. ANTONUCCI: Objection.

THE WITNESS: Well, I would say my experience, that's the primary way we do it. For me to say that's the only absolute way to do it, I don't know that I can say that. I mean, there's other opportunities, I think,

through investigation for people to interview providers, beneficiaries, and whatnot that may also help -- help ferret that out.

BY MS. WALLACE:

Q But you agree that the primary way to catch upcoding and miscoding is to have an RN or a physician review the actual medical record associating -- associated with the CPT or HPC codes, or the ICD-9 or the ICD-10 codes?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I would agree with that.

BY MS. WALLACE:

Q And without doing that medical record corroboration, it's very difficult to catch miscoding and upcoding?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say it's harder, yes.

BY MS. WALLACE:

Q CMS policy, would you agree with me, it treats billing codes as information that requires validation --

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q -- as it relates to your program integrity?

MR. ANTONUCCI: Same objection.

THE WITNESS: I may not fully understand your question.

BY MS. WALLACE:

Q Does CMS policy encourage that billing codes require validation in order to ensure program integrity?

MR. ANTONUCCI: Excuse me.

Same objection.

THE WITNESS: I don't think I would characterize it that way. I mean, the -- again, as I'd said earlier, when a provider submits a claim form, they are certifying that what they're submitting on the claim form is a true and accurate representation of the service they provided and is supported by the medical records. That's what we rely on is that certification.

Does it always need to be verified and corroborated by somebody doing medical review? I would say no. That's not practical or feasible from a resource standpoint.

BY MS. WALLACE:

Q Are you aware of the governing bodies that oversee the Medicare system such as the HHS/Office of Inspector General and the OIG?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I'm aware of them.

BY MS. WALLACE:

Q Are you aware that they oversee Medicare?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes.

BY MS. WALLACE:

Q Have you reviewed the HHS/Office of Inspector General reports that have found widespread coding errors and upcoding errors in Medicare claims?

MR. ANTONUCCI: Objection.

THE WITNESS: No, I have not reviewed them.

BY MS. WALLACE:

Q Are you aware, generally, that they have found widespread coding errors and upcoding in Medicare claims?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes, I would say I am aware.

BY MS. WALLACE:

Q Are you aware that the OIG conducts

recurring audits of Medicare coding in documentation due to risks of upcoding and miscoding?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes.

BY MS. WALLACE:

Q Are you aware that the government accountability office has designated Medicare as a high-risk program due to persistent improper payments and billing complexity issues?

MR. ANTONUCCI: Objection.

THE WITNESS: Yes.

BY MS. WALLACE:

Q Are you aware of CMS's position that the medical record is the primary source for verifying services rendered, medical necessity, and diagnostic support?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say yes, I'm aware of that.

BY MS. WALLACE:

Q If the medical record documentation does not support the codes, does CMS consider that payment improper or flag that as an improper payment?

MR. ANTONUCCI: Objection.

THE WITNESS: I cannot recall off the top of my head. There's nuances to that so I cannot remember.

BY MS. WALLACE:

Q If the documentation does not support the code, it might not be flagged as an improper payment?

MR. ANTONUCCI: Objection.

THE WITNESS: Again, it's -- there's -- there's a level of complexity and nuance to that that I'm not steeped in to say at what point it's going to be called an error or not.

BY MS. WALLACE:

Q Do you consider -- because you -- you testified earlier that a provider signs off on the coding before it's submitted to Medicare. Is it your position that that is sufficient for Medicare to pay that claim or does it require additional review outside of the coding itself?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't think I can answer that question because it may vary on the different circumstances and the type of claim. And it's been -- it's been a minute since I worked in actual program integrity cases.

BY MS. WALLACE:

Q Is there any instance where CMS protocol would not review claims only based on coding?

MR. ANTONUCCI: Objection.

I also want to note for the record that this questioning is going far beyond the scope of Mr. Young's disclosure as an unretained expert.

THE WITNESS: Could you ask the question again because it's --

BY MS. WALLACE:

Q Yes.

A -- it's been a minute.

Q Yes. Is there -- much of the CMS billing comes in the form of coding. Based on your career at CMS, is that also your understanding?

MR. ANTONUCCI: Same objection.

THE WITNESS: Based on my experience, the -- I mean, we deal with a lot of codes that come in on a claim so we use different codes for procedure codes, diagnosis codes, modifiers in conjunction with the CPT codes.

So, yes, I mean, our claims do involve a lot of different codes.

BY MS. WALLACE:

Q And my understanding of your background and experience is that you understand that there are many different programs that have been established to make sure those codes are accurate. You guys have a RACs program, a Comprehensive Error Rate Testing program, you have a medical record auditing program. So your goal -- my understanding is that the goal of CMS is to make sure those codes are accurate, they're medically necessary, they're reasonable, they're not subject to upcoding or miscoding, and that's part of your efforts on fraud detection under the CMS program.

And so I'm just trying to make sure that I understand correctly that CMS tries really, really hard to double-check these codes to make sure that they're accurate before and after they pay them to ensure the integrity of the program.

MR. ANTONUCCI: Objection.

THE WITNESS: So I would just say, in my experience that -- I mean, the -- we do make an effort to make sure that the -- the information billed on the claim is consistent with the medical record through different means. I mean, through -- again, through different selection of medical review records from

medical review, the experience of the recovery audit contractors, things of that sort.

I mean, it's -- it's been a minute since I worked on that space so it's hard for me to confirm your general -- just general statement.

BY MS. WALLACE:

Q In your experience, in your role, do you know what -- how much money is dedicated to fraud and abuse detection and improper billing detection?

MR. ANTONUCCI: Objection.

THE WITNESS: Off the -- off the top of my head, I don't.

BY MS. WALLACE:

Q Would it be millions?

MR. ANTONUCCI: Objection.

THE WITNESS: It would be in the millions, yes.

BY MS. WALLACE:

Q And so would you agree with me, then, that Medicare does not just take the coding as it comes from the provider; they have programs in place to ensure accuracy, and they do often find errors and improper coding when they perform their audits and apply the programs that they've designed?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say we do have means and measures by which we check to make sure codes that come in are accurate and valid as far as their descriptors. But we don't always catch every one or every thing.

BY MS. WALLACE:

Q Yeah. And that was my next question.

With a program of this scale and magnitude, it would be impossible -- difficult if not impossible to catch all errors in billing coding?

MR. ANTONUCCI: Objection.

THE WITNESS: It would be -- it would be difficult.

BY MS. WALLACE:

Q And the gold standard, if you -- would you agree, would be to confirm the coding with the medical records? If you had the chance to do that for everyone, that would be the gold standard?

MR. ANTONUCCI: Objection.

THE WITNESS: It's -- it's been a minute since I worked in program integrity so I don't really feel like I can speak to what the gold standard is right now.

BY MS. WALLACE:

Q Can you agree that that would be a helpful way to validate the claim coding?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say in my experience, that it's been a helpful way to validate whether or not the coding on a claim is supported by the medical record, yes.

BY MS. WALLACE:

Q And its identified in the program integrity manual for CMS publication 100-08 that the medical staff will review the documentation you submit of the claims to determine if the services billed are reasonable and necessary and meet all other requirements of Medicare coverage. Do you have that knowledge in your role?

MR. ANTONUCCI: Objection.

THE WITNESS: I do not have that knowledge in my role.

BY MS. WALLACE:

Q What about the -- complying with medical record documentation requirements that indicate that "We pay for services when the medical record documentation supports Medicare coverage, coding, and billing requirements"?

Is that within your scope or knowledge?

MR. ANTONUCCI: Objection.

THE WITNESS: That is not within my -- my scope right now, no.

BY MS. WALLACE:

Q Have you ever managed the medical record review program in your roles?

A No. I've -- I've not directly managed the medical record review function, per se.

Q Do you agree or disagree that billing codes alone are insufficient to determine clinical relatedness?

MR. ANTONUCCI: Objection.

THE WITNESS: I would have to say the -- I really can't opine or speculate on the appropriateness of the billing codes. I mean, we don't -- CMS doesn't even really own the CPT codes. That's something that's owned by the American Medical Association, I believe. And as far as the descriptors and their adequacy, that's -- that's something that's in their space, not ours, so I really can't comment on that.

BY MS. WALLACE:

Q And so that will not be a topic that you're opining on in this litigation?

A No. I could not speak to that.
Q As we sit here today, do you have any guarantee that Medicare benefits will remain unchanged in the future?
MR. ANTONUCCI: Objection.
THE WITNESS: I cannot -- I cannot speak to that. I have -- it's not possible for me to project what's going to happen in the future.
BY MS. WALLACE:
Q Do you have any guarantee that the reimbursement levels will remain the same in the future?
MR. ANTONUCCI: Objection.
THE WITNESS: Again, I can't -- there's -- there's the poss -- the possibility of the variables we talked about with respect to what Congress may or may not do with Medicare. I don't know. I can't predict that.
BY MS. WALLACE:
Q Would you agree that Medicare's future depends on legislative and policy decisions that have not yet been made? Is that a fair characterization of your testimony?
MR. ANTONUCCI: Objection.
THE WITNESS: Again, I think I have the

same answer. I mean, it may or may not depend on policy decisions that have yet to be made. I cannot predict the demographics of the country or the practice patterns of medicine and how efficient or inefficient it may be, or the evolution of medicine in terms of the efficacy of the services they provide so it's -- I don't really hazard a guess at what the future's going to bring.

MS. WALLACE: All right. Mr. Young, I don't think I have any further questions for you.

MR. ANTONUCCI: I have a few.

EXAMINATION

BY MR. ANTONUCCI:

Q So, Mr. Young, first of all, good afternoon. Thanks for bearing with us for longer than anticipated. I appreciate your patience and I'm going to try to make this quick.

You previously testified that you cannot guarantee the future of the Medicare program; right?

A Yes.

Q And you previously testified you can't guarantee the future of reimbursement levels within the Medicare program; right?

A Yes.
Q Mr. Young, how long have you worked at CMS?
A Just over 35 years.
Q And in your over 35 years at CMS, how much of that time was spent working on Medicare?
A Oh, all of it was working on Medicare, whether it be Medicare Fee-For-Service or the managed care side. It's always been on Medicare.
Q And if you know, when did the Medicare program begin?
A It was -- I can give you the date. It's 1965. I don't remember the month.
Q Okay. So doing the math, it's fair to say Medicare existed for your entire career at CMS; right?
A Yes.
Q And in your 35 years at CMS, you testified that you've observed Medicare expand benefits in coverage; right?
A Yeah. My experience has been that the propensity is for the program to -- to add benefits. The most -- as, again, the most telling one being the addition of the prescription drug benefit program in 2006.

Q To your knowledge, Mr. Young, has Medicare coverage ever been decreased?

A No, not to my knowledge or recollection.

Q To your knowledge, has the Medicare program ever been eliminated or discontinued?

A No, absolutely not.

Q Okay. So based on your 35 years of experience, is it fair to say that it's reasonably likely that Medicare will continue into the future?

A Yes. Based on my experience, what I've lived through, it's -- it's very reasonable to expect that the program is going to continue into the future.

Q And based on your 35 years of experience with Medicare, is it fair to say that it's reasonably likely that the programs Medicare currently covers will continue to be covered into the future?

MS. WALLACE: Objection, please, for the record. Leading and foundation.

THE WITNESS: Based on my experience, I would say it -- the program will continue into the future. As I've said before, the tendency is for the political leadership to accrue and accrete benefits and/or expand eligibility over

time.

That's -- that's been what I have lived and experienced.

MR. ANTONUCCI: Okay, thank you, Mr. Young. I have no further questions at this time.

MS. WALLACE: Shortly, Mr. Young, on redirect.

FURTHER EXAMINATION

BY MS. WALLACE:

Q You testified earlier that it is not within your scope to -- or your role to predict the future policy decisions of Congress as it relates to the Medicare program; is that right?

MR. ANTONUCCI: Objection.

THE WITNESS: I think I said something along the lines of it's not within my scope to predict what Congress is going to do, which I still believe.

BY MS. WALLACE:

Q And we always talk -- we also talked about the fact that Congress will need to make changes or the current funding of at least the Part A program will be depleted as soon as 2033 and as short as next year. Do you remember that testimony?

MR. ANTONUCCI: Objection.

THE WITNESS: I remember us -- what we reviewed in the trustees' report as far as the vulnerabilities for the trust funds.

BY MS. WALLACE:

Q And so it's not within your purview or scope to speculate as to how Congress might fix that problem. Do you agree with that?

MR. ANTONUCCI: Objection.

THE WITNESS: I agree that it's not within my purview to speculate how they may or may not fix the problem.

What I do believe in is based on my experience and what I've seen in terms of the addition of benefits and increasing eligibility requirements for the population that we serve. That tendency could reasonably continue into the future.

BY MS. WALLACE:

Q And it also might not continue into the future. They may also -- Congress may also decide to cut benefits or decrease provider pay as well. We don't know what -- how Congress will fix the problem within the current system. Is that true?

MR. ANTONUCCI: Objection, compound, and

calls for speculation.

THE WITNESS: It is correct that that would be speculative on my part. I do not want to predict what they may or may not do.

BY MS. WALLACE:

Q And so all of your testimony today has to do with the history of Medicare as you've known it in your 35 years at CMS, and you're not making any type of testimony or opinion related to what may or may not happen in the future with regard to the Medicare system; is that correct?

MR. ANTONUCCI: Objection.

THE WITNESS: All I can say is I represented what I've seen and experienced in my lifetime here. And, again, what Congress may or may not do is unknown but to God, as they would say, I think.

BY MS. WALLACE:

Q Are you -- did you testify that you are aware of all of the policy changes as it relates to coverage eligibility and services covered in the Medicare system? Is that within your expertise?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't -- you're going to have to clarify the question a little bit for

me, Whitney. Because when you say "coverage eligibility decisions," what exactly are you trying to get at?

BY MS. WALLACE:

Q You testified earlier that in your time at CMS, you don't recall any coverage being decreased. But I didn't remember if you actually are -- I didn't think that that fell within your -- quite frankly, within your CV, the coverage, you know, eligibility. Obviously, Part D was -- started in 2006. But the menial details regarding services covered, I just didn't remember that being in your CV.

MR. ANTONUCCI: Objection.

THE WITNESS: Yeah. As far as -- excuse me.

As far as what's covered and what's not covered, I mean, it's -- it's through my 35 years of experience as far as what the program covers and doesn't cover.

BY MS. WALLACE:

Q So are you testifying that -- that all changes to the services provided and coverage, that is within your area of expertise over the course of the 35 years that you've been at CMS?

A No, I don't --

MR. ANTONUCCI: Objection, misstates prior testimony.

THE WITNESS: Yeah.

Yeah. I don't -- I don't think I can speak to that.

BY MS. WALLACE:

Q Okay. So the coverage and services provided is not within your area of expertise?

MR. ANTONUCCI: Same objection.

THE WITNESS: I'll just go back to what I had said earlier about -- and what's in my written narrative as far as the primary coverage principle as far as what's medically reasonable and necessary to treat an illness or injury or correct a malformed body member and the different categories which are excluded, necessarily. That's -- that's the basic outline of -- of the core of my experience.

BY MS. WALLACE:

Q And so there may be somebody more knowledgeable at CMS as it relates to the changes and services covered over the 35 years you've been there other than you?

A There might be.

Q Do you know which department that would fall under at CMS?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know. The place to start would be the Center for Medicare Services.

BY MS. WALLACE:

Q Is that the umbrella branch of CMS?

A Well, there's --

MR. ANTONUCCI: Objection.

THE WITNESS: No. It's one of the centers of the Centers for Medicare and Medicaid Services.

BY MS. WALLACE:

Q You were asked a question in -- by your counsel as to whether, in your experience, you'd ever known of coverage being decreased. Do you remember that question? And you said "No, I'm not aware of that"?

A Yes, I --

Q Who -- who would be the actual expert on that at CMS?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't know that there would be one singular person.

BY MS. WALLACE:

Q Which department?

MR. ANTONUCCI: Objection.

THE WITNESS: Again, I don't know other than to point you to the Center for Medicare.

BY MS. WALLACE:

Q Can we agree that it would not be the financial management department?

MR. ANTONUCCI: Objection.

THE WITNESS: We can agree it would not be the CFO.

BY MS. WALLACE:

Q Okay. And that's not one of the topics that you were designated to talk about by the government; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: What I was -- what I was asked to talk about was what my experience was with respect to the -- whether or not the benefits tended to expand or contract under the program, in my experience.

BY MS. WALLACE:

Q And are you, as a -- as a financial -- and as a CFO -- deputy CFO, you are looking at that from a macro level as opposed to a micro level of

understanding any changes in services, small changes over time. You're looking at it as a total -- total dollar or big -- or total program?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say I'm looking at that from my personal experience over 35 years working in different positions within the program.

BY MS. WALLACE:

Q And so is that a macro or a micro level?

MR. ANTONUCCI: Objection.

THE WITNESS: I don't think I have anything else to add.

BY MS. WALLACE:

Q Can you tell me what parameters you're using to make that conclusion? Are you looking at programs? Are you looking at dollars?

MR. ANTONUCCI: Objection.

BY MS. WALLACE:

Q Or are you looking at policy manuals that talk about services covered?

MR. ANTONUCCI: Same objection.

THE WITNESS: It's -- it's based on my experience and different positions with the organization, dealing with claims over time,

knowing what's -- what's covered and having read through the regulations and the Social Security Act, and experience.

BY MS. WALLACE:

Q So it's not related to -- to your analysis of dollars?

MR. ANTONUCCI: Objection.

THE WITNESS: I would say no.

BY MS. WALLACE:

Q And you testified earlier that it would probably be the CMS division that would be in the best position to assess changes in services provided and benefits; correct?

MR. ANTONUCCI: Objection.

THE WITNESS: I said it would be the Center for -- it's called the Center for Medicare, singular, CM.

BY MS. WALLACE:

Q Ahh. And that is a division under the umbrella of CMS?

MR. ANTONUCCI: Asked and answered.

BY MS. WALLACE:

Q Did you answer? Sorry. It might have been a --

A No. It's -- yeah. It's yes. If you

look -- look at the CMS org chart.

Q Okay. But it's -- and if you could just tell me one more question. That's not beneath the CFO department --

A No.

Q -- on the org chart; is that right?

A Correct. Correct.

MR. ANTONUCCI: Objection.

MS. WALLACE: Okay. Great. I don't have any further questions for you, Mr. Young. Thank you for your time today.

MR. ANTONUCCI: I have one more, sorry. A couple more, excuse me.

FURTHER EXAMINATION

BY MR. ANTONUCCI:

Q You testified that someone from the Center for Medicare services, CM -- excuse me if I'm getting the acronym wrong -- would be best positioned to answer Ms. Wallace's question about benefits coverage; right?

A Yes.

Q Can you also answer that question?

A I'm sorry.

MS. WALLACE: Objection.

BY MR. ANTONUCCI:

Q Are you also able to answer that question?
A I'm sorry. What's the question you want me to also answer?
Q Are you able to speak to benefits coverage under Medicare?
A At a high level, I can, as I've already said today. The primary principle for coverage is an item or service has to be medically reasonable or necessary -- and necessary to improve an illness or injury or correct a malformed body member, as I said.
That's under -- it's in the Social Security Act, 1862.
Q Okay, thank you, Mr. Young. I have no further questions.
MS. WALLACE: I don't either, Mr. Young. Thank you.
VIDEOGRAPHER: The time is now 2:53 and this completes media unit number five in this videotaped deposition.
CERTIFIED STENOGRAPHER: Counsel, may I get your transcript orders?
MS. WALLACE: Yes.
MR. ANTONUCCI: Yeah. We have a standing order.

MS. WALLACE: We do. And we -- plaintiff wanted a rough.

CERTIFIED STENOGRAPHER: Okay.

MS. WALLACE: Please.

CERTIFIED STENOGRAPHER: And, Mr. Antonucci, you as well?

MS. WALLACE: Will you make sure there's a condensed? That's my very favorite.

MR. ANTONUCCI: Sorry. Dawn, were you saying something?

CERTIFIED STENOGRAPHER: Yes. Did you want a rough draft?

MR. ANTONUCCI: Yes, please.

CERTIFIED STENOGRAPHER: Okay.

(The reading and signing of the deposition is not waived.)

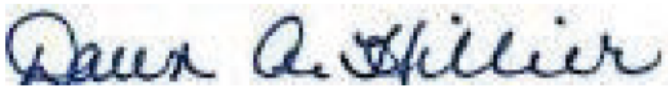
(At 2:53 p.m. the deposition was concluded.)

CERTIFICATE OF OATH

STATE OF FLORIDA)
COUNTY OF PINELLAS)

I, the undersigned authority, certify that LARRY YOUNG appeared before me remotely and was duly sworn.

WITNESS my hand and official seal this 16th day of February 2026.



DAWN A. HILLIER, RMR, CRR, CLR
Notary Public - State of Florida
My Commission No.: HH 300744
Expires: 12-15-2026

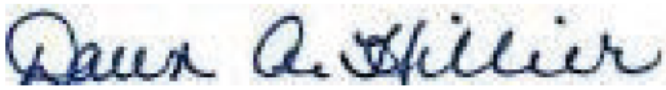
CERTIFICATE

STATE OF FLORIDA)
COUNTY OF PINELLAS)

I, DAWN A. HILLIER, RMR, CRR, CLR certify that I was authorized to and did stenographically report the deposition of LARRY YOUNG; that a review of the transcript was requested; and that the transcript is a true and complete record of my stenographic notes.

I further certify that I am not a relative, employee, attorney, or counsel of any of the parties, nor am I a relative or employee of any of the parties' attorney or counsel connected with the action, nor am I financially interested in the action.

DATED this 16th day of February 2026.



_____

DAWN A. HILLIER, RMR, CRR, CLR

February 16, 2026

IN RE: CAMP LEJEUNE WATER LITIGATION

Dear Mr. Young:

Herein, you will find the transcript of your deposition taken on February 6, 2026, and a Errata Sheet for your use in entering any changes to the deposition.

Please do not edit or make marks on the transcript itself. If you desire to make any changes, they should be noted on the Errata Sheet. If no changes are to be noted, please indicate that on the Errata Sheet so counsel are aware that no changes were made.

After reading the transcript, please execute the Errata Sheet, including date and place of signing and return to Golkow, a Veritext Company at the address indicated below.

Thank you for your prompt attention.

Sincerely,

Dawn A. Hillier, RMR, CRR, CLR
GOLKOW, A VERITEXT COMPANY
1650 Market Street, Suite 5150
Philadelphia, PA 19103
877.370.3377

ERRATA SHEET

I, LARRY YOUNG, have read the foregoing pages of my deposition given on February 6, 2026 in the case of IN RE: CAMP LEJEUNE WATER LITIGATION, Case No. 7:34-CV-00897, and wish to make the following additions, deletions or corrections:

PAGE	LINE	CHANGE AND REASON FOR CHANGE
27	2	The word "assuming" should be changed to "submitting."
80	25	The words "ex rel" should be changed to "actuarial"

In all other respects, the transcript is true and accurate.

LARRY YOUNG

&

& 2:5 62:24

0

000000 5:13
0000000006.... 5:14
0000000007 5:15
0000000273.... 5:16
0001 5:14
00897 1:2 172:5
02203 4:8

1

1 5:7 16:3,8,25 20:5 38:2 62:2
1.1 118:5
1.13 141:10
1.45 46:3,9,12 46:13
10 42:6,11 117:25 119:25 142:9
100-08 151:10
10:10 37:16,18
10:16 37:19,20
11 76:19
110 32:17
1100 3:8
11:00 66:24 67:2
11:11 67:3,4
12-15-2026 169:15
127 2:13
12:03 100:19 100:22
13 40:15
135 62:2
14 72:3
146 118:8
146.2 118:4
15 16:3 89:13 91:4
154 5:3
157 5:3
16 5:7,8,9,11 73:4 171:1
1650 171:22
166 5:4
169 5:4
16th 169:9 170:18
17 5:13 75:25
170 5:5
18 59:8
185 124:17 125:6
1862 167:13
19 90:9
19103 171:23
194 103:1
196 104:18
1960s 124:2
1965 40:16 155:13
1966 9:16
1988 21:17
199 2:8 108:9 108:12
19th 9:16
1:05 100:23,24
1:32 119:15
1:38 119:18
1:39 120:20
1:44 120:23
1st 41:20

2

2 5:8 16:9,11 94:14 95:4
2,200 124:23 125:5
2.90 93:17
20005 3:9
2006 41:20 58:13 155:25 160:11
2007 81:21
201 108:22,22
2011 105:5
2014 32:10,12
202.616.8367 3:10
2023 32:13 34:11 105:6,24 106:1
2024 79:19 87:3,5,7
2025 13:12 16:3 19:5,10 67:10 105:8,24 106:2 124:16 124:23 125:4
2025.12.15 5:7
2025annualre... 5:15
2026 1:12 7:3 16:15 169:10 170:18 171:1,7 172:3
2026.01.30 5:9 5:11
2027 71:15 91:4 114:17,18 115:14
2029 82:24 83:2
203 110:3
2033 71:15 76:7,16 79:6 79:11 81:21 82:5,12 85:17 111:23 157:24
2034 110:18
206 103:2
208 104:19
211 108:13
219 2:20
22 117:23,25

22312 169:12 170:20
2250 4:7
23 105:12 106:9,17
245 89:1
25 48:17,22 67:20 122:9,14 127:1 128:21
257 89:2
26 111:1
27 81:4
273 67:12
27th 35:21
28.83 29:2 139:8
28144 2:7
28406 2:14
29440 2:21
2:07 137:10,13
2:12 137:14,15
2:53 1:13 167:18 168:17

3

3 5:9 8:21 16:12,17
3.1 85:21,25 86:6
3.32 93:19
300 14:15
300744 169:14
30303 4:14
30th 16:14
31 93:6
35 132:13 155:4,5,18 156:7,14 159:8 160:18,25 161:23 164:6
36 123:11
39 81:5

4

4 5:11 16:18,22 20:18
40 30:8,21 42:10
422 118:7
422.5 118:3
43 93:8
45 15:4 90:22
450 117:10 121:15 140:3
46 38:13
48 123:11

5

5 5:13 16:23 17:1 20:22
5150 171:22
525 2:6
553.4 118:4
563 118:8
5m60 4:13

6

6 1:12 5:15 16:25 67:10,13 102:2 171:7 172:3
6.55 29:1 139:8
6.9 28:20
61 4:13
64 105:7 106:1
65 47:10 58:22
67 5:15
6th 7:2

7

7 28:19,22 67:12
704.633.5244 2:8
71 85:1 105:6 105:25
72 86:20
75 48:19,23 85:24 86:4 93:12 105:13 106:18 128:2
75/25 129:13
7500 10:6
7867485 1:18
7:23 7:17
7:34 1:2 172:5

8

8 5:2
82 105:4
83 85:2
84 86:21
843.386.5284 2:22
877.370.3377 171:23
89 76:9,18 111:14,19,24
897 7:17

9

9 5:2 93:21 94:1 97:10 142:9
9/11 135:25
910.794.4829 2:15
97 22:1
99 22:1
9:22 1:13 7:2
9:38 17:17
9:41 17:19

a

a.m. 1:13 7:2 37:18,19 67:2 67:3
ability 104:15 134:13
able 10:1 19:8 34:4 39:22 54:18 71:12 84:18 92:9 111:23 114:3

115:7 128:20 134:10 141:18 167:1,4
above 34:18,18 34:21 110:10 110:17
absent 104:22
absolute 141:23
absolutely 39:25 62:19 88:21 156:6
abuse 139:5 149:9
abusive 32:6
accept 96:21
accepting 96:5 97:1
access 41:15 94:24 95:1 99:3 104:24 106:23 107:20 111:8,18 112:4 112:5
accessible 43:22 44:21
account 43:8 135:4
accountability 145:7
accounted 36:12
accounting 23:23 35:2,3,5 35:6,11 36:13 87:22
accrete 58:10 156:25
accrue 58:10 156:24
accuracy 65:15 149:22
accurate 29:3 61:4,7 109:9 120:13 141:16 143:17 148:4,9 148:16 150:3 172:24
accurately 36:12 39:17
acknowledged 106:22
acronym 62:15 62:21 166:18
acronyms 62:16
act 11:10 40:16 49:11 54:14,17 59:9 130:21,25 165:3 167:13
action 7:21 33:12,17 113:6 114:5 115:23 170:15,16
actions 34:6
activities 23:24 24:18
actu 83:24
actual 92:4,10 92:22 104:13 140:13 142:7 146:25 162:21
actually 20:21 27:7 30:15 39:4 52:9 62:22 72:4 79:17 88:21 97:24 98:1 100:14 127:15 133:2,12 140:13 141:14 160:7
actuarial 69:8 71:21 83:16,25 93:18 114:21 115:6
actuarially 48:16
actuaries 84:4 86:5 92:17 106:6
actuary 85:12 129:10 130:14
actuary's 115:2 128:14
add 83:6 112:11 118:7 129:23 140:4 155:22 164:13
added 58:18
addition 58:11 129:1 155:24 158:15
additional 18:21 55:6 57:14 58:10 112:21 139:10 146:18
additionally 110:9
additions 172:6
address 26:1 29:8 77:16 93:11 112:16 113:1 115:24 171:14
addressed 73:9 114:3 116:10
addressing 93:9 113:4
adequacy 103:10 107:21 114:20 115:4 152:19
adequate 123:13
adjudicating 23:21
adjustment 17:14
administer 7:20 25:1 32:20 33:4 63:11

administered 55:4
administering 22:25 23:3,15 23:17 54:2
administers 35:10
administration 40:25 60:9
administrative 23:10,19 32:18 35:4 36:12 37:7 50:11 52:10 136:23
administrativ... 113:7 114:4
administrator 53:25 54:5 60:6 72:22
advance 52:2 52:18 53:18
advantage 22:19
affect 60:19
affidavit 12:6,9
affidavits 11:20
affirm 8:21 9:5
affirmative 6:7
affirmed 10:12
afford 127:7,11
afloat 112:22
afternoon 154:17
age 58:22
aged 40:12 47:18
agency 18:6 31:9 32:5 35:5 35:10,18 43:19 60:2,8
agency's 37:6
agent 136:17
aggregates 118:8
agree 7:10 8:22 8:25 18:7 23:1 31:21 40:3 46:4 50:17,23 51:24 52:16 59:15 60:10,15 60:18 65:8,10 71:1 73:14,17 73:21 77:24 84:11,14,19 85:20 86:11 87:15 91:23 95:19,24 96:20 96:21 109:13 110:12,19 113:4,10,20 114:9 116:5 122:20 123:18 123:21 124:6 126:12,21 127:22 133:19 133:24 138:2,9 139:14 140:8 141:17 142:5 142:11,21 149:19 150:17 151:1 152:9 153:20 158:8 158:10 163:7 163:10
agreement 18:19 19:21,25
ahead 11:6 141:7
ahh 165:19
allegations 20:4
allowed 55:10 84:9 111:6,10 111:11 112:11
allows 10:23 59:25
alluded 28:5 32:19
als 58:20
alter 103:19
alternative 102:9
amend 60:11
amended 39:12
american 152:18
amount 31:16 44:25 46:15 93:18 95:2 97:13 125:4,17 125:19 139:12
amounts 109:24,25 110:10,11
analyses 99:10
analysis 165:5
analyzed 86:4
anecdotal 95:17
annual 35:17 35:23 36:2 67:10,20 69:5 69:17 81:9 122:14
annually 122:13 123:15 125:6
answer 6:3 13:8 18:3 24:11 25:7 37:4 43:12 52:21 95:25 119:8 121:10 131:5 141:7,8 146:21 154:1 165:23 166:19 166:22 167:1,3
answered 165:21
answering 36:23 39:9
anticipated 80:11 87:7 154:18

antonucci 3:4 5:3,4 9:7 11:5 12:10 19:6,15 19:23 20:12 21:18 22:2,5,9 24:10 25:6,20 26:2,14,22 27:20 28:4,12 28:16 29:4,11 29:19 31:17 32:2 35:15 36:22 39:6 40:5 43:7,14 43:24 44:6,23 45:2,8 47:11 47:25 50:21 51:7,21 52:3 52:19 53:6,19 54:4 56:6 58:7 59:6,16,22 60:14,21,24 61:5 62:13 63:6,17 64:6 64:13,19 65:1 65:9,18 66:2 66:10 68:8 69:1,13 70:1 70:14,22 71:18 73:15,23 74:24 75:15 76:1,21 77:7,22 78:11 79:20 80:2,9 80:13,23 81:13 81:23 82:7,14 83:4,18 84:1 84:12,21 85:11 86:7,14 87:18 87:23 88:10 89:23 90:15 91:21 92:11,23 94:3 95:10,22 96:8,17 97:4 97:17 98:9,17 98:23 99:5,21 100:5,13,18 104:6 105:19 106:10 107:3 107:11,23 109:4,14 110:4 110:13,20 111:20 112:9 112:23 113:9 114:7,24 115:12 116:1,6 116:14 117:2,6 117:16 118:6 119:12 120:15 122:3,11,21 123:20 124:7 126:2,13,22 127:20,23 128:5,12 129:3 129:7,17,21 130:6 131:4,15 132:17 133:4 133:23 134:25 135:6,11,21 136:9,18 137:4 138:7 139:15 140:10 141:2 141:20 142:10 142:17,24 143:3,10 144:4 144:8,15,22 145:3,10,17,25 146:8,20 147:4 147:17 148:18 149:10,15,25 150:12,20 151:3,16 152:1 152:12 153:5 153:13,24 154:13,15 157:4,15 158:1 158:9,25 159:12,23 160:14 161:2 161:10 162:3 162:10,23 163:3,9,16 164:4,11,18,22 165:7,14,21 166:8,12,15,25 167:24 168:6,9 168:13

anybody 101:14

apart 92:5

apologize 94:22

apparently 10:25

appeals 23:22

appear 120:1

appearances 2:1 3:1 4:1

appeared 169:7

applicable 50:20 110:8 125:25

application 22:19

applications 33:24 34:3

apply 94:9 149:24

appointed 60:8 72:19,20 73:1

appointees 60:7

appreciate 17:24 154:18

approach 46:21

approached 19:7

approaches 93:13

appropriately 140:16

appropriaten... 152:15

appropriation 94:15

approval 52:15 53:4,9,11,15,16

approximate 28:10 30:4
approximately 13:10 14:14,25 21:25 29:3 30:8 81:20 85:21 122:9 124:16 127:1
approximation 30:6
april 9:16
area 53:22 56:7 129:16 160:24 161:9
artfully 57:4
ascending 124:11
asked 18:2 101:10 121:3 162:15 163:18 165:21
asking 19:8 27:7 30:7 113:20 116:2
assess 165:12
assessing 33:1
asset 82:23
assets 84:17 111:4
assigned 135:4
associated 22:21 127:8 129:1 131:3 135:24 142:8
associating 142:8
association 152:18
assuming 27:2 78:17 114:1
assumption 109:22
assumptions 71:22 78:17,18 82:6,13,23 83:1
atlanta 4:14
attach 134:10
attention 90:8 90:10 102:6 108:8 123:10 171:15
attorney 8:15 170:12,14
attorneys 39:9
attrition 34:1
audio 7:9 8:7 121:2
audio's 17:9
audit 27:19,23 28:3 30:22 31:2 51:18 149:2
auditing 23:25 148:6
auditor 50:1
audits 23:22 145:1 149:23
author 69:19
authority 60:11 169:6
authorization 52:8,11
authorized 7:19 170:6
availability 74:16
available 10:17 54:24 56:16,23 56:24 98:8 117:10
average 108:17 108:23
avoid 77:19
aware 10:23 18:9 31:2 71:23 144:1,5 144:7,19,23,25 145:6,13,18 159:20 162:19 171:11
awareness 30:25

b

b 40:10,14 41:5 41:23 42:15,19 42:20 44:14,18 48:4,20 55:15 56:11,16,23 57:3,5,6,7,11 71:24 108:6 116:22 117:1,8 117:13 118:4 118:16 119:23 120:6,8 121:10 121:13,17 122:7 123:15 124:3,6,16,24 125:5 126:1,4 126:20 127:4 127:18 128:9 129:25 130:9 130:10
back 13:8 17:20 34:9,9 37:21 67:5 94:17 95:16 100:25 101:4 102:6 119:19 120:18,24 133:1,2,12,16 137:16 161:11
background 11:25 40:3,7 68:23 87:22 137:22 148:1
bad 80:16
bailiwick 92:19
balance 81:8,16 81:25 83:1 114:21 115:6 123:1
ball 113:15
ballpark 117:7

baltimore 10:7
base 125:17
based 21:24 22:23 30:23 31:21 42:16 46:16,25 50:19 53:17 54:6 70:20 71:5,8 71:21 74:15 80:21 84:16 85:13 87:21 91:13 92:8,20 93:25 94:4 96:18 97:19 98:5 99:23 104:3 109:9 120:7 122:19 122:25 126:14 128:11,18 130:1 132:13 134:22 147:3 147:15,18 156:7,10,14,21 158:13 164:23
basic 40:2,7 161:18
basically 32:20 129:19
basis 41:16 51:20 54:8,8 69:17 89:18 91:6
bates 16:24 62:2 67:11 72:2,5 73:4 75:25 81:4 85:1 86:21 89:2 90:9 93:7 103:1 104:18 108:12 117:25 123:11
bcrc 62:24 63:7 136:11
bearing 154:17
bears 67:11
beginning 67:5 81:8 83:7 114:17 137:16
begins 37:21 100:25
behalf 1:11 2:3 3:3 4:3 11:20 27:1 31:14 32:21,21 62:10 96:22
believe 13:11 13:22 15:2 18:3 28:20,21 35:20 38:9,22 43:16 46:10,15 48:17 49:14 55:20 69:6,17 70:17 71:13 72:15,22,25 81:24 90:1 111:22 122:8 127:2 136:10 138:15 152:18 157:19 158:13
bell 2:19
belllegalgrou... 2:23
bellwether 20:4 65:25
beneath 166:3
beneficiaries 41:16 44:5 60:23 64:25 73:12,13 74:18 75:6,7,10,14 96:22 98:2 99:16 100:4 103:24 104:15 112:18 125:13 142:2
beneficiary 23:13 27:1 45:1 48:9,21 57:18 107:20 108:17,23 109:12 111:8 111:17 112:4 122:10 123:14
benefit 23:11 32:21 35:3 36:11 37:7 43:20 47:2 48:18 49:19 58:1,4,12,12 63:7,8 94:6,10 94:14,17,25 95:2 121:14 124:13 128:21 130:15 155:24
benefits 27:1 44:9,10,17 52:13 55:6,9 57:14 58:5 60:12 62:23 63:13 65:7 71:14 77:11,11 84:9,18 111:25 117:10 120:2 127:2 134:5 136:8 140:3 153:3 155:19 155:22 156:25 158:15,22 163:20 165:13 166:20 167:4
best 74:23 75:23 83:16,21 109:18 128:11 165:12 166:18
better 21:4 46:22 79:25 80:11,15 105:15
beyond 11:1 18:22 22:15 49:22,24 56:8 97:24 147:6
big 58:11 103:5 103:6 164:3
bigger 21:1 38:6 103:3

117:21 139:2
biggest 35:16
billed 148:22 151:13
billers 32:7
billing 26:13 65:15 140:25 142:22 143:7 145:9 147:14 149:9 150:10 151:24 152:9 152:15
billion 27:11 29:2 117:10 118:4,4,5 121:15 139:8 140:3 141:10
birth 9:15
bit 56:20 78:12 78:14 118:11 118:18 120:9 120:13 159:25
bladder 38:18
board 52:5 67:20 69:4 72:21,23 84:6
boards 72:12
bodies 144:1
body 12:3 49:15 161:16 167:10
boss 34:20
boston 4:8
bottom 92:2 111:2
boulevard 10:6
branch 162:8
brbc 62:11,12
break 17:24 37:12 66:15,17 66:20 100:12 101:5,7 120:2 137:3,6
breakout 117:20
brief 37:18 66:17 67:2 137:5,13
briefly 32:15 110:25
bring 154:9
budget 89:14 91:4
building 4:7
bulk 118:14
burden 86:12
butler 2:11

c

c 31:3 40:10 41:13 55:1,3 55:12,12,14 56:5 118:10,13 118:20,24 120:1,9,11 121:18
calculation 129:10
calculus 27:2
calendar 125:7
call 13:21,22,22 31:3 46:23 55:5 81:15 138:18
called 8:9 24:15 45:15 48:6 101:9 146:12 165:16
calls 13:14,16 13:17,20 159:1
camera 7:6
camp 1:4 7:14 8:16 10:19,25 11:10 14:2 18:10 20:5 38:15 39:19 61:13 62:10 65:16,25 66:1 68:6,12 69:24 70:7 130:20,24 171:3 172:4
cancer 38:19
capacities 24:7 72:22
capacity 32:16 32:23 34:24 41:3 42:17 44:2
captured 43:16
captures 35:6
capturing 133:11
care 30:13 40:21 54:19 64:11 70:16 74:13 75:4 99:3,8,15 104:14 107:20 155:9
career 21:23 22:23 25:17,24 29:24 31:22 92:8 93:25 116:24 131:12 147:15 155:15
careful 39:7
carolina 1:1 2:7 2:14,21 7:16 20:6,10
carpenito 3:5
carved 54:23 54:25
case 1:2 7:17 8:20 12:5,7 14:1 19:9,14 20:14 61:23 68:1 132:22 172:4,4
cases 1:6 23:12 25:10,11,12 50:9 63:24 132:2,10 134:12 146:25

catch 141:6,18 142:6,15 150:5 150:10
catching 140:6 140:7
categories 161:17
categorized 120:7
category 38:17 38:18
causes 25:4
cautionary 78:14
center 31:8 62:24 136:8 162:5 163:5 165:16,16 166:16
centers 9:18 162:11,12
cert 29:10,12 29:17
certain 23:20 29:21 45:9 64:1 78:17 103:13
certainly 38:7 43:2 47:16,18 77:14
certainty 83:13
certificate 5:4,5 169:1 170:1
certification 143:20
certified 6:13 8:4 13:2,6 141:15 167:21 168:3,5,11,14
certify 169:6 170:5,11
certifying 27:4 143:15
cetera 78:3
cfo 34:13,18,21 163:11,24,24 166:4
challenge 26:8
challenges 71:11 86:16 92:6
chance 108:15 150:18
change 79:13 88:9 104:11,22 112:17 113:16 128:10 172:7,7
changes 60:19 78:9 86:2 88:5 91:19 93:15 157:22 159:20 160:23 161:22 164:1,1 165:12 171:7,10,10,11
characterizati... 53:21 138:9 139:16 153:23
characterize 47:7 71:19 143:13
characterized 136:20
chart 81:7,11 81:15 82:4,11 82:16 84:25 85:10,19 86:20 87:15 109:24 110:11 118:1 118:22,23 119:24 121:11 123:17,21 124:1 125:24 128:10 166:1,6
charts 110:7
chat 15:17,19 15:23 67:9
check 28:2,3 148:15 150:2
chief 9:21 24:22 34:12,15 50:13,13,15
choice 55:4 96:12,19 107:17
choose 55:8 96:23 98:19,20
circumstances 11:22 96:2 98:3 146:23
cited 108:16
civil 11:14
claim 11:10 23:10,11 25:15 26:25 27:3,5,9 27:12,17 28:1 141:10,13,15 143:15,16 146:18,23 147:20 148:22 151:2,6
claimants 11:4
claims 11:4 23:21 25:12 27:11 28:7 30:17,23 50:7 50:16 54:7 138:24 141:10 144:14,21 147:3,23 151:12 164:25
clarify 40:23 159:25
clear 61:11,13
clinical 49:22 52:22 152:10
clinician 49:23 51:14 52:22 53:22
clja 16:25 62:2 67:11
close 114:21
clr 169:13 170:5,21 171:21

cm 165:17 166:17
cms 5:9,11 9:24 9:25 15:6 17:5 18:4,6 21:16 21:23,25 22:23 28:25 29:25 30:22 31:22 35:25 43:6,13 58:1 61:4,23 62:2,10,21 63:3 70:12,21 83:17,25 84:4 94:1 109:12 113:7 116:24 116:25 128:14 131:12,14 132:5,13,15 133:1,2 136:6 136:16 138:3,4 141:1 142:21 143:7 145:22 147:2,14,16 148:8,12,14 151:10 152:16 155:3,5,15,18 159:8 160:6,25 161:22 162:2,8 162:22 165:11 165:20 166:1
cms's 145:13
code 146:6
coded 30:25 31:5
codes 142:8,9 142:22 143:8 145:22 147:19 147:20,21,21 147:22,24 148:4,8,15 150:3 152:10 152:15,17
coding 31:25 65:15 138:5,10 140:25 144:13 144:20 145:1 146:16,19 147:3,15 149:20,23 150:11,17 151:2,6,23
coinsurance 110:10
colleagues 12:22
collect 31:13,16 133:9
collected 45:19 47:1
collecting 35:7 131:20 133:16
collection 132:10 134:16
collections 43:15,20 71:14 123:4
combination 46:11 48:8,9 48:13 130:12
come 34:6,9 128:3,6 130:10 136:1,2 147:20 150:3
comes 133:2 147:15 149:20
coming 100:13 101:10 133:1
comment 152:21
comments 70:10
commercial 74:14 75:6
commission 169:14
common 45:23
commonly 55:25
communicate 10:12
communication 8:25
communicati... 12:17 39:8
companies 55:23,25
company 12:3 171:13,22
comparable 102:19
compared 74:19 75:11 79:16 99:17 105:17 106:8
comparison 86:22 105:2
compel 107:15
compensate 97:2
compensated 18:25 19:2 97:13 105:17
compensation 136:15
competition 32:25
compiled 109:1
compiling 84:3
complain 95:14
complete 170:9
completely 48:5 77:24 125:9
completes 37:17 67:1 100:21 137:12 167:19
completion 79:17
complexity 145:9 146:10
compliance 22:18,20 26:24 34:9 139:4
compliant 24:19 26:24

complying 151:20
component 32:5 40:24 41:4 54:3 68:15 126:20
components 68:11
composition 129:13
compound 158:25
comprehensive 29:9 148:5
comprised 48:17
computer 66:22
computing 130:15
concern 87:21 106:20
concerned 112:7
concerns 115:24 116:19
concert 50:15
conclude 72:9
concluded 120:7 168:18
conclusion 107:2,5 112:3 164:16
conclusions 68:22
conclusive 113:19
conclusively 115:1,8
conclusivity 113:19
conclusory 89:25
condensed 168:8
condition 50:19 71:3
conducted 7:5
conducts 144:25
confidence 36:11,14,20 37:5
confidential 12:17 39:8
confirm 39:22 95:12 99:11 126:16 129:11 149:5 150:17
confirming 120:1
confusing 56:20
congress 10:23 12:2,5 36:1,5 36:20 54:23 59:5,11,12 60:10,18 61:3 69:7,12,14,17 70:12,18,20 72:13 73:20 77:3,9,18 86:13 89:13,16 91:2,5,18 97:20 98:8,19 100:8 111:10 112:11,15,25 115:23 116:8 153:17 157:13 157:18,22 158:7,21,23 159:15
congress's 98:11
congressional 113:6 114:4
conjunction 147:22
connected 116:20 170:14
connection 7:7 68:6
consecutive 35:21 89:12 91:7,9,15
consider 47:5 89:16 91:5 100:8 108:2 145:22 146:14
considered 67:25
considering 99:20
consistent 148:22
constricted 58:2,6
contacted 12:18
contain 139:20
contained 88:13 131:9
content 12:16 32:25 72:13
context 105:3 111:22 133:25 134:21 135:5 135:10,20 136:12
contingency 31:15
continually 21:17
continue 7:10 47:18 68:18 71:12 74:15 105:7,8 106:13 113:25 126:11 156:9,12,17,22 158:17,20
continued 3:1 4:1
continues 110:17 114:2

continuing 103:23
contract 22:20 22:22 23:18 30:22 62:11 136:17 163:20
contractor 23:10 24:15 30:18 32:14 33:6,9,23 50:1 62:20,25 63:3 63:8 136:7
contractors 23:19 26:6 28:3 30:15,20 32:18,20 33:12 33:14 50:6,12 52:10 63:20 132:4 136:23 149:2
contracts 32:24
contribution 57:19 112:21
contributions 123:14 128:1
control 134:9
conversation 101:20
conversations 101:18
convey 74:22
coordination 62:24 63:9 136:8
copay 126:8
copays 44:4,8,9 44:10,15,17,19 44:25 45:5 126:4
copy 38:2
core 122:18 161:19
correct 12:11 15:8 17:6 18:5 24:5 34:14,16 39:15 40:25 41:12,22 42:18 46:10 49:1,15 57:4,17,19 59:3,5,19 61:16,17,20,21 62:4 65:17 66:11 68:2,7 70:21 73:24 83:17,25 88:9 92:16 98:8 101:11 102:14 102:21 106:2,9 106:16 107:10 107:13 119:7 119:10 122:2 122:10 125:18 125:22 130:1 133:7 136:21 141:3,9,16 159:2,11 161:16 163:15 165:13 166:7,7 167:10
corrections 17:23 172:6
corrective 33:11,17 34:6
correctly 86:6 148:14
corresponding 93:7
correspondin... 103:20
corroborated 143:22
corroboration 140:24 141:19 142:15
cost 41:17 56:17 57:1 76:3 82:23 83:1 86:22 87:2,6 92:6 103:19 104:13 109:23,25
costs 76:9,18 76:20 87:16 92:4,10,22 100:3 103:22 104:1 106:5 108:24 109:2 109:12 111:8 123:16 124:13
counsel 7:25 8:20 10:11 12:17 13:21 14:20,23 15:6 15:16,24 16:14 16:21 17:12 19:8,8 38:4 101:6 162:16 167:21 170:12 170:14 171:11
country 95:8 95:13,15,21 96:1 154:4
county 169:4 170:4
couple 33:19 63:19 110:23 166:13
course 10:14 79:9 160:24
court 1:1 7:15 7:19 8:1 12:5,7 12:24 13:7 15:16,25 20:6 20:10 23:5 68:23,24
cover 5:10 16:12,13 51:25 54:18 76:9,17 111:8 122:14 123:16 124:5 124:13 126:25 128:20 160:20
coverage 41:15 46:20 49:5,17 50:20 51:10 52:25 54:24

55:1 58:1,4,10 58:22 59:2 60:19 61:2 64:24 96:16 127:8,9 151:14 151:23 155:20 156:2 159:21 160:1,6,9,23 161:8,14 162:17 166:20 167:4,7
coverages 58:5
covered 49:3 49:11 93:24 98:15 156:17 159:21 160:12 160:17,18 161:23 164:21 165:1
covers 156:17 160:20
cpt 142:8 147:22 152:16
created 29:8
credit 42:10
criteria 51:10
crr 1:15 169:13 170:5,21 171:21
crystal 113:14
cumulative 85:6
current 9:17 25:14 28:21 34:23,24 41:3 66:13 71:7 73:7 74:19 75:10,14 76:4 78:7,16 85:7 86:3,23 91:19 94:13 95:4 97:25 99:16 103:11 104:12 105:9,22 106:13 107:13 107:21 117:9 124:16 157:23 158:24
currently 17:5 18:4 20:6 30:1 36:21 61:16 76:15 82:2 89:21 156:17
cursory 132:18
curve 124:5
cut 12:25 94:17 94:23,24 95:1 125:1 158:22
cuts 17:11
cv 1:2 7:17 16:23 20:21 21:13,17 137:20 160:9 160:13 172:5

d

d 1:8,8 41:14 41:23 42:19,21 44:14,18 49:3 55:15 57:14,15 57:18 58:12 108:6 116:22 117:1,15 118:4 119:23 122:8 123:15 124:3,6 126:1,5,21 127:4,18 130:1 130:10,10 160:10
d.c. 3:9
dallas 24:14
damages 5:7 16:4 61:20
danger 78:16
dangling 37:4
data 65:15 95:16 99:10 140:25
date 1:12 9:15 79:5,10,18 89:14 111:10 111:15 155:12 171:13
dated 16:14 170:18
dates 80:5
david 3:6
david.ortiz 3:13
dawn 1:15 168:9 169:13 170:5,21 171:21
day 19:11 33:2 33:2 169:9 170:18
days 89:13 91:4
deal 63:21 77:15 131:19 132:9 135:4 147:19
dealing 32:24 164:25
dealt 135:3
dear 171:5
debt 133:9
decades 52:18
december 16:3
decide 77:3 158:21
decision 49:22 51:9,14 52:1 73:20,25 140:20
decisions 59:15 59:18,24 60:1 61:3 153:21 154:2 157:13 160:2
declining 81:20 82:5,12
decrease 77:4 99:3 158:22
decreased 156:2 160:6 162:17

dedicated 90:21 149:8
deductible 110:10
deductibles 108:5 110:8 125:25 126:3
deemed 52:17
deems 50:1
deep 55:14
defendant 15:24 16:14 18:10
defendants 3:3
defense 8:20 10:11
deficiencies 115:24
deficit 76:24 77:2 80:7 93:16,18 112:16 113:2,5 114:3
define 27:23
definition 19:18 88:24 89:5 91:14
definitions 88:22 115:3
degree 83:13 84:4
delay 46:7
delays 76:5
deletions 172:6
delivering 75:3
delivery 74:13 104:22
delta 123:3
demand 134:17
demographic 81:1 83:9
demographics 92:17 154:3
demonstrates 123:17
denied 50:1,5 51:20
denote 6:14
dental 54:19,21
deny 95:12
department 3:7 4:3,6,12 36:6 63:5 136:1,4 162:1 163:2,8 166:4
department's 35:19
depend 61:3 107:20,25 154:1
depends 7:6 44:11 47:6 126:7 153:21
depicting 85:10
depleted 71:15 76:15 84:17 111:4,12 112:12 157:24
depletion 75:21 76:6 77:19 78:9 79:5,10 80:4 82:23,25 84:8 111:15 112:8,16
deponent 9:1
deposing 8:17
deposition 7:4 7:13 9:3 10:14 11:12 14:8,20 14:23 16:10,16 16:19 99:15 102:2 167:20 168:15,17 170:7 171:7,8 172:3
depositions 15:15
deputy 9:21,22 34:13,15,16 163:24
describe 16:1 22:14 26:18 32:15 41:5,14 45:11,14
described 27:22
descriptors 150:4 152:19
deserted 101:14
designated 14:1 16:6 56:4 61:12,18 64:3 64:10,23 145:7 163:14
designation 14:9,13 19:4 38:17 41:13 52:24 128:24 130:2,5
designations 13:25 14:5 37:10 39:4 40:2 45:11 56:15 61:9
designed 149:24
desire 171:9
despite 21:16 138:2
details 160:11
detection 148:12 149:9,9
determination 50:8,18 53:17 89:10 90:18,24 90:25 91:7,16
determine 140:14 151:12 152:10
develop 26:1 33:17 34:8 134:6

developed 26:11
developing 26:7 32:24 68:1
develops 58:19
diagnosis 49:6 49:13 53:1 147:21
diagnostic 145:15
dictated 94:18
difference 90:20 132:14
different 33:3 35:1,9 44:8,9 45:12 48:5 52:6 60:7 63:20 69:9,9 72:22 77:9 94:9,11 96:2 97:19 98:3 113:24 121:9 130:9 132:10 132:16 146:23 147:20,24 148:3,23,24 161:17 164:7 164:24
difficult 83:12 142:15 150:9 150:14
dire 71:17 113:14
direct 84:3 102:5 132:1 134:9
directed 13:7
directing 123:10
direction 131:24,25
directly 41:1 132:6,6 135:7 152:7
director 9:22 32:13 34:13,16 50:15
directors 50:13
disabled 40:12 47:9,16
disadvantaged 127:13
disagree 84:14 92:21 109:2 152:9
disclosed 68:5
disclosure 38:14 147:7
disclosures 16:4,7,16 38:3 38:19 65:6
disclosures.pdf 5:7
discontinued 156:5
discuss 130:20
discussed 103:8
discusses 71:2
discussion 63:25
disease 38:17 38:18 40:13 58:17,20 59:1
diseases 59:1
disparity 75:5
distinction 43:18
distinctions 132:20
distorting 118:11
district 1:1,1 7:15,16
division 1:2 7:17 165:11,19
divulge 39:8
doctor 41:6
document 1:5 6:14 14:15 16:2,4,15 21:6 21:10 38:5,7 38:13 62:2 67:8,17,24 68:5,12,16,24 69:12,15,19,23 70:11 72:2,7 72:10 73:4 74:5 88:14,23 93:7 101:24,25 119:25 123:11 124:18
documentation 25:14 31:25 109:12 138:19 139:3,10,19,21 140:6 145:1,21 146:5 151:11 151:21,23
documented 43:6
documents 15:9 29:1 61:23,24 62:4
doing 23:22 37:8 130:14 142:14 143:22 155:14
dollar 164:3
dollars 35:4 36:11,12 37:7 37:7 94:11 164:17 165:6
door 133:12
double 148:15
doubt 92:25 109:6,17 110:1
downcode 140:17
dr 60:6
draft 168:12
draw 123:4
drive 2:13
driver 117:21

drivers 81:1
dropped 105:6 106:1
drug 41:15 57:15 58:12 155:24
dual 57:8
due 79:12,18 145:2,8
duly 8:9 169:7
durable 41:9 49:19
duration 65:6

e

e 1:8,8 45:11
earlier 17:5 19:4 32:19 38:22 57:15 61:14 69:21 75:22 79:12 99:14 102:16 107:7 108:4 111:14 112:15 118:14 119:6 120:12 122:8 125:24 126:6 127:5,12 132:3 136:20 137:21 138:13 139:7 140:23 143:14 146:15 157:11 160:5 161:12 165:10
early 71:14 83:2
earned 42:10 42:10 45:18
earners 46:9
earning 42:17
earnings 42:6
easier 140:7
eastern 1:1 7:16
economic 83:9 92:18 105:11 106:15
economics 105:10
economy 78:2 113:15 114:2
edit 171:9
edits 39:22
education 63:22
effect 41:20 112:18
efficacy 154:7
efficient 74:13 75:3 113:17 154:5
efficiently 36:15
effort 83:21 109:18 148:21
efforts 138:3 148:11
eighteen 40:18
eighth 91:9
either 34:7 65:3 66:4 77:10 84:14 93:14 96:14 114:19 138:20 167:16
elaborate 22:16
elect 77:10 98:20
electing 125:5
electronic 10:13
eligibility 49:9 58:14,16 60:12 77:5 93:24 97:16,24 98:2 98:6 156:25 158:15 159:21 160:2,10
eligible 49:5 52:25 56:17 57:9
eligibles 57:8
eliminate 93:16
eliminated 156:5
else's 47:23
email 12:20 13:13
employ 50:12
employed 17:5 18:4 45:24 46:9,14 47:15 58:1
employee 18:13 170:12,13
employees 32:17
employer 9:17 46:13
enact 60:18
enacted 59:5,11 59:12 73:10
enactment 57:13
encountered 97:23
encourage 143:7
encouraged 26:12
ends 89:2
enforce 138:4
engaging 52:9
enroll 42:3 96:14,15,15,19 96:20
enrolled 41:11 41:16 48:9 56:23,24 127:18
enrollee 42:24 124:24
enrollees 41:18
enrollment 33:24 34:3 41:23 43:19

57:21 127:4
enrolls 55:3
ensure 36:14 36:19 91:19 143:8 148:17 149:22
enter 18:18
entering 171:7
entire 24:25 70:4 155:15
entirety 39:18
entitled 16:3 42:12 45:20 58:21 81:8 102:7,8 108:16 127:14
entity 63:16
equipment 41:9 49:19
eradicated 138:11
errata 171:7,10 171:11,13 172:1
error 29:8,9 31:12 138:5,13 139:18 140:6,8 146:12 148:5
errors 31:25 33:14,19 138:10,19 139:3,19 140:17 141:18 144:13,13,20 149:22 150:10
esquire 2:4,11 2:18 3:4,5,6 4:5,11
essentially 46:18
established 40:15 123:15 148:3
estimated 28:11 76:18 79:5,10 105:7
estimates 79:15 110:18
et 78:3
evaluate 50:7
evaluated 85:7
event 77:1
everybody 13:20
everybody's 57:5
evolution 154:6
ex 80:25
exact 6:14 34:11 70:3 117:19
exactly 19:10 19:16 26:16 39:11,13 43:8 76:10 78:18 119:3 124:4 160:2
examination 5:2,3,3,4 9:10 154:14 157:9 166:14
examined 8:10
example 33:21 33:23 40:10 48:14 49:18 50:11 54:19 56:3 58:14,23 94:11 97:14 133:15 138:13 139:5
examples 33:20
exceed 71:14 90:22
exceeding 87:16
excess 89:10,19 90:18 91:8,16
excited 114:12
excluded 54:14 54:21 161:17
excludes 54:17
excuse 10:21 16:13 31:17 73:12 79:8,11 88:10 105:11 111:11 115:6 117:25 123:24 143:10 160:15 166:13,17
execute 171:12
exhibit 5:7,8,9 5:11,13,15 16:3,8,9,11,12 16:17,18,22,23 17:1 20:18,22 38:2 67:10,13 102:2
exhibits 5:6 6:13 15:16,18 15:25 17:4
existed 10:25 155:15
exists 46:25
expand 58:13 155:19 156:25 163:20
expanded 57:13 58:1,5,6
expect 33:25 91:18 104:24 115:22 156:12
expected 34:8 39:20 48:17 80:22 111:24 114:2 122:14 123:16 126:11 127:1 128:21 130:15
expedited 89:18 91:6
expenditure 76:2 98:7 118:12 120:10

expenditures 79:13,14,19 80:17,22 81:9 81:17 83:11 85:6,8,15 87:7 88:1 90:21,23 93:20,22 94:1 94:6 97:9,15 98:16 103:12 108:17 114:17 115:14 116:25 118:3,15 122:15 124:3,5
experience 24:12 25:5,22 31:11 44:7 50:10 54:7 58:9 61:7 66:12 94:5 96:18 97:11,22 98:5 131:24 132:1 134:20 136:3,5 141:22 147:18 148:2 148:20 149:1,7 151:5 155:21 156:8,10,14,21 158:14 160:19 161:19 162:16 163:18,21 164:6,24 165:3
experienced 157:3 159:14
expert 11:17,22 12:8 16:6 18:21 19:5,14 19:17 38:14 39:18 147:8 162:21
expertise 39:24 53:22 56:8 159:22 160:24 161:9
expires 169:15
explain 45:16 46:22 56:21 68:24 74:21 75:23 76:10 78:15 92:9
exposure 65:25
expound 49:24
ext 2:8
extensive 21:23
extent 36:16 37:5 47:3 54:20 59:24 84:9 111:6 129:15
extractions 140:25
extrapolated 125:6
eyes 21:1

f

f 1:9 2:11
faces 73:8 86:16
facilities 40:21
facility 103:25
facing 71:10 86:13
fact 51:11 53:10 80:16 128:16 134:7 157:22
factor 128:16
factors 83:10 128:11
facts 20:4
factual 71:21
fair 48:11 107:2,5 120:14 153:22 155:14 156:8,15
fairly 87:4
fall 13:11 19:5 19:9 29:23 31:6 59:2 74:19 75:10,14 99:17 103:21 104:13 105:7 105:12 106:8 106:16 114:16 162:2
fallen 29:24
familiar 10:19 10:21,22 94:16 94:21 115:7 132:22 133:20 133:25
far 11:24 14:10 22:17 30:16 31:15 36:9 38:8 72:21 78:4 106:12 123:5 128:19 129:12 130:15 131:8,9 136:23 147:6 150:4 152:19 158:3 160:15,17,19 161:13,14
fault 33:14,18
favorite 168:8
feasible 143:24
feature 15:17 15:19,24 67:9
february 1:12 7:2 169:10 170:18 171:1,7 172:3
federal 4:7 18:6 18:9,13,15,22 19:3 32:17 56:9 59:4 72:19 107:14
federally 40:11
fee 18:22 22:25 23:3,6,18 25:1 28:14,23 29:13 30:13 32:21 33:3 53:13 55:7,11 64:18

64:21 138:12 139:18 155:8
feel 52:20 150:23
fell 160:8
ferret 142:3
fewer 47:4
figure 81:7 85:3,5 86:22 86:25 87:1 111:14,19
filed 7:14 11:4 11:9
fill 11:20
finance 40:25 92:15
financial 9:21 9:23 23:23 24:22 30:2 31:7 33:7,9 34:12,15 35:1 35:11,17 36:2 41:4 67:22 69:7 71:3,7,17 71:23 73:8 78:15 86:12,17 88:8,8 93:9,11 114:20 115:4 122:18 131:17 132:8 163:8,23
financially 7:21 71:12 127:13 170:15
financing 90:21 123:12
find 149:22 171:6
finding 33:19
findings 35:13 35:22
fine 101:12
finish 36:23 37:2 110:23
first 8:9 12:18 15:2 17:4 23:22 31:7 38:18 58:14 72:4 73:5 75:24 90:3 102:25 115:11 116:23 123:12 141:6 154:16
firsthand 129:9
fiscal 80:8 91:4 124:23
five 15:18,25 38:19 75:22,24 92:1 137:8,17 167:19
fix 77:3 158:7 158:12,23
fixed 77:14 94:18
flag 145:23
flagged 146:6
flatout 139:5 139:24
flexibility 59:25
florida 1:17 169:3,14 170:3
flow 35:4
flowing 48:24
focus 26:4 36:18
focused 24:3,24 25:25 68:16,20 130:8
follow 74:5 105:9 106:13
following 8:23 91:1 172:5
follows 8:10
foot 54:19
foregoing 172:2
foreseeable 87:17
form 57:19 104:6 107:11 131:19 135:6 143:15,16 147:15
format 104:12
formula 48:15 122:24
forsyth 4:13
forward 46:17 46:20,24 47:5 86:18 109:18
found 30:24 33:14 144:12 144:20
foundation 74:24 84:14 104:7 107:12 131:4 156:20
four 73:2,3 101:1 137:12
frankly 160:9
fraud 148:11 149:8
fraudulent 25:10 26:13 32:7
free 42:12 45:20 57:7
front 124:1
full 9:12 18:13 46:14,14 53:21 84:18 85:24
fully 10:2 103:14 111:8 138:11,21 143:4
function 32:5 33:22 47:13 49:15 152:8
functions 23:20 31:24 33:3 35:2,6 136:22
fund 45:18 46:24 48:5,7 48:18 69:9

71:7,10,15,17 75:21 76:6,14 77:19,19 78:9 78:16 79:5,11 79:19 80:7 81:8,16,25 82:4,11 83:1 83:10 85:14,24 86:11,16 93:12 100:1 108:23 108:23 110:24 110:25 111:11 111:23 112:8 112:12,22 114:11,18 115:17 116:19 121:24 122:7 122:17,19,24 123:13,23 124:3 126:1 128:2,25 129:2 130:11,11
funded 40:11 45:13,14,17,24 46:2 47:22 48:12,20 55:12 55:14,18,21 56:5 122:25 130:1,2,3,11
funding 29:18 46:21 47:6 48:23,24 86:5 88:14,24 89:4 89:9,11,18,19 89:21 90:1,3,4 90:19 91:1,8 91:10,14,17 116:21 119:23 121:24 122:9 123:5 128:2 130:8 134:8 157:23
funds 46:11 56:11 69:9 71:24 116:21 126:20 128:3 158:4
further 5:3,4 73:9 92:9 97:13 154:11 157:5,9 166:10 166:14 167:15 170:11
future 60:19 61:2 64:11,17 64:21,24 65:7 65:11 66:9,9 78:19 85:15 87:17 91:18,20 92:4,10,22 103:10,14 104:5 113:11 126:12 128:9 129:5,19 130:3 130:16 133:8 134:22 153:4,8 153:12,20 154:21,24 156:9,13,18,23 157:13 158:18 158:21 159:10
future's 154:9

g

g 56:16
gap 86:5
gary 4:11 13:22
gary.kurz 4:15
gears 116:21
gehrig's 58:17 58:20,25
general 10:22 12:1 31:10 36:19 48:1,13 48:13 50:5 54:6 89:11,19 90:18 91:8,16 107:5 123:2,6 128:7 130:18 144:3,12 149:5 149:5
generalize 96:3
generalized 20:11
generally 10:19 21:19 22:18 43:25 48:12,23 49:1 57:25 58:3 59:17,19 60:15 61:7 69:2 71:2,4 78:13 114:9 122:20,22 133:7 136:21 144:19
generated 90:4 90:5 115:15
georgetown 2:21
georgia 4:14
getting 79:24 166:18
gio 13:21
giovanni 3:4
giovanni.ant... 3:11
give 30:6 64:3 105:15 117:4 117:24 118:1 155:12
given 11:12 33:24 44:25 172:3
gives 68:21
giving 117:7
glossary 88:23
go 7:11 11:6 17:10,12 27:13 42:19 45:16 47:2,5 88:19 90:12 99:9 103:6 106:11 112:11 119:12 120:18 131:9 141:7,13 161:11

goal 148:7,8
god 159:16
goes 42:20 49:14 90:16 103:15 133:12
going 7:1 8:17 9:9 14:10 15:14,18,19 16:1 17:3,17 20:18,19 37:9 37:10,13,16 38:1 39:6 55:17 66:14,16 66:20,25 67:8 67:15 74:4 78:1 81:3 86:18 88:25 89:7 93:6 95:25 100:20 101:24 102:15 102:23 103:16 104:12 108:8 108:21 109:22 111:2 117:23 119:16 120:18 120:20 125:14 137:11 146:12 147:6 153:8 154:9,19 156:12 157:18 159:24
gold 150:16,19 150:23
golkow 7:19 171:13,22
gong 16:5
good 7:1 8:12 8:13 73:18 80:15 83:24 154:16
gotcha 89:9 119:4
gotten 80:8
governed 59:4 59:7,8
governing 144:1
government 10:24 11:21 18:7,9,16 32:22 46:1 48:10,25 55:19 55:21 56:9 107:14 123:14 128:4 133:21 145:6 163:15
gradual 93:14
graham 2:5
graph 124:10 126:15
great 8:18 9:8 101:16 166:9
greater 80:22
group 2:19 8:16 32:13,14 32:17 132:7,8
groups 24:23 34:25 58:14 131:18
growing 75:5 126:19
growth 92:6 105:11 106:15
guarantee 65:6 127:17 153:3 153:10 154:21 154:24
guaranteed 64:24
guess 84:22 97:19 154:8
guideline 26:19
guys 148:4

h

h 80:7
half 15:3 28:18 138:15 139:1
hand 50:8 169:9
handle 54:7
handled 136:16
handles 132:15
handling 136:7
happen 51:18 51:19 78:1,5 83:14 99:8 153:8 159:10
happening 51:11
happens 77:1
happy 37:14 39:3 88:15 124:19 135:19
hard 38:10 39:13,13 49:23 96:3 99:6 113:18 148:15 149:4
harder 142:18
hate 98:10
hazard 154:8
head 19:11 29:20 30:19 42:21,25 56:10 62:14 63:18 117:18 121:14 146:2 149:12
headwinds 71:11 86:17
health 4:3,6,12 40:12 41:8 55:5 56:1 74:12,20 75:7 75:12 99:18 103:21 105:4 105:17 111:5 118:10,24 121:19
healthcare 23:9 40:22,24 41:2 74:17 75:2,9 75:13 83:9 92:6 111:9,18

112:5 113:17
hear 8:5 12:25 13:2 17:7,8,9 46:5
heard 7:8 95:14 120:17
hearing 7:25
help 17:13 20:25 22:20 31:4 63:20,20 94:25 112:21 127:15 136:11 136:23 142:3,3
helped 22:18 38:23
helpful 88:16 88:19 151:1,5
helping 32:25 132:1
helps 36:14 40:20 41:5 50:8 63:8,10 140:14
hesitate 80:15
hh 169:14
hhs 12:23 144:2,11
hhs.gov 4:9,15
hi 45:16 71:7,9 71:10,17 75:21 76:6,8,14,17 77:19 78:8,16 79:5,10,13,19 81:8,25 83:10 85:6 86:11,16 86:22 87:2,16 93:12 100:1 108:22 109:25 110:24 111:11 111:23 112:8 112:12,21 114:11,15,16 114:18 116:19 121:24 122:19
high 82:23 83:1 145:8 167:6
higher 79:15 87:3,5,7,7 103:12 117:11 119:6 120:13 125:12,13,13 125:14
highest 116:25
highlight 74:4 85:2 86:21 87:11 89:3 93:20 114:14 118:2
highlighted 74:7 75:25 79:1,1 82:20 85:5 90:14 102:8 104:20 111:3
highlighting 85:22 90:11 92:2
highlights 21:22 68:21 69:22 71:6 78:22 89:25 108:19 130:23 131:7
highly 92:4,10 92:22
higlas 35:5
hillier 1:15 169:13 170:5 170:21 171:21
historical 46:25
historically 82:1
history 66:7 159:7
hit 33:23
hold 34:13,23 65:11 78:17 134:22
holds 48:10 78:19 113:12
home 40:22 41:8
honestly 39:10
hope 83:22
hospice 40:22 87:9
hospital 41:8 45:15 87:8 117:12
hospitalized 54:21
hospitals 40:21
hour 15:3 37:14 100:14 137:2,3
housed 45:5,6
how's 21:2
hpc 142:8
huh 6:7,8
hum 6:7
human 4:3,6,12
hunter 62:7

i

icd 142:9,9
idea 62:5 69:14 73:18
identification 134:23
identified 39:4 65:5 106:21 109:3 110:17 113:5 128:10 132:4 151:9
identify 26:13 26:20 27:11 31:4,12,12,13
identifying 24:3 28:6 31:24 104:4
ii.b1 119:24
ii.e1. 81:7
iii 38:14
iii.b5 85:5

iii.b5. 85:3
iii.b6 86:22,25 87:1
illness 49:7,14 53:2 161:15 167:9
illustrate 93:15
illustrates 103:11
illustrating 81:16
illustrative 102:8
imagine 62:17 108:2 132:12 139:11
imbalance 93:9 93:11
immediate 93:14 115:23
immediately 93:17,21 97:10
impact 73:11 73:12
impacts 87:9
implementati... 93:14
implemented 103:14
implication 126:15
impossible 150:9,10
improper 24:4 24:24 25:2,4,8 25:18 28:11,20 28:21 29:2,15 30:10,12,16 31:14 35:9 137:23 139:8 139:12,17 145:8,23,23 146:6 149:9,23
improve 167:9
inadequate 111:8
inappropriately 140:15,18
include 57:13 94:2 120:1,8,9 120:11 121:18
includes 108:22 109:25 118:9
including 9:1 24:3 25:1 35:2 60:11 118:12 121:17 137:23 171:13
inclusive 30:11 30:18
income 41:18 45:18 47:14 48:14 57:6 86:23 87:4,16 87:25 114:15 114:16 115:15 115:16,16 123:6,6 125:12 134:8
incomes 125:13
incorrectly 30:25 31:4
increase 34:7,7 77:11,11,13 98:1 105:10 106:5,14 126:12
increased 79:18 80:17,22 93:18 110:9 124:4 126:11
increases 124:5
increasing 124:12,13 158:15
increasingly 103:21
incurred 76:9 108:23 114:16
index 5:1 105:11 106:15
indicate 41:19 73:7 81:22 87:1 110:7 151:21 171:10
indicated 71:13 78:22 106:6 114:1 171:14
indicates 32:12 81:25 87:1 89:20 128:24
indicating 85:14
indirect 135:9 135:19
individual 55:3 56:22,24 58:21 61:15,19 64:12 65:8 127:18
individuals 10:24 15:7 20:9 23:8 42:13 46:12 47:8,16,18 56:17 57:7
inefficient 154:5
information 14:10 44:21 65:20 105:21 110:2 138:23 142:22 148:21
inherent 92:5
injury 49:6,14 53:2 161:16 167:10
inpatient 40:20 87:8
inputs 103:19
inspector 144:3 144:12
instance 147:2
insufficient 152:10

insurance 40:12 41:15 45:15 48:6 55:23,25 74:20 75:7,12 99:18 105:5,17 117:12 125:25
insured 102:19
insurers 74:14
integrity 24:3 24:15 25:25 26:4,20 31:9 31:23 32:4 36:13 137:23 143:2,9 146:25 148:17 150:22 151:10
intended 70:11 74:22
intent 70:16
interest 36:5 45:18 114:16 115:16 128:7
interested 7:22 170:15
interesting 45:13
intermediate 82:6,13 87:2 110:18
internally 36:1 136:16
internet 7:6
interpret 76:23
interpreting 22:13
interrupt 141:4
interruption 6:4
interview 142:1
intimately 26:6
intricately 80:25
introduction 14:18 68:15,20 69:22 70:4 103:9 130:23 131:6
introductory 108:19
inventory 13:24
investigation 142:1
investments 45:19
involve 33:5 63:23 93:23 147:23
involved 14:4 26:7 31:23 33:8 41:2 61:24 80:25 83:19 84:2 92:18 131:13 136:25
involves 27:7 132:11
irmaa 125:9
issue 77:16 104:4,25 106:24 116:9 139:24
issued 16:10,13 16:21 75:19 89:22 91:9,11 91:17
issues 100:2 121:2 139:4 145:9
issuing 90:17
item 49:4,12 50:5 52:25 54:13 167:8
items 41:6

j

january 16:14 41:20
jason 4:22
jenna 2:11
jfb 2:16
jfk 4:7
jill 4:5 13:21 101:9
jill.steinberg 4:9
job 1:18 9:20
joshua 3:5 13:22
joshua.g.carp... 3:12
judgment 51:1
june 32:13 34:11
justice 3:7 11:10 130:21 130:25

k

kaiser 22:11
kathleen 62:7
keep 21:13,14 21:17 25:13 42:22 43:1 93:11
key 6:2
kind 34:6 37:4 46:17,20 48:4 52:12 54:24 68:15,21 92:18 104:9
knew 54:11
know 11:9 13:20 19:16 20:7 22:15 26:11,16 28:10 29:18,21 30:20 37:3 42:20,22 43:1 45:3 46:23 47:5 49:25 50:6,22 55:18,21,22 59:1 61:14

62:7,11 63:16 66:15 69:15 70:2,15,17 72:8 73:16 77:23 80:21 81:14 88:17 89:20 94:5 97:12,18 100:8 109:16 112:17 112:25 113:11 113:13 114:12 114:25 123:6 129:22 138:8 138:17 139:1,1 140:1,2,11,12 141:24 149:8 153:18 155:10 158:23 160:9 162:1,4,24 163:4
knowing 165:1
knowledge 20:3,11,13 25:5 31:10 39:24 45:7 55:13 74:23 75:23 84:4 87:22 91:15 128:11 129:9 129:15,25 130:20 132:19 133:1 135:9,20 151:15,17,25 156:1,3,4
knowledgeable 161:22
known 29:10 40:14 52:18 66:8 159:7 162:17
knows 78:18
kurz 4:11

l

l 3:8
lamacchia 2:18
language 76:22 78:3 91:24 92:25 99:23 104:9 106:3,12 106:21 123:22
large 1:17 29:17 32:23 47:21 139:11 140:4
larger 120:10 121:16 139:17
larry 1:10 5:2,8 5:13 7:13 8:8 9:14 16:10 169:7 170:7 172:2,25
law 10:23 59:13,25 66:13 69:16 70:18 73:7 74:19 75:10,14 76:4 78:7,10,16 85:7 86:3 89:16 90:17 91:19 94:12,15 99:16 103:11 105:9 106:13 107:13 126:24
lawmakers 93:10
leadership 8:15 60:2 156:24
leading 32:16 156:20
left 37:4 101:17 134:14 137:6
legal 2:19
legislated 85:8
legislation 73:10,10 89:15 89:17 91:3,6 104:23
legislative 153:21
lejeune 1:4 7:14 8:16 10:20 11:1,10 14:2 18:10 20:5 38:15 39:19 61:13 62:10 65:16,25 66:1 68:7,13 69:24 70:7 130:21,24 171:3 172:4
length 121:23
lengthy 68:16
leslie 2:18
letter 16:13,13
letter.pdf 5:10
letters 134:17
level 23:22 34:4 34:19 65:7 104:23 105:22 138:5 146:10 163:25,25 164:10 167:6
levels 44:9 60:20 61:3 105:3,5 153:11 154:24
lien 63:15 132:21,24 133:13 135:15
liens 132:4,11 132:15 135:3,4 135:5,12 136:7
life 47:23
lifetime 159:15
likely 44:19 156:9,16
likewise 110:1
limit 97:24
limited 9:2 23:12 53:11,15
limitedly 53:4
line 81:20,22 85:9 124:11 172:7

lines 49:16 157:17
lists 108:22
litigation 1:4 7:14 8:16 10:20 11:15 12:13,19 14:2 18:10,19,23 19:22 20:1,5 21:12 38:15 39:19,24 61:13 61:16 62:10 64:4 65:17 66:1 68:7,13 70:7 131:3 135:5,10,20,25 135:25 152:25 171:3 172:4
litigations 69:24
little 17:10 21:1 28:19 37:12 38:6 46:8 66:19 78:12 103:3 118:11 118:11,17 120:9,13 159:25
lived 156:11 157:2
llamacchia 2:23
locality 96:2
located 10:5
long 14:25 31:22 36:8 42:14 85:20 86:3 88:2,8 93:9,11 105:1 106:7,24 114:21 115:6 155:2
longer 154:17
look 16:5 20:17 21:3,24 22:1 28:1 56:14 57:12 66:16 72:1,4 73:2 74:2 78:21 81:3 84:25 85:1,19 86:20 92:1 93:6 102:11 166:1,1
looked 14:17 24:1 125:24
looking 20:21 30:17 85:13 101:23 119:23 124:10 163:24 164:2,5,16,17 164:20
looks 21:24 22:24 39:3 106:20 112:3 120:8,9 124:10 124:10
lose 127:9
loss 133:22
lost 8:6
lot 36:10 116:19 140:6 147:19,24
lots 62:16
lou 58:16,20,25
loud 89:7 90:16 92:3
low 41:18 57:6 97:2
lower 77:11,12 77:13 87:10
lowest 95:8,13 95:15,20
lunch 101:5,7 101:14
luncheon 100:22

m

macro 163:25 164:10
madam 12:24
made 17:23 31:14 50:18 52:1 60:1 61:3 78:10 86:2 88:5 90:24 125:20 153:22 154:2 171:11
magnitude 93:15 150:9
main 2:6 10:7
maintain 88:7
maintained 86:3
maintaining 35:5
maintenance 55:5 56:1
majority 23:2
make 17:14 21:1 25:11 38:6 39:22 48:19 50:8 53:16 59:14,18 61:12 73:25 91:19 103:3 109:21 123:5 124:8 140:16 140:20 148:4,8 148:13,15,20 148:21 150:2 154:19 157:22 164:16 168:7 171:9,9 172:5
makes 59:21 73:20
making 24:19 50:25 51:9,14 60:1 66:8 92:18 113:23 159:8
malformed 49:15 161:16 167:10

managed 30:13 132:4 152:5,7 155:9
management 8:20 9:23 23:23 30:3 31:8 32:14 33:7,10 35:1 41:4 131:18 163:8
manages 43:18 141:1
managing 32:18,25 35:1 131:13
mandatory 96:6
manner 6:13
manual 151:10
manuals 164:20
margins 103:23 103:25
marked 16:8 16:11,17,22 17:1 67:10,13
market 171:22
marketplace 30:14
marks 171:9
maryland 10:7
massachussetts 4:8
material 35:22
materials 10:16 67:25
math 155:14
matter 7:13 47:13 48:1 73:21 80:16
matters 73:16
maximize 73:11
mean 11:19 19:17 23:16 30:8 43:1 46:24 49:23 50:4 51:8 54:15 56:19,19 56:22 58:4,8,8 58:9 69:3 74:25 75:1 77:8 79:16 80:3 81:14 94:4,7,8 97:5,6 101:11 104:9 107:25 114:8 114:22 115:13 117:8 121:13 130:7 133:6,7 134:3 138:9 141:8,25 143:13 147:19 147:23 148:20 148:24 149:3 152:15 154:1 160:18
meaning 34:17 73:20 75:12 76:18 79:24 112:5 114:17 138:19 139:19
means 9:1 10:13 19:18,21 80:3,5 112:14 115:5 134:12 148:23 150:1
meant 25:25 31:17 88:10 135:15
measure 29:15
measurement 30:10
measures 150:2
measuring 24:24 30:12 35:8
media 7:12 37:17,22 67:1 67:6 100:21 101:1 137:12 137:17 167:19
medicaid 30:14 57:9 104:2 127:14,15 162:12
medical 23:22 24:1,17 25:14 25:19 26:12,20 27:5,6,7,8,13 27:14,16 28:1 28:7 41:9 48:6 49:19 50:13,13 50:15,16 51:1 95:6 101:18 104:5 138:21 138:22 139:20 139:22 140:13 140:19,24 141:9,14,19 142:7,14 143:18,22 145:14,15,21 148:6,23,25 149:1 150:18 151:7,11,20,22 152:5,8,18
medically 49:12,21 50:2 51:6 52:17 148:9 161:14 167:8
medicare 9:18 9:18 11:25 20:11 22:13,18 22:19,21,25 23:3,6,8,10,18 23:19,21 24:5 25:1,5 26:11 26:19,21,25 28:14,23 30:13 31:5 32:1,14 32:18 33:6,9 35:7 36:21 37:8 40:3,7,8

40:11,14,15,17
40:20,24 42:1
42:9,12,22
43:19,23 44:22
45:6,12,19,23
46:19,21 48:21
49:4,25 50:11
51:1,8,24
52:10,16 53:13
53:16 54:1,24
55:3,4,7,12
56:16,19 57:9
57:13 58:21
59:4,7,15
60:11,19,23
61:2 62:24,25
63:11,12,22
64:11,17,20,24
65:7,12,15,24
66:8,9 67:21
69:5,10 71:24
72:14 73:8
74:18 75:2,5
75:10,13 76:20
77:5 81:11
84:9 88:14,24
89:4,9,11,17,19
89:21 90:19,25
91:8,10,14,17
91:20 95:7,14
95:20 96:5,11
96:15,21 97:1
97:14,16 99:2
99:4,16 101:19
102:18 103:10
103:12,24
104:1,2,5,11,15
104:24 105:3,5
105:8,10,11,12
105:16,24
106:15,16,23
107:9 108:6,17
109:23 111:5
116:20,22,22
125:5 127:14
127:16,17
132:9 134:15
136:22 137:24
144:2,7,13,21
145:1,7 146:16
146:17 149:20
151:14,23
153:3,17
154:21,25
155:6,7,8,9,10
155:15,19
156:1,4,9,15,16
157:14 159:7
159:11,22
162:5,12 163:5
165:17 166:17
167:5
medicare's 36:8 47:21 71:2 90:20 92:4,9,21 103:20 153:20
medicares 41:22
medicine 78:3 154:4,6
meet 14:19 34:4 50:4 114:19 151:13
meeting 15:1,2 15:3 33:15 51:10
meetings 13:14
member 49:16 161:16 167:10
memory 88:17
menial 160:11
mention 90:2
mentioned 23:25 127:12
messaging 9:2
met 14:22
methodologies 60:13
methods 134:16
metrics 33:16 34:4
micro 163:25 164:10
millions 149:14 149:16
mind 20:17 37:11 85:1 89:8 100:15
minimize 73:12
minimum 125:19
minus 85:15
minute 22:16 146:24 147:13 149:3 150:21
minutes 15:4 121:8 137:8
miscoding 25:19 139:5,13 139:24 140:8 141:18 142:6 142:16 145:2 148:11
misstates 161:2
mistakes 25:11
modifiers 147:21
moment 21:2 43:10 60:5 61:10 71:23 120:19
money 132:25 133:2,11,16 134:4 149:8
month 19:10 124:17 125:7 155:13
monthly 56:18 57:1 110:16
morning 7:1 8:12,13 137:21

move 80:4,19
moved 79:17
moving 122:6
msp 63:1,21

n

n 1:8 2:6
n.w. 3:8
name 8:14 9:12 60:9 62:23
names 13:24
narrative 14:13 70:9 82:16,19 161:13
narrow 53:12
narrowing 97:15 98:6
near 91:18
nearing 93:24
necessarily 6:14 24:21 33:25 36:16 37:3 47:3 52:12 55:15 61:4 72:9 83:14 95:17 97:21 98:12 99:12 109:16 128:17 129:11 161:18
necessary 49:5 49:9,13,21 50:3,18 51:6 52:1,17 53:1 54:2 122:2 126:20 148:9 151:13 161:15 167:9,9
necessity 145:15
need 91:18 143:21 157:22
needed 53:17 93:15 112:18
needing 123:5
needs 36:2 73:9
negative 6:8 85:16 103:23 104:14
negotiated 74:15
neither 102:16 102:17
never 111:10 112:11
new 60:8
nine 68:4 72:5
ninth 91:7,15
nod 5:8
non 19:14,17 19:20 104:2,2 114:16 115:16 130:12
north 1:1 2:7 2:14 7:16 20:6 20:10
notary 1:16 169:14
note 6:13 7:4 9:5 12:20 78:14 147:5
noted 8:1 85:23 115:25 171:10 171:10
notes 170:9
notice 16:10,19 68:5 116:9
novak 4:22
nuance 146:10
nuances 132:19 146:2
number 7:12 25:9 30:4 37:17,22 50:14 67:1,6 72:2,5 73:4 75:25 77:3,14 81:4 85:2 86:21 89:2 93:8 100:21 101:1 103:1 104:19 108:13 117:25 121:18 137:12 137:17 138:16 139:14 167:19
numbers 16:24 67:11 90:9 109:7 118:12 118:21 119:5 120:12 140:4
nurse 27:15 50:7
nurses 50:14
nursing 40:21

o

o 1:8,8,8,9
oath 5:4 7:20 169:1
object 31:18 39:6 88:11 104:6 107:11 135:6
objection 11:5 12:10 19:6,15 19:23 20:12 21:18 22:2,5,9 24:10 25:6,20 26:2,14,22 27:20 28:4,12 28:16 29:4,11 29:19 32:2 35:15 36:22 40:5 43:7,14 43:24 44:6,23 45:2,8 47:11 47:25 50:21 51:7,21 52:3 52:19 53:6,19 54:4 56:6 58:7 59:6,16,22 60:14,21,24 61:5 62:13 63:6,17 64:6 64:13,19 65:1 65:9,18 66:2

66:10 68:8
69:1,13 70:1
70:14,22 71:18
73:15,23 74:24
75:15 76:1,21
77:7,22 78:11
79:20 80:2,9
80:13,23 81:13
81:23 82:7,14
83:4,18 84:1
84:12,21 85:11
86:7,14 87:18
87:23 89:23
90:15 91:21
92:11,23 94:3
95:10,22 96:8
96:17 97:4,17
98:9,17,23
99:5,21 100:5
105:19 106:10
107:3,23 109:4
109:14 110:4
110:13,20
111:20 112:9
112:23 113:9
114:7,24
115:12 116:1,6
116:14 117:2,6
117:16 118:6
120:15 122:3
122:11,21
123:20 124:7
126:2,13,22
127:20,23
128:5,12 129:3
129:7,17,21
130:6 131:4,15
132:17 133:4
133:23 134:25
135:11,21
136:9,18 138:7
139:15 140:10
141:2,20
142:10,17,24
143:3,11 144:4
144:8,15,22
145:3,10,17,25
146:8,20 147:4
147:17 148:18
149:10,15,25
150:12,20
151:3,16 152:1
152:12 153:5
153:13,24
156:19 157:15
158:1,9,25
159:12,23
160:14 161:2
161:10 162:3
162:10,23
163:3,9,16
164:4,11,18,22
165:7,14 166:8
166:24
objections 7:23
7:25 16:20
objections.pdf
5:12
obligation
85:21,25
observed
155:19
obviously
160:10
occupational
41:7
occur 9:2 34:2
53:3 76:7,15
78:9 82:23
83:2 115:23
occurred 19:5
89:11
occurring
113:8
odd 30:21
offer 55:6,8
61:12,18
offering 64:16
65:14,23
offerings 77:5
office 9:22 10:7
24:14,23 30:2
30:9 31:7
92:16 115:2
128:14 131:17
144:2,11 145:7
officer 9:22
22:18 34:13,16
officer's 24:23
officers 50:13
official 169:9
offset 47:2
87:10 133:1,8
133:8,20
134:14 135:15
offsets 64:4,8
131:2,8,13,19
132:2,15,19,20
134:20 135:9
135:13,14,20
135:24 136:14
136:19,24
ogc 12:23
oh 17:8 29:12
37:1 46:6
68:17 72:4
118:25 121:12
155:7
oig 144:3,25
okay 17:16
29:7 34:22
54:11 62:7,9
66:21,23 73:2
74:10 81:19
84:16 85:4
88:18 93:3
100:10 101:9
101:16 102:12
103:7 108:4,21
109:21 110:23
111:13 114:11
114:13 115:10
115:19 116:18
119:5,11 121:6
121:22 129:25

155:14 156:7 157:4 161:8 163:13 166:2,9 167:14 168:3 168:14
old 21:1
omitted 6:6
ongoing 84:10 111:7
oops 20:23 85:4 103:4
operating 49:10
operations 33:2 33:6,10,15
opine 152:14
opining 152:25
opinion 64:4,16 159:9
opinions 11:23 61:12,19 65:5 65:14,23 68:1 70:6
opportunities 141:25
opportunity 58:16
opposed 136:16 163:25
opted 42:1
option 98:7
optional 96:6
options 93:10 98:11 100:7
oral 70:10
order 8:21 35:13 49:11 88:5,7 115:23 143:8 167:25
orders 167:22
org 166:1,6
organization 32:6 55:6 164:25
organizations 56:1,2
original 23:8 40:8,15 49:4 55:7,11
orthotics 41:10
ortiz 3:6
outcome 7:22
outline 161:19
outlined 49:10
outlook 122:18
outpace 115:15
outpaced 87:25
outpatient 40:22 41:8
outside 14:19 35:4 52:15 146:19
outsourced 136:17
outsources 136:6
overall 59:23 71:2 104:8
overpayment 134:16,17,21 136:15
overpayments 35:7 131:20 132:21 134:7 134:11,23
oversee 34:25 144:2,7
overseeing 33:6 33:9 131:13
oversight 31:24 138:3
oversimplific... 78:13
overview 68:22
owe 133:10
owed 131:20 134:3,11
own 74:21 152:16
owned 152:17
oz 60:6

p

p 1:8
p.a. 2:12
p.m. 1:13 100:22,23 137:13,14 168:17
pa 171:23
page 5:1 14:15 38:10,13,19
72:2,5,7 73:2,3 74:2 75:22,24 78:21 81:4 85:1,5 86:20 89:1 90:8 92:1 93:6 103:1 104:18,18 108:9,12,22 110:3 111:1 117:23 119:25 123:11 124:15 124:17 172:7
pages 39:5 108:21 109:23 172:2
paid 18:15,21 23:13,13 30:24 42:24 43:5,12 44:25 48:7,8 56:8 65:24 74:14 84:19 95:3 99:2 101:19 105:25 107:1 108:5 125:4
paragraph 45:11 49:3 68:4 70:3 73:5 74:10,22 75:24 83:7 90:11 92:2 102:24,25 103:17 114:13 123:12

parameters 164:15
parse 118:17
part 21:23 25:24 26:24 27:1,2,6 32:23 35:18 39:1,2 39:11 40:20 41:5,14,23 42:7,9,12,15,15 42:19,20,21 44:14,14,14,18 45:14,19,23 46:2 47:8,17 47:21 48:4,20 49:18 55:1,3 55:12,12,14,21 56:5,16,16,17 56:20,23,23,24 56:25 57:3,5,6 57:7,11,14,15 57:18 58:5,12 59:2 76:20 77:5 81:12 84:6 92:15 93:19 102:9 108:6,6,6 110:8 111:6 116:20,22,22 117:1,1,1,8,12 117:13,15,18 117:20 118:3,4 118:4,10,13,15 118:16,20,24 120:1,6,8,9,10 120:11,13 121:10,10,12 121:13,17,17 121:18,24 122:7,8 123:15 123:15 124:3,6 124:6,16,24 125:5 126:1,4 126:5,20,21 127:4,4,18 128:9 129:25 130:9,9,9,10 131:16 139:2 140:12 148:11 157:23 159:3 160:10
partially 87:9 96:14 139:22
participants 7:7
participate 96:11,20 107:16
participating 104:24 106:23
participation 107:10,19
particular 20:14 51:25
particularly 74:16
parties 7:10 8:25 9:3 133:17 170:13 170:14
partook 24:14
parts 26:24 39:11,14 40:14 45:12 69:10,24 79:1 96:1 116:22 119:23
party 7:21 11:14 20:14
passed 10:23
past 12:23 108:19 129:19
patience 154:18
patient 43:5 112:5
patient's 50:19 50:23
patients 99:4
patterns 154:4
pay 40:20 41:6 42:4,6,14 43:2 43:5,22 46:14 46:17,20,24 57:5 64:11 84:9 95:13 111:5 117:8 122:1 125:14 125:20,20 127:7,11,15 134:23 146:18 148:16 151:22 158:22
payer 63:1,11 63:13,22 102:20 132:9
payers 104:2 106:8
paying 43:3 45:25 46:18 47:4,8 48:22 56:18 57:1,5 93:23 94:23 112:18 124:24 133:21 134:5 140:2
payment 23:21 24:5,24 26:21 28:11,21 29:15 30:10,12,16 35:8,9 49:25 54:8,8 60:13 61:3 64:21 65:7 76:5 87:10 94:11 96:5,22 103:10 103:13 104:11 105:3,5 107:21 133:8 137:24 139:18 145:23 145:24 146:7
payments 23:11 24:4 25:2,4,8,18 29:2 31:14 35:3 94:14,18 103:20 126:1

128:22 134:22 136:25 137:23 139:9,12 145:9
payout 48:18
payouts 47:2 94:6 121:15 130:16
payroll 45:17 45:25 46:2,3 46:12,25 47:4 47:9,14 48:7 93:17 121:25 122:1 130:12
payrolls 113:16
pays 42:15 46:13 57:11 95:7,15
people 23:7 30:8,21 36:4 41:2 42:3 43:2 47:12,22 58:16 122:1 123:7 127:12 138:19 142:1
percent 28:18 28:19,20,22 29:1 46:3,9,12 46:13 48:17,19 48:22,23 76:9 76:18,19 90:22 93:17,19,21 94:1,14 95:4 97:10 105:4,6 105:7,12,25 106:1,9,17 111:14,19,24 122:9,14 127:1 128:2,21 129:13 138:15 139:1,8
percentage 81:9,17 94:18 95:3 102:18 117:11 121:16 138:17 139:17
percentages 45:25 117:20 140:3
perform 23:19 113:16 114:2 149:23
performance 24:15 33:1,1 33:16 34:4
performing 50:16
period 22:11 33:25 79:14,19 80:17 85:24 86:4 93:13 105:14 106:18 122:2
periodically 21:20
periods 94:12 134:6
permanente 22:11
persistent 145:8
person 13:14 134:24 162:25
person's 46:3
personal 20:3 136:3,5 164:6
personally 11:9 109:6
persons 29:18 30:5 40:13
perspective 114:23
phase 38:14
philadelphia 171:23
phone 13:13
physical 41:7
physically 10:5
physician 27:16 50:7,25 74:17 105:3 107:15 108:1 142:7
physicians 104:25 106:4 106:23
picked 55:1
piece 41:4 68:15 117:15
pinellas 169:4 170:4
place 1:14 7:10 52:7 149:21 162:4 171:13
plain 92:25 99:23 106:11 106:21
plaintiff 8:15 54:11 61:19 168:1
plaintiff's 67:24
plaintiffs 1:11 2:3 20:4 61:15 61:22 64:12 65:16 66:1
plan 55:4 57:16 121:19
plans 33:12,17 111:5 118:10 118:24
play 113:1
please 7:4,23 9:12,20 13:18 21:8 23:5 24:9 39:7 49:9 59:21 68:18 73:6 74:11 79:2 82:21 89:5 90:14 92:3 102:1 103:3,17 104:21 108:11 114:23 119:13 120:19 121:5,5 125:2 156:19 168:4,13 171:9

171:10,12
pleasure 21:2
point 10:25 51:15 70:2 76:8,14,16 77:20 90:10 113:22 138:25 140:4 146:12 163:5
points 83:7
policy 22:13 59:15,18,23 60:1 142:21 143:7 153:21 154:2 157:13 159:20 164:20
policymakers 36:20 70:12
political 60:2,7 156:24
population 158:16
portion 122:25 130:22 133:16 138:22
portions 44:18 104:1
portrayal 71:21
posit 95:24
position 22:14 32:15 71:7,17 80:21 94:13 95:12 122:19 122:23 145:13 146:17 165:12
positioned 166:19
positions 24:2 164:7,24
positive 103:25
poss 153:15
possibilities 84:17
possibility 97:6 98:25 99:19 100:1,3 106:22 153:15
possible 75:12 75:16 84:23 97:19 98:18 127:10 153:7
possibly 99:7
post 54:8
potential 93:13 98:7 104:4 113:2 133:15 134:8 139:4
potentially 86:12 140:11
ppo 56:2
practical 27:10 141:11 143:23
practice 78:2 154:4
practices 26:13
pre 52:15 53:4 53:15,16 54:8
precise 30:7
precisely 123:9
predict 153:18 154:3 157:12 157:18 159:4
predictably 80:8
predicting 64:17
premarked 15:19
premium 41:17 42:4,7,8,12,14 42:15 43:15 45:20 48:16 56:18 57:2,5,7 57:11,19 109:24,25 123:1,3 124:16 124:21 129:10
premium's 122:13
premiums 42:1 42:16,23 43:2 43:4,5,9,12,20 43:22 45:19 48:8,15,22 57:10 100:4 108:5 110:16 112:19 121:25 122:10 123:14 124:4,12,25 125:4,14,20 126:10,19,19 126:23 127:8 127:11,15 128:9,17 129:1 129:5,19,20 130:12,16
preparation 78:23
prepare 14:7 14:12,20,23 15:10,13 21:10 21:12,14 33:11 35:13 38:23 109:15 115:3
prepared 63:25 69:4 70:20 72:7,10 109:10 109:11
prepares 68:25 69:3
preparing 14:4 61:24 62:4
prescribed 105:9 106:13
prescription 41:15 57:15 155:24
present 4:21 85:5,14,25 110:18
president 59:13 73:1 89:13 91:2
pressure 104:14

pretty 40:2 94:7
prevent 133:21
previous 13:8
previously 61:22 62:9 67:9 85:23 136:15 154:20 154:23
primarily 23:20 43:17 45:17,24 59:8 68:14 79:12 87:6
primary 63:12 141:22 142:5 145:14 161:13 167:7
principle 49:10 161:14 167:7
prior 52:8,11 53:8,9,11 86:23 161:2
prioritizing 24:18
private 18:18 55:22,24 74:20 75:7,12 99:18 105:2,4,6,8,10 105:13,17,25 106:8,14,17 118:23
privy 65:19 99:10
prob 13:19
probably 23:7 47:9 55:16 138:11 165:11
problem 31:19 38:11 79:24 121:6 125:3 158:8,12,24
procedure 147:21
proceed 8:3 17:21 37:23 67:6 101:2 119:20 120:25 137:18
proceeding 7:23 9:4
process 24:8 27:6,19 28:6 36:13 52:15 53:4,18 74:15
processes 23:11
processing 23:21 33:22 34:2
produced 35:20 67:23
production 5:10
productivity 34:8
program 11:25 23:3,6,8,16,18 24:3,15 25:25 26:4,20,25 28:15,23 29:7 29:10,12,13,17 30:5,10,11,23 31:1,3,8,14,23 32:4 33:3 35:8 35:8 36:10,15 36:17 37:8 40:3,8,11 41:14 45:6,12 46:17,24 51:1 53:13 55:8,11 57:22 58:9,12 63:1,5,12 64:25 65:12 69:5 75:2 76:9 76:18 77:6 78:10 84:19 86:2 88:6 96:11,21 97:14 100:4 107:16 118:3 121:13 125:24 127:16 127:19 131:21 134:15 137:22 140:2 143:1,8 145:8 146:25 148:5,6,7,12,17 150:8,22 151:9 152:6 154:21 154:25 155:11 155:22,25 156:5,12,22 157:14,23 160:19 163:21 164:3,8
program's 51:9
programs 24:25 32:7 35:10 41:23,25 42:2 44:4 52:7 52:13 55:24 67:21 108:6 117:5 121:10 148:3 149:21 149:24 156:16 164:17
project 114:15 153:8
projected 76:7 76:8,15 79:12 79:13,15 82:2 85:25 87:4,8 90:18,22 114:5 134:6
projecting 91:24 92:6,17
projection 83:10 92:19 93:13 105:13
projections 69:8 71:22 73:5,7 76:3 77:25 83:17,25 86:23 87:2,6 102:9 106:5 107:1 113:13 113:25 131:1

prompt 171:15
prompting 116:8
propensity 155:22
proposed 89:15 89:17 91:2
prosthetics 41:9 49:18
protocol 147:2
provide 12:6,7 16:15 19:9 36:10 37:6 39:20 40:6 54:18 55:9,10 75:4 96:23 104:14 138:20 154:7
provided 16:24 38:3 50:19 51:12 61:23 69:16 70:9 105:20 108:9 138:21 143:18 160:23 161:9 165:12
provider 23:12 23:14 27:3,14 33:24 34:3 50:25 74:13 94:24 95:3,6 95:19 96:10,19 97:1 102:18 104:5 107:19 112:20 133:9,9 136:24 143:14 146:15 149:21 158:22
providers 23:9 25:10,11,13,19 52:8 56:2 73:13 75:2 93:23 95:8,14 96:5,14 97:13 99:2 101:19 103:18,22,22 104:13 105:16 105:25 107:8 111:5 113:17 131:20 134:5 142:2
provides 23:11 35:18 36:16 37:7 41:14,17 105:2
providing 11:25 41:2
provisions 76:4 103:13
proviso 136:21
public 1:16 36:4,5,19 73:1 86:13 169:14
publication 151:10
pull 37:10
punctuation 6:2
purpose 78:8 133:20
pursue 134:15
purview 29:24 158:6,11
put 20:19 22:15 67:15 84:5 104:14 109:18 134:22
putting 83:20 116:8

q

quality 7:5,6 74:17 75:9,13 99:3,8,15
quarters 42:10
question 6:3 13:8 18:2 31:18 36:24 39:9 52:21 82:9 88:11 95:25 110:2 111:13 114:11 116:3 121:3 125:1 133:3,6 143:5 146:22 147:9 150:7 159:25 162:15 162:18 166:3 166:19,22 167:1,2
questionable 50:9
questioning 147:6
questions 110:24 130:18 154:11 157:5 166:10 167:15
quick 17:14 154:19
quickly 38:9 80:18 85:13
quite 102:17 160:8
quotations 6:13
quote 6:14

r

r 31:3
racine 2:13
racs 31:3,4,6 148:5
ran 55:22
range 35:1 62:2 79:4,14,18 93:9,11 114:20 114:21 115:4,6
rank 117:1
rapidly 111:9 111:18 112:6
rate 28:11,21 29:8,9 30:10 30:12,16 86:23 87:2 106:7 138:13 139:18 148:5

rates 24:24 29:15 31:12 35:9 64:17,21 74:14 85:8 87:4 95:8,13 95:15 97:1 99:9 103:11 104:5,11 105:2 105:5,6,8,8,10 105:12,13,18 105:22,25 106:14,16,17 106:25 112:20 114:2
rather 73:11 79:25
ratio 82:5,12
reach 86:5
read 6:14 8:23 13:7 14:17 62:6 70:3 73:3 73:4 74:10 75:23 78:25 79:22 82:20 86:9 87:12 88:25 89:4 90:13 92:3 99:14 102:22 103:16 104:3 104:20 107:2 111:2 114:14 115:13 123:19 130:22 131:6,7 165:2 172:2
reading 82:15 86:6 102:25 107:4 130:24 168:15 171:12
reads 103:8 111:4
really 17:24 49:24 53:20 54:9 61:13 65:20 114:25 134:21 141:18 148:14,14 150:23 152:14 152:16,21 154:8
reason 10:1 92:21,24 108:25 109:2,6 109:17 110:1 141:12,13 172:7
reasonable 49:5,8,12,21 50:2,3,17 51:6 51:25 53:1 54:2 148:10 151:13 156:11 161:15 167:8
reasonably 52:17 156:8,16 158:17
reasons 25:9 92:5 106:25
recall 12:20 13:19 28:17 33:19 39:10 42:21 43:16 56:10 58:19 63:19 71:8 89:24 102:15 108:4 117:17 117:19 120:2 121:3 125:14 130:24 146:1 160:6
receipts 123:1 123:2
receive 23:8 27:8,9,10 52:8 52:11,11 75:6 75:7 141:9,11
received 12:20 74:18,20 75:9 75:11,13 99:15 99:17 102:19
receiving 23:20 47:13
recent 121:14 138:16
recess 37:18 67:2 100:22 137:13
recipient 42:1 70:11 127:7
recipient's 97:15
recognize 21:5 38:4,7 62:20 62:23 67:17
recognized 31:23
recollection 44:8 55:13 66:13 156:3
recommendat... 68:22
reconfigure 66:20
record 6:14 7:2 7:11 8:1,22,24 9:4,13 10:4 16:2 17:17,18 17:20 23:22 24:1 27:5,16 37:16,21 43:3 62:1 66:25 67:5 100:20,25 101:5 102:1 103:1 104:18 108:11 119:12 119:16,17,19 120:21,22,24 137:11,16 138:21,22 139:22,23 140:13,19 142:7,14 145:14,21 147:5 148:6,23 151:7,21,22

152:5,8 156:20 170:9
recorded 7:9
recording 7:5,9
records 25:15 26:12,20 27:7 27:9,13,14 28:1,8 139:20 140:24 141:9 141:14,19 143:19 148:25 150:18
recover 31:13 134:3,10
recovered 132:25
recoveries 136:11
recovery 30:22 31:2 62:24 63:9 136:8,24 149:1
recurring 145:1
redirect 157:8
reduce 98:16 103:19
reduced 93:20 93:22 97:10,15 98:7 111:9,19 112:6
reduces 95:2
reducing 31:25 93:24 94:1,6 97:12 98:15
reduction 76:3 112:19
reductions 76:5
refer 23:7
reference 16:16
referenced 20:15
references 6:3 6:5,7,8
referring 29:9 62:1 135:12
reflect 76:3 102:2 108:12
reflected 6:13
reflects 85:20 126:10
refrain 80:14
refresh 88:16
regard 26:19 31:24 128:25 159:10
regarding 12:18 103:10 160:11
regional 24:14
regular 19:3
regularly 35:12 35:14
regulations 22:21 24:20 165:2
reimburse 111:24
reimbursed 31:15
reimbursement 60:20 64:17 74:14 95:7,20 99:9 102:18,19 105:22 106:7 153:11 154:24
rel 80:25
related 7:20 20:9 25:18 65:24 68:12 104:5 111:19 111:21 130:24 136:15 139:19 159:9 165:5
relatedness 152:11
relates 1:5 143:1 157:13 159:20 161:22
relative 118:15 170:11,13
reliability 110:2
reliable 36:14 109:19
relied 67:25 68:12 69:21
relies 36:2 121:25
rely 69:22 143:19
remain 112:22 114:5 127:18 153:3,11
remained 103:25
remaining 34:25
remember 12:13 55:17 62:15 101:20 111:15 124:17 124:20 146:3 155:13 157:25 158:2 160:7,12 162:18
remote 1:14
remotely 169:7
renal 40:13 59:1
rendered 145:15
repeat 13:5 82:8
repeats 38:17
rephrase 121:4 121:5
report 12:8 14:12,14 15:10 35:12,13,14,17 35:19,23 36:4 66:17 67:10,20 69:6,7 70:18 71:2,9,13,16 72:16 75:19

76:7 78:4,8 79:25 80:1 81:4 84:3,8 87:3,3,4,5 89:1 89:20 90:19 93:1 99:20,24 102:3,7,10,13 103:1,15 106:6 108:9,15 109:3 109:10,16 111:2 113:5 114:1,6 115:3 115:25 116:8 117:24 120:8 122:19 123:10 123:24 124:9 124:15 126:10 130:19 131:2 131:10 158:3 170:6
reporter 1:16 8:2 12:24 13:7 15:17,25
reporter's 5:5 6:2
reporting 7:19
reports 132:8 144:12
represent 7:18 38:12 39:18
representation 120:14 143:17
represented 159:14
representing 29:2
represents 123:22 139:8
request 27:13 28:7 67:24
requested 170:8
require 50:12 52:7 54:20 107:15 113:6 114:4 143:8 146:18
required 25:14 69:6,16 70:18 72:21,23 76:4 90:17 94:12 126:24,25
requirement 26:18 49:9 128:20
requirements 34:10 94:15 151:14,21,24 158:16
requires 8:21 89:12,16 91:1 107:8 139:10 142:22
requisite 122:2
reread 14:9
resolution 63:15
resolved 113:7
resource 143:24
respect 19:25 65:12 74:16 78:2 86:17 105:21 111:15 111:22 112:8 113:15 131:8 133:7 153:16 163:19
respects 172:24
respond 89:15 91:3
response 16:19 67:24 89:17
responses 5:11 16:20 68:4
responsibilities 26:5 34:23
responsible 34:25 54:1 72:12
result 76:6 87:6 90:1 103:12 112:4 132:25
results 79:4
resumé 21:9,22 22:24 24:2 32:12 34:12 37:9
retained 19:14 19:17,20
retainer 18:18 19:21,25
retirees 46:19
retirement 47:23,24
return 171:13
revenue 89:11 89:19 90:19 91:8,17 123:2
revenues 48:10 48:14,19 76:8 76:17 77:12,12 77:13,13 83:11 84:10 87:25 111:7,7 113:16 124:12 128:7 130:13
review 21:24 24:17,17 26:5 26:12 27:6,15 38:25 50:16 51:5,18 108:16 141:12 142:7 143:22 146:19 147:3 148:25 149:1 151:11 152:6,8 170:7
reviewed 14:11 15:10,12 29:1 39:1,14 53:5,8 53:9,11 67:25 68:6,14 78:23 102:10 144:11 144:16 158:3

reviewing 26:19 89:24
reviews 23:23 24:1,16 30:16
ridge 2:20
right 9:8 14:15 14:16 15:14,23 21:5,22 22:8 29:5 32:9 45:21 46:1 47:10 48:4 49:2 52:24 56:14 57:12 61:9 66:14 71:5 77:21 78:25 79:7 81:3,6 82:19 88:22,25 90:7 95:1 101:4,14 101:17,23 102:15,22 103:15 104:17 119:1 120:18 122:6,17 124:22 125:8 125:16,23 127:5 133:14 137:25 138:14 150:24 152:3 154:10,21,25 155:16,20 157:14 166:6 166:20
risk 145:8
risks 31:23 96:25 145:2
rmr 1:15 169:13 170:5 170:21 171:21
rn 142:6
role 22:17 32:9 33:5,8,11 34:13,23 36:7 40:24 59:14 62:3 63:15 92:8,15,20 149:7 151:15 151:18 157:12
roles 32:15 152:6
rolled 118:20
room 10:8 51:13
rough 168:2,12
roughly 105:4
routine 54:18
rules 22:21 50:20 54:1 60:12
run 31:8 55:24 63:22 85:16
running 33:2 35:7 36:15,21

s

s 1:8
salary 18:15,22 19:3
salisbury 2:7
samples 30:17
saying 53:3,7 56:8 80:12 94:23 99:24 129:8 168:10
says 49:3 58:9 74:25 75:1 76:14 79:4 82:22 83:6 85:3,23 106:3 106:12 111:17 118:23 123:10
scale 117:4 120:6 121:9,12 150:8
scaled 42:16
scenarios 94:9
schedule 84:18
schedules 64:18,21
scope 10:14 39:18,23 60:12 65:6 66:6 98:2 129:6 132:8 147:6 151:25 152:3 157:12 157:17 158:7
scratch 135:16
screen 7:8 20:19,24,25 32:11 38:20 61:10 67:15 74:8 79:2 81:7 85:3,10 89:3 90:11,14 97:9 102:7,23 110:12 119:24 123:17
scroll 32:11 39:2,3 102:24 103:16 104:17 108:21 109:22
se 27:23 31:12 51:2 70:3 139:25 152:8
seal 169:9
second 15:3 17:13 38:14
secondary 35:8 62:25 63:11,22 132:9
secretary 72:23
section 38:16 38:23 68:21 69:23 71:6 72:1 78:22 88:22 93:8 102:6,9,12 103:11 104:21 108:16,20 109:3,23 124:18
sections 104:20 130:20

sector 74:12
security 10:6 40:16 42:11 43:17,18 44:2 45:6 49:11 54:14,17 59:9 165:3 167:13
see 15:23 20:23 20:24,25 22:4 24:18 27:16 32:10 34:5 38:20 72:24 74:3,4,7,9 81:6 81:10 87:11,13 89:18 119:1,4 119:4
seeing 124:17
seem 99:18
seems 73:17 99:24 126:15
seen 7:7 13:25 25:22 38:9 50:24,24 98:6 158:14 159:14
selection 148:25
self 46:9,14 47:15
sending 134:17
sense 10:22 11:18 45:23 88:4
sentence 54:12 54:15 57:4,24 74:3 76:13 82:20 83:5,6 84:20 85:22 92:2 97:9 99:14 102:23 112:4 114:22 115:11
sequestered 94:14
sequestration 94:10,10,22 95:4,5 96:25 97:12
serve 104:15 158:16
service 22:25 23:3,6,18 25:1 28:14,23 29:13 30:13 32:21 33:3 41:8 44:11 49:4,12 50:2,5,19 51:12,25 52:9 52:12,16,25 53:13,17 54:13 55:7,11 97:16 103:20 126:7,7 138:12 139:18 143:17 155:8 167:8
services 4:4,6 4:12 9:19 35:2 41:6,7,8 54:18 54:19,21 55:2 65:24 74:17 87:9 93:24 96:23 98:15 103:21 105:4 111:6,9,18 112:5 126:4 132:8 145:15 151:12,22 154:7 159:21 160:11,23 161:8,23 162:6 162:13 164:1 164:21 165:12 166:17
serving 103:24
ses 32:13
set 48:16 122:13 132:1
settlement 133:14,15,17
seven 39:5 90:9 90:23 124:15 124:18
several 30:15 40:1 56:15 71:11 86:16 121:8
share 15:15 101:24
sharing 37:9 41:17 109:23 109:25
sheet 171:7,10 171:11,13 172:1
shift 103:25
shifted 100:3
short 28:19 79:4,14,18 80:17 114:16 114:20 115:4 116:12,13 157:24
shortfall 73:9
shortly 16:5 157:7
show 38:1 82:4 82:11 88:15 111:1 117:23
showing 87:16 102:3 108:10 108:12 110:11
shown 85:7
shows 124:2
sic 40:16 118:8
side 29:13 55:15,15 80:25 117:8,12,12,13 117:19,20 118:15 121:17 121:17 155:9
sign 19:21,24 96:10
signature 169:12 170:20
signed 11:20 59:12

significant 35:21 104:25 106:24
signing 168:15 171:13
signs 146:15
similar 11:24 12:8 87:5
simply 14:9 20:13 69:15 70:17 72:11,12 80:16 85:23 94:17 95:2 113:11 115:1 122:23 123:4 129:8 134:2
sincerely 171:18
single 141:10
singular 162:25 165:17
sir 67:16 103:4 116:5
sit 153:2
sitting 138:14
situation 47:6 67:22 97:23 132:24 133:13 134:4
situations 134:21 141:12
six 39:5 78:21 138:14,15 139:1
size 11:3 138:6
skilled 40:21
slight 56:20
small 139:13 140:3 164:1
smaller 117:15 117:18
smi 48:6 108:23 110:25 116:21 119:22 122:7 122:17,24 123:13 124:3 128:2,25 130:11,11
smith 2:12
social 40:16 42:10 43:17,18 44:1 45:5 49:11 54:14,17 59:8 165:2 167:12
solutions 26:1 26:7
solvency 81:11 81:15 86:18 100:2
solvent 71:12 93:12
somebody 54:20 58:19 134:14 143:22 161:21
soon 157:24
sooner 73:11
sorry 13:5 17:9 37:1 40:19 46:6 68:18,19 79:3 82:8 83:24 100:16 101:11 116:3 117:25 119:9 130:4 135:12 141:4 165:23 166:12,23 167:2 168:9
sort 23:24 54:22 149:2
sound 6:7,8 29:3
sounds 14:16 29:5 36:18 125:8
source 121:24 128:1 134:8 145:14
sources 90:22 122:7 130:8
south 2:21
southern 1:2 7:16
space 24:20 52:22 53:23 63:21 149:4 152:21
spaces 24:13
speak 24:12 53:20 54:9 64:7,14,20 65:2,20 66:3 66:11 69:2 130:16 136:3 150:23 153:1,6 161:6 167:4
speaker 6:5
speaking 14:11 44:12 57:25 58:3 136:5,14 136:19
speaks 78:4 104:10
specific 19:21 20:1,9 50:16 52:13 54:16,22 105:21
specifically 21:15 54:13,17 69:25 115:5 120:5 122:25
specified 59:1
spectrum 24:25
speculate 55:16 65:11 70:16 77:9 83:20 92:13 98:10 99:7 152:14 158:7,11
speculating 128:15
speculation 66:9 159:1

speculative 159:3
speech 41:7
spending 87:8
spent 23:2 24:6 32:23 155:6
spi 125:25
spoken 54:6
stability 36:8,9 36:17 37:8 69:8 71:24
staff 30:19 34:1 151:11
staffing 34:7
stage 40:13 58:25
stamp 81:4 85:2 90:9
stamped 67:11
standard 93:16 150:16,19,24
standing 167:24
standpoint 143:24
stands 62:15
start 8:19 9:9 39:4 66:16 76:13 114:18 135:16 162:5
started 26:16 58:15 97:24 160:10
starting 32:10 124:2
starts 38:19 74:3 81:20 85:16
state 1:16 7:23 9:12,20 169:3 169:14 170:3
stated 69:21 119:6
statement 8:23 35:18 36:3 46:4 73:14 77:24 84:11 114:9 123:18 149:5
states 1:1 3:7 5:7 7:15 16:4 38:13 40:11 84:8 86:25 93:10 123:12 124:15
statistical 95:16
status 67:21
statute 59:11 59:12 72:19,21 94:19 96:6 97:25 128:19 129:12
statutes 59:5 60:11
statutorily 126:25
statutory 103:13
stay 22:20 107:8
stays 78:7
steeped 63:10 146:11
steinberg 4:5
stem 25:9
stenographer 8:4 13:2,6 167:21 168:3,5 168:11,14
stenographer's 6:13
stenographic 1:16 8:1 170:9
stenographic... 170:6
stewardship 37:6
stop 32:6 37:9 97:1
straightforward 94:7 140:7
streams 123:5
street 2:6,20 3:8 4:13 171:22
subject 51:5 148:10
submission 89:14 91:5
submissions 31:5
submit 23:9 25:12 27:14 89:13 91:2 151:12
submits 143:15
submitted 27:4 27:17 28:2 146:16
submitting 26:25 72:13 143:16
subpoena 5:11 16:20
subrogation 63:24 132:10 132:22 133:14
subsequent 104:23
subsequently 53:5 58:18
subsidies 41:17
subsidized 41:14 56:11 57:7,10
substantial 73:8 83:8 86:12 103:9 104:1
substantiate 138:22
succeeding 89:14

sue 10:24
suffering 40:13
sufficient 76:17 139:23 146:17
suite 4:13 171:22
summarize 90:13
summary 71:6 72:1 73:5 75:19 89:25 123:23 124:18
super 94:21
supplement 71:9
supplemental 55:9
supplementary 48:6
supplies 41:10
support 25:15 30:9,15 36:8 69:23 138:23 141:14 145:16 145:22 146:5
supportable 27:5
supported 41:25 143:18 151:7
supporting 30:20 139:21
supports 27:17 62:25 70:6,8 151:23
suppose 100:7
sure 13:6,19 24:19 27:22 42:20 61:12 66:21 82:11 102:17 119:14 148:4,8,13,15 148:21 150:2 168:7
suspect 27:12 28:6
suspended 27:12
sustain 88:5 103:22
sustainability 91:20
swear 8:2
switch 116:20
sworn 8:10 169:8
system 25:5 26:12 32:1 35:5 43:6,13 99:4 104:23 107:9,21,22 138:5 144:2 158:24 159:11 159:22
systems 24:5 26:21 137:24

t

t 1:8
table 108:22 119:24
take 7:10 13:24 20:17 66:19 72:1 74:2 78:21 81:3 88:22 92:1 93:6 124:19 137:5 149:20
taken 1:11 7:13 171:7
takes 88:23
talk 32:9 56:4 61:11 101:6,13 110:24 116:18 116:21 120:4 122:6 157:21 163:14,18 164:21
talked 75:22 107:7 111:13 112:14 116:19 121:23 138:13 139:7 153:16 157:21
talking 101:17 108:4 119:22
talks 102:24
targeted 52:13
tax 46:3,12 48:10,13,18 85:7 93:17 111:7 113:16 114:15 115:15 123:2 124:12 128:1,7 130:12
taxes 45:17,18 45:25 47:1,4,9 48:7,14 85:6 85:15 121:25 122:1 123:6
taxpayer 46:21 48:24 112:21
taxpayers 45:24 73:13 128:3
technically 34:20
tell 10:4 12:18 14:22,25 15:20 19:10 23:5 24:8 30:18 34:22 38:10 39:13 43:9 49:8 55:17 68:11 71:6 72:6,9 85:9 88:13 113:23 115:10 164:15 166:3
telling 8:20 12:16 155:23
tells 72:7
tended 58:10 163:20

tendency 58:13 156:23 158:17
term 36:8 85:20 86:3 88:2,9 105:1 106:7,24 116:12,13
terms 70:9 71:11 154:6 158:14
test 49:20 50:5 114:19,20 125:10
testified 8:10 17:5 19:4 38:22 57:15 61:14 62:9 97:11 122:8 127:5 132:3 137:22 139:9 140:23 146:15 154:20,23 155:18 157:11 160:5 165:10 166:16
testify 10:2 14:1 18:12,19 64:10,23 159:19
testifying 12:2 27:25 128:25 160:22
testimony 6:6 11:23 12:8 15:5,11 18:22 19:1,9 20:8 38:4,14 39:19 51:4 66:6 68:17 69:23 70:13 78:23 102:16 118:20 120:12 129:6 137:21 153:23 157:25 159:6,9 161:3
testing 29:9 148:6
text 9:2 10:13 74:7 87:13 89:3 90:13 92:21 111:3
thank 13:4 17:22 21:4 31:19 34:17 37:24 39:17 40:19 46:7 66:23 93:5 112:2 116:17 119:11 120:4 121:22 133:19 157:4 166:11 167:14,17 171:15
thanks 100:18 154:17
theirs 134:8
therapy 41:7
thereof 107:1
thing 35:17 94:16 150:5
things 23:24 39:12 49:18 53:10 54:16,22 54:22 77:9 97:19 114:5 134:18 140:17 149:2
think 12:4 13:15 21:25 37:3 43:25 46:10 55:16 56:19 58:4 71:20 72:20 78:3,12 84:13 86:8 87:24 88:16,17 90:2 91:23 92:12 94:12 95:12,23 95:24 97:6 100:14 104:10 107:4 112:10 113:22 117:9 117:24 120:6 120:11,11,17 126:17 133:6 133:24 139:9 141:25 143:12 146:21 153:25 154:11 157:16 159:17 160:8 161:5 164:12
third 74:4
thirds 138:18 139:10
thought 28:22 30:7 80:18
three 35:9 67:6 74:2 79:11,18 80:5,19 83:2 100:21 117:21
tied 125:12
time 1:13 17:16 17:19 18:13 22:10 23:2 24:6 32:24 33:18,25 37:15 37:20 42:24 43:4 47:1,2,3 47:17 50:18,20 50:23 58:11 66:24 67:4 71:23 74:19 75:11 77:10,20 79:19 80:18 82:1 87:24 92:7 94:12 99:17 100:11 100:19,24 103:18 110:9 111:25 119:8 119:15,18 120:20,23 122:2 124:13 126:11 134:6 137:3,10,15

155:6 157:1,6 160:5 164:2,25 166:11 167:18
time's 37:15
timelines 34:8
times 14:22 55:8
title 9:20 38:10 40:15 59:8 79:2 86:22 93:8 111:10
titled 38:13
today 8:17 10:2 10:9,17 14:20 15:11,13 18:12 19:1 20:8 34:14 46:18 47:22 70:10 153:2 159:6 166:11 167:7
today's 14:7,23
together 83:20 84:5
tomorrow 46:19
ton 137:6
took 37:11 61:9
top 19:11 29:20 30:19 42:21,25 56:10 62:14 63:18 117:18 121:14 146:1 149:11
topic 152:24
topics 163:13
total 90:20 103:25 118:2,2 118:5,12 120:10 125:4 164:2,2,3
totally 101:12
touch 12:25 17:10
toxic 10:24
track 20:5 42:23 43:1
traditional 134:16
trail 6:5
transcript 167:22 170:8,8 171:6,9,12 172:24
transition 74:12
treasury 48:11
treat 161:15
treatment 49:6 49:13 51:19 53:2
treats 142:22
trend 98:1 99:11 104:10
tries 148:14
triggered 89:10
triggers 90:25
trillion 85:21 86:1,6 118:5
true 39:15 48:25 64:5,18 78:17 83:3 96:7 112:22,24 118:16 124:25 125:9 127:9 128:4 136:6 141:1,15 143:17 158:24 170:9 172:24
trust 45:15,15 45:16,18 46:24 48:5,7,18 56:11 69:9 71:10,24 75:21 75:21 76:6,14 77:19,19 78:9 78:16 79:5,11 80:7 81:8,16 81:25 82:4,11 83:1,10 85:14 86:16 93:12 111:11,23 112:8,12,22 114:11,18 115:16 121:24 122:7,24 123:13,23,23 158:4
trustee 114:6 120:8 122:19 123:10
trustee's 101:24
trustees 14:11 14:14 15:10 66:17 67:21 69:4 71:1,9,16 72:14,16,18 73:1 84:6 89:1 90:17 93:1 99:19 102:3 104:24 106:22 112:7 113:5 114:1,15,19,23 115:25 116:8 117:24 119:25 123:24 130:19 131:1,9 158:3
truthfully 10:2 27:3
try 17:13 31:13 36:19 113:1 154:19
trying 32:6 53:2 120:5 121:7,8 129:6 130:4 132:6 134:2 148:13 160:3
turn 108:8
turning 90:8
twice 14:24 133:21 134:24
two 13:16 21:25 37:22

67:1 72:2,24 72:24 89:11 93:13 101:20 106:1 108:21 109:22 121:9 133:17 138:18 139:10
type 12:13 33:18 42:7 44:11 112:20 115:22 126:7 146:23 159:9
types 54:25
typically 55:4

u

u.s. 4:3,6,12
uh 6:7,8
ultimately 128:3
um 6:7,8,8
umbrella 30:1 31:7 131:19 132:7 162:8 165:20
unable 75:3
unavoidable 138:5
uncertain 92:5 92:10,22
uncertainty 83:8 103:9
unchanged 153:4
under 28:22 29:23,24 30:1 31:6 40:15 42:10 49:3 55:10 59:2 60:8 66:12 73:5 74:18 75:10,14 76:4 77:5 78:16 82:5,12,22 83:1 84:19 85:7 94:8,13 95:4 97:13 98:3 99:2,16 100:1,4 101:19 103:11 107:13 108:6 125:23 131:23,25 148:12 162:2 163:20 165:19 167:5,12
underneath 131:18
undersigned 169:6
understand 10:11 15:5 30:23 46:8 51:17 53:3 72:18 77:2 94:25 98:14 108:25 113:23 120:5 129:6 130:4 133:3,5 138:4 143:4 148:2,14
understanding 11:3 19:13 31:22 42:5 46:16 70:21,23 72:11 76:16 84:16 91:13 93:25 95:6,9 96:9 105:16 109:10 115:11 116:24 121:9 122:12 128:19 132:14 147:16 148:1,7 164:1
understood 121:20
undertaken 138:4
undoubtedly 108:1
unexpectedly 34:1
unfunded 76:19 85:21,25
ung 5:15
unit 7:12 37:17 37:22 67:1,6 100:21 101:1 137:12,17 167:19
united 1:1 3:7 5:7 7:15 16:3 38:13 107:14
unitedhealth 56:2
unknowable 78:1
unknown 77:20 159:16
unretained 147:7
unsustainable 88:1,4
upcoded 140:15
upcoding 25:18 26:8,8 139:4 139:13 140:8 140:12 141:18 142:6,16 144:13,20 145:2 148:10
upcoming 123:16
update 21:19 104:23
updated 21:13 21:14,17
updates 87:10 105:9 106:14
upload 15:17 15:18,20 67:8
uploaded 16:1 20:19 38:2 139:11
upside 114:18

usa 5:13,15 16:25 67:11
usdoj.com 3:11 3:12
usdoj.gov 3:13
use 19:20 23:15 29:14 103:19 134:12 147:20 171:7
used 14:12 36:1 68:25 128:16
using 138:12 164:16
usually 47:9 55:1

v

v 1:8
vacancies 72:25
valid 150:3
validate 151:2 151:6
validation 142:23 143:8
validity 109:7
value 85:6,14 85:16,25
variable 108:1
variables 77:15 92:18 98:19 112:25 153:16
vary 96:1 146:22
verbally 8:22 9:5 16:1
verbatim 14:17
verified 143:21
verifying 145:14
veritext 171:13 171:22
versus 84:5 86:23 121:10 121:12 132:21
viability 78:15 88:8
video 7:9,12 17:17,20 37:16 37:21 66:25 67:5 100:20,25 119:16,19 120:21,24 137:11,16
videographer 4:22 7:1,18 8:6 17:12,16,19 37:15,20 66:24 67:4 100:19,24 119:15,18 120:16,23 137:10,15 167:18
videotaped 167:20
view 9:3 36:6
viewed 62:3 86:4
views 36:1,5,6
virtually 7:5
visit 51:19
visits 41:6
voluntarily 41:11
voluntary 41:16,23 57:21 107:9,16 127:5
vulnerabilities 24:4 26:21 137:24 158:4

w

wait 80:14
waived 42:7 168:16
walk 40:1
wallace 2:4,5 5:2,3 8:12,14 8:14,19 9:8,11 11:8 12:12,24 13:4,9 16:9,12 16:18,23 17:2 17:15,22 18:1 19:12,19 20:2 20:16 21:21 22:3,7,12 25:3 25:16,23 26:10 26:17 27:18,24 28:9,13,24 29:6,16,22 31:19,20 32:8 35:24 36:25 37:13,24,25 39:16 40:9 43:11,21 44:3 44:13,24 45:4 45:10 47:20 48:3 51:3,16 51:23 52:14,23 53:14,24 54:10 56:13 58:24 59:10,20 60:3 60:17,22 61:1 61:8 62:18 63:14 64:2,9 64:15,22 65:4 65:13,22 66:5 66:14,21,23 67:7,14 68:10 69:11,18 70:5 70:19,25 71:25 73:19 74:1 75:8,17 76:12 76:25 77:17 78:6,20 79:23 80:6,10,20 81:2,18 82:3 82:10,18 83:15 83:23 84:7,15 84:24 85:18 86:10,19 87:20 88:3,12 90:6 91:12,25 92:14 93:2 94:20 95:18 96:4,13 96:24 97:8

98:4,13,21
99:1,13,25
100:9,11,16
101:3 102:1,4
104:16 105:23
106:19 107:6
107:18 108:3
108:11,14
109:8,20 110:6
110:15,22
112:1,13 113:3
113:21 114:10
115:9,18 116:4
116:11,16
117:3,14,22
118:19 119:14
119:21 121:1
122:5,16 123:8
123:25 124:14
126:9,18 127:3
127:21,25
128:8,23 129:4
129:14,18,24
130:17 131:11
131:22 132:23
133:18 134:19
135:2,8,14,18
135:23 136:13
137:2,5,9,19
139:6 140:5,22
141:5 142:4,13
142:20,25
143:6,25 144:6
144:10,18,24
145:5,12,20
146:4,13 147:1
147:11,25
149:6,13,18
150:6,15,25
151:8,19 152:4
152:23 153:9
153:19 154:10
156:19 157:7
157:10,20
158:5,19 159:5
159:18 160:4
160:21 161:7
161:20 162:7
162:14 163:1,6
163:12,22
164:9,14,19
165:4,9,18,22
166:9,24
167:16,23
168:1,4,7
wallace's 166:19
wallacegraha... 2:9
want 17:12
40:23 47:6
55:16 66:15
74:8 76:10
77:13 81:15
110:24 116:18
120:4 137:5
147:5 159:3
167:2 168:12
wanted 17:4
49:2 61:10
90:10 93:19
102:5 110:23
111:1 116:23
130:18 168:2
ward 2:12
wardandsmit... 2:16
warn 78:8
warning 71:16
88:14,24 89:4
89:9,10,12,16
89:21 90:3
91:1,3,10,14
warnings 75:19
89:18 90:4
washington 3:9
water 1:4 7:14
10:20,25 171:3
172:4
way 9:9 15:15
17:11 36:20
71:20 76:23
79:21 80:12
81:21 98:16
107:5 113:24
115:8 122:24
136:20 140:17
140:20 141:22
141:23 142:5
143:13 151:2,5
ways 77:3,4
132:16 140:18
we've 94:8,9
112:14 116:18
120:6,6
weaknesses 35:22
went 41:19
137:20
whatnot 30:17
136:4 142:2
whitney 2:4
8:14 125:2
160:1
widespread 144:12,20
wilmington 2:14
wish 172:5
withdraw 103:24
withheld 133:2
witness 5:2 7:8
8:2,9,11,13,18
11:7,17 12:11
16:6 19:7,16
19:24 20:13
21:19 22:6,10
24:12 25:8,21
26:3,15,23
27:21 28:5,17
29:5,12,20
32:3 35:16
36:23 37:11
39:10 40:6
43:8,15,25

44:7 45:3,9
47:12 48:1
50:22 51:8,22
52:4,20 53:7
53:20 54:5
56:7 58:8 59:7
59:17,23 60:15
60:25 61:6
62:14 63:7,18
64:7,14,20
65:2,10,19
66:3,11,19,22
68:9 69:2,14
70:2,15,23
71:19 73:16,24
74:25 75:16
76:2,22 77:8
77:23 78:12
79:21 80:3,14
80:24 81:14,24
82:8,15 83:5
83:19 84:2,13
84:22 85:12
86:8,15 87:19
87:24 89:24
90:16 91:22
92:12,24 94:4
95:11,23 96:9
96:18 97:5,18
98:10,18,24
99:6,22 100:6
102:3 104:8
105:20 106:11
107:4,13,24
108:12 109:5
109:15 110:5
110:14,21
111:21 112:10
112:24 113:10
114:8,25
115:13 116:2,7
116:15 117:7
117:17 118:7
122:4,12,22
123:21 124:8
126:3,14,23
127:24 128:6
128:13 129:8
129:22 130:7
131:5,16
132:18 133:5
133:24 135:1,7
135:16,22
136:10,19
137:8 138:8
139:16 140:11
141:3,21
142:11,18
143:4,12 144:5
144:9,16,23
145:4,11,18
146:1,9,21
147:9,18
148:19 149:11
149:16 150:1
150:13,21
151:4,17 152:2
152:13 153:6
153:14,25
156:21 157:16
158:2,10 159:2
159:13,24
160:15 161:4
161:11 162:4
162:11,24
163:4,10,17
164:5,12,23
165:8,15 169:9
word 19:20
23:15 83:25
120:17
worded 56:20
57:4
words 74:21
113:6
work 21:25
24:19 30:2,5
32:25 33:13,16
34:5,18 36:7
42:11 44:1
47:17,19 63:9
63:22 84:5
92:16 97:3
128:13 131:17
worked 12:22
22:11,24 32:13
42:14 146:25
149:4 150:22
155:2
worker 62:11
workers 46:18
47:4
working 21:16
22:17 24:13
26:3 47:22
50:15 63:23
132:1 155:6,7
164:7
workload
33:22
works 15:21
140:18
world 134:2
worse 79:24
80:8,11,15
worth 128:15
write 38:25
39:2
written 14:9
70:9 161:13
wrong 135:15
166:18
wrote 39:1
wwallace 2:9

y

yeah 17:11,11
32:16 41:1
57:3 58:25
66:19 88:21
89:9 101:13
118:7 119:2
120:16 121:21
150:7 155:21
160:15 161:4,5
165:25 167:24

year 13:11
35:19,21 48:16
58:19 79:12,17
80:8 81:9 85:7
85:24 89:15
90:24 91:4,7,9
91:16 93:12
105:13 106:18
115:20,21
117:9 123:16
124:23,24
125:6,7 157:25
year's 28:10
79:15,25 80:1
87:2 90:25
years 21:25
42:6,11 52:18
53:17 79:11,18
80:5,19 83:2
86:24 89:12
90:5,23 97:22
103:14 106:2
132:13 155:4,5
155:18 156:7
156:14 159:8
160:19,25
161:23 164:6
yo 5:15
young 1:10 5:2
5:9,11,13 7:13
8:4,6,8,12 9:14
13:10 16:3,9
16:10,18,25
18:2 20:23
37:1 38:1,2
39:7 57:25
66:23 67:8,10
67:11,17 101:4
102:5 119:22
120:16 121:2
137:7,20
154:10,16
155:2 156:1
157:5,7 166:10
167:14,16
169:7 170:7
171:5 172:2,25
young's 147:7
young.cv.clja 5:13
young.pdf 5:8

z

zero 81:21 82:5
82:12,25 83:1
zoom 13:16,17
13:20 15:15
74:8

Exhibit 790

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF NORTH CAROLINA
SOUTHERN DIVISION

VIDEO DEPOSITION OF TRICIA YOUNT, CPA, MAFF
FEBRUARY 11, 2026

IN RE:
CAMP LEJEUNE WATER LITIGATION

CASE NO. 7:23-CV-897

This Document Relates To:
ALL CASES

TIME: 9:51 A.M.

LOCATION: VERITEXT
MOUNT PLEASANT, SC

REPORTED BY: BETHANY MORSE, RPR, CCR(WA)
CLARK BOLEN
CHARLESTON, SC 29415
843-762-6294
WWW.CLARKBOLEN.COM

A P P E A R A N C E S

ON BEHALF OF THE PLAINTIFFS:
WARD AND SMITH, P.A.
BY: JENNA F. BUTLER, ESQ.
127 Racine Drive
Wilmington, NC 28406
jfb@wardandsmith.com
AND
BELL LEGAL GROUP, LLC
BY: LESLIE LAMACCHIA, ESQ.
BY: DELANEY PRUIETT, ESQ.
219 Ridge Street
Georgetown, SC 29440
llamacchia@belllegalgroup.com

ON BEHALF OF THE DEFENDANT:
UNITED STATES DEPARTMENT OF JUSTICE
BY: DAVID R. ORTIZ, ESQ.
BY: BILL KLOTZBUCHER, ESQ.
1100 L Street NW
Washington, D.C. 20005
david.r.ortiz@usdoj.gov

ALSO PRESENT:
Arthur Daugomah, videographer
Ben VanSlyke, Esq. (Via Zoom)
Ted Ruzicka, Esq. (Via Zoom)
Shanelle Hudson, Esq. (Via Zoom)
Whitney Wallace, Esq. (Via Zoom)

I N D E X

EXAMINATION:		PAGE
By Ms. Butler		8

EXHIBITS:		REFERENCED
Exhibit 1	U.S. Department of Justice Request, Authorization, and Contract for Services of Expert Witness, Attachment #2	14
Exhibit 2	Tricia M. Yount, CPA, MAFF, Curriculum Vitae	48
Exhibit 3	Plaintiffs' Notice of Deposition and Request for Production of Documents	68
Exhibit 4	Plaintiffs' Amended Notice of Deposition and Request for Production of Documents	68
Exhibit 5	United States' Objections and Responses to Plaintiffs' Amended Notice of Deposition and Requests for the Production of Documents to Tricia Yount	72
Exhibit 6	U.S. Department of Justice Request, Authorization, and Contract for Services of Expert Witness, Attachment #2	75
Exhibit 7	U.S. Department of Justice Request, Authorization, and Contract for Services of Expert Witness, Attachment #2	77

///

Exhibit 8	Solicitation/Contract/Order for Commercial Items (CLJA_USA_YOUNT_68-86) Confidential-PII/PHI	81
Exhibit 9	Solicitation/Contract/Order for Commercial Products and Commercial Services (CLJA_USA_YOUNT_100-123) Confidential-PII/PHI	81
Exhibit 10	Solicitation/Contract/Order for Commercial Products and Commercial Services (CLJA_USA_YOUNT_1-28) Confidential-PII/PHI	81
Exhibit 11	Amendment of Solicitation/Modification of Contract (CLJA_USA_YOUNT_40-56) Confidential-PII/PHI	82
Exhibit 12	Amendment of Solicitation/Modification of Contract (CLJA_USA_YOUNT_93-96) Confidential-PII-PHI	82
Exhibit 13	Amendment of Solicitation/Modification of Contract (CLJA_USA_YOUNT_25-28) Confidential-PII-PHI	83
Exhibit 14	Amendment of Solicitation/Modification of Contract (CLJA_USA_YOUNT_91) Confidential-PII-PHI	100
Exhibit 15	U.S. Department of Justice Expert Witness Services Requirement Services Schedule, Rate, and Cost (SRC) (CLJA_USA_YOUNT_89) Confidential-PII-PHI	102

///

Exhibit 16	U.S. Department of Justice Request, Authorization and Contract for Services of Expert Witness, Litigative Consultant, or ADR Neutral	104
Exhibit 17	U.S. Department of Justice Request, Authorization and Contract for Services of Expert Witness, Litigative Consultant, or ADR Neutral	105
Exhibit 18	Forvis Invoices (CLJA_USA_YOUNT_67-97) Confidential-PII-PHI	108
Exhibit 19	Forvis Invoices (CLJA_USA_YOUNT_33, 38, 57, 32, 39, 30, 31, 29, 36, 37, 34, 35) Confidential-PII-PHI	108
Exhibit 20	Expert Report of Tricia M. Yount (Mark Anthony Cagiano)	153
Exhibit 21	Materials Considered List (Mark Anthony Cagiano)	153
Exhibit 22	Expert Report of Tricia M. Yount (Jefferson Michael Criswell)	203
Exhibit 23	Materials Considered List (Jefferson Michael Criswell)	203
Exhibit 24	Expert Report of Tricia M. Yount (Jimmy Laramore)	226
Exhibit 25	Materials Considered List (Jimmy Laramore)	226
Exhibit 26	Expert Report of Tricia M. Yount (Terry F. Dyer)	247
Exhibit 27	Materials Considered List (Terry F. Dyer)	247
Exhibit 28	Expert Report of Tricia M. Yount (Frank Mousser)	254

Exhibit 29	Materials Considered List (Frank Mousser)	254
Exhibit 30	Expert Report of Tricia M. Yount (Jacqueline Tukes)	277
Exhibit 31	Materials Considered List (Jacqueline Tukes)	277
Exhibit 32	Expert Report of Tricia M. Yount (Allan Wayne Howard)	289
Exhibit 33	Materials Considered List (Allan Wayne Howard)	289
Exhibit 34	Expert Report of Tricia M. Yount (David Downs)	300
Exhibit 35	Materials Considered List (David Downs)	300
Exhibit 36	Expert Report of Tricia M. Yount (David William Fancher)	300
Exhibit 37	Materials Considered List (David William Fancher)	300
Exhibit 38	Supplemental Materials Considered of Tricia Yount, February 5, 2026	316
Certificate of Reporter		330

THE VIDEOGRAPHER: We're on the record in the video deposition of Tricia Yount in the matter of Camp Lejeune Water Litigation.

Today's date is February 11th, 2026. We are located at Veritext in Mount Pleasant, South Carolina.

The court reporter is Bethany Morse. My name is Arthur Daugomah, videographer with Golkow Technologies, Inc. The time is now 9:51.

Will counsel please identify themselves for the record.

MS. LAMACCHIA: I'm sorry. Can we go off the record for a second?

THE VIDEOGRAPHER: Time is now 9:51. We are off the record.

(Discussion off the record)

THE VIDEOGRAPHER: Time is now 9:54. We're back on the record, and I believe everybody needs to identify themselves for the record.

MS. BUTLER: I'm Jenna Butler. I'm with Ward and Smith. I'm here on behalf of the Plaintiff Leadership Group.

MS. LAMACCHIA: Leslie LaMacchia with Bell Legal Group on behalf of Plaintiff

Leadership Group.

MR. ORTIZ: David Ortiz and Bill Klotzbucher on behalf of the Department of Justice and the United States.

THE VIDEOGRAPHER: Bethany, can you please swear in the witness.

TRICIA YOUNT, CPA, MAFF,

having been first duly sworn, was examined and testified as follows:

EXAMINATION

BY MS. BUTLER:

Q. Good morning. We met out in the lobby, and I think you said it's Yount; is that correct?

A. Yes.

Q. Okay. Will you please state your full name for the record.

A. Tricia Morris Yount.

Q. Okay. Ms. Yount, as you know, I am here to take your deposition today. I am guessing you've been deposed before; is that correct?

A. Yes.

Q. Okay. And so you know that you're under oath; correct?

A. Yes.

Q. Okay. And you understand that the court

reporter wants to be able to record my question and your answer; so we'll try not to speak over one another.

Do you understand that?

A. Yes.

Q. Okay. And you're doing a really good job of saying "yes" instead of "uh-huh," "huh-uh." That -- can we try to both continue that as well?

A. Yes.

Q. Okay. And if I ask you a question, I am going to assume that you understand the question unless you ask me to rephrase it. Is that fair?

A. Yes.

Q. And are you aware of any reason here today that you cannot -- you could possibly not understand my questions or provide an accurate response?

A. No.

Q. Okay. When were you first hired to work on the Camp Lejeune litigation?

A. I was contacted late 2022, and I believe our contract with my firm at the time was January '23.

Q. And you say your "firm at the time."

What firm was that?

A. Forvis Mazars.

Q. And is that still the entity that you are employed with for purposes of this litigation?

A. Yes.

Q. And, to your knowledge, have there been any other entities or persons employed to work on the report that you've rendered in this case?

A. I am -- I am the expert employed for the case, but there are staff at Forvis Mazars.

Q. But it's all within Forvis Mazars?

A. Yes.

Q. Okay. So there are no other companies that have been hired with other staff who are assisting you; is that correct?

A. Correct.

Q. Okay. Do you know how it came about that Forvis Mazars and/or you in particular were hired to work on this case?

A. The attorney, when he reached out, said I was referred to him.

Q. Okay. What did you understand your assignment to be when you were first contacted back in late 2022?

A. To look at the economic damages for the different plaintiffs from the defense side to review plaintiffs' claims for economic damages and prepare any reports of economic damages as well as review potential offsets for the government.

Q. What kind of potential offsets did you understand you would be looking at?

MR. ORTIZ: Object to form.

You can answer.

A. Any payments made by the government that were related to Camp Lejeune, any payments made to the plaintiffs, or any disability awards is my understanding.

(By Ms. Butler)

Q. And did you have an understanding as to what you were supposed to do with respect to potential offsets? In other words, was there a scope of work with respect to offsets that you were informed of?

MR. ORTIZ: Object to form.

You can answer.

A. Just to calculate those payments and offsets.

(By Ms. Butler)

Q. And so you understood that you were to make calculations; is that correct?
A. Yes.
Q. Did you understand your scope of work to involve any opinions regarding how those calculations were to be applied in the litigation?
A. No.
MR. ORTIZ: Objection.
MS. BUTLER: Did you get that?
(By Ms. Butler)
Q. So we've discussed what you understood your work was to be when you were first, I guess, engaged in discussions back in 2022.
Has that changed over time?
MR. ORTIZ: Object to form.
You can answer.
A. No.
(By Ms. Butler)
Q. Okay. And so what you just testified as to what you understood your job was essentially for this case has stayed the same; is that correct?
A. Yes.
Q. Okay. As far as your assignment for

this case, was that relayed to you verbally or in writing?

A. Verbally.

Q. Okay. And I am not asking you to disclose communications that were had solely with your counsel or with the Department of Justice. Is that how it was relayed to you?

MR. ORTIZ: I -- just to be clear, you're asking if counsel for the Department of Justice limited --

MS. BUTLER: I'm trying to understand -- so I don't want her to relay discussions; so if -- with counsel -- but if it was relayed to her by someone else, then I can ask about that.

(By Ms. Butler)

Q. So was there anybody other than a lawyer with the Department of Justice who relayed that assignment to you?

MR. ORTIZ: And -- and I just want to instruct that you can answer to the extent that it would not involve the disclosure of communications with counsel.

A. No. I've only spoken with counsel.

(By Ms. Butler)

Q. Okay. I'm going to mark as Exhibit 1 --
MS. BUTLER: Here's a copy for you.
(By Ms. Butler)
Q. Here's your copy.
MS. BUTLER: Here's your copy. I guess I have four -- I have four of all of these. So let me keep this one.
(Exhibit Number 1 was marked.)
(By Ms. Butler)
Q. I'm handing you a document, and I apologize. It does not have Bates labels on it because this was provided to us right before your deposition, and I was unable to obtain a Bates labeled version before I left.
But do you see at the top, it says U.S. Department of Justice Request, Authorization, and Contract for Services of Expert Witness?
A. Yes.
Q. Are you familiar with this type of document?
A. I mean, vaguely familiar, yes.
Q. Okay. Have you seen one of these before?
A. Yes. It's been a while.
Q. Okay. Have you seen one of these with

respect to your work in the Camp Lejeune litigation?

A. A few years ago when they first sent me the first one, I did see it.

Q. Okay. And do you see at the top, it says "The contractor" under this attachment to Statement of Work is BKD, LLP?

A. Yes.

Q. Who is BKD, LLP?

A. BKD is Forvis Mazars. There were some mergers and for -- with some different firms over the years. And I would say it was a merger, but perhaps it was like an acquisition because we ended up -- Forvis ended up using BKD's tax ID number. So when we use the tax ID number for Forvis to set up the contract, they're saying, "Oh, it's under BKD," and I said, "Oh, we're in the middle of the name change. Go with that." And I believe subsequent contracts should have been updated with Forvis Mazars's name.

Q. Okay. And looking at the top of this document, do you see under where it says "Statement of Work, SOW" on the far right, the last four numbers are 0165?

A. Yes.

Q. Okay. Do you understand that to maybe be a contractor purchase order number, the last four digits?

MR. ORTIZ: Object to form.

You can answer.

A. I don't know what that is.

(By Ms. Butler)

Q. Okay. Do you see down under "Scope" under 2.2 in that document?

A. Yes.

Q. Okay. And under A, it says -- well, first of all, under "Scope" it says "The contractor shall provide the government expert witness services in support of the case" and then it has Camp Lejeune and a file number.

Do you see that?

A. Yes.

Q. And it says "The services include the following as required by the Department of Justice."

Do you see that?

A. Yes.

Q. And under A, do you see where it says "will provide testimony in the field of forensic accounting and valuation of damages"?

A. Yes.
Q. Okay. Is that consistent with your understanding of the scope of work that was requested for the Camp Lejeune litigation?
A. Yes.
Q. And is that consistent with the scope of work that you testified remained through the current time period?
A. Yes.
Q. Do you have any understanding as to whether the scope of work will change?
MR. ORTIZ: Objection.
You can answer.
A. I don't believe so.
(By Ms. Butler)
Q. Have you been given any assumptions to rely on in this case?
MR. ORTIZ: Objection.
You can answer.
A. No.
(By Ms. Butler)
Q. We'll look at your reports later, but you have made some assumptions in this case; is that correct?
A. Yes.

Q. And so you determined what assumptions to make; is that correct?
A. Yes.
Q. Okay. You have provided nine reports in this case; correct?
A. Yes.
Q. And those nine plaintiffs have either kidney cancer or bladder cancer; is that correct?
A. Yes.
Q. Do you have any particular expertise in the areas of bladder cancer or kidney cancer?
A. No.
MR. ORTIZ: Objection to form and foundation.
You can answer.
A. Sorry. No.
(By Ms. Butler)
Q. Do you understand that there are other diseases involved in these Track 1 bellwether trials?
A. Yes.
Q. Okay. And do you know what those other diseases are?
A. I've heard a couple of them, but I do not know what they all are.

Q. Do you know why you were retained -- or Forvis Mazars was retained only for bladder cancer and kidney cancer cases?

MR. ORTIZ: Objection.

And you can answer to the extent it does not involve disclosure or substantive communications with counsel.

A. No.

(By Ms. Butler)

Q. Okay. During the course of your work, did you review any cases other than the bladder cancer and kidney cancer cases for which you've provided reports?

A. No.

Q. Okay.

A. I -- sorry. There originally were, I guess, 20 plaintiffs before it got down to the five; so nine at where we are now. So there were additional plaintiffs for bladder and kidney cancer until, I guess, a legal decision or court decision to only do a certain number. So there were originally a lot more and -- before I narrowed down to the nine that I issued reports for.

Does that make sense?

Q. Do you recall when it was narrowed down to the nine?

A. I -- I believe sometime in 2024 it was narrowed down. There were originally, like I said, 20 plaintiffs for each disease, and then it got down to five each.

Q. 20 plaintiffs for bladder cancer and 20 plaintiffs for kidney cancer?

A. Yes.

Q. Before it was narrowed down to the nine, for which you've provided reports, do you recall how many hours approximately you had spent working on the case?

A. No.

Q. But you think that was sometime in 2024?

A. Yes.

Q. Do you recall whether it was spring? Fall? Winter? Summer?

A. I don't.

Q. Okay. At this point in time, we have nine reports that have been filed -- or served in this case; correct?

A. Yes.

Q. Okay. Do you -- are the opinions expressed in those reports the extent of the

opinions you intend to testify on in this case?

MR. ORTIZ: Objection.

You can answer.

A. Yes.

(By Ms. Butler)

Q. What did you do to prepare for today?

A. I had a -- a couple of calls with counsel and reviewed the -- my reports.

Q. When you were on the calls with counsel, was there anyone else on those calls other than the lawyers for the Department of Justice?

A. No.

Q. Have you spoken with any other experts in this case?

A. No.

Q. Have you spoken with -- other than other Forvis Mazars individuals, have you spoken with anyone else about this case?

A. Apologize. I did speak -- I met Dr. Ji on a phone call -- I'm now recalling -- and it was a meeting of, "Hello, nice to meet you." And it was maybe five minutes.

MR. ORTIZ: And I'm just going to object to anything further under the CMO as both the retained experts and that's privileged.

(By Ms. Butler)
Q. And Dr. Ji -- and that's spelled J-i; correct?
A. Yes.
Q. And it -- we'll get into your report, but you rely on some of his numbers -- is that correct? -- some calculations he made?
A. Yes.
Q. Okay. And other than Dr. Ji and the Department of Justice attorneys and other people at Forvis Mazars who worked on this matter, have you spoken to anyone else about your work?
A. No.
Q. Were any materials supplied to you since you produced your supplemental Materials Considered List on February 5, 2026?
A. No.
Q. Have you looked up anything on the Internet with respect to this case?
MR. ORTIZ: Objection.
You can answer.
A. What -- what do you mean by -- just Camp Lejeune?
(By Ms. Butler)
Q. Well, for example, your reports do

contain some citations. And so I would understand that there might be some footnotes in your reports of things that you pulled up on the internet. Would that be accurate?

A. Yes.

Q. Okay. Other than anything referred to in your reports, have you done any just general Googling or, you know, research for purposes of this case?

A. Yes.

Q. Okay. What types of things were you looking for?

A. It would have been, you know, VBA benefits, understanding some of that.

Q. And tell me what types of materials did you review on VBA benefits?

A. I don't know. It would be over the last few years when -- while conducting my analysis and research. I know that I've researched the VBA or the VA website when calculating the offsets.

Q. Were your searches focused on the calculations that you made in your reports?

MR. ORTIZ: Objection to form.

You can answer.

A. Yeah, I guess so. Yes.
(By Ms. Butler)
Q. And the reason I ask -- so, for example, I have in front of me -- and I'm not going to mark it as an exhibit, but it's a 2025 annual report of the boards of trustees of the Federal Hospital Insurance and Federal Supplementary Medical Insurance trust funds. This pertains to Medicare. Okay?
A. Okay.
Q. It's a big old document. Were you looking for things just to get a general background on things like VBA disability, Medicare, government payor programs? Or were you trying to find out -- were you trying to find resources to help with your calculations?
MR. ORTIZ: Objection to form and foundation.
A. It would be resources for my calculations.
(By Ms. Butler)
Q. Okay. And what I'm trying to understand is, do you believe that you have sufficient background, training, or experience to testify about VBA in general?

MR. ORTIZ: Objection.
You can answer.
A. No, not VBA in general.
(By Ms. Butler)
Q. Okay. So, as far as veterans disability benefits and how ratings are decided and how the Veterans Benefit Administration [sic] determines the ratings they assign, do you feel that you have any expertise in that area?
MR. ORTIZ: Objection.
A. No.
(By Ms. Butler)
Q. And was your research, when you were looking on the Internet, geared at understanding that aspect of VBA disability benefits?
A. No.
Q. And you're a forensic accountant; correct?
A. Yes.
Q. Okay. And can you just give me a general description of what a forensic accountant does.
A. Well, what I do is I assist attorneys with their financial aspects of their cases.
Q. Okay. And so do you create queries to

pull data, or do you use data that other people supply to you to analyze it?

MR. ORTIZ: Object to form.

A. A little bit of both.

(By Ms. Butler)

Q. Okay. In this case, did you create queries to pull the VBA disability data that you analyzed?

MR. ORTIZ: Objection.

A. No.

(By Ms. Butler)

Q. And so in this case, with respect to VBA disability benefits in particular, were you supplied the data that you analyzed?

A. It was provided -- yes, documents were provided.

Q. Okay. And did -- did you do anything to go back and validate the information that was provided to you?

MR. ORTIZ: Objection.

A. No. It was a -- a veteran's document.

(By Ms. Butler)

Q. Okay. So, for example, you might have received a ratings decision for a particular plaintiff; is that correct?

A. Yes.
Q. And then you took that ratings decision and you made calculations as evidenced in your report. Is that accurate?
A. Yes.
Q. Okay. But you did not go back to understand how the ratings decision had been determined; is that correct?
MR. ORTIZ: Objection.
A. Correct.
(By Ms. Butler)
Q. Okay. I'm just trying to understand the extent of your research on the Internet. So you -- you indicated that you did some Internet research on VBA disability benefits for the purpose of your calculations. We've established that; correct?
A. Yes.
Q. Did you do any other Internet research?
A. It would've been for retirement -- the concurrent retirement and disability pay. I would've -- I researched that.
Q. And, again, was that to understand how to do your calculations?
A. Yes.

Q. But not to, I guess, validate the information that had been given to you; correct?

MR. ORTIZ: Objection.

You can answer.

A. Correct.

(By Ms. Butler)

Q. Did you do any other Internet research?

MR. ORTIZ: Object to form.

A. I don't believe anything else that was not already in my reports.

(By Ms. Butler)

Q. Okay. So, for example, did you do any searches to look into the viability of the Medicare system in the future?

MR. ORTIZ: Objection.

A. No.

(By Ms. Butler)

Q. Did you do any research to look into the solvency of the Veterans Benefit Disability Program?

MR. ORTIZ: Objection.

A. No.

(By Ms. Butler)

Q. Okay. So would it be accurate to say that the Internet research you did was in order

to make the calculations that are in your reports?

A. Correct.

Q. Okay. And are there any assumptions in your reports that are based on any Internet research you did?

A. No.

Q. When you did this Internet research, did you print anything that is not identified in your reports?

A. No.

Q. So any of the Internet research you did to support the conclusions in your reports, is it footnoted or noted in your reports?

A. I believe so.

Q. Okay. Have you kept any personal notes or records relating to this matter?

MR. ORTIZ: Objection.

A. No.

(By Ms. Butler)

Q. Do you know if anyone else on your team at Forvis Mazars has kept any notes related to this matter?

A. I don't.

MR. ORTIZ: Objection.

A. I don't.

(By Ms. Butler)

Q. You don't know one way or another?

A. I don't.

Q. What kind of time records do you generally keep at Forvis Mazars? Do you -- for example, attorneys will enter the date, what was worked on, and the amount of time worked on. Is that similar to the type of record you generally keep?

A. Yes.

Q. Okay. And do you know what the requirements were for keeping time records in this case?

A. No. I mean, I don't understand your question.

Q. Let me ask it a better way.

To the best of your knowledge, did you and the other individuals at Forvis Mazars keep time entries in the manner that I just noted? For example, on a -- the date, what was worked on, and the amount of time worked on, and then it would indicate who worked on that activity?

A. Yes. That's how it's input into the system.

Q. Okay. And is -- is that consistent with how you generally bill for Forvis Mazars's work?

A. Well, when I was with Forvis Mazars full time and did billing, it was summarized. So you would see an employee's name and the total hours worked over a time frame.

I believe recently for the billing, they asked for it broken out.

Q. Okay. Do you know how the Department of Justice found Forvis Mazars for this case?

MR. ORTIZ: Objection.

A. Just what I --

MR. ORTIZ: Sorry. Objection.

Go ahead.

A. Just what I said earlier. The attorney called me, and said he was -- my name was referred to him.

(By Ms. Butler)

Q. Have you ever worked with the Department of Justice before this case?

A. Yes.

Q. Okay. How many times?

A. I'll estimate five or six.

Q. Can you tell me, generally, for each of those five or six times the type of work you were

doing for the Department of Justice.

A. It would -- defense work, clearly. I believe they were personal injury cases.

Q. Were any of those cases also situations where you were calculating veterans disability benefits?

MR. ORTIZ: Objection.

A. No, I don't think so.

(By Ms. Butler)

Q. Have you ever before calculated veterans disability benefits in the manner you calculated them for this case?

MR. ORTIZ: Objection.

A. No.

(By Ms. Butler)

Q. And so given that you had not performed that scope of work before, was that Internet research we discussed earlier in order to inform you how to make those calculations?

A. No.

Q. What was it for, then?

A. It was for the numbers that went into my calculations.

Q. Okay. So how did you -- since you had not performed these calculations before with

respect to veterans -- veterans disability benefits, how did you educate yourself as to how to make those calculations?

A. The -- well, it's the -- it's a very similar calculation that you would do for any other economic damages such as lost wages, or benefits, those sort of things. You've got a but-for situation.

So I was -- you know, went through the documents and understood to look at what was -- kind of what would have been without the injuries or without the Camp Lejeune related conditions compared to, you know, with them and without them.

Q. Did you speak with anyone with the Veterans Benefit Administration regarding your calculations for this case?

MR. ORTIZ: Objection.

A. No.

(By Ms. Butler)

Q. Did you speak with anyone who had background, experience, or training in doing the types of calculations you were doing in this case?

MR. ORTIZ: Objection to form.

You can answer.

A. No.

(By Ms. Butler)

Q. So is it accurate to say that you determined how to make the calculations in this case based on how you just described and that there weren't outside resources that you relied upon?

MR. ORTIZ: Object to form.

You can answer.

A. There -- I guess, no. I'm trying to understand your question. Can you ask that again, please?

(By Ms. Butler)

Q. So I'm trying to understand. I just want to make sure -- you made calculations in this case with respect to veteran disability benefits; correct?

A. Yes.

Q. And as you described, and as in your reports that we'll review, you made determinations about Camp Lejeune related benefits and benefits that would have been, I guess, going to the veteran regardless of the Camp Lejeune litigation; is that correct?

A. I made calculations, not the determination. So I used the data provided by the VBA to calculate the but-for calculations.

Q. And by "but for," you mean but for Camp Lejeune?

A. Correct.

Q. Okay.

A. Sorry. Yes. With the Camp Lejeune conditions and without. I compared what their disability benefits would have been either way.

Q. So what I'm trying to understand is if you did any research before you made those calculations. That's what I'm trying to get at. And I know I'm not asking the best questions.

So I asked if you had talked to anybody at the VBA and you said, "No." I'm trying to understand if you did any other research before you made those calculations.

MR. ORTIZ: Objection.

A. No. No, the only research was -- and it's footnoted in the report of the websites used to show me how to get the ratings and what the dollar figures were that go along with those ratings.

(By Ms. Butler)

Q. And do you know how the information was compiled that you were provided to make those calculations?

MR. ORTIZ: Objection.

A. How -- how I received the -- there were a lot of documents, and I don't know how they were received by the DOJ, but they were uploaded to a system that we sifted through.

(By Ms. Butler)

Q. And those documents are referenced at the end of your report or in your Materials Considered List; correct?

A. Correct.

Q. Okay. And there are Bates numbered documents that are, for example, ratings decisions. Is that accurate?

A. Yes.

Q. And maybe some Excel spreadsheets; is that correct?

A. Yes.

Q. And you did not compile those documents. You received them and reviewed them; is that correct?

A. Yes.

Q. And then made your calculations from

them?

A. Yes.

Q. Okay. Do you have any personal or professional connections with any other experts in this case?

A. I just met one of them. We're both on the board of a forensic economists group. And I just met her.

Q. Who is that? Sorry to put you on the spot.

A. Dubravka? Is that -- I don't know if I said that right. It's the other female --

Q. Tosic?

A. Yes. Her last name -- sorry. I just met her. I didn't know that she was involved in the case.

Q. How recently was that that you met her?

A. In January.

Q. Okay. Of this year?

A. Yes.

Q. Okay. And I don't want to know the subject -- or the substance, but did you discuss the case with her? Just a yes or a no?

MR. ORTIZ: You can answer to the extent it doesn't involve disclosure of

substantive discussions between retained experts.
A. Nothing past, "Oh, we're both involved," and that was it.
(By Ms. Butler)
Q. Have you reviewed any of her reports in this case?
A. No.
Q. Have you reviewed any reports of an individual -- I forget his first name, but his last name is Brod, B-r-o-d?
A. I have not reviewed his.
Q. Okay. And you have not spoken to any of the plaintiffs -- plaintiffs in this case; correct?
A. Correct.
Q. Are you familiar with any of the other experts in this case?
MR. ORTIZ: Object to form.
A. I have seen Dr. Brod's name in a prior case. I cannot tell you what it was, but I've seen him before.
(By Ms. Butler)
Q. Have you formed an opinion about Dr. Brod?
MR. ORTIZ: Objection.

A. I -- I don't recall if I had a -- a report or not, but I was an opposing expert to him in a case some years back.
(By Ms. Butler)
Q. Do you remember what the name of that case was or where it was?
A. No.
Q. Was it in South Carolina? North Carolina? Do you recall?
A. I don't recall at all.
Q. Okay.
A. I'm sorry.
Q. And do you recall whose opinion prevailed?
A. I don't --
Q. Okay.
A. -- recall.
Q. Are you familiar with any of the other experts in this case other than Dr. Brod -- and you just met Dr. Tosic?
A. For plaintiff or defense?
Q. Both.
A. Yes. Plaintiffs' experts, I'm familiar with.
Q. And let's take them one by one. Tell

me, first -- the first one you're familiar with?
A. Fryar.
Q. Fryar. Michael Fryar?
A. Yes.
Q. Okay. And how are you familiar with him?
A. With all -- all my work. I do a lot of work with -- with him as -- as an expert on some of my cases.
Q. Okay. And he's a life care planner; is that correct?
A. I think he does vocational and life care planning.
Q. Okay. And you've been on the same side of cases with him?
A. Yes. I've been on both sides with him.
Q. And have you generally found him to be knowledgeable and experienced in the areas in which he renders opinions?
MR. ORTIZ: Objection.
A. Yes.
(By Ms. Butler)
Q. Who is the next expert that you're familiar with?
A. That might be it. Or you may need to

list them.

Q. Okay. And I'm going to go through your Materials Considered List later --

A. Yes.

Q. -- and we can look at -- at the individual experts at that time. But no others come to your mind? Mr. Staller -- had you worked with him or in cases involved?

A. I -- I think it was just Fryar.

Q. Okay. Have you worked with any of the attorneys in this case before on either side of the case?

A. I -- I don't know who all the plaintiffs' attorneys are. There are lots of them, but I -- in this room, no.

Q. Okay. I don't want to hear about the substance of any conversations you've had with the Department of Justice attorneys, but can you give me an approximate number of times you have met with them either via telephone or in person or on a Zoom call?

MR. ORTIZ: And you can answer but just instruct you not to disclose any communications with DOJ counsel.

A. It's a pure guess, ten to 15 times over

the last about four years or so.
(By Ms. Butler)
Q. And have there been the same attorneys, or have you dealt with a number of attorneys on the -- at the Department of Justice?
A. There have been a number of attorneys. I think the original attorney is -- is no longer there.
Q. And who was that?
A. Dan Eagles.
Q. Okay. Do you recall any of the other attorneys that you've worked with in those ten to 15 times that you've had meetings or calls?
A. The two here. There's Michael, there's --
Q. Mr. Cromwell?
A. Yes. That's -- that's who I can think of right here on the spot.
Q. And during any of those calls or meetings or communications, were -- was anyone present other than Department of Justice attorneys?
A. Just that one time when I met Dr. Ji.
Q. Okay. I forgot to ask you in the beginning. Can you give us your date of birth?

A. [redacted]/77.

Q. Okay. And do you live and work in the Mount Pleasant area?

A. Yes.

Q. How long have you lived here?

A. I've lived in Mount Pleasant for 16 years.

Q. And I believe you went to Clemson; is that correct?

A. Yes.

Q. Okay. And you have been employed with Forvis Mazars since 2024; is that correct?

A. Yes. There were some name changes but same company.

Q. And I think it was just called Forvis from 2022 to 2024; is that correct?

A. Yes.

Q. Okay. And before that who were you employed with?

A. So like I said, it was the same company, just name changes, but it was Dixon Hughes Goodman. Before that it was Dixon Hughes. I think before that, it was Pratt-Thomas Gumb. I was -- in 2004, I was hired by Pratt-Thomas Gumb; and through mergers and so forth, it ended up

Forvis Mazars.

Q. So even though your resume, which we'll -- I will look at in a minute -- reflects all these different employers, you've been with basically the same entity since 2004; is that correct?

A. Yes.

Q. And is that employment in your position as a forensic accountant?

A. Yes.

Q. Okay. And do you hold yourself out as an economist?

A. I would say I'm a forensic economist/accountant.

Q. And what is your background, training, and experience in the forensic economic area?

A. I have been working in this field for 22 years under other forensic economists and trained -- trained and worked under him and have -- go to annual conferences for forensic economics, and I'm on the board of two of those organizations and work with them and review the -- the journals and been training and studying with those economists for all these years.

Q. And any of the opinions that you are rendering in this case with respect to the area of forensic economics, are they expressed in the nine reports that you've provided?

MR. ORTIZ: Objection.

You can answer.

A. Yes.

(By Ms. Butler)

Q. Okay. And so whether it's because of your forensic accounting background or under the area of forensic economics, the opinions are all in your reports. Is that accurate?

A. Yes --

MR. ORTIZ: Same objection.

You can answer.

A. Yes.

(By Ms. Butler)

Q. Is there a way you would divide your opinions in this case as falling under the category of forensic accounting in this area or forensic economics in this area, or is it kind of a combination?

A. It is all the same. I was telling you, I am a forensic -- I am a forensic economist. I have -- with a CPA license. So I -- I am a

forensic economist is what I would say. But there is no distinction between the opinions in the report. It is all the same.

Q. Okay. Now, you also have a separate consulting LLC titled, Yount Forensic Consulting, LLC; is that correct?

A. Yes.

Q. What do you do under that LLC versus your role at Forvis Mazars? Is it different?

A. So I left Forvis -- Forvis Mazars a year and a half ago to start my own company, and I've contracted back. So I'm an independent contractor with Forvis Mazars, finishing up cases that I was already involved in. So I do the exact same thing, just self-employed.

Q. So with respect to your work on this case since you left Forvis Mazars, how are you compensated?

A. They pay me an hourly rate for the work I do.

Q. Forvis Mazars does?

A. Yes.

Q. And what is your hourly rate?

A. I believe that they pay me 350 an hour.

Q. And to the best of your knowledge, have

you received 350 per hour for your work on this case since the beginning of your work on this case?

A. No.

Q. Okay. Can you walk me through the progression since 2024 forward and how that has changed?

A. It would have been September 2024 when I left -- September 11th, 2024. And since that date, I would be an independent contractor and was paid for hourly work. Before that I was a salaried employee.

Q. So before you left Forvis Mazars, while you may have had an hourly rate that you billed out to clients, you were on a salary at Forvis Mazars?

A. Yes.

Q. Okay. But since you left Forvis Mazars, you receive 350 an hour for your work on this case?

A. Yes.

Q. Okay. And that goes through Yount Forensic Consulting, LLC?

A. Yes.

Q. Now, do you have any employees or other

individuals, whether they're independent contractors or whatever their relationship is, that work with you at Yount Forensic Consulting, LLC?

A. No.

Q. I'm going to mark as Exhibit 2 your CV that's been provided in this case.

(Exhibit Number 2 was marked.)

(By Ms. Butler)

Q. Do you recognize this document?

A. Yes.

Q. Is there anything on this document that would need to be updated?

A. No.

Q. So we've already gone through some of this, but it looks like you graduated from Clemson in December 2000; is that correct?

A. Yes.

Q. And then you were employed with Bank Of America until you joined Dixon Hughes Goodman LLP; is that correct?

A. Yes.

Q. And as you've explained, I believe Dixon Hughes is now what is Forvis Mazars; is that correct?

A. Yes.

Q. Okay. And it looked like based on your certifications, licenses, and associations that you obtained your CPA license in 2013; is that correct?

A. Yes.

Q. Okay. And you received a master analyst in financial forensics in March 2008?

A. Yes.

Q. Is -- what is the master analyst in financial forensics?

A. It is a certification that is through one of those associations below, the National Association of Certified Valuators and Analysts, and it's a -- it's a course in -- regarding financial calculations and damages for litigation matters.

Q. Okay. And is -- is that a course that takes a number of hours or a number of weeks or a number of months? Which is it?

A. It was a full week, like, I guess, 40-plus hours --

Q. Okay.

A. -- of a class and then an exam at the end.

Q. Okay. And have you held any teaching positions, presented any lectures, published articles, or held positions that are not on your resume?

A. No.

Q. Okay. And your CV shows no background in medicine; is that correct?

A. Correct.

Q. And so you have no training, knowledge, or experience with respect to the Track 1 diseases at issue in the Camp Lejeune litigation; correct?

MR. ORTIZ: Object to form.

You can answer.

A. Correct.

(By Ms. Butler)

Q. And in particular, you don't have any specialized training or knowledge about kidney cancer or bladder cancer; correct?

MR. ORTIZ: Object to form.

A. Correct.

(By Ms. Butler)

Q. And so am I correct that you are not opining in this case as to what care any of the plaintiffs might need in the future?

A. Correct.

Q. Are you relying on life care plans prepared by other individuals for the calculation of the amounts associated with that type of care?

A. For the -- the actual needs and the current cost of that care, I am relying on other medical experts.

Q. Okay. And am I correct that you're not opining as to whether the care a plaintiff might need will be available through government programs such as Medicare, Tricare, in the future?

MR. ORTIZ: Objection.

You can answer.

A. I am not.

(By Ms. Butler)

Q. Okay. And so that is outside the scope of your expertise to opine as to whether the care they need will actually be available through the programs that are offered currently; is that correct?

MR. ORTIZ: Same objection.

You can answer.

A. Correct.

(By Ms. Butler)

Q. And you -- am I correct that you are not opining as to whether the providers who offer care provided for by government programs -- whether those would be the best care for any of the plaintiffs in this litigation?

MR. ORTIZ: Objection.

A. Correct.

(By Ms. Butler)

Q. You are not offering that opinion; correct?

A. I am not.

Q. Okay. And your CV shows no background in veteran disability benefits or government provided healthcare and that's accurate?

MR. ORTIZ: Objection.

A. Correct.

(By Ms. Butler)

Q. Okay. And so other than the Internet research we discussed earlier to make your calculations in this case, you don't have any training, knowledge, or experience in the Veterans disability system?

MR. ORTIZ: Objection.

A. No.

(By Ms. Butler)

Q. Okay. And you don't have any background in Medicare, do you?

A. No.

Q. Okay. And you don't have any background or experience with other government payor programs like TriWest or Community Care Network or Tricare; correct?

MR. ORTIZ: Objection.

A. Correct.

(By Ms. Butler)

Q. And so you are not offering any opinions in this case as to the availability of that care in the future; correct?

MR. ORTIZ: Objection.

A. Correct.

(By Ms. Butler)

Q. And do you do life care plans?

A. No. That would be the medical expert. I calculate the present value of life care plans.

Q. Okay. And did you speak with any of the persons who prepared life care plans in this case?

A. No.

Q. And in your reports, you also deferred, for example, to Dr. Ji on the calculation of

medical expenses; is that correct?
A. Yes.
Q. Okay. And you deferred to the Veterans Benefit Administration as to the amounts of disability benefits provided to the plaintiff; correct? You just divided them between Camp Lejeune related and not Camp Lejeune related?
MR. ORTIZ: Object to form.
A. Yes, that would be the -- I guess, the -- the research that says what the monthly payments are based on their disability.
(By Ms. Butler)
Q. And you didn't determine the monthly payments -- let me back up. Let me rephrase that.
You didn't calculate the monthly payments for the VBA; correct?
A. No. I took their data, and I did calculate future benefits based on their data.
Q. Okay. So would it be accurate to say that your expertise in this case, that you're relying on, is to forensically analyze economic data that was provided to you by others?
MR. ORTIZ: Object to form.
A. No.

(By Ms. Butler)
Q. What would you say your expertise in this case is?
A. Is to provide the present value of the economic damages and then provide the -- a calculation of potential offsets.
Q. And with respect to potential offsets, is that your calculation of the but-for Veterans disability benefit -- benefits -- sorry -- that were provided to the plaintiffs?
A. That would be the but-for calculation. Sorry. Ask that one more time. I got --
MR. ORTIZ: Yeah, sorry. It was --
(By Ms. Butler)
Q. Sorry. Sorry. We were -- let me -- let me back up.
You applied present value to certain amounts -- is that correct? -- in this litigation?
A. Yes.
Q. Okay. And -- and you applied those present values to amounts that others had calculated; correct?
A. The data provided, I calculated present value amounts to.

Q. And then the second thing you did in this case -- I'm just trying to make sure I understand -- is the but-for calculation we talked about with respect to disability; correct?

A. Yes. The -- the offsets calculations. I did a present value for that as well.

Q. Okay. Let me ask you what your understanding is of an offset. You've used that word a couple of times.

MR. ORTIZ: Object to form.

A. As part of my scope, I was asked to calculate the potential offsets, and I was explained that there's a statute that says the government gets an offset, and that's the extent of that word. But it's basically any payments that they had made and any disability awarded to the plaintiffs. I was asked to add them together.

(By Ms. Butler)

Q. Okay. Have you looked at that statute?

A. I have seen it.

Q. Okay. Are you rendering any opinions as to how that statute should be interpreted?

A. No.

Q. Okay. And so are you just calculating

the figures that the government is going to present to the Court as an offset?

MR. ORTIZ: Object to form and foundation.

A. Yes.

(By Ms. Butler)

Q. And do you have any opinion as to how those offsets should be applied?

A. No.

MR. ORTIZ: Objection.

A. No.

(By Ms. Butler)

Q. Okay. And so you do not intend to render an opinion as to how your figures should be applied. You've just calculated the numbers; correct?

MR. ORTIZ: Objection.

You can answer.

A. Correct.

(By Ms. Butler)

Q. And have you been involved in other cases where you have presented figures for offsets?

A. One case, many, many years ago for a DOJ case, there was a lawyer who had asked us to look

at potential offsets in a different manner. I'm vaguely recalling that. That would be the only extent that I recall ever doing that.

Q. Did that case involve VBA disability benefits?

A. I don't believe so. I believe it was a life care plan -- plan the plaintiffs were calculating and the defense attorney, I guess similar to here -- the offsets for what they -- the government would pay for that medical care.

Q. Have you ever considered the use of an offset as a credit against a damage award?

MR. ORTIZ: Objection to form and foundation.

A. I guess it would be similar to what I just explained. It was just whatever the payments -- the government was going to pay on behalf of the plaintiff. That's it.

(By Ms. Butler)

Q. And do you recall in that case -- did you actually testify as to an offset number in that case?

A. No.

Q. Okay. And so you -- you never rendered an opinion in that case on the offsets. Is that

accurate?
A. That's --
MR. ORTIZ: Objection.
(By Ms. Butler)
Q. To the best of your recollection?
A. That's accurate. To the best of my recollection, we reviewed the data and then I believe the case settled and didn't go any further.
Q. And so I just want to make sure I'm clear. In this case, you're not rendering an opinion as to how these figures you calculated should be applied under the Camp Lejeune Justice Act; is that correct?
MR. ORTIZ: Objection. Asked and answered.
(By Ms. Butler)
Q. Is that correct?
A. Correct.
Q. Okay. Going -- returning back to Exhibit 1 -- sorry -- Exhibit 2, which is your CV, down in the "Consulting Experience" -- do you see that paragraph?
A. Yes.
Q. It says in the third sentence that

"Tricia has experience with engagements involving the analysis of wage loss."

Do you see that?

A. Yes.

Q. What is wage loss?

A. When someone's claiming a loss of earnings.

Q. And do you typically provide wage loss analysis in cases? Is that something you do regularly?

A. Yes.

Q. Okay. And when you are deciding a loss of -- I guess, calculating loss of earnings in a case, do you distinguish between loss of earnings and loss of earning capacity?

A. Yes.

Q. What is the difference in your view?

A. The loss of earnings is what's expected based on what the person was doing at the time is my understanding. And the loss of earning capacity would be the loss of ability to use, you know, to your full potential of earnings based on the person's, you know, education and background.

Q. And what do you base that understanding on?

A. I'm sorry. The -- the --
Q. The --
A. My knowledge of this?
Q. Yes.
A. My experience and training in this field and my knowledge.
Q. Do you calculate both loss of earnings and loss of earning capacity in cases?
A. Yes.
Q. Okay. And are those different calculations?
A. Not really.
Q. Okay. Do you use the same information for both calculations?
A. Typically when you're looking at earning capacity, you could look at market data to determine what someone's potential earnings could have been.
Q. And that's different from loss of earnings where you look at past employment; is that correct?
A. That's -- one of the sources is looking at what they were doing at the time, actual pay stubs, that kind of thing.
Q. What are other sources for determining

loss of earnings?

A. You could also look at market data as well. I was saying that you didn't have to only look at tax returns and pay stubs.

Q. Do you have any understanding as to what veterans disability benefits are intended to compensate a veteran for?

MR. ORTIZ: Objection.

A. For their disability, for living with a disability.

(By Ms. Butler)

Q. And where did you gain that understanding?

A. That would have been on the VA website.

Q. Do you have any understanding as to whether veterans disability benefits are intended to compensate a veteran for loss of earning capacity?

MR. ORTIZ: Objection.

A. No.

(By Ms. Butler)

Q. So you don't intend to render any opinions as to what veterans disability benefits are intended to compensate a veteran for; is that correct?

MR. ORTIZ: Objection.

A. Correct.

(By Ms. Butler)

Q. Okay. That's outside the scope of your expertise?

MR. ORTIZ: Objection.

A. Correct.

(By Ms. Butler)

Q. Your consulting experience in your CV goes on to say in the next sentence that "Tricia has been qualified as an expert in the field of economic and financial damages in federal and state courts and has testified in various venues"; is that correct?

A. Yes.

Q. And I believe you said this earlier. Are you often retained in personal injury cases?

A. Yes.

Q. Okay. And are you retained by both plaintiffs' counsel and defense counsel?

A. Yes.

Q. And so you've testified in both types of cases?

A. Yes.

Q. And would you say that you have kind of

a -- a typical case that you get involved in, or are they all different?

A. I mean, they're all different. Personal -- any kind of injury, wrongful death, wrongful termination cases.

Q. So I understand the facts are different, but is your analysis generally the same type of methodology and the same type of opinion that you're being asked to render?

MR. ORTIZ: Object to form.

You can answer.

A. Yes, calculation of present value calculations.

(By Ms. Butler)

Q. Okay. Present value calculations for damages?

A. Yes.

Q. And would that encompass various categories such as medical expenses?

A. Future medical care, yes.

Q. Would it also encompass other categories like household services?

A. Yes.

Q. And do you look at both past and future damages in those cases?

A. Yes.
Q. Attached to your CV is deposition and trial testimony over the last four years.
Did any of these cases involve -- or, well, let me ask: Did any of these cases involve veterans disability benefits?
MR. ORTIZ: Object to form.
You can answer.
A. I don't think so.
(By Ms. Butler)
Q. Okay. And did any of these cases involve testimony regarding offsets?
A. No.
MR. ORTIZ: Object to form. You can answer.
A. Sorry. No.
(By Ms. Butler)
Q. And are there any cases not identified on here that you can recall that involve testimony on your part involving disability benefits or government payor offsets?
MR. ORTIZ: Object to form.
A. No.
MR. ORTIZ: Jenna, we've been going about an hour, a little over an hour. Maybe now

is a good time --

MS. BUTLER: Yes. I meant to state this, and I'll state it on the record now that you are welcome to take a break at any time, and now is a good time. I do ask if I have a question pending that you answer it, but other than that, just let me know whenever you need a break. And we'll take a break right now for about five minutes if that's good for everybody.

MR. ORTIZ: That's fine.

THE DEPONENT: Okay.

MS. BUTLER: Okay. Great.

THE VIDEOGRAPHER: All right. Time is now 10:57. We're off the record.

(A recess was taken.)

THE VIDEOGRAPHER: Time is now 11:06. We're back on the record.

(By Ms. Butler)

Q. Ms. Yount, we were looking at your CV which is Exhibit 2. Do you still have that in front of you?

A. Yes.

Q. Now, you earlier indicated that you had actually had a case in which one of the other experts in this case, Dr. Brod, was involved.

Do you recall that testimony?
A. Yes.
Q. And I believe you said you were opposing experts. Is that accurate?
A. Yes.
Q. Do you recall if that case is one of those that is listed on the back of your resume?
A. I do not.
Q. Okay. And do you recall what your criticisms were of Dr. Brod in that case?
MR. ORTIZ: Object to form and foundation.
A. I do not.
(By Ms. Butler)
Q. Okay. Do you recall what his criticisms of you were in that case?
MR. ORTIZ: Same objection.
A. Again, I don't -- if I didn't issue a report, he may not have known I was involved. I could have been a consultant for the defense. I -- I don't recall.
(By Ms. Butler)
Q. Okay. You just recall that he was involved and that you had differing opinions?
MR. ORTIZ: Object to form and

foundation.

A. I did not say "differing opinions." I said I reviewed his expert report. I do not recall what my faults were on it, at that time.

(By Ms. Butler)

Q. Okay. All right. I am going to mark as Exhibit 3 --

MS. BUTLER: Do you have her notice of deposition?

I'm going to mark, as Exhibit 3, Plaintiffs' Notice of Deposition and Request for Production of Documents.

MR. ORTIZ: Is this the original notice?

MS. BUTLER: This is the original notice. This is Exhibit 3.

(Exhibit Number 3 was marked.)

MS. BUTLER: And then I'm going to mark, as Exhibit 4, Plaintiffs' Amended Notice.

(Exhibit Number 4 was marked.)

(By Ms. Butler)

Q. I'm going to hand you Exhibit 4. Do you recall that the date of your deposition was changed?

A. Yes.

Q. Okay. And I will represent to you that, other than the date of the deposition, I don't think there are any changes between the Exhibit 3 and Exhibit 4.

MS. BUTLER: Would you agree with that, Mr. Ortiz?

MR. ORTIZ: I think it purported to change the date of compliance, a day earlier.

MS. BUTLER: Okay.

MR. ORTIZ: But other than that, I believe that's accurate.

MS. BUTLER: Okay.

(By Ms. Butler)

Q. So looking at Exhibit 4 -- we'll just use Exhibit 4 for today -- did you -- do you recall seeing this before?

A. Again, assuming it's the same as 3 without the 11, I have peeked at it, yes.

Q. Okay. And do you recall when you received this?

A. In the last couple of weeks.

Q. And if you look at Exhibit 4, behind the notice of deposition, there's a subpoena.

Do you see that?

A. Yes.

Q. And then behind the subpoena, do you see that there's a schedule A?

A. Yes.

Q. Okay. And if you go to page 3 of the schedule A, do you see that there's a request for production?

A. Yes.

Q. Okay. And do you recall reviewing those requests for production?

A. Yes.

Q. And did you produce documents in response to that request for production to the Department of Justice?

MR. ORTIZ: Object to form and foundation.

And -- and instruction not to answer to the extent it would involve any communications between the expert and counsel.

A. Well, I spoke to counsel about it and --

MR. ORTIZ: And I'm going to instruct you not to disclose the substance of -- of communications with counsel.

(By Ms. Butler)

Q. I'll -- I'll ask you this: Regardless of what was discussed, which I don't want to know

about or I can't know about, did you produce documents to the Department of Justice in response to this request for production?

MR. ORTIZ: Objection.

A. No. They provided the documents on my behalf.

(By Ms. Butler)

Q. Okay. So am I correct to state that the Department of Justice already had any of the documents that were produced in response to this request for production?

A. Yes.

MR. ORTIZ: Object to form and foundation.

A. Yes.

(By Ms. Butler)

Q. And so do you know what the Department of Justice produced to us in response to this request for production?

A. I have not seen the actual documents, but I saw the response.

Q. Okay. And I will mark that as our next exhibit, which will be Exhibit 5. I'm marking the United States' Objections and Responses to Plaintiffs' Amended Notice of Deposition and

Requests for the Production of Documents to Tricia Yount.

(Exhibit Number 5 was marked.)

(By Ms. Butler)

Q. I'm going to hand you what has been marked as Exhibit 5. Is this what you just indicated you had seen?

A. Yes.

Q. Did you review Exhibit 5 before it was sent to us?

MR. ORTIZ: Objection.

A. No.

(By Ms. Butler)

Q. Okay. Going through Exhibit 5, if you go back to page 2, Number 1 requested your current CV and bibliography. And we just looked at that; is that correct?

A. Yes.

Q. Okay. So that was attached to your reports. Is that accurate?

A. Yes.

Q. And then Number 2 -- it's fairly lengthy, and if you want to read the whole thing, I welcome -- I will let you do that, but it asks for billing invoices or records. And then if you

go down, it says "This includes all time sheets, time records, billing records, and documents reflecting the time you and/or anyone employed by you or on your behalf spent in connection with your work and any aspect of the Camp Lejeune water contamination litigation."

Do you know if all of that information had been provided to the Department of Justice?

MR. ORTIZ: Objection. Form and foundation.

A. I do not know what the invoices looked like that were sent to them. But I do know that they include -- would include staff and hours and billing amounts.

(By Ms. Butler)

Q. And should they include an entry for each date with a description of the activity, the person who worked on it, and the amount of time spent?

MR. ORTIZ: Objection.

A. I don't know what detail was provided.

(By Ms. Butler)

Q. But that's the typical format that Forvis Mazars uses. Is that accurate?

MR. ORTIZ: Objection.

A. No. What I'd said before was that I -- when I did billing for them two years ago, I would summarize the staff with the hours and that's how the billing was done. I believe recently I was told they had to split out in more detail, but I have not seen their invoices.
(By Ms. Butler)
Q. Okay. So I guess I misunderstood. I thought you said that you typically kept your time on a date -- with a date entry, a description of services, and the amount of time spent.
Did I misunderstand that?
A. No. Time is input into a system that way, correct.
Q. Okay. Okay. And that's a system that Forvis Mazars uses?
A. Yes.
Q. What is it called? Do you know?
A. STAR, I believe. I'm sure there's a formal name. That's all I'm -- I know it as.
Q. Okay. So we have received documents in response to the responses and objections. But it's my understanding you don't know what we've received; is that correct?

MR. ORTIZ: Objection.

You can answer.

A. No.

(By Ms. Butler)

Q. Okay. We previously looked at, I think, Exhibit 1, which was a statement of work. Do you have that in front of you?

A. Yes.

Q. I will represent to you that that was one of the documents that was produced to us in response. And I am going to have marked as -- this is our next Exhibit -- 6 -- Exhibit 6. It is a Statement of Work, Attachment #2, and the last four numbers of the contract purchase order number are 0155.

Again, these do not have Bates numbers because they were produced to me without Bates numbers.

(Exhibit Number 6 was marked.)

(By Ms. Butler)

Q. I'm going to hand you Exhibit 6. Can you take a look at that document?

A. Yes.

Q. Okay. And as with the Exhibit 1, do you see any date anywhere on either of those

documents?

A. No.

Q. Okay. And they both say "Attachment #2, Statement of Work, SOW."

Do you see that?

A. Yes.

Q. Okay. And the Exhibit 1 was ending in 0165; is that correct?

A. Correct.

Q. And this one ends in -- and this Exhibit 6 ends in 0155; is that correct?

A. Yes.

Q. Okay. And do you see -- we looked previously under the scope, which is Section 2.2 in Exhibit 1. Do you see that same section in Exhibit 6?

A. Yes.

Q. And do you see under 2.2A, it again says that -- "will provide expert testimony in the field of forensic accounting and valuation of damages."

Do you see that?

A. Yes.

Q. And that's consistent with what you testified as to the scope of work for this case;

is that correct?

A. Yes.

Q. Okay. I'm going to have marked as Exhibit Number 7. I will represent to you this is another document that was produced to us in response to our request for production.

Have you seen that document before?

(Exhibit Number 7 was marked.)

A. I don't know.

(By Ms. Butler)

Q. Okay. And, again, can you find a date on that document?

A. I don't, but just from my knowledge, I'll point out that you can -- this is '23, this is '24 and '25 based on the contract number.

Q. And how do you tell that?

A. I -- I'm aware of that, that each year they'll -- they updated their contracts because it was only, say, December of each year. And so because of my knowledge of that, I can tell because of the V23 and the V24 and the V25 that these appear to be the updated statement of work for their contract that kept the case going, I guess, in their management.

Q. So Exhibit 1 has the V23 and then it

ends in 0165; correct?
A. Yes.
Q. And then Exhibit 6 has V24 and ends in 0155?
A. Yes.
Q. And Exhibit 7 has V25 and ends in 0162?
A. Correct.
Q. Okay. So it's your understanding that these are statements of work for 2023, 2024, and 2025; is that correct?
A. Correct.
Q. And if you look at the last one, Exhibit 7, is the scope in 2.2A the same as in the other two?
A. Yes.
Q. So consistent with your testimony, the scope of work, which is to provide expert witness services in the field of forensic accounting and valuation of damages. That did not change; correct?
A. Correct.
Q. Do you know if there's been a new statement of work for 2026?
A. I do not know.
Q. And would you expect that scope of work

to stay the same?

A. Yes.

Q. Now, we also were provided a number of contracts. And I've had to piece these together because, again, they were produced a little bit piecemeal to us and some have -- I believe, the copies we now have all have Bates numbers, but I am going to try to present these to you in the order that I have pieced them together.

So let me make sure -- okay. I am going to have marked as Exhibit 8 --

MS. BUTLER: Can we go off the record for a minute? I'm sorry.

THE VIDEOGRAPHER: Time is now 11:21. We're off the record.

(Discussion off the record)

THE VIDEOGRAPHER: Time is now 11:23. We're back on the record.

MS. BUTLER: Sorry. We're back on the record; so what I'm going to do is -- I'm just going to go ahead and have all of these marked, and then that way we can talk about them all.

So Exhibit 8, at the bottom right, says "1/17/23." I'm going to do it face down. There

we go. This will be --

MR. ORTIZ: And for the record these are Bates stamped.

MS. LAMACCHIA: Yes.

MS. BUTLER: Oh, yes, okay. Sorry. I'm not used to working with the Bates stamps because --

MR. ORTIZ: That's fine.

MS. BUTLER: -- I didn't get them that way.

Okay. Exhibit 9 is going to be the one starting with Bates 100, and we'll go through all this, but that's mine. Let's just give the court reporter these, and I'm going to let you mark these. And then I'll go through and identify them.

(By Ms. Butler)

Q. Okay. So what I have marked -- and I'll go through for the record -- is that we have a number of contracts that were produced to us by the Department of Justice.

Exhibit 8 at the top says "Solicitation/Contract/Order for Commercial Items." The contract number ends in 0165. It says "Award/Effective Date 1/17/23."

Do you see that?

(Exhibit Number 8 was marked.)

A. Yes.

(By Ms. Butler)

Q. Okay. Exhibit 9 is also a Solicitation/Contract/Order for Commercial Products. And it has a contract number ending in 0155. The award/effective date -- it says "See Block 31C," and it says "2/21/23."

Do you see that? Exhibit 9?

(Exhibit Number 9 was marked.)

A. Yes.

(By Ms. Butler)

Q. And then Exhibit 10 is another Solicitation/Contract/Order for Commercial Products. The contract number ends in 0162, and the award/effective date is 12/26/24.

(Exhibit Number 10 was marked.)

A. Yes.

(By Ms. Butler)

Q. Do you see that?

MR. ORTIZ: That was 12? Sorry.

THE DEPONENT: 10.

MR. ORTIZ: That was 10.

MS. BUTLER: That's 10. Sorry.

MR. ORTIZ: That's fine. My bad.
(By Ms. Butler)
Q. And then 11 is an Amendment of Solicitation/Modification of Contract.
Do you see that?
(Exhibit Number 11 was marked.)
A. Yes.
(By Ms. Butler)
Q. And the contract ID code ends in 0162.
Do you see that?
A. Yes.
Q. And then down on the bottom right it says "Date signed 8/27/25"?
A. Yes.
Q. Okay. That's 11.
And then 12 is Amendment of Solicitation/Modification of Contract. The contract ID code is 0162.
Do you see that?
(Exhibit Number 12 was marked.)
A. Yes.
(By Ms. Butler)
Q. And it says "Date signed 12/4/2025." Do you see that at the bottom right -- date signed?
A. Yes, I do.

Q. Okay. So that's Number 12. And then did we mark a 13?

A. No.

MR. ORTIZ: I don't think so.

MS. BUTLER: Okay.

A. Yes, sorry.

MS. BUTLER: We did? Is 13, though -- is 13 the same as 12, though?

MR. ORTIZ: I don't --

THE DEPONENT: It appears to be.

MS. BUTLER: But not signed. That's -- that's what it is.

MR. ORTIZ: I don't think I have a 13. Oh, wait. Maybe I do. Is that Bates 25?

MS. LAMACCHIA: Correct.

MS. BUTLER: Yes.

MR. ORTIZ: Okay. Thank you.

(Exhibit Number 13 was marked.)

(By Ms. Butler)

Q. And it's an unsigned version of 12; is that correct?

A. Yes.

Q. Okay. Okay. So looking at Exhibit 8, to the best of your knowledge, is this the first engagement agreement or contract that the

Department of Justice entered into with what is now Forvis Mazars for the Camp Lejeune work that we've been discussing?

A. Yes.

Q. Okay. And if you -- we discussed who BKD, LLP is; correct? Do you see in -- in Box 17A it says that the contractor is BKD, LLP?

A. Yes.

Q. And that's the predecessor to Forvis Mazars; is that correct?

A. Yes.

Q. Okay. And if you go down into kind of the grayed area where it has a Column 20, "Schedule of Supplies/Services."

Do you see that?

A. Yes.

Q. It just says "Period of Performance 1/17/23 to 12/31/23."

Do you see that?

A. Yes.

Q. And then in Box 26, it says "Total Award Amount of 150,000."

Do you see that?

A. Yes.

Q. Is that -- do you -- were you involved

in the negotiation of these contracts?

MR. ORTIZ: Object to foundation.

A. I would not say "negotiations." They asked what our hourly rate was, and they provided this contract.

(By Ms. Butler)

Q. And so is it your understanding that for the work that BKD, LLP, which was now Forvis Mazars, was to perform for the period of performance in Exhibit 8 -- that Forvis Mazars could bill up to $150,000?

MR. ORTIZ: Object to form and foundation.

You can answer.

A. That was the maximum that we were allotted for that time frame.

(By Ms. Butler)

Q. Okay. And if you go back in that document behind the table of contents to the next page where it says "Schedule of Supplies/Services."

Do you see that?

A. Yes.

Q. And, again, does it say "Obligated Amount $150,000"?

A. Yes.
Q. And below that does it say "The total invoices shall not exceed the ceiling/funding amount of 150,000"?
A. Yes.
Q. Okay. And so for that one-year period from January 17, 2023, through December 31, 2023, what is your recollection as to what Forvis Mazars was doing in the Camp Lejeune litigation?
MR. ORTIZ: Object to form and foundation.
A. That first year, I believe we were sifting through a lot of documents.
(By Ms. Butler)
Q. And would those be the documents that are referred to in your Materials Considered List and your reports?
A. Yes. They -- I believe they are. They had a document system that they asked us to go look through to see what documents they had. So half of that was probably trying to understand their system.
But, yes, anything that we looked at -- it was my understanding -- is based in our materials considered.

Q. Okay. I want to back up and make sure I understand.

The Department of Justice asked Forvis Mazars to go through its document system and pick out what it -- what Forvis Mazars wanted to perform its work?

MR. ORTIZ: Objection.

A. When we talked about documents needed, they said, "We have this file system with these documents." And whatever documents they put on that system for our review, we looked at.

(By Ms. Butler)

Q. But the only documents that have been referenced in your reports or on your Materials Considered List are the documents you used to create your reports; is that correct?

MR. ORTIZ: Objection to form and foundation.

A. Not necessarily. Any document that we've looked at, whether or not it's the basis for our opinions, is listed.

(By Ms. Butler)

Q. Okay. So the extent of this document system that you looked through is identified either in your reports or in the Materials

Considered List that have been produced to us.
Is that your testimony?
MR. ORTIZ: Object to form.
A. They should be.
(By Ms. Butler)
Q. Okay. So turning, then, to Exhibit 9. If you look down under the contractor in this exhibit, which is now contract number ending in 0155, do you see that it's Forvis now?
A. Yes.
Q. Okay. And if you look in the period of performance in Column 20, do you see that it's for 12/21/23 through 12/31/24?
A. Yes.
Q. And is that consistent -- when we were looking at those other scope of work documents you indicated that there were different contracts for each year. Is that what you were referring to?
A. Yes. That's what these are.
Q. Okay. And so each year did Forvis Mazars or its predecessors have to enter into a new contract with the Department of Justice?
A. Yes. Whenever it was -- before it would end, we would need to increase the dates and

update the contract.

Q. So looking at this Exhibit 9, which appears to be for the year 2024, do you see that the total award in Block 26 is now 250,000?

A. Yes.

Q. Okay. And what do you recall about the increase of another $100,000 for work to be performed by Forvis for the Department of Justice? What did that involve?

MR. ORTIZ: Objection to form and foundation.

And I assume you're not trying to get any kind of privileged communications --

MS. BUTLER: I'm not asking --

MR. ORTIZ: -- or anything like that.

MS. BUTLER: -- for discussions with the government, but --

MR. ORTIZ: And that's generally true for this line of questions?

MS. BUTLER: Yes.

MR. ORTIZ: Correct.

MS. BUTLER: Absolutely. I -- I am not asking you to disclose attorney-client communications. And if I ask a question that

would elicit that response, just tell me so. But if there's a response you can give that doesn't involve communications with the Department of Justice, that's what I'm trying to look for.

Thank you for that clarification.

(By Ms. Butler)

Q. So let me -- let me ask the question again.

Looking at Exhibit 9, it appears that the total award amount for Forvis's work with the Department of Justice was increased by $100,000 for the year 2024; is that correct?

A. Yes.

Q. Do you know why there was $100,000 increase for the year 2024?

MR. ORTIZ: Objection to form and foundation.

And same instruction we just talked about to the extent you can answer without disclosing privileged communications.

A. It's my understanding that once you -- with contracts with the government, once you hit their maximum amount, if you go over and try to bill for it, there would be a whole big mess and you would have to stop work and it would delay

things.

So they were always ahead of the game and making sure there was plenty of money in their award available to pay any invoices as needed.

(By Ms. Butler)

Q. Do you know if, at the end of 2023, Forvis had billed close to the prior contract amount of 150,000?

A. I don't.

Q. And do you know if, at the end of the 2025, Forvis had billed close to this contract amount of 250,000?

A. I do not.

Q. Do you know the total billings that Forvis Mazars or its predecessors have submitted to the Department of Justice for the work in this litigation?

A. No.

Q. Okay. I'm going to turn to Exhibit 9.

MR. ORTIZ: Exhibit 10.

MS. BUTLER: Oh, sorry. Exhibit 10. Thank you.

(By Ms. Butler)

Q. Which is it starts with Bates number 1.

Do you see that on the bottom right?
A. Yes.
Q. Okay. And if you look at the contract number, we're now in the contract 0162.
Do you see that?
A. Yes.
Q. I'm on Exhibit 10. Okay. Good.
And do you see now in the contractor name it says Forvis Mazars?
A. Yes.
Q. Okay. And the date signed and the award/effective date are both 12/26/24.
Do you see that?
A. Yes.
Q. And the period of performance under Column 20 is for basically the calendar year 2025.
Do you see that?
A. Yes.
Q. And do you see that the total award amount is now $249,850?
A. I see that.
Q. Okay. Do you know why this Exhibit 10, which is the contract for the period covering calendar year 2025, is for an award amount of

249,850 when the prior contract we looked at, which was Exhibit 9, was for 250,000?

MR. ORTIZ: And same instruction about privileged communications that we discussed earlier.

But you can answer.

A. No.

(By Ms. Butler)

Q. Who -- do you know who at Forvis Mazars, I guess, dealt with these contracts with the Department of Justice?

A. There's -- there's no dealing with the contracts. They just send them to us and if we don't sign them, then we don't get paid for any work we -- we do. So they would have -- if they emailed them to me, I would have forwarded them on to, I guess, either partner or Jennifer Walton, who I believed signed one back here, to sign off on.

Q. And so is it to the -- is it your understanding that there's really no negotiation? It's just a matter of signing?

A. Yes.

Q. Okay. And do you have any knowledge as to what the billings were that Forvis Mazars had

submitted to the Department of Justice through the end of 2025 for the Camp Lejeune litigation?

A. No.

Q. So I'm going to turn to Exhibit 11 now. This is another one of those amendments.

Do you see that at the top?

A. Yes.

Q. And it references contract ID code ending in 0162.

Do you see that?

A. Yes.

Q. Do you see in the block for eight where it says "Forvis Mazars, LLP"?

Do you see that?

A. Yes.

Q. Do you see those black lines, which means something was redacted?

A. Yes.

Q. Did you redact that?

A. No.

Q. Do you have any idea why that was redacted?

A. No.

Q. When you go down to the "Description of Amendment Modification," which is down in Block

14 -- do you see that?
A. Yes.
Q. It says "The purpose of this modification is to increase the contract ceiling."
Do you see that?
A. Yes.
Q. Do you know what the contract ceiling -- well, let me back up.
Do you know why the contract ceiling needed to be increased?
MR. ORTIZ: Same instruction about privileged communications earlier, but to the extent it doesn't involve disclosure of privileged communications, you can answer.
A. This -- I -- I don't know exactly. I know there was a time period where there was a change in hourly rates since this started in 2022. And there was a request, I believe, from Forvis Mazars to update their contract with our updated billing rates, and this could be what that is for.
(By Ms. Butler)
Q. I think you went back to the page I was going to direct you to, which is -- it has Bates

number 42 on the bottom.

Do you see that?

A. Yes.

Q. And it's the Schedule of Supplies/Services. Is that what you were looking at?

A. Yes.

Q. Okay. And do you see under there where it -- over -- under the "Schedule of Supplies/Services," it says "Previous total 249,850."

Do you see that?

A. Yes.

Q. And then it says "Change 100,000. Current total 349,850."

Do you see that?

A. Yes.

Q. Does it appear that this amendment was to increase the ceiling funding amount to $349,850?

A. Yes.

Q. Okay. Do you know why that ceiling or funding amount needed to be increased?

MR. ORTIZ: Same instruction about privilege earlier.

But you can answer to the extent it doesn't involve disclosure of privileged communications.

A. I'm assuming it's same as before. I wanted to make sure there was enough in the contract to pay for any invoices over the time period.

(By Ms. Butler)

Q. Okay. I'm going to turn to Exhibit 12, which appears to be another Amendment of Solicitation/Modification of Contract.

Do you see that?

A. Yes.

Q. And if you look at the date signed, which is in the bottom right, 16C Block, it says "December 4, 2025."

Do you see that?

A. Yes.

Q. And do you see the name and title of the signer as Jennifer Walton, on the left?

A. Yes.

Q. And is -- who is Jennifer Walton?

A. She is a director at Forvis Mazars.

Q. And I think you had noted she had signed another document; is that correct? Or were you

referring to this one?
A. This one.
Q. Okay. And if you look at this document -- if you go down to 14, it says "Description of Amendment: The purpose of this modification is to extend the period of performance through January 2, 2027."
Do you see that?
A. Sorry. Which block?
Q. Sorry. 14. It's above the signatures.
A. Thank you.
Q. I know.
A. Yes, I do see that.
Q. Okay. Did I read that accurately? The purpose?
A. Yes, it looks like they extended it through the end of this year, correct. Well, January 2nd, 2027.
Q. And do you see where it says "The SOW and all other terms and conditions remain unchanged"?
A. Yes.
Q. Do you know what "SOW" is referring to?
A. Those would be the exhibits we looked at earlier called "Statement of Work."

Q. Okay. And -- and those were the statements that we've already gone through; correct?

A. Correct.

Q. And, again, if you go back to the Schedule of Supplies/Services -- do you see it shows previous total, 349,850; change zero; and then current total, 349,850? Is that accurate?

A. Yes.

Q. Okay. And so would it appear that this was just to extend the contract through, as you said, the end of 2026?

A. Yes.

MR. ORTIZ: Well, through -- through the dates stated on the contract.

MS. BUTLER: Through the date stated -- well, yeah, you can testify that.

Did we mark a 13? Okay.

(By Ms. Butler)

Q. And does 13 appear to be the same as 12 -- just it doesn't have Jennifer Walton's signature? And take your time if you need to review.

A. Yes.

Q. Are you aware of any other contracts

that have been signed by Forvis Mazars or any individuals working with Forvis Mazars with respect to the Camp Lejeune litigation other than those we've looked at?

MR. ORTIZ: Object to form and foundation.

A. No. These appear to be -- cover the entire time period.

(By Ms. Butler)

Q. Okay. I'm going to have marked as -- I think we're on 14; is that correct? I'm handing you Exhibit 14, and this is taken out of order chronologically; so I apologize.

(Exhibit Number 14 was marked.)

(By Ms. Butler)

Q. Does this appear to be another Amendment of Solicitation/Modification of Contract?

A. Yes.

Q. And do you see this contract ID code ends in 0155?

A. Yes.

Q. And so does that appear to be with respect to the contract that was for 2024?

A. Yes.

Q. Okay. And do you see now at the bottom

left that you actually signed this contract?
A. Yes.
Q. And do you see in the description of amendment modification, "The purpose of this modification is to update the vendors rate"?
Do you see that?
A. Yes.
Q. Okay. And is that what you were recalling earlier when you referenced that billing rates needed to be updated?
A. Yes. This was back at this time period. I -- I believe that there's been a -- the other one we were talking about I thought was a more current one.
Q. Okay. And we can't tell from this document what -- what the rates were that were changed; correct?
MR. ORTIZ: Objection to form and foundation.
A. Correct. I think in each one they just give a total amount.
(By Ms. Butler)
Q. Okay. But Exhibit -- Exhibit 14 is a one-page document; correct?
A. Correct.

Q. And we don't have anything attached to give us any more context, do we?

MR. ORTIZ: Objection to foundation.

A. I do not see anything.

(By Ms. Butler)

Q. And I'll represent to you this was how it was produced to us. So I'm not trying to withhold anything from you.

Okay. Does that now constitute the contracts that you're aware of with respect to Forvis Mazars's work on this case?

MR. ORTIZ: Objection to foundation.

You can answer.

A. I believe so unless you hand me another one.

(By Ms. Butler)

Q. That would only be if they were produced to us. I am going to have marked as Exhibit 15, a document bearing Bates number 89, which I will represent to you also was produced to us as a single-page document.

(Exhibit Number 15 was marked.)

(By Ms. Butler)

Q. Do you see in the top of this document that it refers to "V25," which you've indicated would refer to the contract for the year 2025, and then it also has 0162?

Do you see that at the top?

A. Yes.

Q. Okay. And then down under "Labor Category," do you see where it says "Principal Award Rate 575" and "Staff 370"?

A. Yes.

Q. Okay. Given that this appears to be for the 2025-year, do you know what the principal and staff rates were for the other years?

A. No.

Q. And you indicated that either once or perhaps more times, the principal and staff rates changed; is that correct?

MR. ORTIZ: Objection.

A. Well, yeah, definitely. From Number 14 we see that it changed.

(By Ms. Butler)

Q. But you don't recall whether it changed to increase to 575 or beyond 57- -- do you have any recollection of the rates that would have been applied over the course of the time that

Forvis Mazars has worked with the Department of Justice?

MR. ORTIZ: Objection to form.

A. I don't know the actual rates, but they were smaller at the beginning. And as -- I believe these are the current rates now.

(By Ms. Butler)

Q. I'm going to mark as Exhibit 16, another document that was produced to us as a single page.

(Exhibit Number 16 was marked.)

(By Ms. Butler)

Q. That appears to have "V23" in front of the contract and the last four of 0165.

Do you see that?

A. Yes.

Q. Would that appear to be pertaining to the contract for 2023?

A. Yes.

Q. And do you see that the principal rate in that document is 500?

A. Yes.

Q. Okay. And do you see a staff rate in there?

A. No.

Q. Do you know if the principal rate was anything other than 500 or 575 during the course of the time that Forvis Mazars has worked on this case?

A. I don't believe so.

Q. I'm going to mark as Exhibit 17, another document that was produced to us as a single page, which appears to be another schedule rate and cost document.

Do you see that at the top?

(Exhibit Number 17 was marked.)

A. Yes.

(By Ms. Butler)

Q. And do you see that it has "V24" and then the last four 0155?

A. Yes.

Q. Would that appear to pertain to the 2024 contract?

A. Yes.

Q. Okay. And do you see the principal rate went from current rate of 500 to a new rate of 560?

A. Yes.

Q. And then do you see "staff member"? There was nothing, but it went to a new rate of

370?

A. Yes.

Q. So we have three different rates for principals now, and we have one rate for staff. Are you aware of any other rates charged by Forvis Mazars for principals or staff with respect to the work on the Camp Lejeune litigation?

A. I -- I think this will be the same as the contract. I'll say "no" unless you hand me another rate. I don't know.

Q. And I apologize. We received these as individual pages. They were not attached to contracts. So we've had to piece this together. And so I'm not trying to confuse you, I promise.

A. That's okay. I -- I don't know of any other rates. But it should be in a contract if there's a different rate.

Q. Okay. I think -- let me just look.

Are these rates set by Forvis, or are they rates set by the Department of Justice?

A. Forvis.

Q. Okay. Now we're going to get back to Exhibit 5, which was the Request for Production of Documents, which is what led us to all those

contracts.

Okay. Going back to page 2 of Exhibit 5, we had discussed how we had requested all billing invoices, time sheets, time records, et cetera.

Do you see that in Request Number 2?

A. Yes.

Q. And then if you look at the Request Number 3, which is on the next page, do you see that we requested it in another way: "All bills, invoices, or other documents reflecting compensation paid to you related to the Camp Lejeune litigation"?

A. Yes.

MR. ORTIZ: Object to form.

You can answer.

A. Yes.

(By Ms. Butler)

Q. Okay. Now, I am going to mark as the next exhibits, which will be -- what are we on?

MS. LAMACCHIA: 18.

MS. BUTLER: 18.

MR. ORTIZ: Yes.

MS. BUTLER: Do you have the time records? Okay.

Can we go off the record for a minute? I apologize.

THE VIDEOGRAPHER: Time is now 11:56. We're off the record.

(A recess was taken.)

THE VIDEOGRAPHER: Time is now 12:07. We're back on the record.

MS. BUTLER: I am going to hand the court reporter what I will ask her to mark as Exhibit 18. And I'm also going to go ahead and have her mark Exhibit 19.

(Exhibit Number 18 was marked.)

(Exhibit Number 19 was marked.)

(By Ms. Butler)

Q. Okay. I'm going to hand you, Ms. Yount, Exhibits 18 and 19 and ask if you have seen these before.

A. It's been a long time, but I have seen 18 before and a portion of 19.

Q. With respect to Exhibits 18 and 19, did you provide these to the Department of Justice to produce to us?

MR. ORTIZ: Objection.

A. No.

(By Ms. Butler)

Q. And so as with the other documents we previously looked at, which were all of those contracts, the Department of Justice already had the documents. Is that accurate?

A. Yes.

Q. And so in respect to the Request for Production of Documents, am I understanding correctly that you didn't provide any additional documents to the Department of Justice. You relied on them to produce what they already had?

MR. ORTIZ: Object to form.

A. We had a discussion.

MR. ORTIZ: And -- and I don't want you to disclose the substance of any privileged communications with counsel.

A. They -- I did not provide additional documents.

(By Ms. Butler)

Q. Okay. So let's look at Exhibit 18. And I will tell you that -- that the reason these are compiled a little bit different -- and between 18 and 19 -- is because at first we received Exhibit 19, the documents that are in there. And then right before the deposition, we received the documents in Exhibit 18. So I just already had

them compiled separately.

But looking at Exhibit 18, do you see this where it says "Expert Witness Services from February 1, 2023, through May 3, 2023" -- do you see that?

A. Yes.

Q. Okay. And what -- what this Exhibit 18, these expert witness services run from, on the first page, February 1, 2023, and then on the last page, it goes up through November 30, 2024.

Do you see that?

A. Yes.

Q. Okay. So would these appear to be invoices for Forvis Mazars and their predecessors for the work performed in this Camp Lejeune litigation for 2023 and 2024?

A. That's what it appears to be.

Q. Let's look at the first invoice on the top of Exhibit 18.

Do you see that?

A. Yes.

Q. Who is Roy Strickland?

A. He is the managing partner of the forensics department at Forvis Mazars.

Q. So do you work under him?

A. Yes.
Q. And it appears that your rate and his rate are the same; is that correct?
A. Yes, this -- they're the principal rates in the contract.
Q. And it shows that you have 1.4 hours for that time period.
Do you see that?
A. Yes.
Q. Now, when you would have entered that 1.4 hours at Forvis Mazars, would you have put a description of the services rendered?
MR. ORTIZ: Objection to foundation.
A. Sometimes.
(By Ms. Butler)
Q. Is it common for you to just input time as an amount of hours without a description of services?
MR. ORTIZ: Objection.
You can answer.
A. There -- there's a description code. So it may say "communication" or "analysis" and then there's also a notes section. And there is a main time code. So it could have -- yes, there

is -- in my -- my -- your first question I was thinking of the detailed -- that -- that's usually nothing there. But there is a selection of time; so it could have -- like a code. I'm answering poorly, but it's either, like, communication or analysis or meeting.

(By Ms. Butler)

Q. And -- and we don't see that in this time -- in this invoice, do we?

A. No.

Q. And are you aware of there being any instructions within the contracts that we looked at earlier about the manner in which a government contractor is supposed to keep their time?

MR. ORTIZ: Objection to foundation.

A. I believe there was a -- if I'm recalling from some years prior -- this is 2023 -- that they needed their bills in a certain manner with this contract information and the hours per staff member. So yes.

(By Ms. Butler)

Q. Do you know if there's any requirement that a description of what was done for that time period be included?

MR. ORTIZ: Objection to foundation.

You can answer.

A. I don't.

(By Ms. Butler)

Q. And so looking at this first invoice, it looks like you and Mr. Shahnasarian were the only two involved. Is that consistent with your recollection of who was involved with the Camp Lejeune litigation on behalf of the Forvis Mazars at the inception of the engagement?

MR. ORTIZ: Objection to form.

You can answer.

A. Yes. At the beginning. And just to note, it does describe the description of services provided in the sentence at the top.

(By Ms. Butler)

Q. And what does it state?

A. Includes case review and attorney communications.

Q. Okay. And so is it -- is it your contention that that is the description that covers all of the hours below?

MR. ORTIZ: Objection to form.

A. Yes.

(By Ms. Butler)

Q. And there's no indication on how many dates those hours were worked; is that correct?

A. It's just between the time frame listed.

Q. Okay. Going to the next page of Exhibit 18, this appears to be for services from August 16, 2023, to December 21 -- sorry -- December 31, 2023.

Do you see that?

A. Yes.

Q. Okay. Are you aware of there being any work on the Camp Lejeune litigation between May 3rd, 2023, and August 15, 2023?

A. I don't, but I would assume not if there's no billings for it.

Q. And if you look at the second page of Exhibit 18, which goes through the end of 2023, do you see there's the name Jordan Kingston?

A. Yes.

Q. Who is Jordan Kingston?

A. She is a senior consultant at Forvis Mazars.

Q. And what was her role on the Camp Lejeune project?

A. She assisted with documents

accumulation, and management.

Q. And then there's the name Laura Mason. Do you see that?

A. Yes.

Q. And who is Laura Mason?

A. She -- she was a manager. She is no longer there.

Q. So was she on the same level as you and Mr. Strickland?

A. No.

Q. Can you explain the hierarchy for me of the individuals on these two invoices we've looked at so far.

MR. ORTIZ: Object to form.

You can answer.

A. Roy Strickland is managing partner. At the time I was managing director. Below me would be Laura Mason, as a manager. And below her would be Jordan Kingston, as a senior -- senior consultant.

(By Ms. Butler)

Q. And looking at the second page of Exhibit 18, we don't see what the hourly rates are that are being charged, do we?

A. $500.

Q. So everyone on that invoice charged $500?

A. Yes.

Q. Okay. And we don't see how many dates were worked, do we?

A. It was between the dates on the invoice.

Q. But, for example, it shows that you worked 14.5 hours.

Do you see that?

A. Yes.

Q. We don't have an indication as to the -- whether that was all in one day or on multiple days, do we?

A. No.

Q. And we have no indication other than the general description above as to what you did for each of those days or time periods that you worked; correct?

MR. ORTIZ: Objection.

You can answer.

A. Yes. It's just a mix of all of those things put together.

(By Ms. Butler)

Q. Okay. And it's the summary up there above Jordan Kingston's name?

A. Yes.
Q. Okay. Going to the next page of Exhibit 18, now we see Benjamin Wallace. Who is Benjamin Wallace?
A. Ben Wallace was a consultant. He's no longer there.
Q. So where does he fall in that hierarchy you previously explained to me?
A. He would be at the bottom.
Q. Below Laura Mason?
A. Below Jordan. So Laura --
Q. Okay.
A. -- was the manager. Jordan was a senior consultant. And then Ben was a consultant.
Q. Now, Jordan Kingston and Ben Wallace charged the same hourly rate; is that correct?
A. And Laura.
Q. And Laura Mason. They all charged 370 an hour; is that correct?
A. Yes.
Q. And on this third page, which is for the period January 1, 2024, through February 26, 2024, your rate has increased to 560; is that correct?
A. Yes.

Q. And, again, we don't have any individual time entries by day for any of these persons, do we?

A. No.

Q. And when you enter your time at Forvis Mazars, would you just enter, say, "Ben Wallace, 65.25 hours for Camp Lejeune litigation"?

MR. ORTIZ: Objection to form and foundation.

You can answer.

A. No.

(By Ms. Butler)

Q. So he would actually enter, say, "February 11, 2026, 1 hour," and what he did, and he would do that day by day. Is that accurate?

MR. ORTIZ: Objection to form and foundation.

A. Yes.

(By Ms. Butler)

Q. But we don't see any of that on this invoice, do we?

A. No.

Q. And do you know why?

A. That wasn't required for billing.

Q. It wasn't required by Forvis Mazars or

by the Department of Justice?

A. The Department of Justice is -- my understanding that this is how they receive their -- they needed their bills, with the dates of service and the people and the hours a day and the hourly rate. And that's how it was provided to them.

Q. So the Department of Justice will pay $61,024 of taxpayer dollars to Forvis Mazars without any further breakdown than we see on this page 3 of Exhibit 18?

Is that your understanding?

MR. ORTIZ: Objection and motion to strike.

You can answer.

A. Yes.

(By Ms. Butler)

Q. Let me back up. Am I correct that the invoice total for this page 3 is $61,024?

A. Yes.

Q. Okay. And is it your understanding this is the invoice that was submitted to the Department of Justice for the payment of that amount of money?

A. Yes.

Q. And do you see any further breakdown as far as Benjamin Wallace's 65.25 hours?

A. No. It's just right there at the 65 hours.

Q. Okay. And there's just a general description for all four individuals on this invoice of -- to include document management and review of Track 1 plaintiffs; is that correct?

A. Correct.

Q. And is it your understanding that the Department of Justice paid Forvis Mazars the $61,024 based on this invoice?

A. Yes.

Q. And do you see that approved for services stamp in red on the left with a date of March 1, 2024?

A. Yes.

Q. Okay. And to you -- to the best of your understanding, would Forvis Mazars submit any further documentation for this invoice to the Department of Justice that is not reflected on this page?

MR. ORTIZ: Objection to form and foundation.

A. I don't think so.

(By Ms. Butler)

Q. Going to the next page of Exhibit 17, this is for expert witness services from February 27, 2024, through April 11, 2024.

Do you see that?

A. Yes.

Q. And do you see that the invoice total is 69,118.50?

A. Yes.

Q. And, again, we just have the number of hours worked for that time period for each individual; correct?

A. Yes.

Q. We have no individual time entries by date with a description of what was done on that date; correct?

A. Yes, they are all the exact same.

Q. And, again, we just have the general description to include document management and review of Track 1 plaintiffs.

Do you see that?

A. Yes.

Q. Okay. And we have four individuals, who we've already spoken about; correct?

A. Correct.

Q. Okay. And going to the next page, do you see this says for "Expert Witness Services from April 12, 2024, through May 4, 2024"?

A. Yes.

Q. And do you see that the amount is 31,982.50?

A. Yes.

Q. And then there's a balance forward for a total due of 70,978.50?

A. Yes.

Q. And, again, we just have total hours for that time period with no day-by-day description and just a general description of services to include document management and review of Track 1 plaintiffs; is that correct?

A. Correct.

Q. Okay. And am I correct, though, that in those 14 hours of your time reflected on that invoice, you would have entered more specific information into the Forvis Mazars, I guess, time management system?

MR. ORTIZ: Objection to form and foundation.

A. It would just have the -- the date performed -- services performed.

(By Ms. Butler)
Q. And you would describe what you did or not?
MR. ORTIZ: Objection -- objection to foundation.
A. No. It would have -- it would have one -- there is a code but no detail. So there might be a code to say "analysis" or "data management."
(By Ms. Butler)
Q. But there would be some sort of explanation?
MR. ORTIZ: Objection.
A. Yes -- yes.
(By Ms. Butler)
Q. Okay. More explanation than we see on this piece of paper in front of us --
MR. ORTIZ: Same objection.
(By Ms. Butler)
Q. -- is that correct?
A. No. This -- these invoices give more detail than what the time records would show. The time records would just give you the individual days and hours worked that you're asking about. But the document management and

review of Track 1 plaintiffs information would likely not be in any detail put into the time records.

Q. But it would say, for example, "February 11, 2026, 1 hour, analysis."

MR. ORTIZ: Objection.

(By Ms. Butler)

Q. Is that accurate?

A. Yes.

Q. Okay. And so if -- if you were doing review versus document management, I would be able to tell that, whereas on this invoice, I can't.

MR. ORTIZ: Objection.

(By Ms. Butler)

Q. Is that accurate?

A. No, not necessarily. Most of my time, whenever I put it in, I use the same code no matter what. So it doesn't -- it's not -- it would not reflect the exact -- it would only reflect the hours and the date that you would get information out of that -- is what I'm saying.

Q. So regardless of what you're doing that day, you just put the same code in?

A. Typically.

Q. Okay. Let's go to the next page. This appears to be for "Expert Witness Services from May 5, 2024, through June 13, 2024."

Do you see that?

A. Yes.

Q. And the total amount is 28,035.

Do you see that?

A. Yes.

Q. And we've discussed all four of those individuals; correct?

A. Correct.

Q. And how are -- it appears that -- would you -- would you call this a team who was working on the Camp Lejeune litigation with you?

A. Yeah.

Q. Okay. Who compiles those teams?

A. I did.

Q. Okay. And so are these individuals that you regularly work with?

A. They -- they were, yes.

Q. Okay. And going to the next page, there's a new individual on here India Bratrud, and I'm sorry if I butchered that.

Do you see her name on there?

A. I do.

Q. And can you explain to me her role on your team.

A. She was an intern at that time and assisted with one of the consultants with the document, you know, management and review.

Q. Okay. And she spent seven hours during that time period?

A. It looks like it.

Q. And they charged her out at 370 an hour?

A. Yes.

Q. And then going to the next page, we have a Jennifer Walton. Can you explain her role on your team within the hierarchy that we've previously discussed.

A. Yeah. She's director with Forvis Mazars. And I believe at this time is when I was leaving Forvis and Laura was leaving, and we were bringing in another manager-type person at the firm.

Q. Now, Jennifer billed at 370 an hour on this invoice.

Do you see that?

A. Yes.

Q. Okay. And -- and is that consistent with her role as a director?

MR. ORTIZ: Object to form.

A. It's based on the contract for -- that we looked at earlier. All the staff was billed out at 370, and I am billed out at 560 at this time.

(By Ms. Butler)

Q. And you indicated Laura Mason left at the same time you did; is that correct or?

A. Sometime after.

Q. Okay. Okay.

Let's turn to Exhibit 19, which is just a continuation of these invoices.

Do you see that the first page of Exhibit 19, which has Bates number 33 on it, is from January 1, 2025, through February 28, 2025?

A. Yes.

Q. And consistent with the prior invoices we looked at, there's no individual time detail. We just have Benjamin Wallace, 17 hours; Jennifer Walton, 26.5 hours; Jordan Kingston, 21 hours; and Patricia Yount, 31 hours.

Do you see that?

MR. ORTIZ: Object to form.

You can answer.

A. Yes.

(By Ms. Butler)
Q. Okay. And do you have any recollection of what you were doing in those 31 hours?
MR. ORTIZ: Objection.
A. As I sit here today, I can't -- I don't know exactly.
(By Ms. Butler)
Q. And this invoice would not tell us other than to include document review analysis and various communications of Track 1 plaintiffs; correct?
A. Yes, that's what I was doing.
Q. Okay. And your rate is 575?
A. That's what they charged, yes.
Q. And at that point, Jennifer Walton has gone up to 575; is that correct?
A. It looks like it, yes.
Q. Okay. And I believe Jordan Kingston is -- was she still senior consultant at that time?
A. I -- I believe so.
Q. And Ben Wallace, a consultant?
A. I believe so.
Q. Okay. Turning to the next page of Exhibit 19, we have a number of new individuals.

I'm going to ask you about each one.

Who is Alexander Rey?

A. He's a partner at Forvis Mazars.

Q. So where does he fall in line in the hierarchy?

A. He would be between Roy and me.

Q. And what is his expertise?

A. I mean, he's a partner in the forensics and valuation department at our firm.

Q. Let me back up. All of the individuals we've looked at so far -- and if you need to review the invoices again to recall -- are they all within the forensic accounting department at Forvis Mazars?

A. Yes.

Q. Okay. Do any of the individuals we've looked at so far have any particular expertise that would be, I guess, relevant to this litigation?

MR. ORTIZ: Object to form.

A. I mean, no, they're consultants working under -- you know, managers and consultants working under my direction and -- and, you know, we're working in forensics and valuation services.

(By Ms. Butler)
Q. Did anyone on your team, whether we've gone through their name now or they appear on a later invoice, have any particular expertise in veterans disability benefits?
MR. ORTIZ: Objection to form and foundation.
A. Not that I know of.
(By Ms. Butler)
Q. So going back to page 2 of Exhibit 19, who is Erik Lioy?
A. Erik Lioy is a partner with Forvis Mazars as well.
Q. So he's on the same, I guess, plane as Alexander Rey?
A. Yes.
Q. Okay. And Harley Hager?
A. Harley is -- I think she's a manager there.
Q. And Katharine Markow?
A. She -- she's no longer there. She was a consultant.
Q. And Richard Brockman?
A. And he was a consultant.
Q. Okay. And all of these individuals

spent time working on the Camp Lejeune litigation?

A. Correct.

Q. Did -- did all of these people have specific, I guess, assignments or tasks that they were completing?

A. Yes.

Q. Explain to me the -- I mean, to the best of your recollection, and -- and if you can refer to names, what were the various roles of these individuals?

A. Well, we've already been through Ben, Jennifer, Jordan, myself, Laura -- I guess that was before she left. Those were, I guess, my main team that would help with reviewing all of the, you know, document system that was provided to us and document management and reviewing everything, you know, helping me, data input, those sort of things.

The invoice with all these people -- this appears to be when we issued maybe an initial preliminary report. And there would have been these -- the other people -- let's see -- Harley and Katherine -- they would have done a -- Forvis requires a math check and a partner review

before anything goes out the door. So they would have just looked at everything generally to see if they spotted anything. And then Alex and Eric would have done a read-through and said, "Okay. You can put this on our letterhead" kind of thing.

Q. So looking at this invoice which has Bates number 38 on it, do you see that it's -- it's in the amount of $126,653.25?

A. Yes.

Q. And, again, it has, for example, that you worked 79.5 hours.

Do you see that?

A. Yes.

Q. And so I guess I am to assume that that 79.5 hours included document review, analysis, various communications, and report preparation of Track 1 plaintiffs; is that correct?

MR. ORTIZ: Object to form.

A. Yes.

(By Ms. Butler)

Q. And there was no further detail or breakdown of your 79.5 hours that you provided to Forvis Mazars or the Department of Justice?

MR. ORTIZ: Object to form and

foundation.

You can answer.

A. My -- Forvis has all the detailed time by date, and I believe that this is what was sent. These invoices that you have here are the only thing that was sent to the Department of Justice for payment.

(By Ms. Butler)

Q. But Forvis Mazars might have further detail; is that correct?

A. Yes.

Q. Okay. And so, for example, this invoice total of 126,653.25 -- it's your understanding that this page that we're looking at is all that was submitted to the Department of Justice for the payment of that amount?

A. I believe so.

Q. And you worked 79.5 hours; Jennifer Walton, 54.25; Benjamin Wallace, 48; and the only further breakdown would be within the files of Forvis Mazars; is that correct?

MR. ORTIZ: Objection.

You can answer.

A. Yes.

(By Ms. Butler)

Q. Going through the rest of this Exhibit 19, these appear to be additional invoices similar to those we've looked at where there is just a number of hours for the time period and a general description of the services rendered by anybody on the invoice -- is that accurate? -- until we get to the May 22 invoice, which is the Bates number 032 on the bottom?

A. Yes.

Q. So starting with that invoice, which has Bates number 032 for May 22, 2025, through May 31, 2025, we start to see some -- at least a date even though we don't have a description of the services other than the general description above; is that correct?

A. Yes.

Q. Do you know why there was that change to the date format --

A. No.

Q. -- for the invoices?

A. No.

Q. Okay. And continuing forward chronologically as we look through these invoices, it looks like, then, these invoices continue with the date format but no description

by date; is that correct?

MR. ORTIZ: Object to form and foundation.

A. These are all the same date. I guess these are the most recent billings perhaps. Sorry. I'm just seeing -- I've never seen these before. So -- oh, I see a 2026 one.

(By Ms. Butler)

Q. Wait. What do you mean by "same date" because -- I'm sorry. I want to make sure we have the same document in front of us. We started with Bates number 032.

A. They're all dated December 1st, 2025. So...

Q. Oh, sorry. I was looking at the expert witness services line.

A. Yeah. I'm not sure how it was compiled. I -- I'm not there so I -- I don't have access to their billing system. But, yes, it appears you've got some -- all the dates and hours specifically worked with a general summary at the top.

Q. Now, I didn't see any new names until we got to the November 1. And, again, I'm looking at the line that says "Expert Witness Services

from," as opposed to the date at the top, which you pointed out, they all say December 1, 2025. But if you look at the line I'm looking at -- can you get to the November 1?

A. What's the Bates?

Q. 36.

A. Thank you. Okay.

Q. There's a Jordan Husko. Where does she fall in the --

A. She got married.

Q. Okay.

A. That's Jordan Kingston.

Q. Okay.

A. It's now Jordan Husko.

Q. And then if you go to the next invoice, which was December 1, there is a Sarah Cloud?

A. Yes. This looks like -- because I see the partner's name on there -- we issued our report. So Sarah would have done math check.

Q. Okay.

A. She's a consultant.

Q. So by my count, there are -- there are 13 different people that worked on the nine reports that were rendered in this case.

Is that consistent with your

understanding?

MR. ORTIZ: Objection to form.

You can answer.

A. It would've been a lot more than that because in the beginning -- remember there were 40 cases we initially were reviewing until it cut down. So there was more work. So in the end, there were nine reports.

But from the beginning, I don't know how many people were the first year or so before it got cut down until it got to the second half. But, yes, it appears there were that many staff members associated with this case.

(By Ms. Butler)

Q. And please correct me if I'm wrong, but my recollection is you thought that it got cut down to the nine reports sometime in 2024; is that correct?

A. I think so.

Q. And so looking at Exhibit 18, which goes through the end of 2024, it looks like there are seven different names up through the end of 2024?

A. Okay.

Q. Is that correct?

A. If that's what you counted.

Q. Okay. And then another six additional new names after that period of time?

A. That sounds about right.

Q. Okay. So what I'm trying to understand is -- is we have the nine reports that we'll go through probably after lunch at this point. How many of these individuals contributed to the -- the final written product that we received?

A. All were a part of getting there, but they're all my reports and so they're under my direction, would help with any data input, general, you know -- you know, wording of the reports maybe, like, the first paragraph or something and getting the first page put together.

So for the end product I would say all of them started, you know, came from document management all the way until I finished the reports.

Q. Now, going back to Exhibit 18, do you have any understanding as to what the total of all of those invoices are, which would be the total for work for 2023 and 2024?

A. I don't. I'd have to add them all up.

Q. Would it sound about right if I told you

that we calculate 289,857.16?

MR. ORTIZ: Objection to form.

A. Say that number again.

(By Ms. Butler)

Q. 289,857.16.

A. I just did a rough look and got about 220 and just making sure you're not double counting the balance forwards instead of -- so just the total, do --

Q. I gotcha. And if we did that -- that would be --

A. -- two of them, yeah.

Q. -- that would be around 250,000 then?

A. Take off about 17,000 and additional 39,000, then that seems about right.

Q. Okay. And looking at Exhibit 19, which would appear to be 2025 through -- well, January 1, 2025, through December 31, 2025, I'll tell you that our calculations show a total of 292,569.50. Does that sound about right to you?

MR. ORTIZ: Objection to form.

A. It -- it could be. These look like a lot of invoices that might account to that, but I have not counted them.

(By Ms. Butler)

Q. Okay. And so if our totals are correct, do you have any understanding as to the total amount Forvis Mazars has billed to the Department of Justice for the Camp Lejeune work to date?

A. Not until just now. It sounds like you've got the numbers there.

Q. Would about 500,000 or more sound correct to you?

MR. ORTIZ: Objection to form examine foundation.

You can answer.

A. I guess I -- based on these invoices.

(By Ms. Butler)

Q. Does that surprise you?

MR. ORTIZ: Objection.

A. No.

(By Ms. Butler)

Q. Are any of the individuals on these invoices -- would you consider them to be coauthors of your reports?

MR. ORTIZ: Objection.

A. No.

(By Ms. Butler)

Q. Is it typical for a project at Forvis Mazars to have so many people involved?

A. A project that -- of this magnitude, yes.

Q. And, to your knowledge, do you know if Forvis Mazars was ever asked to look at preparing reports for plaintiffs with conditions other than bladder cancer or kidney cancer?

A. No.

Q. When these invoices that we've looked at in Exhibit 18 and 19 were sent to the Department of Justice, does somebody approve them before they go to the Department of Justice?

A. Yes. I think a partner or someone has to approve it to be submitted.

Q. Okay. And -- and I'm taking it that person is not you?

A. No, I'm no longer there.

Q. Okay. So given the number of cooks in the kitchen here, just to use an expression, what did you do as the author of these reports to validate or confirm the accuracy of the work that others were doing?

MR. ORTIZ: Objection to form and foundation.

You can answer.

A. All of their work was done under my

direction, and I reviewed the documents and everything that was put into each analysis. And I authored each of the reports.

(By Ms. Butler)

Q. And so by authoring the reports, are you therefore validating the reliability of the information contained in the reports?

MR. ORTIZ: Objection.

A. I'm -- I'm assuming that it is correct based on the documents that we were provided.

(By Ms. Butler)

Q. And are you assuming it's correct based on the work that others provided you that you then put into your reports?

MR. ORTIZ: Objection.

A. Other experts' reports. The -- any staff member that helped me with my work, I reviewed myself and would call it my work. But I'm assuming any other work as an expert reports provided to me, I'm assuming that those are accurate.

(By Ms. Butler)

Q. And so let's take, for example, Dr. Ji who we mentioned earlier. You include some of the figures that appear in his reports -- you

include those in your reports; correct?
A. Yes.
Q. And so did you undertake to do anything to confirm the validity of Dr. Ji's information?
MR. ORTIZ: Objection.
A. No.
(By Ms. Butler)
Q. And the same with respect to -- you refer to two life care planners, Shahnasarian and Navarro, and you incorporate information from their reports into yours; is that correct?
A. Yes.
Q. And did you do anything to validate the information that you put in your reports that came from Shahnasarian and Navarro?
MR. ORTIZ: Same objection.
A. No.
(By Ms. Butler)
Q. And the same with Dr. Henry Miller. You incorporate information that is contained in reports of Dr. Henry Miller; correct?
MR. ORTIZ: Same objection.
A. Yes.
(By Ms. Butler)
Q. And did you do anything to independently

validate or verify the information that you put in your reports that came from Dr. Henry Miller?

MR. ORTIZ: Same objection.

You can answer.

A. No.

(By Ms. Butler)

Q. And so if other experts made assumptions that are contained in their reports, did you do anything to assess the reasonableness of those assumptions?

MR. ORTIZ: Object to form.

A. No. It goes back to the prior questions. I assumed that their reports are all accurate, and I have done nothing to verify their reports. Excuse me.

MS. BUTLER: I don't know where we are on time. Is there a clock right there? But now might be a good time to break for lunch.

MR. ORTIZ: I was -- I was going to suggest the same.

MS. BUTLER: If that's okay. My voice is kind of fading.

MR. ORTIZ: That's fine.

MS. BUTLER: Okay.

THE VIDEOGRAPHER: All right. Time

is now 12:47. We're off the record.

(A lunch recess was taken.)

THE VIDEOGRAPHER: Time is now 1:23. We're back on the record.

(By Ms. Butler)

Q. Ms. Yount, I hope you had a good lunch.

A. Yes. Thank you.

Q. I wanted to revisit just two things and then I'm going to move into your reports. First of all, can you pull out that very first exhibit, Exhibit 1. This was the first Attachment #2, Statement of Work that we looked at. Do you recall we looked at a few others as well?

A. Yes.

Q. Okay. If you look at the second page of Exhibit 1, do you see a Section 2.7 Billing Submittal?

A. Yes.

Q. Can you read that first sentence to me just up to the comma.

A. "The contractor shall submit a monthly detailed invoice by the 10th of each month following the month in which the services were rendered."

Q. Okay. And to the best of your

knowledge, were the invoices that Forvis Mazars or its predecessors submitted to the Department of Justice those that we looked at in Exhibits 18 and 19?

MR. ORTIZ: Object to form.

You can answer.

A. To the best of my knowledge, those were the invoices submitted.

(By Ms. Butler)

Q. But there is more detail within the Fortis Mazars system; correct?

MR. ORTIZ: Object to form and foundation.

A. Yes.

(By Ms. Butler)

Q. And so if those had been requested by the Department of Justice, those could have been produced; correct?

MR. ORTIZ: Objection.

A. Yes.

(By Ms. Butler)

Q. Okay. And going down to Section 2.8, do you see where it says "Monthly Projections of Rendered Services"?

A. Yes.

Q. Do you see that it says "The contractor shall provide monthly detailed projection of services and other direct costs to include projected travel for each month the contract is in effect"?

A. Yes.

Q. Do you know if Forvis Mazars submitted those to the Department of Justice?

A. Yes. There were a couple when I was there that were submitted.

Q. And did you submit those?

A. Yes. I emailed it. There's -- it wasn't a -- a -- it was more of a how much -- when you -- because once you got to maybe 70 percent of the contract award amount, you had to submit that you were close to that amount and submit how many -- how much you think you needed to work additional.

So there was something along those lines which, I think, this is what that means. And those were submitted. I know I submitted at least a couple when I was employed there.

Q. Other than the projections that you just explained about the 70 percent situation, were there any other projections or, I guess, other

invoice or services rendered type of documents submitted to the Department of Justice that we haven't looked at today?

MR. ORTIZ: Object to form and foundation.

You can answer.

A. Not that I recall.

(By Ms. Butler)

Q. So I also wanted to go back to Exhibit 5, which were the Responses and Objections to the Requests for Production, which is how we got into all that other stuff.

So going to page 2 again, and we're looking at paragraph 2. And I've alluded to this before, but do you see where Request 22 included all time sheets?

Do you see that?

A. It says "All billing invoices or records between you --" Second sentence: "This includes all time sheets, time records, billing records, documents reflecting the time --" yes, I see that.

Q. And based on your testimony, it's my understanding that there would be some time sheets that Forvis Mazars has that have not been

produced; is that correct?

MR. ORTIZ: Objection to form and foundation and to the extent it misstates prior testimony.

A. Yes. There are some -- all the time has been submitted to you guys, but there are some additional details, if you will.

(By Ms. Butler)

Q. Okay. And going, then, to page 5 -- sorry. Go to page 4. And you'll see there's a paragraph 4 in the middle of the page.

A. Yes.

Q. This was a request for consulting contracts or retention letters.

Do you see that?

A. Yes.

Q. Okay. And if you go to -- down there's a response and there are a bunch of legal objections, but if you go to the next page on page 5, you'll see a paragraph that starts "Subject to and without waiving."

Do you see that?

A. Yes.

Q. It says "Subject to and without waiving the foregoing objections, the United States will

produce certain contracting documents related to Ms. Yount's work as a retained expert."

Do you see that?

A. I do.

Q. Do you know if there are contracting documents related to your work as a retained expert in this case that we have not looked at today?

MR. ORTIZ: Objection to form.

A. Not that I know of.

(By Ms. Butler)

Q. Okay. And if you look at the next paragraph it asks for "all retainer agreements or contracts executed by you regarding your work as an expert in the CLJA litigation."

And again, if you go to the next page, it says "Subject to and without waiving the foregoing objections, the United States will produce certain contracting documents relating to your work."

Do you see that?

A. I do that.

Q. Again, are you aware of any contracting documents relating to your work that have not been produced?

MR. ORTIZ: Object to form.

A. I don't believe so.

(By Ms. Butler)

Q. Okay. Then if you go down to page 7, paragraph 7 -- if you look at both paragraph 7 and 8 on that page before you get to where -- do you see where there's a response afterwards?

A. Yes.

Q. It asks for a lot of materials, and you can feel free to read both of those requests.

A. Okay.

Q. If you look in the response, there's an objection. And then it says in -- in both "Subject to and without waiving the foregoing objection, the United States refers plaintiffs to documents that may contain information responsive to this request," and it refers to, one, your reports dated December 15, 2025, and attached reference list; second of all, your Materials Considered List dated December 22, 2025; and third, a supplemental Materials Considered List that will be served before Ms. Yount's deposition, which I will tell you we have received.

Are you aware of anything responsive to

either Request 7 or 8 that would not be contained within your reports dated December 15, 2025, and the attached reference list or your Materials Considered List?

MR. ORTIZ: Objection to form and foundation.

A. No, I don't think so.

(By Ms. Butler)

Q. Okay. And I'm going to ask you that same question for Request Number 9, which is on page 8.

A. Do you want me to answer it? The same question, are you going to ask?

Q. I'm going to ask you the same -- you know, they refer to -- in the response, they refer to those same three groups of materials, which is your reports; the exhibits to your reports; the Materials Considered List, both the ones that were produced back in December and the ones that were produced before your deposition.

And I'm just going to ask if there's anything else responsive to Request Number 9 that would not be contained in what's identified.

MR. ORTIZ: Objection to form and foundation.

You can answer.

A. No, I don't believe so.

(By Ms. Butler)

Q. Okay. Okay. I am going to now turn to the reports in this case. And we went ahead during the break and marked these. So I am going to hand you Exhibit 20, which is the Expert Report of Tricia M. Yount for Mark Anthony Cagiano.

(Exhibit Number 20 was marked.)

(By Ms. Butler)

Q. And I am going to hand you Exhibit 21, which is the Materials Considered List for Mark Anthony Cagiano.

(Exhibit Number 21 was marked.)

(By Ms. Butler)

Q. So if you look at the first page after the front page but -- page 2 of your report, at the top it says "Assignment."

Do you see that?

A. Yes.

Q. And would you agree that each of your reports for the nine plaintiffs has the same sentence under the assignment heading?

A. Yes.

Q. Okay. And for each one, it says "To perform professional consulting services in connection with the above referenced matter."

Do you see that?

A. Yes.

Q. And so we previously looked at the scope of work documents which explained that you are providing -- and I'm going to get it -- forensic accounting and valuation of damages. Is that the assignment that you're referring to in your reports for these nine plaintiffs?

A. Yes. That would encompass professional consulting services.

Q. Okay. And so while professional consulting services can be pretty broad, it's more narrowly focused on what's stated in the Statement of Work that we looked at previously?

A. Yes.

Q. Okay. And consistent with your testimony; correct?

A. Correct.

Q. Okay. If you go down, then, to the introduction for Mr. Cagiano, the first paragraph -- is -- is that just a summary of information that you were provided?

A. It is a summary of information based on facts and his life expectancy that is from a source.

Q. Okay. And so other than the life expectancy, which is from a source, was the other information -- information that you did not independently verify?

A. Correct.

MR. ORTIZ: Object to form.

Just give me a minute.

THE DEPONENT: Sorry.

A. Correct.

MR. ORTIZ: That's fine.

(By Ms. Butler)

Q. And then in the next paragraph under "Introduction," you say "The purpose of this analysis is to evaluate alleged damages as presented by plaintiffs and to provide an expert opinion as to the value of any offsets to a potential award"; correct?

A. Correct.

Q. And then it says -- excuse me -- "All calculations are calculated to present value as of the date of this report"; is that correct?

A. Yes.

Q. Okay. So is it accurate that for these nine reports that you provided in this case, that generally speaking, you are providing an expert opinion as to the value of purported offsets?

A. Yes. It is the present value of offsets.

Q. Okay. And then I was going to say in the other stuff that -- that you are providing, as your expert opinion in this matter, is -- you are providing present values for various numbers; is that correct?

A. That -- yeah, that is my opinion as to the value is all present value.

Q. And so those -- those two items -- is that pretty much what your expertise is limited to in these cases?

MR. ORTIZ: Object to form.

A. Reviewing and calculating economic damages and calculating offsets. That's what my scope is and...

(By Ms. Butler)

Q. Okay. Now you state in the introduction for Mr. Cagiano, "Plaintiffs have not presented an economic damage report" -- sorry -- "economic damage expert report regarding Mr. Cagiano. I

will therefore only provide an opinion regarding offsets in this matter."

Is that still the case with respect to Mr. Cagiano?

A. Yes.

Q. Okay. And so going down, then, to your "Opinions & Basis," your first heading is "Offsets" and underneath that you have "Past Medical Expense."

Do you see that?

A. Yes.

Q. In that paragraph, under "Past Medical Expenses," are you providing any opinion with respect to the benefits that Mr. Cagiano received from government agencies?

MR. ORTIZ: Object to form.

You can answer.

A. Regarding Dr. Ji's report and the amount listed, I have no opinions about that amount.

(By Ms. Butler)

Q. So are you basically just stating what Dr. Ji is going to opine on? Is that an accurate, I guess, representation of what you're doing in that paragraph?

MR. ORTIZ: Object to form.

A. Yes.
(By Ms. Butler)
Q. Going to the next heading, which is "Veterans Benefits Administration Compensation" -- actually, let me -- let me go back to the past medical expenses. I'm sorry.
As far as the amount that you've identified, are you relying on Dr. Ji for the calculation of that amount?
A. Yes.
Q. And are you relying on Dr. Ji for the basis for his calculation of that amount?
A. Yes.
Q. Now we'll go to the "Veterans Benefits Administration Compensation" heading. Sorry.
You note in there that Mr. Cagiano began receiving benefits related to Camp Lejeune on March 1, 2018. What did you rely on to determine that -- excuse me -- that date?
A. That is the date based on the VBA documents provided with the disability ratings combined with Dr. Ji's report, telling me which conditions were related to Camp Lejeune.
Q. And so on the first part of that, as far as the date he began receiving -- sorry --

Mr. Cagiano began receiving benefits, did you rely on information provided to you by the Department of Justice for that?

MR. ORTIZ: Objection to form. You can answer.

A. They provided the documents from the VBA that had that data, yes.

(By Ms. Butler)

Q. Okay. And then you said secondly -- and I believe this is covered by your footnote too, but correct me if I'm wrong -- that you relied on Dr. Ji for the disability ratings for the conditions that those disability ratings applied to; is that correct?

A. He opined which of those disability ratings were related to the Camp Lejeune exposure.

Q. And so you note -- made no independent determination about the relatedness of those conditions to the Camp Lejeune exposure; is that correct?

A. Correct.

Q. And so, for example, if you look at your Footnote 2 -- if Dr. Ji -- if he determined that prostate cancer was related to Mr. Cagiano's

Track 1 illness -- his Camp Lejeune Track 1 illness, you relied on Dr. Ji for that determination; is that correct?

A. Yes.

MR. ORTIZ: Objection to form and foundation.

A. Yes.

(By Ms. Butler)

Q. And so if Dr. Ji related prostate cancer to Mr. Cagiano's Track 1 illness, then you related prostate cancer to his Track 1 illness; is that correct?

MR. ORTIZ: Objection to form and foundation.

A. Yes.

(By Ms. Butler)

Q. Okay. And so if Dr. Ji were wrong in that determination, then the premise for your determinations would be wrong; is that correct?

A. Correct. If that one needed to be changed, then the calculations would be changed.

Q. Okay. Now, the next -- I'm still on page 2 under "Veterans Benefits Administration Compensation." The next sentence after the date that you note as being the date that Mr. Cagiano

started receiving benefits, the next sentence states "VBA benefits are based on Mr. Cagiano's combined disability rating, assigned by the VBA for various diagnoses."

Do you see that?

A. Yes.

Q. What do you understand about a combined disability rating? What does that mean?

A. When a person has more than one disability, the -- well, the VBA assigns a disability rating for the different conditions that they have. And when there's more than one, they combine them in a special way. It is -- they don't just add them together. They have a chart and that's how they figure out what the actual disability rating is that would then turn into their monthly benefit.

Q. Okay. And what chart are you referring to there? Is that a publically available chart?

A. Yes.

Q. Okay.

A. It's on my references.

Q. And that's why I handed you Exhibit 21. Is it on Exhibit 21? And it could also be attached to the back of your report. There are

other references there.

A. It's the one that starts "National."

Q. Okay.

A. Fourth line from the bottom.

Q. Okay. And so that is -- that National Archives and Records and Administration CFR combined ratings -- I'm guessing that should be "table" -- is that what you were relying on?

A. Yes.

Q. Okay. And so if an individual has different disabilities, is it your understanding that they necessarily have to add up to 100 percent, or can they add up to more than 100 percent?

MR. ORTIZ: Objection to form and foundation.

A. Once it's 100 percent, it's 100 percent. There's no more than 100 percent is my understanding. There are some other special monthly compensations that if they were awarded that would give a little bit of extra compensation.

(By Ms. Butler)

Q. So I'm going to give you a general example. If, let's say, if I -- this is just an

example. Let's say Mr. Cagiano had 100 percent disability rating, and he had various conditions, and his Track 1 bellwether illness was rated at 60 percent.

Would you assume that the other conditions are the remaining 40 percent?

MR. ORTIZ: Objection to form.

A. That's -- that's not really how it works. Each condition is assigned a different rating. And depending on how they are, they -- they get organized in highest to lowest. And if he was at 100 percent, then it doesn't necessarily mean 60/40. It would -- you'd have to take out the amount -- the rating for the related illness for Camp Lejeune and see what ratings were left and then follow the special chart in here.

(By Ms. Butler)

Q. And is that the methodology you used for these reports to determine the but-for calculation that we discussed at the beginning of your deposition?

A. Yes.

Q. Okay. That's what I was trying to get at is -- I wanted to understand the methodology

that you used to calculate -- and we'll get into some of the tables -- but the amounts that you allocated to the Track 1 Camp Lejeune illness versus other conditions.

Is there anything more to your methodology other than what you just explained?

MR. ORTIZ: Object to form.

You can answer.

A. Well, I don't know that that explained the full methodology, but it was -- all ratings together are what the Camp Lejeune ratings are -- or what they have with the Camp Lejeune disabilities -- or conditions.

And then I -- I guess this is what we said is -- you take those conditions out that are listed from Dr. Ji's report and then what are those ratings that are left and those are the non-Camp Lejeune ratings; so that's how we determine the disability rating from the chart.

(By Ms. Butler)

Q. That methodology you just described -- did you do that for each of these nine plaintiffs?

A. Yes.

Q. Okay. Did you personally do it?

A. Yes.

Q. Okay. So in the next sentence, where it says "Using VBA's disability ratings tables, I have calculated Mr. Cagiano's benefits due to increased disability ratings related to Camp Lejeune compared to what he would have received without these ratings," is that what you just described to me?

A. Yes.

Q. And that table that we looked at, the National Archives and Records Administration -- that's the table that you used -- that you refer to in the report?

A. Correct.

Q. Okay. In the next page of your report, which is page 3, you go on to state that "Mr. Cagiano's additional benefits received through December 31, 2025, due to increased disability ratings related to Camp Lejeune total 199,685," and you refer to Table 1.

Do you see that?

A. Yes.

Q. Is there anything more than that you did to get to that total other than what we just discussed?

MR. ORTIZ: Object to form.

A. No.

(By Ms. Butler)

Q. Okay. Going -- skipping the next paragraph, which is where you go through his current benefit and then you give a number stating what Mr. Cagiano would have received if he hadn't received Camp Lejeune -- skipping that paragraph, which refers to Table 2 -- do you see that?

A. Yes.

Q. Okay. Let's go to the next paragraph. Okay. Do you see where you say "assuming no other changes to his disability ratings"?

A. Yes.

Q. So is that an assumption that there would be no other changes to Mr. Cagiano's disability ratings -- is that an assumption that you made for each of these nine plaintiffs that there would be no changes to his disability ratings?

MR. ORTIZ: Object to foundation.

You can answer.

A. Yes.

(By Ms. Butler)

Q. And upon what do you base that assumption?

A. That there's no -- based on the information we have right now, I have no reason to assume that it would change.

Q. Now, in fact, when you were reviewing Mr. Cagiano's disability ratings, they had changed in the past; correct?

A. I believe so.

Q. And with respect to most of these plaintiffs, had their disability ratings changed over the time that you reviewed?

MR. ORTIZ: Objection to form and foundation.

A. I'd -- I'd have to look at each one. I don't know if they each changed or not.

(By Ms. Butler)

Q. And we can -- we can look at each one. Is it your testimony that it is reasonable to assume that there would be no changes to an individual's disability rating over time?

MR. ORTIZ: Object to form and foundation.

A. Yes.

(By Ms. Butler)

Q. And upon what do you base that testimony?

MR. ORTIZ: Objection.

A. That that is -- I have no reason to assume that it would change, and it's based on the facts that we sit here today.

(By Ms. Butler)

Q. Including the facts involving changes to ratings for a number of these plaintiffs?

MR. ORTIZ: Objection.

A. Yes.

(By Ms. Butler)

Q. So is it your opinion that no further changes will ever occur to these plaintiffs' disability ratings?

MR. ORTIZ: Objection.

A. No. That's an assumption made and if changes were made then -- then the changes will be made. But as we sit here today, we have no reason to assume they would go up or down, and it's based on what we know today.

(By Ms. Butler)

Q. So are all of your reports in this litigation premised upon the assumption that the government programs involved in your calculations

will continue in the exact same manner as they're operating at the present time including veterans disability benefits?

MR. ORTIZ: Objection to foundation.

A. Yes.

(By Ms. Butler)

Q. And are all of your reports in this matter premised upon the assumption that the care the plaintiffs need will continue to be covered by the government programs involved in your reports?

MR. ORTIZ: Same objection.

A. You're asking if the government will continue to pay for their medical needs? Is that what you're asking me?

(By Ms. Butler)

Q. So, for example, if you have calculated a future offset for Tricare medical expenses, are you assuming that Tricare will continue to provide for the plaintiffs' needs in the future exactly as they are now?

MR. ORTIZ: Same objection.

A. I think my answer is yes. I was confused because I think we changed topics. That

would be, like, for the life care plans and for Miller's analysis. Yes, it assumes that all the programs that were -- that are continuing -- that are paying for them now will continue in the future.

(By Ms. Butler)

Q. And with regard to veteran disability benefits -- and we'll -- we'll stick with that since that's where we are in the report, are you also making assumptions that the Veterans disability program will continue to pay at the same rates it's paying now?

MR. ORTIZ: Object for foundation.

A. Yes. And they'll actually increase each year for cost of living adjustments.

(By Ms. Butler)

Q. Okay. And so that was going to be my next question is you have made cost of living adjustments; correct?

A. Yes.

Q. Other than cost of living adjustments, is it correct to say that you have accounted for no other variables that could change with respect to a veteran's disability payments over time?

MR. ORTIZ: Objection.

A. Correct. The -- the -- the payments in this calculation are based on what they currently are receiving now.

(By Ms. Butler)

Q. So, for example, if the day after trial if a -- one of the Camp Lejeune plaintiffs were to develop a new illness that is not related to Camp Lejeune that caused a disability rating change, you have not accounted for that; correct?

A. Correct. That's -- we don't know that that would happen.

Q. And so if one of these plaintiffs were to -- if one of these plaintiffs were to develop an illness that was another Camp Lejeune related illness, you have not accounted for that either; correct?

MR. ORTIZ: Objection to form and foundation.

A. I have assumed no other changes. And if they received additional ratings, you know, their benefit may not change. It may stay where it is. If they get reduced, it could change. We don't know, as we sit here today; so we base it off what we know today and that's what the calculations are.

(By Ms. Butler)
Q. And, for example, are some of the calculations based on the veteran having a spouse who's living?
MR. ORTIZ: Objection.
A. Yes. Some of them have a spouse.
(By Ms. Butler)
Q. And so you haven't made any accommodation for the possibility that a spouse might pass; is that correct?
MR. ORTIZ: Object to foundation.
A. I'm -- I recall reviewing the life expectancies of the spouse and made sure that the plaintiffs were -- had a longer life expectancy. But if they were to pass away before them then it would reduce their benefit.
(By Ms. Butler)
Q. Okay. And that analysis of the spouses is not set forth in your report; is that correct?
A. No. It was a review.
Q. Okay. Going in that same paragraph where it says "Assuming no other changes to his disability ratings" -- do you see that paragraph I'm talking about?
A. Yes.

Q. Okay. Now, the next assumption is an assumption of an -- a life expectancy.

Do you see that?

A. Yes.

Q. You say Mr. -- "Assuming no other changes to his disability ratings, Mr. Cagiano will continue to receive these additional benefits through his life expectancy."

Do you see that?

A. Yes.

Q. Okay. That's what I was referring to. And so for each of these plaintiffs, have you calculated a life expectancy?

A. Yes.

Q. And that is an assumption that you have made as well; correct? That they will live until their life expectancy or longer?

A. Yes, and I -- I did not calculate it. I used it from the national statistics report.

Q. And so, for example, if one of the plaintiffs were to pass before their life expectancy they would not receive the benefits that you have calculated into the future; correct?

MR. ORTIZ: Object to form.

A. Correct. But again if they live longer than their average life expectancy, it could be higher.

(By Ms. Butler)

Q. And, in fact, given the tables you've used, half of the people would probably die before and half later; correct?

MR. ORTIZ: Objection.

A. It is an average life expectancy that does consider diseases in all people; so it's an average life expectancy.

(By Ms. Butler)

Q. And are there any other assumptions that you have made with respect to your calculations other than what we've just gone over?

A. The -- the cost of living adjustments --

Q. Okay.

A. -- as well.

Q. Okay. And going further down in Mr. Cagiano's report, you next have a summary paragraph.

Do you see that?

A. Yes.

Q. Okay. And if you look at that summary where you have your table -- you know what I'm

referring to in that table?
A. Yes.
Q. Okay. And you have offsets and then you have past medical care, and you have a number of 35,447.
Do you see that?
A. Yes.
Q. Now, you didn't calculate that number; correct?
A. No.
Q. You got that from Dr. Ji; correct?
A. Correct.
Q. And so by putting it in your report, you're just repeating what you're relying on Dr. Ji to have calculated correctly?
MR. ORTIZ: Objection.
A. I'm relying on him to provide me the past medical care offset number.
(By Ms. Butler)
Q. Okay. And are you taking an opinion with respect to how that offset should be applied?
MR. ORTIZ: Objection.
A. No.
(By Ms. Butler)

Q. Okay. And by putting it in the same table with VBA disability benefits, are you taking a position that the VBA disability benefits should in any way be applied against medical care?

MR. ORTIZ: Objection.

A. No. Again, I have no opinion about how they are applied.

(By Ms. Butler)

Q. Okay. And looking further at that chart, you have the past VBA disability benefits. Would it be accurate to say that those are the disability benefits that you have attributed to Mr. Cagiano's Track 1 Camp Lejeune illness?

A. Yes.

Q. And then as far as the future, that is the number that you have projected out that he would receive assuming his -- the life expectancy and assuming no other changes to his disability ratings based on his Camp Lejeune Track 1 illness?

A. Correct.

Q. Okay. And other than your calculation of those VBA disability benefits, is the rest of that table just math?

MR. ORTIZ: Objection.
(By Ms. Butler)
Q. I mean, you -- you've just added the total to get --
A. Yes.
Q. -- 618,951; correct?
A. Yes.
Q. Okay. There's nothing special that I'm missing there?
A. Correct.
Q. Okay. I just wanted to make sure.
Okay. So, again, you've assumed that Mr. Cagiano would remain eligible to the same extent he is now for veterans disability benefits; correct?
A. This calculation assumes that, yes.
Q. Okay. And are you aware that a sustained improvement of a disability can cause a reduction in the amount of a disability benefit?
MR. ORTIZ: Object to form and foundation.
A. I do not -- I'm not aware of how they are -- provided the ratings, the VBA.
(By Ms. Butler)
Q. Did you note that reduction of

disability benefit for a sustained improvement of a disability during your review of any of the plaintiffs' disability ratings?

MR. ORTIZ: Objection to form and foundation.

A. Did I note that -- I don't -- I don't know where they were in their care for the illnesses, if that's what you're asking.

(By Ms. Butler)

Q. Well, did you see any examples of where, say, for example, a veteran was assigned a 100 percent disability rating for his Camp Lejeune illness and then after some time it's reduced to less than 100 percent?

A. Yes, I have seen that.

Q. Did you make note of what caused that reduction in percentage disability rating?

A. No.

Q. Okay. And did you make note of how other illnesses impacted any reductions in those disability ratings?

MR. ORTIZ: Object to form.

A. No. I do not know how any change in illness affects the disability ratings.

(By Ms. Butler)

Q. Okay. And so those were not things you took into consideration in making your projections for future disability payments; correct?

MR. ORTIZ: Object to form.

A. Correct. It was based on his actual disability ratings at the time of this report.

(By Ms. Butler)

Q. Okay. So I want to turn now to your tables, just to make sure -- and as you've probably noted, I'm using Mr. Cagiano to try to understand your methodology for the plaintiffs as a whole.

So turning to your tables, can you explain to us what Table 1 represents.

A. Table 1 represents the total VBA benefits received and projected to receive, both with the Camp Lejeune related conditions and without the Camp Lejeune related conditions and the differential of those calculated to present day value.

Q. So I think this is clear but just to make sure I'm understanding correctly, if you look at Table 1 and you see the column that says "VA benefits with CLJA" -- do you see that?

A. Yes.

Q. Is that intended to represent the VA benefits, the veterans disability benefits that Mr. Cagiano is receiving for his Track 1 bellwether illness in the Camp Lejeune litigation?

A. It is what he's totally receiving now with -- that includes those ratings.

Q. That includes those ratings. And then the next column which is "VA Benefits Without CLJA," is that the but-for analysis?

A. Correct. Had he not had those conditions that Dr. Ji noted, I calculated what his benefits would have been anyway.

Q. And what did you use to calculate those? Is that the chart that we referred to earlier, the table?

A. Yes. The chart -- the chart we referred to earlier provides the ratings, and then there's an additional chart. They have every monthly historical compensation amount based on ratings published and that's where the numbers came from.

Q. And is that -- where is that chart referred to?

A. It is right there in --

Q. Is it the next chart?
A. -- ratings and -- yeah, right. Compensation rates -- rate tables.
Q. So we're looking at Exhibit 21. It's the US Department of Veterans Affairs compensation and rate tables?
A. Correct.
Q. Okay. So that chart is what you used to calculate the numbers on Table 1; is that correct?
A. Yes.
Q. Okay. And then you have a column that says "Excess Benefits for CLJA."
Do you see that?
A. Yes.
Q. How did you calculate that column?
A. That is the first column minus the second column.
Q. Okay. And then the "Present Value" column -- is that the present value of the number reflected in the excess benefits for CLJA?
A. Yes. And that only applies to future calculations discounted back to today.
Q. And so are there any other tables or charts, other than the two we've referred to on

Exhibit 21, that you used to calculate the numbers on your Table 1?

A. I don't think so.

Q. Okay. And, again, the information that you obtained -- those numbers came from the disability ratings that you were provided by the Department of Justice?

MR. ORTIZ: Object to form.

A. They provided the documents from the VBA that provided those ratings, but, yes, the documents came from the DOJ.

(By Ms. Butler)

Q. Okay. I want to turn to Table 2, just to understand how you compiled Table 2.

Can you explain to us what Table 2 is intended to represent.

A. These show you what the ratings are for each year and the effective date with and without the Camp Lejeune rating related conditions. So you would take -- you could look at these percentages and go to the compensation tables and get the monthly amount.

Q. So looking at this, you have "CLJA rate."

Do you see that?

A. Yes.
Q. And then you have "No CLJA rate" and then you have "Variance."
Do you see that?
A. Yes.
Q. So what does the variance represent?
A. It's the differential. The CLJA rate which includes all ratings minus the no CLJA rate.
Q. So I guess what's confusing me is -- is the first rate where it says "CLJA rate" -- actually CLJA and not CLJA?
MR. ORTIZ: Object to form.
A. It -- it's really should say maybe "with CLJA." So...
(By Ms. Butler)
Q. Yeah.
A. It's because it's all -- it's total.
Q. Yeah.
A. Okay. That's what I was trying to get at.
Q. So -- so the "CLJA Rate" column is really the total of all the disability benefits that the individual is receiving?
A. At that date, yes.

Q. Okay. And then the "No CLJA" is what you're subtracting out to get the variance; is that correct?

A. Yes.

Q. And the variance -- is that what you attribute to the CLJA --

A. Yes.

Q. -- illness? Okay.

And then "Annual" -- is that just times 12?

A. Yes.

Q. Okay. Can you tell me -- you have an asterisk for the SMC 48 S and K-1, which are special monthly compensation rates. What is your understanding of those rates and what they are for?

A. Sorry. That -- that annual number is not times 12. When I was looking at that, I -- I just said that because it's -- it's for the rest of that -- that time period. So if you look at the effective dates -- I apologize -- do you see, like, March 1 to --

Q. Yes.

A. -- July 1?

Q. Yes.

A. Then that would account for just that time period.
Q. For the four months?
A. Yeah.
Q. Okay. Okay. So from March 1st, 2018, to 7/1 --
A. Would be that.
Q. -- 2018?
A. Yeah.
Q. Okay.
A. So if you look lower, you'll see one's -- like, $500. That one's a little bit easier to follow. It's just times three kind of.
Q. Okay.
A. The $1600. Sorry.
Q. No. Thank you for --
A. -- questioning as I was --
Q. -- correcting me. Yes.
A. -- looking at that.
THE STENOGRAPHER: One at a time, please.
THE DEPONENT: Thank you.
(By Ms. Butler)
Q. So I had asked about the SMC 48 S and K-1 asterisk. Can you tell me what you

understand those special monthly compensation rates to be for?

A. Yes, the S -- the 48 S that is when you have 100 percent disability rating plus an additional -- I believe, it was over 60 percent if there's a second disability rating above 100 percent. I think you mentioned that earlier today.

The K-1 is when you -- is an additional monthly compensation for losing an organ or losing the use of a certain organ.

Q. And how did you account for those special monthly compensation rates in your Table 2?

A. They're from the rating tables.

Q. So again --

A. There's --

Q. Sorry. Referring to Exhibit 21, they're from the tables we looked at?

A. Yes.

Q. Okay. And so as far as your treatment of the special monthly compensation rates, you treated them however the two tables that we referred to on your Exhibit 21 indicate?

A. Correct.

Q. And is that math indicated on this Table 2?

A. It's -- it's in there. If you go to the rating tables, you'll -- you'll take the 100 percent plus the S plus the K-1 and add the three together in there.

Q. And how did you determine if the S and the K-1 were Camp Lejeune related or not?

A. I don't know. That might be if it were -- it must have had to code -- the code that Dr. Ji had supplied.

Q. Okay. So turning now to Table 3 -- and Table 3 covers two pages -- can you tell me what Table 3 is intended to represent.

A. This is a summary of the VBA documents that provide the different diagnosis codes and descriptions and ratings that they were given.

Q. So when you have referred to previously in your deposition about the -- I forget how you put it -- the documents in the system that you were looking at, is this a summary of those documents?

A. Documents from the VBA that we obtained, yes.

Q. Okay. So looking at Mr. Cagiano, if you

look at Table 3, page 1, and you start down at the bottom, which is March 1 -- sorry. Are you with me?

A. Yes.

Q. And if you want to take those apart, feel free.

A. I don't want to mess with your official exhibit.

Q. Okay.

A. It's fine. It's good. I'm just looking at a few pages at once.

Q. So I'm looking at Table 3 and -- and at the bottom it shows "Original Award, March 1, 2018"; right?

A. Yes.

Q. And that's consistent with the date you put in your report as the date that you indicate he first started receiving benefits from his Track 1 Camp Lejeune injury; correct?

A. Correct.

Q. Okay. And you look at original award and it says "100 percent."

Do you see that?

A. Yes.

Q. Okay. And then if you go up and you see

on 5/1/2019 it says "Compensation Rating Adjustment."

Do you see that?

A. Yes.

Q. And he fluctuates down to 40 percent?

A. Correct.

Q. And is that a fluctuation for the same disease that he was awarded the 100 percent for?

MR. ORTIZ: Objection to foundation.

A. It does appear that way, yes.

(By Ms. Butler)

Q. Okay. And then you go to 8/1/2019 and you see an 80 percent.

Do you see that?

A. Yes.

Q. And is that for the same disease for which the original award was made on 3/1/2018?

MR. ORTIZ: Same -- same objection.

A. These are the combined ratings; so it's not that simple. But there was a change in that diagnoses code related to it -- the same Camp Lejeune related diagnoses.

(By Ms. Butler)

Q. So for Mr. Cagiano, within just that one

year and five-month period, he went from 100 percent to 40 percent to 80 percent; correct?

MR. ORTIZ: Objection.

A. For all his diagnosis codes, it appears that way, yes.

(By Ms. Butler)

Q. Were those all of his diagnosis codes that you related to his Camp Lejeune Track 1 injury?

MR. ORTIZ: Objection.

A. No. I did not relate them. Dr. Ji said which ones were related. But it's -- remember it's a combined rating table. So the -- it's based on a few different ratings from different items that were not all Camp Lejeune related.

(By Ms. Butler)

Q. Okay. So let's look at the second table on -- for Table 3, which is on page 2 of 2.

Do you see that table?

A. Yes.

Q. Okay. So if you -- if you go down to -- I'm starting from the bottom -- and you see on 2/23/2018 there's a diagnostic code of 7500 for papillary urothelial carcinoma.

Do you see that?

A. Yes.
Q. Okay. Do you understand that to be his bladder cancer?
A. I -- I don't know exactly what that is. But I assume that's what that is. I just know that that's a related condition.
Q. Okay. But the diagnostic code is 7500; correct?
A. Yes.
Q. Okay. And it says papillary urothelial carcinoma with some other language; correct?
A. Yes.
MR. ORTIZ: Object to form.
(By Ms. Butler)
Q. And it has a percentage of 100 percent.
Do you see that?
A. Yes.
Q. Then if you go up and you look for that same diagnostic code, you see it again on 5/1/2019.
Do you see that?
A. Yes.
Q. Okay. And it has the same diagnostic code of 7500; correct?
A. Correct.

Q. And it has the same language, papillary urothelial carcinoma with the rest of the language; correct?

A. Correct.

Q. And do you see that it has a percentage of 30 percent?

A. Yes.

Q. And then if you go up and you look for that diagnostic code again, and you see it again, 7500 on 7/19/2019.

Do you see that?

A. Yes.

Q. And it has the same papillary urothelial carcinoma; correct?

A. Correct.

Q. And it has the percentage at 60 percent?

A. Correct.

Q. So am I not correct that Mr. Cagiano, in about a year and a half time frame, went from 100 percent to 30 percent to 60 percent for the same diagnostic code?

MR. ORTIZ: Object to form.

A. Yes. And as you can see from the table before the different ratings than the other one. That's why this one explains that one specific

code a little bit better but, yes, they did fluctuate.

(By Ms. Butler)

Q. Yet your projections into the future for Mr. Cagiano assume that no such change in his percentage will ever occur again; correct?

MR. ORTIZ: Objection.

You can answer.

A. Based on this it assumes it would be at that, I guess, 60 percent, yes.

(By Ms. Butler)

Q. And so, again, to ask: You're assuming that there will be absolutely no changing -- no changes ever again with respect to his disability ratings in the future --

MR. ORTIZ: Object to form and asked and answered.

(By Ms. Butler)

Q. -- is that correct?

A. Yes, my calculations --

Q. Okay.

A. -- are based on what we have today. I cannot assume a change in the future unless there's a specific medical -- someone to tell me that it's going to change.

Q. And looking again at that second page of Table 3. If you go up to the top of that chart, in fact, the last entry in your table is for a diagnostic code 7528; correct?

A. Yes.

Q. And so that diagnostic -- diagnosis description is prostate cancer; correct?

A. Yes.

Q. And he -- under the percentage it says 100 percent; is that correct?

A. Yes.

Q. And that occurred with an effective date according to your chart of August 10, 2022; correct?

A. Correct.

Q. And so whereas on 2/23/2018 Mr. Cagiano had a 100 percent percentage rating for papillary urothelial carcinoma. By 8/10/2022 he had a 100 percent disability rating for prostate cancer; correct?

A. Correct.

Q. And is it your understanding that prostate cancer is a Track 1 illness for which Mr. Cagiano is seeking recovery in this litigation?

MR. ORTIZ: Objection.

A. I believe according to Dr. Ji's report, it is related.

(By Ms. Butler)

Q. And so just, for example, I'm going to ask you to make an assumption. Let's assume that prostate cancer was not a Track 1 illness for which Mr. Cagiano was seeking recovery. If that were the case, then it would be -- would it be your determination that none of his future disability benefits would be for his Camp Lejeune Track 1 illness?

MR. ORTIZ: Objection to form and foundation.

A. No. There are a few different codes that are considered related. So you would take out that 100 percent and still recalculate his combined disability rating based on what was left.

(By Ms. Butler)

Q. And do you know how that would impact your analysis if you did that?

A. It would change.

Q. Okay.

A. I don't know what it would be, as I sit

here right now.

Q. So if a veteran that you have calculated future disability benefits for were to contract an illness that is service related but not the illness for which they're seeking recovery in the Camp Lejeune litigation, it would change your future calculation; correct?

MR. ORTIZ: Object to form and foundation.

A. Yes.

(By Ms. Butler)

Q. Okay. So one of the other things I'm going to ask you to explain -- and, again, I'm trying to use Mr. Cagiano as exemplary for some of the other reports -- is if we look at the second page of Table 3, and then I'm going to ask you to go back to Table 2. I'm trying to understand how these are -- these changes in Table 3 are reflected in Table 2.

So, for example, if you start on Table 2 and you start with 3/1/2018 and you have 100 percent, which I understand is the total disability rating; correct?

A. Yes.

Q. Okay. And we look back at Table 3, the

second page -- in fact, are you referring to the 100 percent disability rating on 2/23/2018 for the papillary urothelial carcinoma or something else?

A. Yes, that's correct.

Q. Okay. Did you just round up to the next month?

A. No. VBA benefits are effective the first of the month --

Q. Okay.

A. -- following their effective date.

Q. Okay. So that 100 percent that we start with in Table 2 is reflected by that entry on 2/23/2018 in your Table 3; correct?

A. Correct.

Q. Okay. Then we go up and if you -- we looked at this -- and the next entry for the diagnostic code 7500, the papillary urothelial carcinoma is reduced to 30 percent.

Do you see that?

A. Yes.

Q. And, in the meantime, it looked like right below it, there was another condition for which Mr. Cagiano received disability; is that correct?

A. Yes.
Q. And that's the tinnitus?
A. Yes.
Q. At 10 percent?
A. Yes.
Q. Can you show me how those are reflected in your Table 2.
A. Yes. So you should really look at the first page of Table 3, and that shows you the combined ratings of each one. So if you look at May 1, 2019, you'll see that it's at 40 percent. So what you would do is his -- so at that date, he had two ratings of 30 percent and a 10 percent and when you look at that combined -- in this situation, it looks like you just add them together, but that's not really what you do.
You look at this combined ratings table and you go down one side of it and you go over to the other. You go down the 30 percent and you go over to 10 and you grab that number. And it was -- I'm going to guess, it was probably like 38 percent and it rounds; so it would be 40.
Q. Okay. And then if you look at Table 2, again that heading really should be total -- right? -- at 40 percent?

A. It -- yes. This should be what he's actually receiving compared to the but-for. Had it not occurred, what he would have received.

Q. Because the CLJA rate would actually be 30 percent, not 40 percent; is that correct?

A. Correct. So this is calculating all what he's actually totally getting versus what he would have gotten without those ratings.

Q. So in all of your Table 2s, would it be more accurate to label that where it says "CLJA rate total" --

A. Sure.

Q. -- to avoid confusion?

A. Sure.

Q. Okay. I just wanted to make sure I was reading that correctly.

And then, again, just to make sure I'm understanding your tables correctly, we looked at the diagnostic code 7500, which changed to 60 percent on 7/19/2019. Can you show me where that is reflected in Table 2?

A. That would -- when it goes up to 80 percent on August 1 because it's the first of the month of the following month.

Q. And, again, that's his total combined

rate?

A. It is combined; so it would be the 60 and the 30 and the 10 based on the -- the combined rate in the table.

Q. And that's the 60 for the papillary urothelial carcinoma, the 30 for the total right knee replacement, and the 10 for the left knee arthritis?

A. Yes. And there -- it looks like there's also -- did you say tinnitus?

Q. The -- I don't know if I'm pronouncing that correctly, but...

And so those are reflected in your Table 2 under the column that would be more accurately stated as the total combined rate?

A. It would be the total with the CLJA --

Q. Okay.

A. -- rates.

Q. Okay.

MR. ORTIZ: Is now a good time for a break?

MS. BUTLER: Yeah.

MR. ORTIZ: We've been going for about an hour.

MS. BUTLER: Yes, that's fine.

THE VIDEOGRAPHER: All right. Time is now 2:24. We're off the record.

(A recess was taken.)

THE VIDEOGRAPHER: Time is now 2:35. We're back on the record.

(By Ms. Butler)

Q. We just went through the report of Mr. Cagiano, which is Exhibit 20. Do you intend to render any opinions with respect to Mr. Cagiano beyond what is set out in your report?

MR. ORTIZ: Object to form.

A. No. Not at this time.

(By Ms. Butler)

Q. Now, you previously provided a report on Mr. Cagiano back in, I think it was April of 2025. Do you recall providing a prior report?

A. Yes.

Q. And do you recall that at that time, Dr. Ji was not involved in the litigation or at least had not provided a written report?

A. Correct. Yes.

Q. And so for the pieces that we went over in Mr. Cagiano's report that you relied on Mr. -- Dr. Ji for, do you recall what you relied on in

your last report?

A. There were some documents provided, but I don't know exactly, as we sit here.

Q. Are those documents identified either in the attachment to your Exhibit 20 or in Exhibit 21?

MR. ORTIZ: Object to foundation. You can answer.

A. Yes, I'm pretty sure -- I can't look at this and tell you which documents, but I believe they're encompassed in the Bates documents.

(By Ms. Butler)

Q. And so, for example, for the relatedness determinations that you indicate in your Footnote 2 that you relied on Dr. Ji for, how did you make those determinations before you had Dr. Ji to rely upon?

A. In the preliminary report, counsel told us which rates -- which codes to use.

Q. Is there a written document that provided those assumptions for you?

A. No, I don't think so.

Q. So how did you remember as you were going through all of these reports what assumptions you were to make on relatedness?

MR. ORTIZ: Objection.

A. I -- it was probably part of the -- when we did the calculations. I -- I can't tell you as I sit here.

(By Ms. Butler)

Q. Okay. But you relied on assumptions provided by counsel in your earlier report, and you have replaced those assumptions with Dr. Ji's relatedness determinations in the current report; is that correct?

A. Yes.

Q. And I'm sorry. I have no further question on that.

Okay. I am going to move to Mr. Criswell.

MR. ORTIZ: We're done with Cagiano?

MS. BUTLER: Yes.

(By Ms. Butler)

Q. And so I am going to hand you what we marked as Exhibit 22, which is your expert report for Mr. Criswell and Exhibit 23, which is your Materials Considered List for Mr. Criswell.

(Exhibit Number 22 was marked.)

(Exhibit Number 23 was marked.)

(By Ms. Butler)

Q. Now, turning to page 2, we discussed the assignment provision under the Cagiano report and discussed that the professional consulting services were the services referred to in the scope of work exhibits. Is that again consistent for all of these reports?

A. Yes.

Q. Okay. I'm not going to ask you that again unless there's any report that that would change for.

A. Okay.

Q. Is -- is there any report that your scope of work was different than as we've already discussed?

A. They should all have that same sentence.

Q. Okay. And I noted, in comparing these nine reports, that they are all organized in a -- the same manner; is that correct?

A. Yes.

Q. And so did you have kind of a form that you used for these nine reports and that you followed for each of them?

A. Yes.

Q. And we noted previously that there were

a lot of people involved in Forvis Mazars's work on these reports. So looking at Mr. Criswell's report here as Exhibit 22, are there any parts of this report that you relied on others to prepare?

MR. ORTIZ: Objection to form and foundation.

A. I had some of the staff members input the early, like, maybe the first two or three paragraphs and, like, the final compensation and restrictions and any generic information.

(By Ms. Butler)

Q. Is there anything else in the reports that you did not personally prepare?

A. No.

Q. So looking at Mr. Criswell specifically, which is Exhibit 22, we go down to the "Introduction," and it says "The purpose of this analysis is the following" -- do you see where I am?

A. Yes.

Q. It says, first bullet point: "Evaluate alleged damages as presented in Plaintiffs' expert report prepared by Chad Staller, J.D."

Do you see that?

A. Yes.

Q. And then second bullet point: "Determine the present value of any offsets to a potential award."

Do you see that?

A. Yes.

Q. Is that the scope or the extent of the analysis you prepared for Mr. Criswell?

MR. ORTIZ: Object to form.

A. Yes.

(By Ms. Butler)

Q. Okay. Now, going down to the next heading, it says "Staller Report."

Do you see that?

A. Yes.

Q. And it refers to household services.

Do you see that?

A. Yes.

Q. And you refer to a report by Chad Staller; is that correct?

A. Yes.

Q. Okay. And going to the next page, the top sentence on page 3 says "While I do not take issue with the sources used in Staller report, the illustrative calculations provided are unsupported and misleading."

Do you see that?

A. Yes.

Q. Okay. So I want to understand that sentence better.

Am I understanding correctly that you don't take issue with the method Mr. Staller used to calculate the one hour of lost household services; is that correct?

MR. ORTIZ: Object to form.

A. Correct.

(By Ms. Butler)

Q. Okay. What I understand you take issue with is the fact that he did not apply that one hour and calculate it out to make a final calculation as to the number of household services that should be considered in the case; is that correct?

MR. ORTIZ: Object to form.

A. Partly, yes. He -- he's assumed at least one hour a week or all hours per week.

(By Ms. Butler)

Q. Okay. So you said "partly." Can you explain better than I did what your criticism of Mr. Staller is.

A. It was just because you said that he

didn't multiply one hour by something, well, it could have been subtracting it. I meant to say that he assumes that he had one hour a week of losses from 1997 through 2025. So there was at least one hour per week. There could have been times where there were zero hours per week or, again, there could have been more hours per week.

I'm stating he didn't provide an opinion on that, and he didn't have a basis for providing an -- any of this, if there's a loss at all. And in the second scenario, he provided statistical data on the average person and Mr. Criswell's situation, I guess, age and retirement, that sort of thing -- again, I don't take any issues with the sources. I use similar sources. But Scenario 2 assumes that he can't do anything into the future. And I don't see his basis for that calculation.

Q. Have you been involved in cases where either you or other experts have testified as to lost household services?

A. Yes.

Q. And in your experience, is there usually testimony at trial upon which a fact finder makes a determination about the loss of household

services?

MR. ORTIZ: Object to foundation.

A. My experience is that me or other experts -- excuse me -- other experts or I will provide an opinion and the trier of fact hears that opinion and whether they agree with me or the other expert, those are the opinions.

(By Ms. Butler)

Q. And so is it your testimony that you, as an expert, opine as to the household services that someone could or could not have performed as opposed to a fact witness such as the plaintiff or the plaintiff's spouse?

MR. ORTIZ: Object to form.

A. I -- I do not judge them or look at -- evaluate what they can and can't do based on the statistics similar to here but make it personalized for the actual plaintiff. I calculate a damage amount for that.

(By Ms. Butler)

Q. So you calculate a damage amount, but, in fact, isn't it dependent upon what evidence is allowed at trial as to how many hours might be determined to have been lost or not lost for household services?

MR. ORTIZ: Object to foundation.

A. I don't know what's admitted in trial, legally or whatnot, but as part of my file, I include loss of household services. And I don't put a blanket number. I actually calculate in the loss based on interviewing the -- the plaintiff and in -- as well as look at the statistics.

(By Ms. Butler)

Q. Okay. Do you understand your role as an expert witness in a case, either in this case or other cases, to be serving as the role of a fact finder?

MR. ORTIZ: Objection.

A. I am providing an opinion based on facts.

(By Ms. Butler)

Q. And are those facts determined at the trial based on your opinion or based on the testimony that fact witnesses give at the trial?

MR. ORTIZ: Objection.

A. Again, I -- I -- I guess it's based on the fact witnesses. But I prepare my report based on the fact witnesses, and my opinion here as you asked, is that he didn't do that. He just

provided a generic number and didn't apply it to, specifically, the plaintiff in his report.
(By Ms. Butler)
Q. Okay. And so, again, your criticism is that he didn't try to serve as fact finder and determine the number of hours to be applied to the calculation, and it's the calculation you have no problem with; it's him not taking the role of fact finder; is that correct?
MR. ORTIZ: Objection.
A. No.
(By Ms. Butler)
Q. Okay. Can you explain it to me.
A. He didn't -- he provided a random number in his report.
Q. How is it random when you say that you don't have a problem with the statistical data?
A. He provided the same number in every report, and it's not specialized to each specific plaintiff. The only thing he did was make it local to each area that they lived in.
So he has provided a scenario where there's one hour per week -- let's -- let me make sure I said that correct -- per week lost over a 28-year period, when I don't have -- I don't see

where he's provided a basis for even saying that there's a one hour per week loss there. That's what I'm saying.

And then he's providing a scenario where he can't do anything for the rest of his life. And when I think there -- I didn't see anything that stated that where he got that opinion from -- that he couldn't do anything. And I believe we see in his deposition that he wasn't claiming lost household services.

Q. So let me ask it this way: If at the end of a -- the trial, the Court or jury were to determine a number of hours that Mr. Criswell was unable to perform household services, am I correct that you don't take issue with the calculation that Mr. Staller provided to apply to that determination?

MR. ORTIZ: Object to form.

A. Correct.

(By Ms. Butler)

Q. Okay. I'm going to move now down to your "Opinions & Basis," and under "Offsets," again, you have "Past Medical Expense." And we went through this with Mr. Cagiano, and I just want to make sure that, again, and for all of

these reports in this past medical expense paragraph, you're relying on the report of Dr. Ji for all of that information; is that correct?

MR. ORTIZ: Object to form and asked and answered.

A. Yes.

(By Ms. Butler)

Q. And so in this instance, Dr. Ji, you state, determined that there were no government agencies that had provided healthcare benefits. And so you are just -- I guess, didn't go back to make sure that determination was correct. You're relying on Dr. Ji for that information?

MR. ORTIZ: Same objection.

A. Correct.

(By Ms. Butler)

Q. Okay. Now, going down to VBA, is the methodology and the manner in which you made your calculations similar to what we just went through with Mr. Cagiano?

A. Yes.

Q. Okay. And so the information, for example, about when Mr. Criswell began receiving benefits came from the documents that you were provided that are VBA documents?

A. Yes.

Q. Okay. And then as far as how you made your calculations that are reflected in this section, we went through the different tables in Mr. Cagiano's report, and you did the same thing here applying Mr. Criswell's information. Is that accurate?

A. Yes.

Q. And is that true for all of these nine plaintiffs so I don't have to go through in painstaking detail?

A. Yes.

Q. Okay. And just as we referred to those two statistical items, the National Archives and the US Department of Veterans Affairs compensation and pension rate tables, which you relied on for Mr. Cagiano -- if you look at Exhibit 23, which is your Materials Considered List for Mr. Criswell, you have those same two resources noted there as well; correct?

A. Correct.

Q. Are there any other additional tables that you relied on for Mr. Criswell that we didn't discuss with Mr. Cagiano?

A. No.

Q. Okay. So going through, again, the Veterans Benefits Administration compensation and turning to page 4, the first full paragraph, again, says "assuming no other changes to his disability ratings."

Do you see that?

A. Yes.

Q. So we went through with Mr. Cagiano that you made various assumptions including that Mr. Criswell's disability ratings will not change ever again in the future and that's an assumption you made here as well; correct?

MR. ORTIZ: Object to form.

A. Yes.

(By Ms. Butler)

Q. Okay. And you also assumed the annual cost of living adjustment; correct?

A. Yes.

Q. And you applied a life expectancy; is that correct?

A. Yes.

Q. And so other than the cost of living adjustment, you are assuming that nothing will change with respect to Mr. Criswell's conditions, his ratings, the amounts to be paid for those

ratings, or other criteria pertaining to his veterans disability benefits will change in the future; is that correct?

MR. ORTIZ: Object to form.

A. Correct. These are based on today's rates -- ratings.

(By Ms. Butler)

Q. Okay. And going to your summary for Mr. Criswell, it says "Based on the scope of work performed in connection with this matter as well as my professional experience and education, it is my opinion that the present value of potential offsets to any award in this matter is $1,106,904."

Do you see that?

A. Yes.

Q. And, in fact, for Mr. Criswell that is the total of the past and future VBA compensation benefits that you calculated in Table 1; is that correct?

A. Yes.

Q. Okay. And, again, it's my understanding you're not opining as to how those offsets should or should not be applied. You're just calculating the amount; is that correct?

A. Correct.

Q. Okay. And so if we go down to the tables, and you look at -- sorry. I think it's probably easier to look at Table 3.

So if you look at Table 3, and you start at the bottom, which is 1/11/2012 and you see a diagnostic code of 7528 for bladder cancer with residuals at 20 percent.

Do you see that?

A. Yes.

Q. And then would you agree that Mr. Criswell's percentages during the nine-year period that's reflected in that table on page 2 of 2 at the -- the Table 3, the second -- that bottom table down there -- I don't know how to describe it. It's on page 2 of 2. It's the second table on there?

A. Yes, these are his actual rating decisions.

Q. Okay. So the nine-year period that's reflected there, he went from 20 percent for bladder cancer with residuals and then 30 percent to unspecified depressive disorder with anxious distress and then, again, that tinnitus for 10 percent like Mr. Cagiano had.

Do you see that?

A. I do see that.

Q. Okay. And then do you see on 8/21/2017, there's an increase to 100 percent for unspecified depressive disorder with anxious stress?

A. Yes.

Q. And then on 11/1/2021, there's bladder cancer with residuals at 20 percent?

A. Yes.

Q. Okay. So looking at that chart, if you look at just the dates 1/11/2012, he has 20 percent for bladder cancer, 10 percent for tinnitus, and another 10 percent entry for tinnitus. Can you show me how all of that is reflected on your Table 3.

A. So that would be January 11th, 2012 --

Q. I'm sorry. On your Table 2. I'm sorry.

A. Uh-huh. So that -- that combined rating -- let's see here -- it would be starting February 1, 2012. So you've got a 20 percent and a -- and two 10 percents. That equals 30 percent.

Like I said, it's not straight math. It's based on off of the -- the rating tables; so

you -- what you would do is you take the highest percentage first, which is the 20 percent; and you'd go down the left side of that combined rating table; you'd go over to 10 percent, you'd grab whatever rate that was, say it's 22, and then you would take 22 from that left side of the table and go over 10 percent again. And I'm going to guess it's like 28, 29 percent and that rounds up to 30.

Q. Okay. And, again, that "CLJA Rate" column should be total combined --

A. All --

Q. -- rate?

A. -- rates, yes.

Q. And so then Mr. Cagiano, if you look at your Table 2, you see that in 2014, on 4/1/2014 -- sorry. This is Mr. Criswell. Did I say Mr. Cagiano?

MR. ORTIZ: Yes.

(By Ms. Butler)

Q. Mr. Criswell, on 4/1/2014, you have the total rate column, which is labeled "CLJA Rate," but it's total rate. You -- you have it going up to 100 percent; correct?

A. Yes.

Q. Okay. Can you show me where that is reflected on this table we were looking at, at Table 3?

A. This unfortunately -- when I went to review this I saw that these were missing. There was a -- in that time frame, it would have been -- there was a -- we have the 11/2012 and then -- yeah, April 1st, 2014, there was 100 percent rating given that is not listed on here.

Q. And do you know what that diagnostic code was or what the diagnosis description is?

A. I did not note it -- I -- when I reviewed it. I know it's one of the related Camp Lejeune diagnosis conditions, but as I sit here right now, I cannot tell you. I can provide an updated Table 3 for you after the deposition to show that amount.

Q. And your Table 2 also shows an 8/1/2014 and a 12/1/2014. Are those all missing as well?

A. There's the 8/1/2014 was just a change because there was no child, I guess. And then 12/1/14 -- let's see here -- it could. Like I said, when I looked at this I was -- I saw that as well and was, like, why aren't they matching

up? And it was a -- some hidden cells on Excel when this got printed.

Q. Okay. So is it your intention to update these tables for Mr. Criswell's report to reflect missing information?

MR. ORTIZ: Object to form.

You can answer.

A. I can. The information is provided in the actual documents, and this was just a summary of them. But, yes, I can update the table and provide the -- a summary of the ratings that he received.

(By Ms. Butler)

Q. Okay.

MS. BUTLER: I think it would be best if she does that, Mr. Ortiz.

MR. ORTIZ: Okay. We can talk about it after the deposition.

MS. BUTLER: Yeah.

(By Ms. Butler)

Q. When you were reviewing this, did you note any other information that was missing?

A. I believe that was -- that's all I recall seeing.

Q. Okay. Now, looking at that Table 3, we

do see on 11/1/2021 that the bladder cancer is residual. The percentage is 20 percent; correct?

A. Correct.

Q. But when you look on Table 2 at 11/1/2021, under the total rate which is titled "CLJA Rate," you have 100 percent plus K-1.

Can you explain what that's reflecting there.

A. He still had 100 percent disability, and he has the K-1 because, I believe, he has lost the use of an organ.

Q. Do you know what organ he has lost the use of?

A. I can only speculate that it is on the list of erectile dysfunction, but I cannot confirm.

Q. And so for purposes of the K-1, did you attribute that to Camp Lejeune?

A. Yes, it appears so.

Q. Okay. And did you also attribute the SMC 48 S to Camp Lejeune?

A. That was during that time period where he had two diagnoses, 100 percent and greater, yes.

Q. And how did you make those

determinations about whether to attribute the SMC 48 S and the K-1s to Camp Lejeune or not?

A. It -- I would have used Dr. Ji's report and his guidance benefits and if it's -- if it's not attributed to that, then it would change.

Q. So if -- if Dr. Ji's report did not support the allocation of those and SMC 48 S's and K-1's to Camp Lejeune, then your analysis would change?

MR. ORTIZ: Object to form and foundation.

A. Yes.

(By Ms. Butler)

Q. Now, we just looked at Mr. Cagiano who went from 100 percent for bladder cancer to 100 percent for prostate cancer; correct?

A. I believe so, yes.

Q. And so it's possible that something similar could happen to Mr. Criswell; correct?

MR. ORTIZ: Objection to form and foundation.

A. I don't know what he could get or could not get. He could have another diagnosis.

(By Ms. Butler)

Q. Okay. So it's possible, isn't it, that

Mr. Criswell could have another diagnosis over the course of his lifetime; correct?

A. Sure.

MR. ORTIZ: Same objection.

A. Sure.

(By Ms. Butler)

Q. Okay. And that diagnosis could change his disability ratings; correct?

A. If it -- yes, depending on whether it was related or not related.

Q. Right. And, in fact, Mr. Criswell like Mr. Cagiano had a number of fluctuations in his disability ratings even in the chart as reflected here, which is missing some information; correct?

MR. ORTIZ: Object to form.

A. I think in the -- the last one we were looking at a specific code and in this one it looks like it's the same -- the same code is the same percentage. He has some different diagnoses in there regarding depressive order. You were correct. The 30 percent went up to 100 percent.

(By Ms. Butler)

Q. So, again, my question is that Mr. Criswell, even in the time period reflected in your Table 3, shows that over the course of

time he had various fluctuations in his disability percentages and the different diagnoses related to those; correct?

MR. ORTIZ: Object to form.

A. He -- he has some different diagnoses over that time period, yes.

(By Ms. Butler)

Q. And different percentages; correct?

MR. ORTIZ: Same objection.

A. Yes. But he had different diagnoses.

(By Ms. Butler)

Q. Okay. And would that not lend some credence to the fact that he might have some more different diagnoses in the future?

MR. ORTIZ: Objection.

A. I could never speculate what he could or couldn't have in the future. This is based on what he actually has now.

(By Ms. Butler)

Q. Okay. So I was curious with respect to your Materials Considered List -- I think it was Mr. Criswell. Sorry. Maybe it's the supplemental Materials Considered List. I will -- so there was a -- I'll -- I'll get to that later. There was a supplemental Materials

Considered List that I think I have a question based on. So we can -- we can move on from Mr. Criswell's report.

So I'm going to turn to Mr. Laramore. I am going to hand you -- sorry -- this is Exhibit 24, which is Mr. Laramore's report and Exhibit 25, which is your Materials Considered List for Mr. Laramore.

(Exhibit Number 24 was marked.)

(Exhibit Number 25 was marked.)

(By Ms. Butler)

Q. And I am going to ask you just -- we've gone over two of the reports so far. Is there anything in particular -- and we can look at his report specifically -- but is there anything in particular that you recall being different about Mr. Laramore's report from the other two that we looked at previously?

A. This one has a life care plan.

Q. Okay. All right. We'll get into the life care plan. So with respect to Mr. Laramore, the assignment, the expert qualifications -- those are the same as we've previously gone over; correct?

A. Yes.

Q. Okay. And then in the introduction, you actually have three bullet points here, and you say you're going to "evaluate alleged damages as presented in Plaintiffs' expert report prepared by Chad Staller"; and then, next, "determine the present value of future medical care costs as specified in a life care plan report prepared by Deborah Navarro"; and, then, finally to "determine the present value of any offsets to a potential award."

Is that the scope of your report for Mr. Laramore?

A. Yes.

Q. Okay. And so going down to the next heading, it says -- it says "Staller report," "Medical Care Expenses." And, again -- well, this one's a little different. You say that "The Staller report reviewed the cost analysis tables prepared by Michael Fryar dated February 6th, 2025, in which Mr. Fryer provides the cost of bladder removal surgery either with a neo bladder or without a neo bladder"; is that correct?

A. Yes.

Q. And then you provide the figures that Mr. Staller applied to Mr. Fryar's life care

plan; is that correct?
A. Yes, I think it was just Fryar's numbers. I don't think there were any calculations in this situation.
Q. Okay. And so in that paragraph, are you just repeating what is stated in other people's reports?
A. Yes. I'm summarizing Staller's report there.
Q. Okay. And so there's no testimony or opinion analysis in that paragraph that you're rendering; is that correct?
A. No. He -- Staller didn't provide a real opinion. He just restated Fryar's number.
Q. And you're just restating those numbers as well; correct?
A. Yeah.
Q. Okay. And then going to "Opinions & Basis." We start with "Future Medical Care."
With respect to future medical care, you say that your "opinion regarding the present value of the cost of future medical care needed by Mr. Laramore is based upon a life care plan report prepared by Deborah Navarro dated April 8, 2025; is that correct?

A. Yes.
Q. And so you did not prepare the life care plan report. You relied on Ms. Navarro's report; correct?
A. Correct.
Q. Okay. And she provides -- Ms. Navarro -- the current costs and specific needs in her report; correct?
A. Correct.
Q. And Mr. Fryar, who also prepared a life care plan, he's the plaintiffs' life care plan person; correct?
A. Yes.
Q. And Ms. Navarro is the defendant's life care plan person; correct?
A. Yes.
Q. And so you relied on the defendant's life care plan rather than the plaintiffs' life care plan, correct?
A. Correct.
Q. Okay. And so your numbers are based on the DOJ expert, Ms. Navarro -- her life care plan?
A. Correct.
Q. And there's also a Mr. Shahnasarian who

provided a life care plan for the defendant for some of the plaintiffs, but you relied on either Mr. Shahnasarian or Ms. Navarro for the life care plans that you evaluated; correct?

A. Yes.

Q. Okay. So going next to page 3 of Exhibit 23 [sic], you discuss Ms. Navarro's report, and then you apply a present value to her figures; is that correct?

A. Yes.

Q. So with respect to the life care -- that -- this heading which is "Future Medical Care," your -- I guess, your part in this analysis is just to present value Ms. Navarro's numbers; is that correct?

A. There's a two step process: The first step is my job is to forecast the increase in the cost of the different items each year out in the future; so I calculate that out, and I get that total. And then I discount that back to present value.

Q. Okay.

A. So it's inflation adjusted into the future and then discounted --

Q. And then discounted back? Okay. So two

steps, but that's the extent of your involvement in the figures that are presented for Ms. Navarro's life care plan?

A. Yes.

Q. Okay. You didn't go back and reevaluate her life care plan; is that correct?

MR. ORTIZ: Object to form.

A. Correct.

(By Ms. Butler)

Q. Okay. So now going to offsets and, again, we're looking at future medical expenses. Now, we have a little bit of a different situation here because you're referring now to Dr. Henry Miller. And he's a new expert that we haven't talked about in Mr. Cagiano or Mr. Criswell's report; correct?

A. Yes. But I think this is Dr. Ji for past medical expense.

Q. I'm under "Offsets" where --

A. Sorry.

Q. -- it says "Future Medical Expense." That page --

A. Thank you.

Q. -- right there.

A. Sorry. I jumped ahead.

Q. Sorry. I was in that first paragraph where it refers to Henry Miller?

A. Got it.

Q. Okay. Now, we had not -- in discussing Mr. Criswell or Mr. Cagiano discussed Henry Miller yet. Why are you referring to Henry Miller in Mr. Laramore's report?

MR. ORTIZ: Object to form.

A. He is another expert for the defense, who is providing what the government would pay for the same services in either Navarro's report or Fryar's report to calculate an offset.

(By Ms. Butler)

Q. So Henry Miller is a defense expert that provided a report that calculates the cost of future medical care based on Ms. Navarro's report but using TriWest, which is under the Department of Veterans Affairs Community Care Network; is that correct?

MR. ORTIZ: Object to form.

A. Yes.

(By Ms. Butler)

Q. Are you familiar with TriWest?

A. No.

Q. Have you done any investigation or

analysis about TriWest?

MR. ORTIZ: Object to form.

A. No.

MR. ORTIZ: And foundation.

(By Ms. Butler)

Q. And you're not rendering any opinions as to the viability of TriWest in the future; is that correct?

MR. ORTIZ: Objection.

A. Correct.

(By Ms. Butler)

Q. And you are not rendering any opinions as to whether TriWest will be able to care the -- provide the care that Ms. Navarro or Mr. Fryar predict Mr. Laramore will need in the future; is that correct?

A. Correct.

MR. ORTIZ: Object to form.

A. Correct.

(By Ms. Butler)

Q. Okay. So with respect to this part of your report where you're relying on Henry Miller, are you assuming for purposes of this report that TriWest will continue in the exact same manner as it continues now to provide the same type of care

with the same eligibility requirements and the same type of reimbursements, et cetera?

MR. ORTIZ: Objection.

A. I am -- I will say, yes, that the assumption is it will be able to continue to pay for the items that Dr. Miller states that they are currently able to pay.

(By Ms. Butler)

Q. And that Mr. Laramore will be eligible to receive payment from TriWest for those items; correct?

MR. ORTIZ: Same objection.

A. Sure.

(By Ms. Butler)

Q. Now, Mr. Laramore -- his future medical expenses are projected by Henry Miller based on TriWest. But do you recall that there are some other plaintiffs who might have, like, Tricare or Medicare or other government payors that Henry Miller utilizes in his reports?

MR. ORTIZ: Object to foundation.

A. I -- I'd have to look at the reports, but I do recall there are some other government agencies that -- that he's talked about.

(By Ms. Butler)

Q. Okay. And is it accurate that you're not rendering an opinion as to the viability of those government agencies to continue to pay for the care that they're currently paying for?

MR. ORTIZ: Objection.

A. Correct.

(By Ms. Butler)

Q. And you're assuming that any of the government programs involved in your opinions will continue with no reduction of services; is that correct?

MR. ORTIZ: Objection.

A. Correct.

(By Ms. Butler)

Q. And with no reduction of payments to cover services?

MR. ORTIZ: Objection.

A. Correct.

(By Ms. Butler)

Q. And with no reduction of coverage or eligibility?

MR. ORTIZ: Objection.

A. Correct.

(By Ms. Butler)

Q. Okay. And so here, for example, you're

relying on Dr. Henry Miller to provide a value that he contends the cost provided in Ms. Navarro's -- is the cost for what Ms. Navarro's report contends would be required under the TriWest system; is that correct?

A. Yes.

Q. Well, you state "This represents the amount of offset to apply to the present value of future medical care as presented in Ms. Navarro's report"; correct?

A. Correct.

Q. And you're relying on Dr. Henry Miller's report; correct?

A. Correct.

Q. Okay. So that number -- that number right there that is in that first paragraph -- that all comes from Dr. Miller; correct?

A. Correct.

Q. Okay. And then you go down and he -- Dr. Miller did the same thing he did with Ms. Navarro's report for Mr. Fryar's report; correct?

A. Correct.

Q. And so in the table beneath that you have a Scenario 1 and a Scenario 2.

Do you see that?

A. Yes.

Q. Okay. And the future medical care -- where did you get the 120,078 and the 117,830?

A. Those are Staller report.

Q. Okay. So those came from Mr. Staller. You didn't calculate those?

A. No.

Q. Okay. And then you have offset and you have 15,664, 15,326. Where did you get those numbers?

A. Those are from Dr. Miller's analysis.

Q. So the only, I guess, thing you did with respect to Scenario 1 and Scenario 2 is to subtract and provide a total?

MR. ORTIZ: Object -- objection.

A. I have, yes, I have calculated the -- what the cost -- out-of-pocket cost for the plaintiff would be if you apply the offsets from Dr. Miller to Fryar's numbers.

(By Ms. Butler)

Q. But, again, those are Fryar's numbers, Staller's numbers, and Miller's numbers; correct?

A. Fryar's and Miller's.

Q. And then you just provided the total?

A. Correct. I calculated the --
Q. Okay.
A. -- total.
Q. So are you really offering an opinion there other than how to do the math?
A. I have no --
MR. ORTIZ: Object to form.
A. There's no opinion here. I state here that -- well, it says "Should the trier of fact determine that Fryar's tables are related and necessary applying the offsets determined from Dr. Miller," this is what the number would be.
(By Ms. Butler)
Q. Okay. So, again, you're just doing the math; correct?
MR. ORTIZ: Object to form.
A. In -- in this situation, I am providing the math numbers.
(By Ms. Butler)
Q. Okay. Now we go to the past medical expenses. I think that's where you were earlier. And, again, you rely on Dr. Ji for those numbers; correct?
A. Yes.
Q. Do you know what he means -- you provide

two numbers, you say, when accounting for total cost and then one accounting for only direct cost payments. Do you know what the difference is there?

MR. ORTIZ: Objection to form.

A. It -- I believe that there -- one of them includes some sort of overhead amount, but I can't tell you exactly what that is.

(By Ms. Butler)

Q. So, again, you're -- you're just relying on Dr. Ji for all of that?

A. Correct.

Q. Okay. So going to the next section of your report, this pertains to the VBA compensation; is that correct?

A. Yes.

Q. Okay. And I believe -- is there anything different in your methodology or analysis or assumptions in this section of Mr. Laramore's report from the other two reports we looked at?

A. No.

Q. Okay. So you -- you did the same calculation. We've already gone through just with different numbers that pertain to

Mr. Laramore; correct?

A. Correct.

Q. Okay. And your tables, which are attached and which -- which we can go through -- they reflect Mr. Laramore's ratings and -- and his adjustments, et cetera; correct?

A. Correct.

Q. Okay. But the methodology and the manner in which you went about this section of your report didn't change?

A. Correct.

Q. Okay. So I'm going to go down to the summary, then.

So on the summary, you say "Based on the scope of work performed as well as my professional experience, it is my opinion --" and you -- you express some numbers. So I'm going to look at that chart. You say, "See table below."

Where it says "Future Medical Care Expense," do you see that number?

A. Yes.

Q. Now, that 15,805 -- is that the present value of the care based on the Navarro report?

A. Yes.

Q. And that's what we -- we looked at

previously -- correct? -- that you relied on Navarro for all of that? You just brought it to present value?

A. I calculated the total amount and discounted the present value, yes.

Q. Okay. Then if we go below that and you see where it says "Past Medical Care"?

A. Yes.

Q. And you have the 31,680 and the 31,314 -- those numbers came from Dr. Ji; correct?

A. Correct.

Q. So you didn't calculate those numbers; correct?

A. Correct.

Q. And then where it says "Future Medical Care," and you have 4,168 in both columns; correct?

A. Correct.

Q. And that came from Henry Miller and Ms. Navarro; is that correct? And then you applied a present value?

A. This -- same methodology as the life care plan, future medical care expense, I calculated they -- that out to life expectancy

and discounted back to present value.

Q. And those were based on Dr. Miller and Ms. Navarro's reports; correct?

A. Yes.

Q. And then the VBA disability benefits -- that was pursuant to -- that's the past and future and the analysis that is up above the summary that is similar to the analysis and methodology we went through with Criswell and Cagiano; correct?

A. Correct.

Q. And so other than the present value figures that you calculated and the disability benefit calculations you made, the rest of the numbers in there, you relied on others for; correct?

MR. ORTIZ: Object to form.

A. The past medical care item costs are -- relied on Dr. Ji. The others were my calculations with inflation adjustments and discount rates.

(By Ms. Butler)

Q. Based on reports from Ms. Navarro and Dr. Miller?

A. Correct.

Q. Okay. So going to the tables in Mr. Laramore, we have just a couple of different tables. So I just want to make sure. Table 1, because we had the life care plan, this is all based on Ms. Navarro's report; correct?

A. The annual cost and the projected care is based on her report.

Q. And then you have the total cost and the total present value?

A. Correct.

Q. Okay. And then, again, Table 2, this is all premised upon the life care plan prepared by Ms. Navarro; correct?

A. And these are the offsets from Henry Miller. These are the --

Q. These are the --

A. Would pay for Table 2.

Q. Okay. And so these are the Tricare costs that Henry Miller included in his report?

A. It would -- yeah, whatever --

Q. Sorry. TriWest.

A. -- whatever costs are in his report, that's what these are.

Q. So you didn't independently calculate them? You relied on Henry Miller for those

calculations?
A. For the annual cost amounts.
Q. Okay. And then you have the total and the present value; is that correct?
A. Correct.
Q. Okay. And then Table 3 looks similar to the tables we looked at for Mr. Cagiano and Mr. Criswell. Is there anything different in your tables three, four, or five for Mr. Laramore than what we looked at previously from Mr. Cagiano and Mr. Criswell?
A. No.
Q. Okay. And so those were the same methodology that you already described and the same method of calculating?
A. Yes.
Q. And if we look at your Materials Considered List for Mr. Laramore, which is Exhibit 24, you have those same two tables noted in there that we previously looked at, the National Archives and the US Department of Veterans Affairs; correct?
A. Yes.
Q. Okay. Is there anything else about Mr. Laramore's report other than what we've

discussed, which is the involvement of a life care plan and also Dr. Henry Miller, that is different from what we discussed with Mr. Criswell and Mr. Cagiano?

MR. ORTIZ: Object to form.

A. No.

(By Ms. Butler)

Q. And are all of the opinions you intend to present with respect to Mr. Laramore contained within your report for him?

MR. ORTIZ: Objection.

A. Yes.

(By Ms. Butler)

Q. Okay. I might have -- I need to clear something up for the record quickly.

MS. BUTLER: Mr. Laramore's report -- is that Exhibit 20- --

MS. LAMACCHIA: 4.

MR. ORTIZ: 24.

MS. BUTLER: 4 and then his Materials Considered List is 25.

MR. ORTIZ: Correct.

MS. BUTLER: Okay. I think I referred to those incorrectly. So Mr. Laramore's report is 24 and his Materials Considered List is

25, but you have them marked correctly. I have them wrong. Okay. I don't know how long we've been going. Do you want to take a break or keep going?

MR. ORTIZ: It's been about 55 minutes.

MS. BUTLER: Do you want to take a minute?

THE DEPONENT: You can keep -- I can keep going.

MS. BUTLER: Okay.

THE DEPONENT: Another report.

MS. BUTLER: Yeah. That's fine.

THE DEPONENT: Some water. If someone -- can you grab me a bottle of water, please.

MS. BUTLER: We can move on.

MS. LAMACCHIA: In the kitchen.

THE DEPONENT: Can I -- actually one -- one, literally 60 seconds --

MS. BUTLER: Yes. Absolutely. Let's go off the record for a minute.

THE VIDEOGRAPHER: Time is now 3:28. We're off the record.

(A recess was taken.)

THE VIDEOGRAPHER: Time is now 3:29. We're back on the record.

(By Ms. Butler)

Q. Ms. Yount, I'm going to move -- let me get my microphone on; is that okay?

THE VIDEOGRAPHER: Yeah.

(By Ms. Butler)

Q. To the expert report of Terry Dyer. I'm handing you what has been marked as Exhibit 26, which is Ms. Dyer's report and then 27, which is your Materials Considered List for Ms. Dyer.

(Exhibit Number 26 was marked.)

(Exhibit Number 27 was marked.)

(By Ms. Butler)

Q. Turning to Ms. Dyer's report, the assignment and expert qualifications are the same as the other reports. I'm going to move to the introduction. Do you see where I am?

A. Yes.

Q. Okay. The introduction here has three bullet points. It says "The purpose of this analysis is to, one, evaluate alleged damages as presented in Plaintiffs' expert report prepared by Chad Staller; two, determine the present value of future medical care costs as specified in the

life care plan report prepared by Deborah Navarro; and then, finally, to determine the present value of any offsets to a potential award," but you have a footnote.

And in that footnote on the third bullet point, it says "According to an expert opinion report of Wang Ji, M.D., dated December 15th, 2025, no government offsets were identified for Ms. Dyer related to her alleged injury due to exposure at Camp Lejeune"; is that correct?

A. Yes.

Q. So with respect to your third bullet point, in fact, did you not determine the present value of any offsets to a potential award for Ms. Dyer?

A. I determined that there were none.

Q. Okay. So we're left with the other two bullet points; is that correct?

A. Correct.

Q. Okay. And then with respect to future medical care expenses, which is down below that. Again, in that paragraph as we looked at with Mr. Laramore, are you just summarizing what Mr. Staller's report provided?

A. Yes.

Q. And you state "I take no issue with methodologies used in the Staller report regarding future medical care"; is that correct?

A. Correct.

Q. And so you are not rendering any opinions adverse to Mr. Staller's report on Ms. Dyer with respect to the future medical care; is that correct?

A. Correct. We just have different medical experts we're relying on.

Q. You said it better than I did. So you're relying on Ms. Navarro and Mr. Shahnasarian, and he's relying on Mr. Fryar; is that correct?

A. Correct.

Q. Okay. So when we get down to past medical and related care, we went through this -- I think it was Mr. Criswell -- about your sentence that says "While I do not take issue with the sources used in Staller report, they provide no support or opinion for the illustrative calculations."

Do you see that?

A. Yes.

Q. Are your same, I guess, criticisms of

Mr. Staller with respect to Ms. Dyer in this portion of your report the same that we discussed with respect to Mr. Criswell in that report?

A. Yes.

Q. Is there anything additional that we need to discuss that we haven't already gone over with respect to Mr. Criswell that is different in Ms. Dyer in that past medical and related care section?

A. No.

Q. Okay. Moving to "Past Household Services. The first two paragraphs summarize Mr. Staller's report; is that correct?

A. Yes.

Q. Okay. And then you say "While I do not take issue with the sources used in Staller report, they provide no support or opinion for the illustrations calculations."

Do you see that?

A. Correct.

Q. And, again, is your criticism that he did not apply his calculation not with the calculation itself?

A. I feel like that's a hard -- will -- will you restate that again?

Q. Yes. So I'm trying to understand that sentence, "While I do not take issue with the sources used in Staller report, they provide no support or opinion for the illustrative calculations."

And it's my understanding that your other criticism that we've discussed with Mr. Staller is that he did not apply facts to the calculations. Is that the same criticism here?

A. Yes.

Q. Okay. Are there any other criticisms with respect to the past household services category?

A. No.

MR. ORTIZ: Object to form.

(By Ms. Butler)

Q. Okay. And so going, then, down to "Future Medical Care." As you previously expressed, you're relying on Ms. Navarro -- correct? -- for the life care plan?

A. Correct.

Q. And Mr. Staller relies on Mr. Fryar; correct?

A. Correct.

Q. And so you determined a present value of the calculations based on Ms. Navarro's report; is that correct?

A. Correct.

Q. Okay. And in the summary, you state that "Based on the scope of work performed in connection with this matter as well as my professional experience and education, it is my opinion that the present value of the cost of future medical care needed, as of December 31, 2025, is 22,328."

Do you see that?

A. Yes.

Q. So is that the extent of the opinion you will be rendering with respect to Ms. Dyer?

MR. ORTIZ: Objection.

A. Yes.

(By Ms. Butler)

Q. And so -- and, again, that 22,328 is based on the life care plan of Deborah Navarro; is that correct?

A. Yes.

Q. And then a present value calculation?

A. Yes.

Q. Okay. And so, again, just as we -- we

reviewed in Mr. Laramore and his tables with respect to your Table 1, you're relying on the life care plan prepared by Deborah Navarro, as noted in the little A beneath that table; is that correct?

A. Yes.

Q. Is there anything with respect to the report of Terry Dyer that is different from the reports we've reviewed previously?

A. I don't think so.

Q. Okay. And are all of the opinions that you intend to present with respect to Terry Dyer included in your report for Terry Dyer?

MR. ORTIZ: Object to form.

A. Yes.

(By Ms. Butler)

Q. Okay. And then Exhibit 27, which I handed you -- this is your Materials Considered List for Ms. Dyer; is that correct?

A. Yes.

Q. And we don't have those two sources because you did not compute any past or future disability benefits for Ms. Dyer; is that correct?

A. Correct.

Q. Okay. I am going to turn now to Mr. Mousser. I am going to hand you what has been marked as Exhibit 28, which is your expert report for Mr. Mousser, and to Exhibit 29, which is your Materials Considered List for Mr. Mousser.

(Exhibit Number 28 was marked.)

(Exhibit Number 29 was marked.)

(By Ms. Butler)

Q. Now, are you aware that the four reports we've reviewed previously -- Mr. Cagiano, Mr. Criswell, Mr. Laramore, and Ms. Dyer are all bladder cancer Track 1 plaintiffs?

A. I -- I don't know for sure, but --

Q. Okay. Is -- is that not something that you have had to concern yourself with? I'm just -- I'm just trying to understand. Do --

A. No.

Q. Okay. So you're not familiar with what Track 1 illness each of the plaintiffs that you rendered reports for has; is that correct?

MR. ORTIZ: Objection.

A. I was made aware at one point, but it's not a concern of mine, and I didn't put it in the report because of that.

(By Ms. Butler)

Q. Okay. So we are turning to plaintiffs Exhibit 28 and 29, which is the expert report for Frank Mousser and the Materials Considered List for Frank Mousser.

Now, going into the "Assignment" and "Expert Qualifications," those are the same; correct?

A. Yes.

Q. And if we go to the introduction, there are three bullet points; correct?

A. Yes.

Q. And the first bullet point is to "evaluate alleged damages as presented in Plaintiffs' expert report prepared by Chad Staller"; is that correct?

A. Yes.

Q. And then to "determine the present value of future medical care costs as specified in a life care plan report prepared by Michael Shahnasarian"; is that correct?

A. Yes.

Q. And then to "determine the present value of any offsets to a potential award"; is that correct?

A. Yes.
Q. And so that's the extent of your analysis for Mr. Mousser; is that correct?
MR. ORTIZ: Objection.
A. Yes.
(By Ms. Butler)
Q. And looking at Mr. Mousser, in the "Future Medical Care Expenses" section, similar to one of the other reports we reviewed, is this a summary of Mr. Staller's report that was based on Mr. Fryar's life care plan?
A. Yes.
Q. And, again, on page 3, you state "I take no issue with methodologies used in Staller report regarding future medical care"; is that still correct?
A. Correct.
Q. And so you are not expressing any criticisms of Mr. Staller in that portion of your report; correct?
A. Correct.
Q. Okay. Now, the next section of your report is titled "Earnings." We haven't seen that before, have we?
A. No.

Q. Okay. So in this section, you summarize Mr. Staller's report with respect to calculations pertaining to Mr. Mousser under your heading "Earnings"; is that correct?

A. Yes.

Q. And at the end you say "I take no issue with assumptions and methodologies used in Staller report to calculate lost earnings."

Do you see that?

A. Yes.

Q. And, in fact, I think we discussed you sometimes calculate lost earnings for cases; is that correct?

A. Yes.

Q. And so you reviewed what Mr. Staller did to calculate the lost earnings and you're taking no issue with that; is that correct?

A. Correct.

Q. Is that still true today?

A. Correct.

Q. And you used the word "lost earnings." Do you see that? "I take no issue with assumptions and methodologies used in Staller report to calculate lost earnings."

A. Correct.

Q. Are you intending to differentiate there between lost earnings and earning capacity?
A. No.
Q. Were you just using it as a kind of a catch-all terminology?
A. Sure.
Q. Okay. And are you taking a position in this case as to whether what Mr. Staller did was to calculate lost earnings versus lost earning capacity?
A. No.
MR. ORTIZ: Objection.
A. No.
(By Ms. Butler)
Q. Okay. And so you're not expressing an opinion as to what Mr. Staller did and how it should be labeled; is that correct?
MR. ORTIZ: Objection.
A. Correct.
(By Ms. Butler)
Q. Okay. In fact, you take no issue with his assumptions and methodologies; correct?
MR. ORTIZ: Same objection. Asked and answered.
(By Ms. Butler)

Q. Okay. I withdraw that question.

We can move to "Past Household Services." Under the "Past Household Services" section, you, again, describe Mr. Staller's report as we've seen in some prior reports and then you say "While I do not take issue with the sources used in Staller report, they provide no support or opinion."

Is that the same criticism we've already discussed with respect to the household services section in other reports?

A. Yes.

Q. Okay. Is there anything further that you would need to add to what we've already discussed in that household services section?

A. No.

Q. Okay. Going to your "Opinions & Basis." Your first heading is "Future Medical Care."

Do you see that?

A. Yes.

Q. And in that section consistent with other sections, you're relying on the life care plan report of the defense expert; is that correct?

A. Yes.

Q. In this case it's an updated life care plan report prepared by Mr. Shahnasarian; correct?

A. Correct.

Q. And so you use those numbers, and you -- as you indicate, that you determine the amount of money to fund or provide for the yearly future costs, assuming an investment of a lump sum and then you present value that number; is that correct?

A. Correct.

Q. Okay. And is there anything different that you did in that section with respect to the future medical care that -- as what we have discussed with other reports?

A. No.

Q. So going to future earnings -- if you look at the last section of that paragraph, you say "For purposes of this analysis, no loss of earning capacity has been considered."

Do you see that?

A. Yes.

Q. And why has no loss of earning capacity been considered there?

A. Because of Michael Shahnasarian's

opinion.

Q. Okay. And so you're relying on Mr. Shahnasarian for -- as the basis for you not considering loss of earning capacity; is that correct?

A. Correct. According to Shahnasarian, there is no -- he was able to work and there's no loss of earning cap- -- loss of earnings.

Q. Okay. And so there's no loss of earnings based on Mr. Shahnasarian's opinion, but you are not rendering your own opinion in that respect; is that correct?

A. Correct.

Q. Going to "Offsets." Again, you mentioned Henry Miller, Ph.D.

Do you see that?

A. Yes.

Q. And in this case, he utilized Dr. Shahnasarian's report but projected the amount to be paid -- that he contends would be paid by the Department of Veterans Affairs on behalf of Mr. Mousser; is that correct?

A. Correct.

Q. Did you do any independent analysis of the viability of the Department of Veterans

Affairs to continue paying for medical care on behalf of Mr. Mousser?

MR. ORTIZ: Objection.

A. No.

(By Ms. Butler)

Q. And are you rendering any opinions as to whether Mr. Mousser can or would continue to receive the same care he's receiving now from the Department of Veterans Affairs in the future?

MR. ORTIZ: Same objection.

A. Sorry. Am I -- sorry. Ask the question -- if you can say the first few words.

(By Ms. Butler)

Q. Yes. Are you rendering an opinion --

A. No.

Q. -- with respect to whether Mr. Mousser will continue to be eligible for the same care, will be able to continue to receive the same care, or all of those other criteria that we went through previously with other government payors with respect to the Department of Veterans Affairs?

A. No.

MR. ORTIZ: Same objection.

A. No.

(By Ms. Butler)
Q. And so what you did is you took Mr. Miller's number and you applied a present value; is that correct?
A. I did the same methodology. I inflation-adjusted it into the future and calculated present value.
Q. Okay. And -- and your -- your calculations there are assuming that the Department of Veterans Affairs will continue to offer the exact same care to Mr. Mousser that they're offering currently and that that is the type of care he would need; is that correct?
MR. ORTIZ: Objection.
A. I have no opinions about the medical care he needs. I am solely basing -- assuming that it will continue to pay the amounts as supplied in Miller's report, if that's what you mean.
(By Ms. Butler)
Q. Yep. Thank you.
Going to the next page of your report, which is page 5, I was a little confused. At the top of that chart, it says "Past Medical Care." Should that be "Future Medical Care"?

A. Yes.
Q. And that, in fact, is reflecting that Mr. Mousser -- if he were to need a kidney transplant or dialysis; correct?
A. Correct. From Staller's report.
Q. Okay. And so that should really say "Future Medical Care," and where did you get those two numbers?
A. Those are Staller's --
Q. Okay.
A. -- numbers.
Q. And then you -- the next line is "Offset," and where did you get those numbers?
A. Just like the prior report, those are Dr. Miller's opinions that the VA would pay those items on his behalf.
Q. And so are you intending to indicate in this chart that the amounts that Dr. Miller opines would be paid by the VA should be subtracted from the future medical care that Mr. Mousser would need to receive?
MR. ORTIZ: Objection to form.
A. I am calculating what the offsets would be according to Dr. Miller and if those are indeed the offsets that would be applied to each

of these scenarios in this report -- in Staller's report.

(By Ms. Butler)

Q. And so it's my understanding that you are not expressing opinions on how offsets should be applied. Is that still correct in this report for Mr. Mousser?

MR. ORTIZ: Objection.

A. Correct. But this specific item was -- Dr. Miller was calculating the offset specifically to the actual items in this life care plan. So the life care plan is a little bit different in that if these are the actual medical care items needed, then he's saying that this is what the offsets would be.

(By Ms. Butler)

Q. And -- and so in that context, are you trying to show in this chart that basically this offset would be a credit against the cost -- the cost of future care because it would be provided by the government?

MR. ORTIZ: Objection.

A. I think that sounds about right. Just like the other one we said is Dr. Miller's report if -- excuse me -- yes, if the items -- if the

trier of fact deems that the items in Staller's report or Fryar's report are accurate, the government's future offsets are calculated to be that.

(By Ms. Butler)

Q. And, again, you're not trying to tell the trier of fact how to apply the offset. You're just calculating it; is that correct?

MR. ORTIZ: Objection.

A. Correct.

(By Ms. Butler)

Q. Okay. Going to past medical expenses, I -- I think this is the same as what we've discussed with other reports. You are just repeating what Dr. Ji has in his report; is that correct?

A. Correct.

Q. And you're not expressing any kind of independent opinion; correct?

A. Correct.

Q. So going down to the Veterans Benefits Administration section, again, we -- I know we've discussed this with a lot of the plaintiffs, but I wanted to look at the Footnote 4. In Footnote 4, you state that "VBA disability ratings related

to Camp Lejeune are based on an expert opinion report prepared by Wang Ji, M.D., dated December 15, 2025," and then you list what those conditions are for Mr. Mousser; is that correct?

A. Yes.

Q. And so, again, just to make sure I'm clear, that, in these reports that you have provided dated December 15, 2025, you are relying on Dr. Ji with respect to the VBA disability ratings being related to Camp Lejeune; is that correct?

A. Yes.

Q. Okay. And so when -- when these ratings are listed down here, you have drawn no independent conclusion about whether they are related to the Track 1 bellwether illness for which the plaintiff is seeking damages. You are relying on Dr. Ji for that determination?

MR. ORTIZ: Objection.

A. Correct.

(By Ms. Butler)

Q. Okay. And so looking down at the summary of Mr. Mousser's, you -- you provide a summary that reflects future medical care expense of 4,631 and, again, what is that based upon?

A. That is based on Dr. Shahnasarian's life care plan.

Q. Okay. And then down in the "Past Medical Care," are you relying on Dr. Ji for those numbers?

A. Yes.

Q. And then for the future medical care, who are you relying on for those numbers?

A. I made those calculations based off of the opinions of Henry Miller and Michael Shahnasarian.

Q. And then as to the VBA disability benefits, you made those calculations based on the same methodology and process that we've discussed for the other plaintiffs who had VBA disability benefits?

A. Correct.

Q. Okay. Is there anything about the determination of VBA disability benefits for Mr. Mousser that is different from any of the other plaintiffs?

A. I don't believe so.

Q. And so, again, in making those determinations, you assume that Mousser's ratings won't change; correct?

MR. ORTIZ: Objection.
A. Correct.
(By Ms. Butler)
Q. And that he will live until his life expectancy as you've indicated in your report?
MR. ORTIZ: Objection.
A. It's -- there's a reduced life expectancy based on Staller's report and Fryar's report and that's the calculation is calculated to that reduced life expectancy.
(By Ms. Butler)
Q. And -- and so the assumption is that he will live to that reduced life expectancy; correct?
A. Correct.
Q. And you're assuming that the VBA won't make changes to its ratings schedule; is that correct?
MR. ORTIZ: Objection.
A. Correct. Besides COLA adjustments.
(By Ms. Butler)
Q. Right. And then he will remain -- Mr. Mousser will remain exactly as he is now with no new conditions, no progression of conditions, no additional diagnoses; is that correct?

MR. ORTIZ: Objection.

A. Correct. I am not able to make those determinations.

(By Ms. Butler)

Q. Okay. Looking back at the tables -- Table 1, again, is based on Mr. Shahnasarian; correct?

A. Yes.

Q. And Table 2 is based on the life planning prepared by Mr. Shahnasarian and the government costs provided by Henry Miller; correct?

A. Correct.

Q. And then Table 3 is the cost analysis -- based on the cost analysis tables prepared by Michael Fryar with the government costs projected per the report of Henry Miller; is that correct?

A. Correct.

Q. So I wanted to go back to Table 6. And, again, I was trying to make sure I could find some of these things in his Table 5.

If you look at Table 6, the bottom part of that on 9/22/2020, he's 100 percent rated for diagnostic code 7528, which is neoplasm of kidney urothelial cancer with some other language; is

that correct?
A. Yes.
Q. And then it looks like two months later, on 11/5/2020, under diagnostic code 9435, he's 70 percent rated for insomnia with depressive disorder and chronic ongoing.
Do you see that?
A. Yes.
Q. Can you show me where that is indicated on Table 2.
MR. ORTIZ: Table 5?
MS. BUTLER: Sorry. Table 5.
(By Ms. Butler)
Q. Table 5.
A. Let's see. December 1st, 2020.
Q. It's actually -- okay. December 1st, 2020.
A. Where he gets the additional SMC -- it's because he's got an additional rating. So he got a special monthly compensation.
Q. And did you --
A. So he got a little bump there.
Q. And so did you attribute that to his Camp Lejeune Track 1 injury?
A. Yes.

Q. Okay. And then on 11/10/2021, we again see 100 percent for neoplasm of kidney urothelial cancer, but it has a different diagnostic code as previously indicated.

Do you know why that is?

A. I do not.

Q. Okay. Do you know if that's an error?

MR. ORTIZ: Objection.

A. I don't.

(By Ms. Butler)

Q. Okay. And then if you go up to the top, he has neoplasm of kidney with the same diagnostic code of 7500, but it's reduced to 30 percent; is that correct?

A. Yes.

Q. Where is this reflected on Table 5?

MR. ORTIZ: Object to form.

A. 2024. It looks like according to this there are no changes in the combined ratings. So he continued to receive the same.

(By Ms. Butler)

Q. And how would you have made that determination?

A. The VBA payment amounts provided when we calculate -- when I calculated these disability

ratings, I could compare it to what he was actually receiving to check it and that's what it appeared.

Q. And do you have working papers or anything that show those types of analyses other than what we've been looking at with respect to your reports?

A. No. I -- for these ratings here, I actually went to the -- the website for the combined ratings and these -- these percentages are in there.

Q. Okay. So you don't have any separate, like, worksheets or working papers that you used to prepare these tables? All of your work is shown in here?

MR. ORTIZ: Object to form.

A. Yes. No, there are -- there's a spreadsheet for these.

(By Ms. Butler)

Q. And is that a spreadsheet that you -- is that spreadsheet reflected in these reports?

A. These are the -- they're printed out -- these summaries are printed out here for the approximate tables here for our final product.

Q. Okay. I'm -- I'm confused; so I need

you to back up. Are you saying that there's a spreadsheet that you used to create these tables that we don't have a copy of?

A. These are all spreadsheets, yes.

Q. Okay. So I'm just making sure. All of your spreadsheets that you used to compute the calculations that you're testifying to in this litigation are included in the tables attached to your reports?

A. Yes. My final opinions for the Excel spreadsheets are printed here and are attached as tables.

Q. Okay. Are there Excel spreadsheets that are not -- you know, we only have PDFs. Are there Excel spreadsheets with, like, notes and -- I'm not great at Excel, but I know you can hide/fit columns, and you can include formulas and things like that.

Are there Excel spreadsheets that have information that we're not privy to because we have the PDF?

A. Correct. All of these are -- are formulas to get to these amounts.

Q. And so you have spreadsheets that are in Excel format that have formulas that would help

us understand how you got this hardcopy table?
MR. ORTIZ: Object to form.
A. Well, all the information is -- there are -- there are Excels with this in here. But yes, any other expert can recreate this.
(By Ms. Butler)
Q. Okay. But if -- you have Excels in your possession that have formulas in them that were used to render these tables. Is that accurate?
MR. ORTIZ: Objection to form.
A. Yes.
(By Ms. Butler)
Q. Okay. Have you ever been asked to provide those to the government?
A. Yes.
Q. Have you provided those to the government?
A. Yes.
Q. Okay. But, to your knowledge, do you know if they have been produced in this litigation?
MR. ORTIZ: Objection.
A. No.
(By Ms. Butler)
Q. You don't know one way or the other?

A. I do not know.
Q. Okay. Okay.
MR. ORTIZ: Is this a good time for a break?
MS. BUTLER: Sure. Let me ask one more time question --
MR. ORTIZ: That's fine.
MS. BUTLER: -- about Mr. Mousser.
MR. ORTIZ: That's fine.
(By Ms. Butler)
Q. Are there any opinions you intend to render with respect to Mr. Mousser that are not stated in your expert report?
A. No.
MR. ORTIZ: And object to form to the last one, but --
MS. BUTLER: That's it.
MR. ORTIZ: -- that's fine.
MS. BUTLER: Then we can go off the record.
MR. ORTIZ: That's fine.
MS. BUTLER: Okay.
THE VIDEOGRAPHER: All right. Time is now 4:02 and we're off the record.
(A recess was taken.)

THE VIDEOGRAPHER: Time is now 4:12. We're back on the record.

(By Ms. Butler)

Q. Ms. Yount, I am going to hand you what has been marked as Exhibit 31 and -- sorry. 30 and 31, which is your expert report for Ms. Tukes and your Materials Considered List for your report of Ms. Tukes.

(Exhibit Number 30 was marked.)

(Exhibit Number 31 was marked.)

(By Ms. Butler)

Q. Going to the first page, which is page 2, going down to the introduction, it says "The purpose of this analysis is the following," and you have three bullet points.

Do you see those three bullet points?

A. Yes.

Q. And those are similar bullet points that we've reviewed for other plaintiffs; is that correct?

A. Correct.

Q. And are those bullet points the extent of the analysis that you're going to be rendering with respect to Ms. Tukes?

MR. ORTIZ: Object to form.

You can answer.

A. Yes.

(By Ms. Butler)

Q. Okay. Going down to "Staller report" -- is this -- with respect to past medical and related care, you first summarize what Mr. Staller's report does; is that correct?

A. Yes.

Q. And he provides an illustrative calculation to value the services that Ms. Tukes's husband provided for her -- to help care for her for a period of time; is that correct?

A. Yes.

Q. And you state underneath that summary that "While I do not take issue with the sources used in Staller report, they provide no support or opinion for the illustrative calculations."

Do you see that?

A. Yes.

Q. Is your statement there and the criticism that you're intending to render with respect to Mr. Staller's report the same that we have discussed when you have made similar statements for other reports?

A. Yes.

Q. Okay. Is there any additional criticism that you intend to make other than what we've already discussed here today?

A. No.

Q. Okay. And going down to the next page, which is page 3, the last sentence right before "Past Household Services" -- do you see that?

A. Yes.

Q. Again, you state "There is no support of any opinion as to how many hours of home health, personal care aid Ms. Tukes required due to her alleged injuries."

Do you see that?

A. Yes.

Q. And is that criticism the same with respect to what we've discussed with other reports?

A. Yes.

Q. Okay. Is there anything additional that you intend to testify on that subject with respect to Ms. Tukes?

A. No.

MR. ORTIZ: Object to form.

(By Ms. Butler)

Q. Okay. Going to "Past Household

Services." Again, you summarize Mr. Staller's report, and then you state "While I do not take issue with the sources used in Staller report, they provide no support or opinion for the illustrative calculations."

Do you see that?

A. Yes.

Q. And, again, we've discussed similar statements for other plaintiffs with respect to past household services. Is your criticism of Mr. Staller the same as we've discussed with respect to those other reports?

A. Yes.

Q. Is there any additional testimony, other than what we've already discussed here today, with respect to the past household services portion of the report for Ms. Tukes?

MR. ORTIZ: Object to form.

A. No.

(By Ms. Butler)

Q. Okay. Going to "Medical Care Expenses." In this section, you, again, refer to Mr. Staller's report, and you discuss that he calculates the present value of future medical care based on cost analysis tables prepared by

Michael Fryar.

Do you see that?

A. Yes.

Q. Okay. And then you -- you provide a summary of Mr. Staller's report; is that correct?

A. Correct.

Q. And you say at the bottom of page 3 in this section "I take no issue with methodologies used in Staller report regarding future medical care."

Do you see that?

A. Yes.

Q. And is that consistent with your continued opinion with respect to the medical care expenses in the Staller report?

A. Yes.

Q. And that is that you don't intend to render an opinion taking issue with his methodologies used regarding future medical care?

A. Correct.

Q. Okay. Going to "Opinions & Basis." In future medical care, you discussed that your current opinion regarding the present value of the cost of future medical care needed by Ms. Tukes is based upon a life care plan prepared

by Michael Shahnasarian; is that correct?
A. Correct.
Q. And so consistent with other plaintiffs where you have relied on Ms. Navarro or Mr. Shahnasarian, are you relying on the life care plan and not rendering your own opinion as to the life care plan part of your report?
A. Yes.
Q. Okay. And so are you taking the costs and projecting them to a reduced life expectancy for Ms. Tukes as stated in your report?
A. Yes.
Q. And then bringing it to present value?
A. Yes.
Q. And so is that the extent of the opinion you intend to render as far as this section of your report under "Future Medical Care"? Is that all contained in that section of your report?
A. Yes.
Q. Okay. Going to "Offsets," we, again, have "Future Medical Expenses" and the involvement of Henry Miller.
Do you see that?
A. Yes.
Q. And it states that he "utilized the

amounts in Dr. Shahnasarian's report and projected the amounts that he contends would be paid by Medicare and Tricare."

Do you see that?

A. Yes.

Q. Have you done anything to assess the likelihood that Medicare or Tricare will continue to provide the same benefits in the future as they provide now?

MR. ORTIZ: Objection.

A. No.

(By Ms. Butler)

Q. Okay. And so consistent with our discussions of these sections of reports where Mr. Miller is involved with respect to other plaintiffs, you are not opining as to the viability of these government agencies to provide the same care in the future or pay for the same care in the future; is that correct?

MR. ORTIZ: Objection.

A. Correct.

(By Ms. Butler)

Q. Okay. And you are just assuming that the type of care and the eligibility for care and the availability of care will continue in the

future; is that correct?

MR. ORTIZ: Objection.

A. Correct. As you said the type of care assuming he still -- he needs the medical care needed as presented in the report initially.

(By Ms. Butler)

Q. Okay. And his eligibility for that care to be provided by Medicare and Tricare and their ability to provide that care and to pay for it -- you're making those assumptions; correct?

MR. ORTIZ: Objection.

A. Correct.

(By Ms. Butler)

Q. And going down to your table in that "Offset" section -- once again, I -- I can't remember where -- which report it was, but it needed to say "Future Medical Care"?

A. Yes.

Q. So once again in that section, at the bottom of page 4 where you are summarizing the Option 1 and Option 2, should that say "Future Medical Care"?

A. Yes.

Q. Okay. And where did those numbers under Option 1 and Option 2 come from?

A. Those are Staller's opinions.
Q. Okay. And so you did not calculate those numbers; correct?
A. Correct.
Q. And then as to the offsets -- where did -- that number is the same in each column. Did you calculate that number?
A. Yes.
Q. And how did you calculate that number?
A. That is Dr. Miller's opinions of doctor -- or Mr. Fryer's life care plan on what Medicare and Tricare would pay on behalf of Ms. Tukes and that is the present value calculation of those.
Q. And so any assumptions that Mr. Miller is making with respect to his analysis are also assumptions that you are making and the only, I guess, thing you are doing to Mr. Miller's numbers is bringing them to present value; is that correct?
MR. ORTIZ: Objection.
A. Again, same as the past reports. Inflation-adjusted to life -- reduced life expectancy and present value.
(By Ms. Butler)
Q. But you're relying on Mr. Miller as to

his projections about Medicare and Tricare; correct?

A. Correct.

Q. And you've done no independent research or analysis as to Medicare and Tricare and any issues they might be having with solvency or ability to provide the same care in the future; correct?

MR. ORTIZ: Objection to form and foundation.

A. Correct.

(By Ms. Butler)

Q. Going to the next page of Ms. Tukes report, we have the past medical expenses at the top.

Do you see that?

A. Yes.

Q. And, again, are you just repeating what Mr. -- sorry -- Dr. Ji had in his reports?

MR. ORTIZ: Object to form.

A. Yes.

(By Ms. Butler)

Q. And down in the summary -- if we look at this summary table as far as the future medical care expense, that 206,280 -- that is based on

the Shahnasarian life care plan; is that correct?
A. Yes.
Q. And then the past medical expense that you have in there of 165,493 -- that's based on Dr. Ji; correct?
A. Correct.
Q. And then the future medical care -- is that based on Henry Miller, who is basing it on the Shahnasarian life care plan?
A. Yes.
Q. And so inputting all of those figures from all of those other experts, your addition to all of their information is totaling the column at the far right to get 275,593; is that correct?
A. Well, based on their opinions, I've calculated the $110,000. But, yes, there -- the total offsets is $275,593.
Q. And you got that by adding the two numbers in that column; correct?
A. Correct.
Q. And those numbers were from Dr. Ji and from Henry Miller; correct?
A. Henry Miller did not provide the future medical care offset number. He provided what items would go into it, and I calculated that

number.

Q. Okay. Going to the tables -- if you look at Table 1 from Ms. Tukes, you have -- again, this -- this is based on the life care plan prepared by Mr. Shahnasarian; correct?

A. Yes.

Q. And you have items marked as TBD and say they have "an unknown frequency and or duration and have not been included in the total"; is that correct?

A. Correct.

Q. And where did you pull that TBD? Did that carry over from Mr. Shahnasarian's life care report?

A. Yes.

Q. Okay. So they're not TBD pursuant to your analysis? They're TBD pursuant to Mr. Shahnasarian's analysis?

A. Yes.

Q. Okay. And then Table 2 is also based on Mr. Shahnasarian's life care plan and government costs provided by Henry Miller; is that correct?

A. Yes.

Q. And then Table 3 is the cost analysis tables prepared by Michael Fryar -- is that

correct? -- with -- with the government costs projected by Henry Miller; is that correct?

A. Yes.

Q. Okay. Is there anything with respect to your expert report for Ms. Tukes that is different as far as the methodology and the bases for your opinions than we've discussed here with respect to her report or other reports?

A. No.

Q. And are all of your opinions that you expect to express with respect to Ms. Tukes stated in your expert report?

MR. ORTIZ: Objection.

A. Yes.

(By Ms. Butler)

Q. And Exhibit 31 -- that's your Materials Considered List for Ms. Tukes; is that correct?

A. Yes.

Q. Okay. I'm going to hand you what has been marked as Exhibit 32 and what has been marked as Exhibit 33.

(Exhibit Number 32 was marked.)

(Exhibit Number 33 was marked.)

(By Ms. Butler)

Q. This is your expert report with respect

to Allen Wayne Howard and your Materials Considered List.

Do you see that?

A. Yes.

Q. Going to the first page, looking at the introduction, you have two bullet points.

Do you see that?

A. Yes.

Q. And it says the purpose of your analysis is the following: To "evaluate alleged damages as presented in plaintiffs' expert report prepared by Chad Staller"; is that correct?

A. Yes.

Q. And to "determine the present value of any offsets to a potential award"; is that correct?

A. Yes.

Q. And is that the extent of your analysis with respect to Mr. Howard?

A. Yes.

Q. Going down to the Staller report, do you see your title "Earning Capacity"?

A. Yes.

Q. Now, are you intending to label what Mr. Staller has done as earning capacity versus

lost earnings, or are you using those interchangeably?

MR. ORTIZ: Objection to form.

A. It should be whatever Staller used in his report.

(By Ms. Butler)

Q. And so are you just reflecting what Mr. Staller titled his analysis, or are you trying to label what he did?

A. I -- my goal here was to summarize what he did only.

Q. Okay. Now, with respect to your analysis of Mr. Staller's report with respect to Mr. Howard in this section, you have a number of paragraphs from page 2 to 3. And if you need to review them, please let me know.

But I wanted to understand: Do you have a problem with the calculations that Mr. Staller made or just with the premise that Mr. Howard retired early?

MR. ORTIZ: Object to form.

You can answer.

A. There -- it's twofold. You've got -- he -- the very last paragraph of the section, it said he failed to reduce his mitigating -- his

mitigating earnings by the last two years, 2016 and 2017. So otherwise, I don't have any issues with his methodology and how he calculated his numbers here.

However, I say that there are no factual basis that Mr. Howard retired prematurely due to his injuries, and that I don't see any facts here that show that he did.

(By Ms. Butler)

Q. So other than, as you noted in that last paragraph, your statement that Mr. Staller failed to consider that Mr. Howard worked into 2017 -- other than that issue that you just noted, is it correct that it's not the methodology; it's the facts that you disagree with?

MR. ORTIZ: Objection.

A. It's the lack of facts that I -- that I disagree with.

(By Ms. Butler)

Q. But you don't have a problem with the methodology that Mr. Staller used other than the one note you make in that last paragraph; correct?

MR. ORTIZ: Objection.

A. Correct. The methodologies and

calculations performed are -- I have no issue with.

(By Ms. Butler)

Q. Going down to the next section is titled "DROP Accumulation." This is something we haven't seen in any other reports. Is that your recollection as well?

A. Yes.

Q. Now, you state at the -- in the last paragraph on page 3 under that heading "DROP Accumulation," "As stated above, according to Mr. Howard's deposition testimony, he did not plan to remain employed with the police department which was a requirement to participate in DROP. Staller report is not based on reliable facts."

Do you see that?

A. Yes.

Q. The last sentence where you say "Staller report is not based on reliable facts," is that based on the sentence that precedes it?

A. Yes. He -- he has -- there's been no documents or facts showing that he joined DROP or planned to retire early.

Q. So similar to your criticism of

Mr. Staller in the section above, is your criticism with respect to the factual application and not the calculations that were made?

MR. ORTIZ: Objection.

You can answer.

A. Yes.

(By Ms. Butler)

Q. Going to the next section which is "Opinions & Basis," the first section is, again, "Past Medical Expenses." And as with the other reports, are you just repeating what Dr. Ji provided in his report here?

A. Yes.

Q. Going down to the "Veterans Benefits Administration Compensation" section, is -- is your methodology and analysis the same for this section of your report with respect to Mr. Howard the same as we've discussed with respect to those sections of other reports?

A. Yes.

Q. Okay. Would you agree with me that a new diagnosis for any of these plaintiffs could change the but-for Lejeune proportion of his benefits?

A. It could.

MR. ORTIZ: Object to the form.
You can answer.
A. It could.
(By Ms. Butler)
Q. And you did not take that into consideration in your projections of future benefits; correct?
MR. ORTIZ: Objection.
A. Correct.
(By Ms. Butler)
Q. And as we've discussed with other similar sections in other reports, the assumptions that are made in this section are the same as we've already discussed; correct?
A. Correct.
Q. Looking at Footnote 3 at the bottom of page 4 of your report, similar to your other reports, are you relying on Dr. Ji with respect to the conditions that you identify in that footnote as being related to Camp Lejeune?
A. Yes.
Q. And so were your opinions rendered in this report based upon Dr. Ji's opinions with respect to what conditions and disability ratings were related to Mr. Howard's Camp Lejeune

illness?

A. Yes.

Q. And your calculations are based on both, in this instance, the non-Hodgkin's lymphoma and the renal cell carcinoma on being related to his Camp Lejeune Track 1 illness; is that correct?

A. Yes.

Q. And so if Dr. Ji's determinations in that regard were wrong, then your analysis would be wrong as well; correct?

A. Correct. If he needs to change those, then I would update my analysis.

Q. Okay. Going to the next page of your report, there's a table and, again, it's -- it's setting out offsets. Under the "Past Medical Care," are those two numbers numbers that you obtained from Dr. Ji?

A. Yes.

Q. And so you didn't perform any independent evaluation or analysis of those numbers; correct?

A. Correct.

Q. And so in that chart, the numbers that reflect your testimony in this case are the VBA disability benefit numbers?

MR. ORTIZ: Objection -- objection.
(By Ms. Butler)
Q. Is that correct?
A. Yes.
Q. Okay. Looking at Mr. Howard's tables, Table 1 appears to be similar to tables we've seen in other reports; would you agree?
A. Yes.
Q. Okay. Obviously with his information?
A. Correct.
Q. Okay. Then we go to Table 2. And there are no more tables for Mr. Howard. Are we missing the next tables?
A. Yes.
Q. Okay.
A. You're missing your -- your favorite tables with the two different charts.
Q. That's what I was looking for. So it's Table 3 and, like, Mr. Cagiano is Table 6 and Mr. Mousser -- so we're missing my tables where I get to ask you all the questions about how you --
A. Correct.
Q. Okay.
A. Changes in the disability ratings over the time period.

Q. Okay. So could we add -- would you be able to add those tables?

A. Yes.

Q. Okay. And do you think your report would be more complete if you did add those tables?

MR. ORTIZ: Objection.

A. No. It is complete and the source documents that are listed have the data in there. It's really a summary to assist reviewing it, but I'll add the table and send it back.

(By Ms. Butler)

Q. Okay. With respect to Plaintiff Allan Wayne Howard, are there any opinions that you intend to express other than those contained within your report?

MR. ORTIZ: Objection.

You can answer.

A. No.

(By Ms. Butler)

Q. And is Exhibit 33, your List of Materials Considered, for that report?

A. Yes.

Q. Okay. I noted on Mr. Howard's Materials Considered List that you had reviewed the

depositions of a number of individuals: Westerlind, Clarke, Hunter, Hartwell, Ryan, Rivas, Tackaberry, and Zakaryan.

Do you see those?

A. Yes.

Q. Did you review all of those depositions?

A. No.

Q. Okay. Do you know why they're on your Materials Considered List?

A. They were provided.

Q. Okay. But they were not reviewed?

A. Correct.

Q. Do you plan to review them?

A. At this time probably not but maybe.

Q. Do you plan to render any opinions that you have not already expressed today?

MR. ORTIZ: Objection.

A. No.

(By Ms. Butler)

Q. Okay. We have --

MR. ORTIZ: Are we done with Howard?

MS. BUTLER: Yes, we have two more reports.

MR. ORTIZ: Great.

MS. BUTLER: Getting down there.
(By Ms. Butler)
Q. I'm going to hand you what has been marked as Exhibit 34, which is the report for David Downs, and Exhibit 35, which is the Materials Considered List for David Downs.
And while I'm at it, I'm going to go ahead and give you Exhibit 36, which is for Mr. Fancher. That's his -- your report. And Exhibit 37, which is your Materials Considered List for Mr. Fancher?
(Exhibit Number 34 was marked.)
(Exhibit Number 35 was marked.)
(Exhibit Number 36 was marked.)
(Exhibit Number 37 was marked.)
MR. ORTIZ: Do you have a copy of Mr. Fancher's report?
MS. LAMACCHIA: Huh-uh.
MS. BUTLER: Yes. I'm sorry.
MR. ORTIZ: No, you're fine.
MS. BUTLER: Did I not hand it to you?
MR. ORTIZ: You're fine.
MS. BUTLER: I apologize.
MR. ORTIZ: That's fine.

MS. BUTLER: Yes, I do, David. Sorry.

MR. ORTIZ: Thank you.

(By Ms. Butler)

Q. Okay. So let's look at Mr. Downs first. Turning to Mr. Downs, the assignment and expert qualifications are the same as the other reports. Let's go to the introduction. There are no bullet points in this report.

Would you agree with me?

A. Yes.

Q. Okay. So the first paragraph appears to be the summary that we've seen similar to other reports; is that correct?

A. Yes.

Q. And then the next paragraph says "The purpose of this analysis is to evaluate alleged damages as presented by plaintiffs and to provide an expert opinion as to the value of any offsets to a potential award. All calculations are calculated to present value as of the date of this report"; is that correct?

A. Yes.

Q. And then you say "Plaintiffs have not presented an economic damage report" -- sorry --

"Plaintiffs have not presented an economic damage expert report regarding Mr. Downs. I will therefore only provide an opinion regarding offsets in this manner." Is that accurate?

A. Yes.

Q. And is that still true?

A. Yes.

Q. So the extent of your analysis for Mr. Downs is to provide an opinion regarding offsets; is that correct?

A. Correct.

Q. Okay. Going down below to your opinion on offsets, the past medical expenses paragraph appears to be the same except for the numbers as in other reports. And did you obtain those numbers and the information from Dr. Ji?

A. Yes.

Q. Okay. Going down to the "Veterans Benefits Administration Compensation" section, was your methodology and analysis and assumptions -- were they all the same as we've discussed for similar provisions in other plaintiffs' expert reports?

A. Yes.

MR. ORTIZ: Object to form.

You can answer.

A. Yes.

(By Ms. Butler)

Q. Is there anything that you did differently with respect to Mr. Downs in calculating his Veterans Benefits Administration compensation both past and future than you did for other plaintiffs in this case?

A. No.

Q. You indicate, after noting that you assume no other changes to his disability ratings and that you assumed a life expectancy with cost of living adjustments, that the total past and future VBA compensation benefits is calculated to be 132,569.

Do you see that?

A. Yes.

Q. And so is that the extent of the opinion that you are rendering with respect to Mr. Downs?

MR. ORTIZ: Object to form.

A. Yes.

(By Ms. Butler)

Q. Okay. And so in the summary, basically that number is in there along with some other numbers, but the extent of your opinion is really

limited to the total and past future VBA compensation benefits of 132,569; correct?

MR. ORTIZ: Objection. Asked and answered.

A. Yes, the 58,000 is from Dr. Ji and I calculated the 132-.

(By Ms. Butler)

Q. Okay. And what is the purpose of providing the chart in the summary?

A. For a total list of offsets to provide everyone a summary.

Q. And it's a summary that includes opinions rendered by other experts; is that correct?

MR. ORTIZ: Objection.

A. The 58,000 is provided by Dr. Wii [sic] --

(By Ms. Butler)

Q. Okay.

A. -- Ji.

Q. Going to the tables that are behind your report for Mr. Downs. Table 1 are his -- it's your table for VBA payments from the government; is that correct? That's your --

A. Yeah.

Q. -- calculation that we just discussed in the prior section?
A. Yes.
Q. The 132,569?
A. Yes.
Q. Okay. And then Table 2 is similar to tables we've looked at for other plaintiffs; correct?
A. Yes.
Q. Okay. And then Table 3 is similar to what we've looked at for other plaintiffs; correct?
A. Correct.
Q. So with respect to Mr. Downs, I have a question with respect to Table 3, and that's the last page 2 of 2. At the top, you see that there's a diagnostic code of 7500 for "renal cancer, status post right kidney removal, percentage 60 percent, effective date March 14, 2017."
Do you see that?
A. Yes.
Q. Where is that reflected in Table 2?
A. At the very beginning, that 70 percent is his combined rating which includes that and

that's when the losses start because that's when -- or the offsets would start because that's when he became -- had a -- a condition related to Camp Lejeune.

Q. And so once again that CLJA rate should be total combined rate?

MR. ORTIZ: Objection.

A. It is. On Table 1 it says "VA Benefits with CLJA," and then without; so it would probably be better if those same headings were over there to help.

(By Ms. Butler)

Q. Okay. And so as reflected in Table 2, you were showing that his combined rate is 70 percent as of 4/1/2017; is that correct?

A. Yes.

Q. And that his non-CLJA is 40 percent?

A. Yes.

Q. And you made those determinations using the -- the -- I'm trying to find his Materials Considered List -- using the tables that we've referred to in other reports; is that correct?

A. Yes.

Q. And is that the -- which table is that on Mr. Downs's Materials Considered List?

A. I don't see our table, the websites listed that are from the VBA. Let's see if it's in the references. There should be those two same websites for the compensation benefits. And the combined ratings should be added here.

Q. So those are the National Archives and Records Administration CFR Combined Ratings table and the US Department of Veterans Affairs Compensation and Pension Rate tables?

A. Yes.

Q. Okay. So those should be added to Mr. Downs Materials Considered List?

A. Correct.

Q. And that's how you equate the 60 percent service connected injury for renal cancer on 3/14/2017 to your Table 2?

A. That's how I connected. I get his combined rating from the sites that you just mentioned, and it turns into Table 2.

Q. Okay. So these need to be added. Is there anything else that you know that needs to be added to Exhibit 35, which is the Materials Considered List for Mr. Downs?

MR. ORTIZ: Object to foundation.

A. Not that I know of.

(By Ms. Butler)
Q. And are all of the opinions that you expect to render with respect to Mr. Downs contained within your expert report?
MR. ORTIZ: Objection.
You can answer.
A. Yes.
(By Ms. Butler)
Q. Okay. We are going to move to Ms. Fancher, which is -- your report is Exhibit 36, and your Materials Considered List is 37. Turning to Ms. Fancher --
MR. ORTIZ: Mr. Fancher.
MS. BUTLER: Sorry. Mr. Fancher.
MR. ORTIZ: It's all right.
MS. BUTLER: I'm sorry.
MR. ORTIZ: It's late in the day.
MS. BUTLER: Yes, late in the day.
(By Ms. Butler)
Q. With respect to Mr. Fancher -- sorry. I was looking at the next page where we talk about his wife, and so I apologize.
On page 2 of your report for Mr. Fancher the assignment and expert qualifications are the same as we've reviewed in other reports; correct?

A. Correct.

Q. Going to the introduction we have two bullet points that summarize your analysis; is that correct?

MR. ORTIZ: Objection.

(By Ms. Butler)

Q. Okay. Let me ask another question: Under the "Introduction" section of Mr. Fancher's report, it says "The purpose of this analysis" -- is the -- "if the following," but it should be "is the following"; correct?

A. Correct.

Q. And there are two bullet points there; correct?

A. Correct.

Q. First, to "evaluate alleged damages as presented in Plaintiffs' expert report prepared by Chad Staller"; is that correct?

A. Yes.

Q. And then to "determine the present value of any offsets to a potential award"; is that correct?

A. Yes.

Q. Turning to the next section of your report, it's titled "Staller Report."

Do you see that?

A. Yes.

Q. And you describe how the "Staller report includes an illustrative calculation to value the services of Mr. Fancher's wife that she provided for him, to help care for him for a period of time."

Do you see that?

A. Yes.

Q. And you state under that summary of Mr. Staller's report "While I do not take issue with the sources used in Staller report the illustrative calculations provided are unsupported."

Do you see that?

A. Yes.

Q. Is that -- did I read that correctly?

A. Yes.

Q. Okay. And we have discussed a similar provision in other reports. And is your criticism of Mr. Staller, with respect to what he did for the past medical and related care for Mr. Fancher -- is your criticism the same as we've discussed with other reports?

A. Yes.

Q. And you go on to state that the "Staller report makes no effort to determine what Mr. Fancher's wife actually provided and arrive at an expert opinion regarding the amount of care provided"; correct?

A. Yes.

Q. And so that's your criticism of Mr. Staller, not the calculations and the basis for the calculations; correct?

MR. ORTIZ: Objection.

A. The methodology and the sources used, I have no issues with.

(By Ms. Butler)

Q. And at the end of that section of your report, which is on page 3 at the top, you state that "Staller report is not based on reliable facts and data and provides no support of any opinion of the amount of medical care provided by Mr. Fancher's wife."

Do you see that?

A. Yes.

Q. And you -- you quote some deposition testimony before that; is that correct?

A. Correct.

Q. And so, again, is your criticism of

Mr. Staller the fact that he is letting a factfinder decide the facts as opposed to determining them himself?

MR. ORTIZ: Objection to form and foundation.

A. He didn't -- he -- in my opinion, he's not providing an opinion he's providing a -- a number. And he didn't do anything to determine if she spent one hour per day, in this calculation, for the past 28 years.

(By Ms. Butler)

Q. If there were to be testimony at trial and the factfinder were to determine that based on that testimony that there was support for applying a one hour per day calculation, do you take issue with the calculation that Mr. Staller did under those circumstances?

MR. ORTIZ: Objection to foundation.

A. No.

(By Ms. Butler)

Q. Okay. Moving to the next part of your report, which is "Opinions & Basis." Again, you start off with past medical expenses, and you refer to the report of Dr. Ji and provide some

numbers that are based on Dr. Ji's report; is that correct?

A. Yes.

Q. And Dr. Ji's report, you indicate, refers to benefits received from the VHA; correct?

A. Ask that again, please.

Q. In your summary of Dr. Ji's report, do you refer to payments from the VHA?

A. Yes.

Q. And, again, have you done any independent analysis of the VHA's ability to make those same payments in the future?

MR. ORTIZ: Objection.

A. Those are past medical expenses.

(By Ms. Butler)

Q. Right. I'm just asking if you've done any analysis of VHA into the future. I'm not sure I've asked that before.

MR. ORTIZ: Same objection.

A. No.

(By Ms. Butler)

Q. Okay. I've asked it with respect to Medicare, Tricare, TriWest and others, I just want to make sure I cover -- going down to

"Veterans Benefits Administration Compensation," is there anything in your analysis of the VBA benefits administration compensation for Mr. Fancher that is different than the methodology and analysis that you've described for other plaintiffs?

A. No.

Q. And, again, you are relying on Dr. Ji with respect to the VBA disability ratings that are related to his Camp Lejeune conditions; is that correct?

A. Yes.

Q. And so going to the top of page 4, you state total past and future VBA compensation benefits is calculated to be 368,399; is that correct?

A. Yes.

Q. And so is that the extent of your calculation with respect to this plaintiff, Mr. Fancher?

MR. ORTIZ: Objection.

A. Regarding the VBA disability benefits.

(By Ms. Butler)

Q. Well, did you do any other calculations for Mr. Fancher?

A. No.
Q. Okay. So that's the extent of your opinion with respect to Mr. Fancher; correct?
A. That's my opinion for these. I've added -- I've been asked to give the total offset number, and I needed to include Dr. Ji's total to arrive at total offset amount.
Q. Okay. And so, again, you're adding what you determined in VBA disability benefits to figures that were determined by Dr. Ji; correct?
A. Yes.
Q. And in so doing you're not intending to imply how any of those offsets should be applied in this case; correct?
MR. ORTIZ: Objection.
A. Correct.
(By Ms. Butler)
Q. And with respect to your report for Mr. Fancher and including the tables, which I'm not going to go through because we've gone through a lot of tables already, but is there anything different with respect to your methodology or your opinions regarding Mr. Fancher other than what we have discussed with respect to other plaintiffs?

A. No.
Q. Are all of the opinions you intend to render with respect to Mr. Fancher included in your expert report?
MR. ORTIZ: Objection.
You can answer.
A. Yes.
(By Ms. Butler)
Q. Okay. I have a few more questions, but I can probably wrap up. Do you want to keep going, or do you want to take a quick break?
MR. ORTIZ: How long do you think you have? 15 minutes or less?
MS. BUTLER: Hopefully.
MR. ORTIZ: Then I -- I think we can just press on.
(By Ms. Butler)
Q. Okay. I am going to -- I'm going to hand you what has been marked as Exhibit 38, which is a Supplemental Materials Considered List.
(Exhibit Number 38 was marked.)
MR. ORTIZ: Are we -- that was the next Exhibit Number? I just want to be sure.
MS. PRUIETT: Correct. 38.

MR. ORTIZ: Thank you.

MS. BUTLER: I need a copy. I don't know where mine went. Oh, here it is. Never mind. I got it. Okay.

(By Ms. Butler)

Q. Have you seen this document before today?

A. Yes.

Q. Did you prepare this document?

A. No.

Q. Okay. Are you aware of anything else that you have reviewed with respect to any of the reports that you intend to testify about in this litigation that have not been indicated on the materials considered lists that we already looked at, your reports that we already looked at, or this Supplemental Materials Considered List?

A. No.

Q. So I note that you reviewed a number of the Track 1 trial plaintiff damage assessment forms. Do you see those bullet points on there?

A. Yes.

Q. Do you intend to render any opinions with respect to the damage assessment forms of any of the plaintiffs in this case?

MR. ORTIZ: Objection.
You can answer.
A. No.
(By Ms. Butler)
Q. Okay. You reviewed the rebuttal expert opinion report of Marjorie Hackett-Wallace and the corrected rebuttal expert opinion report of Marjorie Hackett-Wallace; is that correct?
A. No. These were provided to me. I have not reviewed all of these.
Q. Do you expect to render an opinion with respect to the expert reports of Marjorie Hackett-Wallace?
A. No.
Q. Okay. And, in fact, you haven't reviewed them to date; correct?
A. Correct.
Q. Do you intend to review them?
MR. ORTIZ: Objection.
And "them" being the reports of Ms. Wallace.
MS. BUTLER: The -- Ms. Hackett-Wallace's reports.
A. I don't know.
(By Ms. Butler)

Q. It indicates you reviewed the rebuttal expert report of Chad Staller.

Do you see that?

A. Yes.

Q. Do you intend to express any opinions not already discussed here today with respect to the opinions of Mr. Staller?

MR. ORTIZ: Objection.

A. No.

(By Ms. Butler)

Q. It says you reviewed the expert report and expert testimony of Peter Rybolt. Did you, in fact, review that report?

A. Yes.

Q. Do you expect to render any opinions with respect to the expert report and expert testimony of Peter Rybolt?

MR. ORTIZ: Objection.

You can answer.

A. Not at this time.

(By Ms. Butler)

Q. You say "not at this time." Do you expect to be asked to render such opinions?

MR. ORTIZ: Objection.

You can answer.

A. I don't know. If I were asked to, I could.
(By Ms. Butler)
Q. Okay. But to date, you haven't been asked to?
A. Correct.
MR. ORTIZ: Objection.
(By Ms. Butler)
Q. It says you reviewed the expert report of Anirban Basu and a number of amended appendices.
Do you see that?
A. I see that and these are -- these are as materials considered. They were provided. I have not reviewed them.
Q. Do you plan to review Mr. -- Dr. Basu's report and appendices?
MR. ORTIZ: Objection.
You can answer.
A. I don't think so.
(By Ms. Butler)
Q. You also apparently were given materials considered lists for three experts. Do you see those bullet points on there?
A. Yes.

Q. Based on -- did you, in fact, review those materials considered lists?

A. I may have opened up Chad Staller's, but I don't recall.

Q. Did you review any of the materials on those lists?

A. I can't tell you what's -- can you show me the list?

Q. Well, let me ask you: When you reviewed those materials considered lists that are identified on Exhibit 38, did you go to any of the materials that were on there?

A. Not at that January 27th -- as of that date, no.

Q. Okay. This next item is a series of Bates numbers for Mr. Criswell. And I have a copy here, and I'm glad to hand it to you. I don't necessarily need to mark it as an exhibit unless we need to talk about it, but I was curious why you reviewed Bates numbers 5428 through 5450 for Mr. Criswell.

A. I saw they were provided, and I reviewed them and did nothing with them.

Q. Okay. And so those Bates numbers 5428 through 5450 that are on your materials

considered lists -- do they have any impact on your opinions with respect to Mr. Criswell in this case?

A. I don't think so. They appeared to be medical records that I don't usually look at. So I did not give it attention.

Q. Okay. Is there anything else that you have reviewed in this case that you -- could change any of your opinions in this matter?

MR. ORTIZ: Objection to form and foundation.

You can answer.

A. I don't think so.

(By Ms. Butler)

Q. Now, I did not see on your materials considered lists any of the other defense economic reports such as Dr. Brod and Dr. Tosic. I think we already went over this, but you did not review their reports; is that correct?

A. Correct.

Q. And same question as to the defense expert, Gregory Russo. Have you reviewed his report?

A. No.

MS. BUTLER: If I could take a few

minutes I think I can wrap up this really quickly.

MR. ORTIZ: Yep.

THE VIDEOGRAPHER: Time is now 5:01. We're off the record.

(A recess was taken.)

THE VIDEOGRAPHER: Time is now 5:08 and we're back on the record.

(By Ms. Butler)

Q. Ms. Yount, it's been a day of looking at numerous reports. I think that they are Exhibits 20, 22, 24, 26, 28, 30, 32, 34, and 36 in case you need to go back to them.

Which sections in your reports rely on your calculations and expertise as opposed to other experts' calculations and expertise?

MR. ORTIZ: Objection.

(By Ms. Butler)

Q. And if you want to use one as exemplary, if you want to go through each one individually, it's up to you.

A. In every report that I used Dr. Ji's opinion for past medical care offsets, that is his opinion that I've used to calculate total offsets. And I have -- I think that's it.

Q. Now, you have used Ms. Navarro's reports; correct?

A. Correct. I've used their reports to calculate my opinion of the present day value of those.

Q. And Mr. Shahnasarian as well; correct?

A. Correct.

Q. And you've used Dr. Henry Miller's reports; correct?

A. Correct.

Q. And when you are using these reports of other individuals, for example, Dr. Ji, you're not expressing any opinion, you're just providing a summary of their report; correct?

MR. ORTIZ: Objection.

A. He's the only one that I've done that.

(By Ms. Butler)

Q. With respect to Henry Miller, you've taken his numbers and you've applied some calculations; correct?

A. I've done just what Staller's done with Fryar's report. I've calculated the present day value based on a set of current day medical care expenses.

Q. And so other than taking Dr. Miller's

numbers and applying the calculations you just indicated, would it be accurate to say the other portions of these reports that are your analysis are the VBA disability benefits portions of these reports?

MR. ORTIZ: Objection.

A. The -- no, everything in here are my opinions and calculated except for Dr. Ji's number. I've done an analysis and calculation on everything else.

(By Ms. Butler)

Q. I've asked you a lot of questions today about whether you have independently analyzed or validated other experts' reports, and you've repeatedly stated "no."

Are you now changing your testimony?

MR. ORTIZ: Objection. Misstates prior testimony.

A. No. You've asked me if I have independently verified their reports. My role is to take their opinions and to come up with a present day value. You can't get to my number without their report.

(By Ms. Butler)

Q. Okay.

A. So I am relying on their report just as Staller did with Michael Fryar's report, to give a base amount and we calculate it out to present or to life expectancy and discounted to present value.

I'm not giving any validity to their report. I'm taking what their report is and saying, assuming it's accurate, and then I've prepared an opinion based off of that.

Q. Okay. Thank you for that explanation.

We looked at, in a number of these reports, some of the headings that perhaps could have been better descriptive. You know what I'm referring to?

A. I do. I understood what it is, but I need to make it better so everyone can understand it, yes.

Q. Who created those headings?

MR. ORTIZ: Objection.

A. I -- I did.

(By Ms. Butler)

Q. So with respect to all of the tables attached to your reports, is it your testimony that you created all of those tables including the headings and the information in there?

A. Yes. I have -- some of the staff would help with data inputs, and I have finalized everything in every one of these reports.

Q. Okay. I have noted that we've been here all day, and you have a folder with you there today. Is there any material in that folder? Okay. That's what --

A. It's for me to --

Q. I wanted to make sure there wasn't anything that you brought here today that you were referring to. I appreciate that.

MS. BUTLER: I have no further questions, but I do want to hold the deposition open. I want to note a few things with respect to Mr. Criswell. I understand that Ms. Yount will be updating the table and provide the summary of ratings. There was some missing information that's Exhibit 22.

In the Mousser report the tables for -- we learned that the tables for all of the plaintiffs' reports are Excel spreadsheets that have formulas that were not provided to us.

And with respect to Mr. Howard, there are tables that are missing. That's Exhibit 32.

With respect to Downs, there's cites

missing from the Materials Considered List and that -- I think that's Exhibit 35 that she intends to add.

And we understand that there are time sheets and monthly projections that would be responsive to our request for production and that were not provided.

So I wanted to note that for the record.

MR. ORTIZ: And we can deal with that after the deposition?

MS. BUTLER: Yes. But I -- I want to hold it open at this time while those things are being updated and produced, and then make a determination about whether we need to gather back.

MR. ORTIZ: Yeah, we -- we can discuss that after the deposition. Are you passing the witness?

MS. BUTLER: Yes. I have no further questions.

Thank you very much for your time and patience today.

MR. ORTIZ: I have no questions.

Thank you very much, ma'am.

THE VIDEOGRAPHER: This concludes

the video deposition of Tricia Yount. Time is now 5:15, and we're off the record.

THE STENOGRAPHER: Any transcript orders?

MR. ORTIZ: I think we have a standard.

MS. BUTLER: We have a standard -- we all have standard orders.

(The deposition was concluded at 5:15 P.M.)

CERTIFICATE OF REPORTER
STATE OF SOUTH CAROLINA
COUNTY OF CHARLESTON

I, Bethany Morse, Registered Professional Reporter and Notary Public for the State of South Carolina at Large, do hereby certify that the witness in the foregoing deposition was by me duly sworn to testify to the truth, the whole truth and nothing but the truth in the within-entitled cause; that said deposition was taken at the time and location therein stated; that the testimony of the witness and all objections made at the time of the examination were recorded stenographically by me and were thereafter transcribed by computer-aided transcription; that the foregoing is a full, complete and true record of the testimony of the witness and of all objections made at the time of the examination; and that the witness was given an opportunity to read and correct said deposition and to subscribe the same.

Should the signature of the witness not be affixed to the deposition, the witness shall not have availed himself/herself of the opportunity to sign or the signature has been waived.

I further certify that I am neither related to nor counsel for any party to the cause pending or interested in the events thereof.

Witness my hand, I have hereunto affixed my official seal on 25th day of February, 2026, in North Charleston, Charleston County, South Carolina.

<%1259,Signature%>
Bethany Morse
REGISTERED PROFESSIONAL REPORTER, RPR, CCR(WA)
My Notary Commission expires January 4, 2033

&

& 157:7 212:22 228:18 259:17 281:21 294:9 312:23

0

0155 75:15 76:11 78:4 81:8 88:9 100:20 105:15
0162 78:6 81:16 82:9,18 92:4 94:9 103:4
0165 15:24 76:8 78:1 80:24 104:14
032 134:8,11 135:12

1

1 3:8 14:1,8 18:19 50:10 59:21 72:15 75:6,24 76:7,15 77:25 91:25 110:4,9 117:22 118:14 120:8 120:16 121:20 122:14 124:1,5 127:15 128:10 132:18 135:24 136:2,4,16 139:18 145:11 145:16 158:18 160:1,1,10,11 163:3 164:3 165:20 176:14 176:20 179:15 179:16,24 180:4 181:9 182:2 184:13 184:22,24 185:25 186:9 187:5,8 188:1,2 188:13,19 190:8 194:23 195:7,12 198:11 199:23 216:19 218:21 222:6,10,17 236:25 237:14 243:3 253:2 254:13,20 267:16 270:6 271:24 284:21 284:25 288:3 296:6 297:6 304:22 306:8 317:20
1's 223:8
1,106,904 216:14
1-28 4:8
1.4 111:6,11
1/11/2012 217:6 218:12
1/17/23 79:25 80:25 84:18
10 4:6 81:14,18 81:23,24,25 91:21,23 92:7 92:23 194:13 198:4,13,20 200:3,7 217:25 218:13,14,22 219:4,7
10/31/77 43:1
100 4:18 80:12 162:13,14,17 162:17,18 163:1,12 178:12,14 186:4,7 187:5 188:22 189:8 190:2 191:15 192:20 194:10 194:17,19 195:17 196:22 197:2,12 218:4 219:24 220:9 222:6,9,23 223:15,16 224:21 270:23 272:2
100,000 89:7 90:11,14 96:14
100-123 4:5
102 4:21
104 5:1
105 5:4
108 5:7,9
10:57 66:14
10th 145:22
11 1:4 4:9 69:18 82:3,6,15 94:4 118:14 121:4 124:5
11/1/2021 218:8 222:1,5
11/10/2021 272:1
11/2012 220:7
11/5/2020 271:4
110,000 287:16
1100 2:14
117,830 237:4
11:06 66:17
11:21 79:15
11:23 79:18
11:56 108:4
11th 7:4 47:9 218:17
12 4:12 81:22 82:16,20 83:1,8 83:20 97:9 99:21 122:3 184:10,18
12/1/14 220:23
12/1/2014 220:20
12/21/23 88:13
12/26/24 81:17 92:12
12/31/23 84:18

12/31/24 88:13
12/4/2025 82:23
120,078 237:4
1259 330:20
126,653.25 132:9 133:13
127 2:5
12:07 108:7
12:47 145:1
13 4:15 83:2,7,8 83:14,18 99:18 99:20 125:3 136:23
132 304:6
132,569 303:15 304:2 305:4
14 3:8 4:18 95:1 98:4,10 100:11 100:12,14 101:23 103:19 122:18 305:19
14.5 116:8
15 4:21 41:25 42:13 102:20 102:24 114:13 151:18 152:2 267:3,8 316:13
15,326 237:10
15,664 237:10
15,805 240:22
150,000 84:22 85:11,25 86:4 91:9
153 5:12,13
15th 248:7
16 5:1 43:7 104:8,11 114:7
1600 185:15
165,493 287:4
16c 97:15
17 5:4 86:7 105:6,11 121:2 127:19
17,000 139:14
17a 84:7
18 5:7 107:21 107:22 108:10 108:12,16,19 108:20 109:19 109:21,25 110:2,7,19 114:6,17 115:23 117:3 119:11 137:20 138:20 141:9 146:3
19 5:9 108:11 108:13,16,19 108:20 109:22 109:23 127:11 127:14 128:25 130:10 134:2 139:16 141:9 146:4
199,685 165:20
1997 208:4
1:23 145:4
1s 223:2
1st 135:13 185:5 220:8 271:15,16

2

2 3:9,10,21,23 48:6,8 59:21 66:20 72:15,22 75:13 76:3 98:7 107:2,6 130:10 145:11 148:13 148:14 153:18 159:24 160:23 166:9 182:13 182:14,15 186:14 187:2 190:18,18 196:17,19,20 197:13 198:7 198:23 199:21 200:14 202:15 204:2 208:16 217:13,14,16 217:16 218:18 219:16 220:19 222:4 236:25 237:14 243:11 243:17 270:9 271:10 277:13 284:21,25 288:20 291:15 297:11 305:6 305:16,16,23 306:13 307:16 307:19 308:23
2.2 16:9 76:14
2.2a 76:18 78:13
2.7 145:16
2.8 146:22
2/21/23 81:9
2/23/2018 190:23 194:16 197:2,14
20 5:12 19:17 20:5,7,7 84:13 88:12 92:16 153:7,10 201:8 202:5 217:8,21 218:9,13,21 219:2 222:2 245:17 323:12
2000 48:17
20005 2:15
2004 43:24 44:5
2008 49:8
2012 218:17,21
2013 49:4
2014 219:16 220:8
2016 292:1
2017 292:2,12 305:20
2018 158:18 185:5,8 188:14
2019 198:11

2020 271:15,17
2022 9:22 10:25 12:14 43:16 95:19 194:13
2023 78:9 86:7 86:7 91:7 104:18 110:4,4 110:9,16 112:19 114:7,8 114:13,13,17 138:23
2024 20:3,15 43:12,16 47:6,8 47:9 78:9 89:3 90:12,15 100:23 105:17 110:10,16 117:22,23 120:16 121:4,4 122:3,3 125:3,3 137:17,21,22 138:23 272:18
2025 24:5 78:10 91:12 92:17,25 94:2 97:16 103:3,12 127:15,15 134:11,12 135:13 136:2 139:17,18,18 151:18,20 152:2 165:18 201:17 208:4 227:20 228:25 248:8 252:11 267:3,8
2026 1:4 6:15 7:4 22:16 78:23 99:12 118:14 124:5 135:7 330:17
2027 98:7,18
203 5:15,17
2033 330:22
206,280 286:25
21 5:13 114:7 127:20 153:12 153:15 161:23 161:24 181:4 182:1 186:18 186:24 202:6
219 2:9
22 5:15 44:18 134:7,11 148:15 151:20 203:21,24 205:3,16 219:5 219:6 323:12 327:18
22,328 252:11 252:19
220 139:7
226 5:18,20
23 5:17 9:24 77:14 203:22 203:25 214:18 230:7
24 5:18 77:15 226:6,9 244:19 245:19,25 323:12
247 5:21,23
249,850 92:21 93:1 96:11
25 5:20 77:15 83:14 226:7,10 245:21 246:1
25-28 4:17
250,000 89:4 91:13 93:2 139:13
254 5:24 6:1
25th 330:17
26 5:21 84:21 89:4 117:22 247:9,12 323:12
26.5 127:20
27 5:23 121:4 247:10,13 253:17
275,593 287:14 287:17
277 6:2,4
27th 321:13
28 5:24 127:15 211:25 219:8 254:3,7 255:3 312:10 323:12
28,035 125:6
28406 2:5
289 6:5,7
289,857.16 139:1
289,857.16. 139:5
29 5:10 6:1 219:8 254:4,8 255:3
292,569.50. 139:20
29415 1:21
29440 2:10
2:24 201:2
2:35 201:5
2nd 98:18
2s 199:9

3

3 3:12 68:7,10 68:16,17 69:3 69:17 70:4 107:9 110:4 119:11,19 165:16 187:12 187:13,14 188:1,12 190:18 194:2 196:16,19,25 197:14 198:9 206:22 217:4,5 217:14 218:16 220:3,17 221:25 224:25 230:6 244:6

256:13 270:14 279:6 281:7 288:24 291:15 293:10 295:16 297:19 305:10 305:15 311:15
3/1/2018 189:18 196:21
3/14/2017 307:16
30 5:10 6:2 110:10 192:6 192:20 197:19 198:13,19 199:5 200:3,6 217:22 218:23 219:9 224:21 272:14 277:5,9 323:12
300 6:8,10,11 6:13
31 5:10 6:4 86:7 114:8 127:21 128:3 134:12 139:18 165:18 252:10 277:5,6 277:10 289:16
31,314 241:10
31,680 241:9
31,982.50 122:6
316 6:14
31c 81:9
32 5:10 6:5 289:20,22 323:12 327:24
33 5:9 6:7 127:14 289:21 289:23 298:21
330 6:20
34 5:10 6:8 300:4,12 323:12
349,850 96:15 96:20 99:7,8
35 5:10 6:10 300:5,13 307:22 328:2
35,447 175:5
350 46:24 47:1 47:19
36 5:10 6:11 136:6 300:8,14 308:11 323:12
368,399 314:15
37 5:10 6:13 300:10,15 308:12
370 103:9 106:1 117:18 126:9 126:20 127:4
38 5:9 6:14 132:8 198:22 316:19,22,25 321:11
39 5:10
39,000 139:15
3:28 246:24
3:29 247:2
3rd 114:13

4

4 3:14 68:19,20 68:22 69:4,14 69:15,22 97:16 122:3 149:10 149:11 215:3 245:18,20 266:24,25 284:20 295:17 314:13 330:22
4,168 241:17
4,631 267:25
4/1/2014 219:17 219:21
4/1/2017 306:15
40 49:22 137:6 163:6 189:5 190:2 198:11 198:22,25 199:5 306:17
40-56 4:11
42 96:1
48 3:10 133:19 184:13 185:24 186:3 222:21 223:2,7
4:02 276:24
4:12 277:2

5

5 3:16 6:15 22:16 71:23 72:3,6,9,14 106:24 107:3 125:3 148:10 149:9,20 263:23 270:21 271:11,12,14 272:16
5/1/2019 189:1 191:20
500 104:21 105:2,21 115:25 116:2 185:12
500,000 140:7
54.25 133:19
5428 321:20,24
5450 321:21,25
55 246:6
560 105:22 117:23 127:4
57 5:9 103:23
575 103:9,23 105:2 128:13 128:16
58,000 304:5,16
5:01 323:5
5:15 329:2,10

6

6 3:19 75:12,12 75:19,21 76:11 76:16 78:3 270:19,22 297:19

60 163:4 186:5 192:16,20 193:10 199:20 200:2,5 246:20 305:19 307:14
60/40 163:13
61,024 119:9,19 120:12
618,951 177:6
65 120:4
65.25 118:7 120:2
67-97 5:7
68 3:12,14
68-86 4:2
69,118.50 121:8
6th 227:19

7

7 3:22 77:4,8 78:6,13 151:4,5 151:5 152:1
7/1 185:6
7/19/2019 192:10 199:20
70 147:15,24 271:5 305:24 306:15
70,978.50 122:9
72 3:16
75 3:19
7500 190:23 191:7,24 192:10 197:18 199:19 272:13 305:17
7528 194:4 217:7 270:24
77 3:22
79.5 132:12,16 132:23 133:18
7:23 1:8

8

8 3:4 4:1 79:11 79:24 80:22 81:2 83:23 85:10 151:6 152:1,11 228:24
8/1/2014 220:19 220:21
8/1/2019 189:13
8/10/2022 194:18
8/21/2017 218:3
8/27/25 82:13
80 189:14 190:2 199:23
81 4:1,3,6
82 4:9,12
83 4:15
843-762-6294 1:21
89 4:23 102:21
897 1:8

9

9 4:3 80:11 81:5 81:10,11 88:6 89:2 90:9 91:20 93:2 152:10,22
9/22/2020 270:23
91 4:19
93-96 4:14
9435 271:4
9:51 1:13 7:9 7:15
9:54 7:18

a

a.m. 1:13
ability 60:21 284:9 286:7 313:12
able 9:1 124:12 233:13 234:5,7 261:7 262:18 270:2 298:2
above 98:10 116:16,25 134:15 154:3 186:6 242:7 293:11 294:1
absolutely 89:23 193:13 246:21
access 135:18
accommodati... 172:9
account 139:23 185:1 186:12
accountant 25:17,21 44:9 44:14
accounted 170:22 171:9 171:15
accounting 16:25 45:10,20 76:20 78:18 129:13 154:9 239:1,2
accumulation 115:1 293:5,11
accuracy 141:20
accurate 9:17 23:4 27:4 28:24 34:4 36:16 45:12 52:14 54:20 59:1,6 67:4 69:11 72:20 73:24 99:8 109:4 118:15 124:8 124:16 134:7 142:21 144:14 156:1 157:23 176:12 199:10 214:7 235:1 266:2 275:9 302:4 325:2 326:8
accurately 98:14 200:15
acquisition 15:13

act 59:14
activity 30:23 73:17
actual 51:5 61:23 71:20 104:4 161:16 179:6 209:18 217:18 221:9 265:11,13
actually 51:19 58:21 66:24 101:1 118:13 158:5 170:14 183:12 199:2,4 199:7 210:5 225:18 227:2 246:19 271:16 273:2,9 311:3
add 56:17 138:24 161:14 162:12,13 187:5 198:15 259:14 298:1,2 298:5,11 328:3
added 177:3 307:5,11,20,22 315:5
adding 287:18 315:8
addition 287:12
additional 19:19 109:8,16 134:2 138:1 139:14 147:18 149:7 165:17 171:20 173:7 180:20 186:5,9 214:22 250:5 269:25 271:18 271:19 279:1 279:19 280:14
adjusted 230:23 263:6 285:22
adjustment 189:2 215:17 215:23
adjustments 170:15,19,21 174:16 240:6 242:20 269:20 303:13
administration 25:7 33:16 54:4 158:4,15 160:23 162:6 165:11 215:2 266:22 294:15 302:19 303:6 307:7 314:1,3
admitted 210:2
adr 5:3,6
adverse 249:6
affairs 181:5 214:15 232:18 244:22 261:21 262:1,9,22 263:10 307:8
affects 178:24
affixed 330:13 330:17
age 208:13
agencies 157:15 213:10 234:24 235:3 283:17
ago 15:3 46:11 57:24 74:2
agree 69:5 153:22 209:6 217:11 294:21 297:7 301:10
agreement 83:25
agreements 150:13
ahead 31:14 79:21 91:2 108:10 153:5 231:25 300:8
aid 279:11
aided 330:9
alex 132:3
alexander 129:2 130:15
allan 6:6,7 298:13
alleged 155:17 205:22 227:3 247:22 248:9 255:14 279:12 290:10 301:17 309:16
allen 290:1
allocated 164:3
allocation 223:7
allotted 85:16
allowed 209:23
alluded 148:14
amended 3:14 3:17 68:19 71:25 320:10
amendment 4:9,12,15,18 82:3,16 94:25 96:18 97:10 98:5 100:16 101:4
amendments 94:5
america 48:20
amount 30:8,22 73:18 74:11 84:22 85:25 86:4 90:10,23 91:9,13 92:21 92:25 96:19,23 101:21 111:18 119:24 122:5 125:6 132:9 133:16 140:3 147:15,16 157:18,19 158:7,9,12 163:14 177:19 180:21 182:22

209:19,21 216:25 220:18 236:8 239:7 241:4 260:6 261:20 311:4 311:18 315:7 326:3
amounts 51:4 54:4 55:18,22 55:25 73:14 164:2 215:25 244:2 263:17 264:18 272:24 274:23 283:1,2
analyses 273:5
analysis 23:18 60:2,9 64:7 111:23 112:6 123:8 124:5 128:9 132:16 142:2 155:17 170:2 172:18 180:11 195:22 205:18 206:7 223:8 227:18 228:11 230:14 233:1 237:12 239:19 242:7,8 247:22 256:3 260:19 261:24 270:14,15 277:14,23 280:25 285:15 286:5 288:17
288:18,24 290:9,18 291:8 291:13 294:16 296:9,12,20 301:17 302:8 302:20 309:3,9 313:12,18 314:2,5 325:3,9
analyst 49:7,10
analysts 49:15
analyze 26:2 54:22
analyzed 26:8 26:14 325:13
anirban 320:10
annual 24:5 44:20 184:9,17 215:16 243:6 244:2
answer 9:2 11:10,22 12:17 13:21 16:5 17:13,19 18:15 19:5 21:3 22:21 23:25 25:2 28:4 34:1,10 37:24 41:22 45:6,15 50:14 51:14,23 57:18 64:11 65:8,15 66:6 70:16 75:2 85:14 90:19 93:6 95:15 97:1 102:15 107:16
111:21 113:3 113:13 115:15 116:20 118:10 119:15 127:24 133:2,23 137:3 140:11 141:24 144:4 146:6 148:6 152:12 153:1 157:17 159:5 164:8 166:23 169:24 193:8 202:8 221:7 278:1 291:22 294:5 295:2 298:18 303:1 308:6 316:6 318:2 319:19,25 320:19 322:12
answered 59:16 193:17 213:5 258:24 304:4
answering 112:5
anthony 5:12 5:14 153:8,14
anxious 217:23 218:5
anybody 13:17 35:15 134:6
anyway 180:14
apart 188:5
apologize 14:11 21:19 100:13
106:12 108:2 184:21 300:24 308:22
apparently 320:22
appear 77:22 96:18 99:10,20 100:7,16,22 104:17 105:17 110:13 130:3 134:2 139:17 142:25 189:11
appeared 273:3 322:4
appears 83:10 89:3 90:9 97:10 103:11 104:13 105:8 110:17 111:2 114:6 125:2,12 131:21 135:19 137:12 190:4 222:19 297:6 301:12 302:14
appendices 320:11,17
application 294:2
applied 12:6 55:17,21 57:8 57:15 59:13 103:25 159:13 175:22 176:4,8 211:6 215:19

216:24 227:25 241:22 263:3 264:25 265:6 315:13 324:19
applies 181:22
apply 207:13 211:1 212:16 230:8 236:8 237:19 250:22 251:8 266:7
applying 214:6 238:11 312:15 325:1
appreciate 327:11
approve 141:10 141:13
approved 120:14
approximate 41:19 273:24
approximately 20:12
april 121:4 122:3 201:16 220:8 228:24
archives 162:6 165:11 214:14 244:21 307:6
area 25:9 43:3 44:16 45:2,11 45:20,21 84:13 211:21
areas 18:11 40:18
arrive 311:3 315:7
arthritis 200:8
arthur 2:18 7:8
articles 50:3
asked 31:8 35:15 56:11,17 57:25 59:15 64:9 85:4 86:19 87:3 141:4 185:24 193:17 210:25 213:5 258:23 275:13 304:3 313:19 313:23 315:5 319:23 320:1,5 325:12,19
asking 13:4,9 35:14 89:14,24 123:25 169:14 169:16 178:8 313:17
asks 72:24 150:13 151:9
aspect 25:15 73:5
aspects 25:24
assess 144:9 283:6
assessment 317:20,24
assign 25:8
assigned 161:3 163:9 178:11
assignment 10:24 12:25 13:19 153:19 153:24 154:10 204:3 226:22 247:16 255:6 301:6 308:24
assignments 131:5
assigns 161:10
assist 25:23 298:10
assisted 114:25 126:4
assisting 10:16
associated 51:4 137:13
association 49:14
associations 49:3,13
assume 9:12 89:12 114:14 132:15 163:5 167:5,20 168:5 168:20 191:5 193:5,23 195:6 268:24 303:11
assumed 144:13 171:19 177:12 207:19 215:16 303:12
assumes 170:2 177:16 193:9 208:3,16
assuming 69:17 97:4 142:9,12 142:19,20 166:13 169:20 172:22 173:5 176:18,19 193:12 215:4 215:23 233:23 235:8 260:8 263:9,16 269:16 283:23 284:4 326:8
assumption 166:16,18 167:2 168:17 168:24 169:9 173:1,2,15 195:6 215:11 234:5 269:12
assumptions 17:16,23 18:1 29:4 144:7,10 170:10 174:13 202:21,25 203:6,8 215:9 239:19 257:7 257:23 258:22 284:10 285:14 285:16 295:13 302:21

asterisk 184:13 185:25
attached 65:2 72:19 102:1 106:13 151:18 152:3 161:25 240:4 274:8,11 326:23
attachment 3:9 3:21,23 15:6 75:13 76:3 145:11 202:5
attention 322:6
attorney 10:21 31:15 42:7 58:8 89:24 113:19
attorneys 22:10 25:23 30:7 41:11,14,18 42:3,4,6,12,22
attribute 184:6 222:18,20 223:1 271:23
attributed 176:13 223:5
august 114:7,13 194:13 199:23
author 141:19
authored 142:3
authoring 142:5
authorization 3:8,20,22 5:1,4 14:16
availability 53:12 283:25
available 51:10 51:19 91:4 161:19
availed 330:13
average 174:2,9 174:11 208:12
avoid 199:13
award 58:12 80:25 81:8,17 84:21 89:4 90:10 91:4 92:12,20,25 103:9 147:15 155:20 188:13 188:21 189:18 206:3 216:13 227:10 248:4 248:14 255:24 290:15 301:20 309:21
awarded 56:16 162:20 189:8
awards 11:13
aware 9:15 77:17 99:25 102:11 106:5 112:11 114:11 150:23 151:25 177:17,22 254:10,23 317:11

b

b 38:10
back 7:18 10:25 12:14 26:18 27:6 39:3 46:12 54:14 55:16 59:20 66:17 67:7 72:15 79:18,19 85:18 87:1 93:18 95:9 95:24 99:5 101:11 106:23 107:2 108:7 119:18 129:10 130:10 138:20 144:12 145:4 148:9 152:19 158:6 161:25 181:23 196:17 196:25 201:5 201:16 213:11 230:20,25 231:5 242:1 247:2 270:5,19 274:1 277:2 298:11 323:8 323:13 328:15
background 24:13,24 33:22 44:15 45:10 50:6 52:12 53:1 53:4 60:23
bad 82:1
balance 122:8 139:8
bank 48:19
base 60:24 167:1 168:1 171:23 326:3
based 29:5 34:6 49:2 54:11,19 60:19,22 77:15 86:24 120:12 127:2 140:12 142:10,12 148:23 155:1 158:20 161:2 167:3 168:5,21 171:2 172:3 176:20 179:6 180:21 190:14 193:9,22 195:18 200:3 209:16 210:6 210:15,19,19 210:22,24 216:5,9 218:25 225:17 226:2 228:23 229:21 232:16 234:16 240:14,23 242:2,23 243:5 243:7 252:2,6 252:20 256:10 261:10 267:1 267:25 268:1,9 268:13 269:8

270:6,9,15 280:25 281:25 286:25 287:4,8 287:15 288:4 288:20 293:15 293:20,21 295:23 296:3 311:16 312:13 313:1 321:1 324:23 326:9
bases 289:6
basically 44:5 56:15 92:16 157:21 265:18 303:23
basing 263:16 287:8
basis 87:20 157:7 158:12 208:9,17 212:1 212:22 228:19 259:17 261:3 281:21 292:6 294:9 311:8 312:23
basu 320:10
basu's 320:16
bates 14:11,13 36:14 75:16,17 79:7 80:3,6,12 83:14 91:25 95:25 102:21 127:14 132:8 134:8,11 135:12 136:5 202:11 321:16 321:20,24
bearing 102:21
began 158:16 158:25 159:1 213:23
beginning 42:25 47:2 104:5 113:14 137:5,9 163:21 305:24
behalf 2:3,12 7:22,25 8:3 58:18 71:6 73:4 113:10 261:22 262:2 264:16 285:12
believe 7:18 9:22 15:19 17:14 20:3 24:23 28:9 29:15 31:7 32:3 43:8 46:24 48:23 58:6,6 59:8 63:16 67:3 69:11 74:4,20 79:6 86:12,18 95:19 101:12 102:16 104:6 105:5 112:17 126:16 128:18 128:21,23 133:4,17 151:2 153:2 159:10 167:9 186:5 195:2 202:10 212:9 221:23 222:10 223:17 239:6,17 268:22
believed 93:18
bell 2:8 7:25
belllegalgrou... 2:10
bellwether 18:19 163:3 180:5 267:16
ben 2:18 117:5 117:14,15 118:6 128:22 131:12
beneath 236:24 253:4
benefit 25:7 28:19 33:16 54:4 55:9 161:17 166:6 171:21 172:16 177:19 178:1 242:14 296:25
benefits 23:14 23:16 25:6,15 26:13 27:15 32:6,11 33:2,7 34:18,23,23 35:10 52:13 54:5,19 55:9 58:5 62:6,16,23 65:6,21 130:5 157:14 158:4 158:14,17 159:1 160:23 161:1,2 165:4 165:17 169:3 170:8 173:8,22 176:2,4,11,13 176:24 177:15 179:17,25 180:3,3,10,14 181:13,21 183:23 188:18 195:11 196:3 197:8 213:10 213:24 215:2 216:2,19 223:4 242:5 253:23 266:21 268:13 268:16,19 283:8 294:14 294:24 295:7 302:19 303:6 303:14 304:2 306:8 307:4 313:5 314:1,3 314:15,22 315:9 325:4
benjamin 117:3 117:4 120:2 127:19 133:19
best 30:18 35:14 46:25

52:4 59:5,6 83:24 120:18 131:8 145:25 146:7 221:16
bethany 1:20 7:7 8:5 330:3 330:20
better 30:17 193:1 207:4,23 249:11 306:10 326:13,16
beyond 103:23 201:10
bibliography 72:16
big 24:11 90:24
bill 2:14 8:2 31:2 85:11 90:24
billed 47:14 91:8,12 126:20 127:3,4 140:3
billing 31:4,7 72:25 73:2,14 74:2,4 95:21 101:10 107:4 118:24 135:19 145:16 148:18 148:20
billings 91:15 93:25 114:15 135:5
bills 107:10 112:19 119:4
birth 42:25
bit 26:4 79:5 109:21 162:21 185:12 193:1 231:12 265:12
bkd 15:7,9,10 15:17 84:6,7 85:8
bkd's 15:14
black 94:16
bladder 18:8,11 19:2,11,19 20:7 50:19 141:6 191:3 217:7,22 218:8,13 222:1 223:15 227:21 227:21,22 254:13
blanket 210:5
block 81:9 89:4 94:12,25 97:15 98:9
board 37:7 44:21
boards 24:6
bolen 1:20
bottle 246:15
bottom 79:24 82:12,24 92:1 96:1 97:15 100:25 117:9 134:8 162:4 188:2,13 190:22 217:6 217:15 270:22 281:7 284:20 295:16
box 84:7,21
bratrud 125:22
break 66:4,8,8 144:18 153:6 200:21 246:3 276:4 316:11
breakdown 119:10 120:1 132:23 133:20
bringing 126:18 282:13 285:18
broad 154:15
brockman 130:23
brod 38:10,24 39:19 66:25 67:10 322:17
brod's 38:19
broken 31:8
brought 241:2 327:10
bullet 205:21 206:1 227:2 247:21 248:5 248:12,18 255:11,13 277:15,16,18 277:22 290:6 301:9 309:3,13 317:21 320:24
bump 271:22
bunch 149:18
butchered 125:23
butler 2:4 3:4 7:21,21 8:11 11:15,25 12:10 12:11,19 13:11 13:16,25 14:2,3 14:5,9 16:7 17:15,21 18:17 19:9 21:5 22:1 22:24 24:2,21 25:4,12 26:5,11 26:22 27:11 28:6,11,17,23 29:20 30:2 31:18 32:9,15 33:20 34:3,14 35:25 36:9 38:4 38:22 39:4 40:22 42:2 45:8 45:17 48:9 50:16,22 51:16 51:25 52:8,17 52:25 53:10,16 54:12 55:1,14 56:19 57:6,12 57:20 58:19 59:4,17 62:11 62:21 63:3,8 64:14 65:10,17 66:2,12,18 67:14,22 68:5,8

68:15,18,21	137:14 139:4	201:14 202:12	265:16 266:5
69:5,9,12,13	139:25 140:13	203:5,18,19	266:11 267:21
70:23 71:7,16	140:17,23	204:1 205:11	269:3,11,21
72:4,13 73:15	142:4,11,22	206:10 207:11	270:4 271:12
73:22 74:7 75:4	143:7,18,24	207:21 209:8	271:13 272:10
75:20 77:10	144:6,16,21,24	209:20 210:9	272:21 273:19
79:12,19 80:5,9	145:5 146:9,15	210:17 211:3	275:6,12,24
80:17 81:4,13	146:21 148:8	211:12 212:20	276:5,8,10,17
81:20,25 82:2,8	149:8 150:11	213:7,16	276:19,22
82:22 83:5,7,11	151:3 152:8	215:15 216:7	277:3,11 278:3
83:16,19 85:6	153:3,11,16	219:20 221:13	279:24 280:20
85:17 86:14	155:14 156:21	221:15,19,20	283:12,22
87:12,22 88:5	157:20 158:2	223:13,24	284:6,13
89:14,17,21,23	159:8 160:8,16	224:6,22 225:7	285:24 286:12
90:6 91:6,22,24	162:23 163:18	225:11,19	286:22 289:15
93:8 95:23 97:8	164:20 166:3	226:11 231:9	289:24 291:6
99:16,19 100:9	166:25 167:17	232:13,22	292:9,19 293:3
100:15 101:22	167:25 168:7	233:5,11,20	294:7 295:4,10
102:6,18,25	168:12,22	234:8,14,25	297:2 298:12
103:21 104:7	169:7,17 170:6	235:7,14,19,24	298:20 299:19
104:12 105:13	170:16 171:4	237:21 238:13	299:23 300:1,2
107:18,22,24	172:1,7,17	238:19 239:9	300:19,21,24
108:8,14,25	174:4,12	242:22 245:7	301:1,4 303:3
109:18 111:16	175:19,25	245:13,16,20	303:22 304:7
112:7,22 113:5	176:9 177:2,24	245:23 246:7	304:18 306:12
113:17 114:1	178:9,25 179:8	246:11,13,17	308:1,8,14,16
115:21 116:23	182:12 183:16	246:21 247:3,7	308:18,19
118:12,19	185:23 189:12	247:14 251:16	309:6 311:13
119:17 121:1	189:24 190:6	252:18 253:16	312:11,21
123:1,10,15,19	190:16 191:14	254:9 255:1	313:16,22
124:7,15 127:6	193:3,11,18	256:6 258:14	314:23 315:17
128:1,7 130:1,9	195:4,20	258:20,25	316:8,14,17
132:21 133:8	196:11 200:22	262:5,13 263:1	317:2,5 318:4
133:25 135:8	200:25 201:6	263:20 265:3	318:22,25

319:10,21
320:3,8,21
322:14,25
323:9,18
324:17 325:11
325:24 326:21
327:12 328:11
328:19 329:7

c

c 2:1
cagiano 5:12,14
153:9,14
154:23 156:23
156:25 157:4
157:14 158:16
159:1 160:25
163:1 166:7
173:6 177:13
179:11 180:4
187:25 189:25
192:18 193:5
194:16,24
195:8 196:14
197:24 201:8
201:10,16
203:17 204:3
212:24 213:20
214:17,24
215:8 217:25
219:15,18
223:14 224:12
231:15 232:5
242:10 244:7
244:11 245:4
254:11 297:19
cagiano's
159:25 160:10
161:2 165:4,17
166:17 167:7
174:20 176:14
201:24 214:5
calculate 11:23
35:3 53:19
54:16,19 56:12
61:7 139:1
164:1 173:18
175:8 180:15
181:9,16 182:1
207:7,14
209:19,21
210:5 230:19
232:12 237:7
241:13 243:24
257:8,12,16,24
258:9 272:25
285:2,7,9
323:24 324:4
326:3
calculated
32:10,11 55:23
55:24 57:15
59:12 155:23
165:4 169:18
173:13,23
175:15 179:20
180:13 196:2
216:19 237:17
238:1 241:4,25
242:13 263:7
266:3 269:9
272:25 287:16
287:25 292:3
301:21 303:14
304:6 314:15
324:22 325:8
calculates
232:15 280:24
calculating
23:20 32:5
56:25 58:8
60:13 156:18
156:19 199:6
216:25 244:15
264:23 265:10
266:8 303:6
calculation
33:5 51:3 53:25
55:6,8,11 56:3
64:12 158:9,12
163:21 171:2
176:23 177:16
196:7 207:15
208:18 211:7,7
212:16 239:24
250:22,23
252:23 269:9
278:10 285:13
305:1 310:4
312:10,15,16
314:19 325:9
calculations
12:2,6 22:7
23:23 24:16,20
27:3,16,24 29:1
32:19,23,25
33:3,17,23 34:5
34:16 35:1,3,13
35:18 36:3,25
49:16 52:20
56:5 61:11,14
64:13,15
139:19 155:23
160:21 168:25
171:25 172:3
174:14 181:23
193:20 203:3
206:24 213:19
214:3 228:4
242:14,20
244:1 249:22
250:18 251:5,9
252:2 257:2
263:9 268:9,13
274:7 278:17
280:5 291:18
293:1 294:3
296:3 301:20
310:13 311:8,9
314:24 323:15
323:16 324:20
325:1
calendar 92:16
92:25
call 21:20 41:21
125:13 142:18

called 31:16 43:15 74:19 98:25
calls 21:7,9,10 42:13,19
camp 1:7 7:3 9:21 11:12 15:1 16:15 17:4 22:22 33:12 34:22,25 35:4,8 50:11 54:6,7 59:13 73:5 84:2 86:9 94:2 100:3 106:7 107:12 110:15 113:9 114:12,23 118:7 125:14 131:1 140:4 158:17,23 159:16,20 160:1 163:15 164:3,11,12,18 165:5,19 166:8 171:6,8,14 176:14,20 178:12 179:18 179:19 180:5 182:19 187:8 188:19 189:22 190:8,15 195:11 196:6 220:14 222:18 222:21 223:2,8 248:10 267:1 267:10 271:24 295:20,25 296:6 306:4 314:10
cancer 18:8,8 18:11,11 19:3,3 19:12,12,20 20:7,8 50:19,19 141:6,6 159:25 160:9,11 191:3 194:7,20,23 195:7 217:7,22 218:9,13 222:1 223:15,16 254:13 270:25 272:3 305:18 307:15
cap 261:8
capacity 60:15 60:21 61:8,16 62:18 258:2,10 260:20,23 261:4 290:22 290:25
carcinoma 190:24 191:11 192:2,14 194:18 197:3 197:19 200:6 296:5
care 40:10,12 50:24 51:2,4,6 51:9,18 52:3,4 53:6,12,17,19 53:21 58:7,10 64:20 143:9 169:9 170:1 175:4,18 176:5 178:7 226:19 226:21 227:6,7 227:16,25 228:19,20,22 228:23 229:2 229:11,11,15 229:18,19,22 230:1,3,11,13 231:3,6 232:16 232:18 233:13 233:14,25 235:4 236:9 237:3 240:19 240:23 241:7 241:17,24,24 242:18 243:4,6 243:12 245:2 247:25 248:1 248:21 249:3,7 249:17 250:8 251:18,20 252:10,20 253:3 255:19 255:20 256:8 256:11,15 259:18,22 260:1,14 262:1 262:8,17,19 263:11,13,16 263:24,25 264:7,20 265:12,12,14 265:20 267:24 268:2,4,7 278:6 278:11 279:11 280:21,25 281:10,15,19 281:22,24,25 282:6,7,17 283:18,19,24 283:24,25 284:3,4,7,9,17 284:22 285:11 286:7,25 287:1 287:7,9,24 288:4,13,21 296:16 310:6 310:22 311:4 311:18 323:23 324:23
carolina 1:1 7:6 39:8,9 330:1,4 330:18
carry 288:13
case 1:8 10:9,11 10:20 12:22 13:1 16:14 17:17,23 18:5 20:13,22 21:1 21:14,18 22:19 23:9 26:6,12 30:14 31:10,20 32:12 33:17,24 34:6,17 37:5,16

37:23 38:6,13 38:17,20 39:3,6 39:19 41:11,12 45:2,19 46:17 47:2,3,20 48:7 50:24 52:20 53:12,22 54:21 55:3 56:2 57:24 57:25 58:4,20 58:22,25 59:8 59:11 60:14 64:1 66:24,25 67:6,10,16 76:25 77:23 102:12 105:4 113:19 136:24 137:13 150:7 153:5 156:2 157:3 195:9 207:16 210:11 210:11 258:8 260:1 261:18 296:24 303:8 315:14 317:25 322:3,8 323:13
cases 1:10 19:3 19:11,12 25:24 32:3,4 40:9,15 41:8 46:13 57:22 60:9 61:8 63:17,23 64:5 64:25 65:4,5,11 65:18 137:6 156:16 208:19 210:12 257:12
catch 258:5
categories 64:19,21
category 45:20 103:8 251:13
cause 177:18 330:6,15
caused 171:8 178:16
ccr 1:20 330:21
ceiling 86:3 95:5,8,10 96:19 96:22
cell 296:5
cells 221:1
certain 19:21 55:17 112:19 150:1,19 186:11
certificate 6:20 330:1
certification 49:12
certifications 49:3
certified 49:14
certify 330:5,15
cetera 107:5 234:2 240:6
cfr 162:6 307:7
chad 205:23 206:18 227:5 247:24 255:15 290:12 309:18 319:2 321:3
change 15:18 17:11 69:8 78:19 95:18 96:14 99:7 134:17 167:5 168:5 170:23 171:9,21,22 178:23 189:21 193:5,23,25 195:23 196:6 204:11 215:10 215:24 216:2 220:21 223:5,9 224:7 240:10 268:25 294:23 296:11 322:9
changed 12:15 47:7 68:24 101:17 103:17 103:20,22 160:21,21 167:8,11,16 169:25 199:19
changes 43:13 43:21 69:3 166:14,17,20 167:20 168:8 168:14,18,18 171:19 172:22 173:6 176:19 193:14 196:18 215:4 269:17 272:19 297:24 303:11
changing 193:13 325:16
charged 106:5 115:24 116:1 117:16,18 126:9 128:14
charleston 1:21 330:2,17,17
chart 161:15,18 161:19 163:17 164:19 176:11 180:16,18,18 180:20,23 181:1,8 194:2 194:13 218:11 224:13 240:18 263:24 264:18 265:18 296:23 304:9
charts 181:25 297:17
check 131:25 136:19 273:2
child 220:22
chronic 271:6
chronologically 100:13 134:23
circumstances 312:17
citations 23:1
cites 327:25

claiming 60:6 212:10
claims 11:3
clarification 90:5
clark 1:20
clarke 299:2
class 49:24
clear 13:8 59:11 179:22 245:14 267:7
clearly 32:2
clemson 43:8 48:17
client 89:24
clients 47:15
clja 4:2,5,8,11 4:14,17,19,23 5:7,9 150:15 179:25 180:11 181:13,21 182:23 183:2,7 183:8,11,12,12 183:15,22 184:1,6 199:4 199:10 200:16 219:10,22 222:6 306:5,9 306:17
clock 144:17
close 91:8,12 147:16
cloud 136:16
cmo 21:24
coauthors 140:20
code 82:9,18 94:8 100:19 111:22,25 112:4 123:7,8 124:18,24 187:10,10 189:22 190:23 191:7,19,24 192:9,21 193:1 194:4 197:18 199:19 217:7 220:12 224:17 224:18 270:24 271:4 272:3,13 305:17
codes 187:16 190:4,7 195:15 202:19
cola 269:20
column 84:13 88:12 92:16 179:24 180:10 181:12,16,17 181:18,20 183:22 200:14 219:11,22 285:6 287:13 287:19
columns 241:17 274:17
combination 45:22
combine 161:13
combined 158:22 161:3,7 162:7 189:20 190:13 195:18 198:10,14,17 199:25 200:2,4 200:15 218:19 219:3,11 272:19 273:10 305:25 306:6 306:14 307:5,7 307:18
come 41:7 284:25 325:21
comes 236:17
comma 145:20
commercial 4:1 4:4,4,7,7 80:23 81:6,15
commission 330:22
common 111:17
communication 111:23 112:6
communicati... 13:5,23 19:7 41:24 42:20 70:17,22 89:13 89:25 90:3,20 93:4 95:13,15 97:3 109:15 113:20 128:10 132:17
community 53:6 232:18
companies 10:14
company 43:14 43:20 46:11
compare 273:1
compared 33:13 35:9 165:6 199:2
comparing 204:17
compensate 62:7,17,24
compensated 46:18
compensation 107:12 158:5 158:15 160:24 162:22 180:21 181:3,6 182:21 184:14 186:1 186:10,13,22 189:1 205:9 214:16 215:2 216:18 239:15 271:20 294:15 302:19 303:7 303:14 304:2 307:4,9 314:1,3

314:14
compensations 162:20
compile 36:21
compiled 36:2 109:21 110:1 135:17 182:14
compiles 125:16
complete 298:5 298:8 330:10
completing 131:6
compliance 69:8
compute 253:22 274:6
computer 330:9
concern 254:16 254:24
concluded 329:9
concludes 328:25
conclusion 267:15
conclusions 29:13
concurrent 27:21
condition 163:9 191:6 197:23 306:3
conditions 33:12 35:9 98:20 141:5 158:23 159:13 159:20 161:11 163:2,6 164:4 164:13,15 179:18,19 180:13 182:19 215:24 220:15 267:4 269:24 269:24 295:19 295:24 314:10
conducting 23:18
conferences 44:20
confidential 4:2 4:5,8,11,14,17 4:20,23 5:8,11
confirm 141:20 143:4 222:16
confuse 106:15
confused 169:25 263:23 273:25
confusing 183:10
confusion 199:13
connected 307:15,17
connection 73:4 154:3 216:10 252:7
connections 37:4
consider 140:19 174:10 292:12
consideration 179:2 295:6
considered 5:13,17,20,23 6:1,4,7,10,13 6:15 22:16 36:12 41:3 58:11 86:16,25 87:15 88:1 151:20,21 152:4,18 153:13 195:16 203:23 207:16 214:18 225:21 225:23 226:1,7 244:18 245:21 245:25 247:11 253:18 254:5 255:4 260:20 260:24 277:7 289:17 290:2 298:22,25 299:9 300:6,10 306:21,25 307:12,23 308:11 316:20 317:15,17 320:14,23 321:2,10 322:1 322:16 328:1
considering 261:4
consistent 17:2 17:6 31:1 76:24 78:16 88:15 113:8 126:24 127:17 136:25 154:19 188:16 204:6 259:21 281:13 282:3 283:13
constitute 102:10
consultant 5:3 5:6 67:20 114:21 115:20 117:5,14,14 128:19,22 130:22,24 136:21
consultants 126:4 129:21 129:22
consulting 46:5 46:5 47:23 48:3 59:22 63:9 149:13 154:2 154:13,15 204:4
contacted 9:22 10:24

contain 23:1 151:16
contained 142:7 143:20 144:8 152:1,23 245:9 282:18 298:15 308:4
contamination 73:6
contends 236:2 236:4 261:20 283:2
contention 113:22
contents 85:19
context 102:2 265:17
continuation 127:12
continue 9:8 134:25 169:1 169:10,15,20 170:4,11 173:7 233:24 234:5 235:3,10 262:1 262:7,17,18 263:10,17 283:7,25
continued 272:20 281:14
continues 233:25
continuing 134:22 170:3
contract 3:9,20 3:23 4:1,3,6,10 4:13,16,19 5:2 5:5 9:23 14:17 15:16 75:14 77:15,23 80:23 80:24 81:6,7,15 81:16 82:4,9,17 82:18 83:25 85:5 88:8,23 89:1 91:8,12 92:3,4,24 93:1 94:8 95:4,8,10 95:20 97:6,11 99:11,15 100:17,19,23 101:1 103:3 104:14,18 105:18 106:10 106:17 111:5 112:20 127:2 147:4,15 196:3
contracted 46:12
contracting 150:1,5,19,23
contractor 15:6 16:2,13 46:13 47:10 84:7 88:7 92:8 112:14 145:21 147:1
contractors 48:2
contracts 15:19 77:18 79:4 80:20 85:1 88:17 90:22 93:10,13 99:25 102:11 106:14 107:1 109:3 112:12 149:14 150:14
contributed 138:7
conversations 41:17
cooks 141:17
copies 79:7
copy 14:2,4,5 274:3 300:16 317:2 321:17
correct 8:13,20 8:23 10:16,17 12:2,23 17:24 18:2,5,8 20:22 22:3,7 25:18 26:25 27:8,10 27:17 28:2,5 29:3 34:18,25 35:6 36:12,13 36:19,23 38:14 38:15 40:11 43:9,12,16 44:6 46:6 48:17,21 48:25 49:5 50:7 50:8,12,15,19 50:21,23 51:1,8 51:21,24 52:1,7 52:10,16 53:7,9 53:13,15 54:1,6 54:17 55:18,23 56:4 57:16,19 59:14,18,19 61:21 62:25 63:2,7,14 71:8 72:17 74:15,25 76:8,9,11 77:1 78:1,7,10,11,20 78:21 83:15,21 84:6,10 87:16 89:22 90:12 97:25 98:17 99:3,4 100:11 101:17,20,24 101:25 103:17 111:3 114:3 116:18 117:16 117:19,24 119:18 120:8,9 121:12,16,24 121:25 122:15 122:16,17 123:20 125:10 125:11 127:8 128:11,16 131:3 132:18 133:10,21 134:15 135:1 137:15,18,24 140:1,8 142:9 142:12 143:1

143:11,21	207:10,17	242:25 243:5	274:22 277:20
146:11,18	211:9,24	243:10,13	277:21 278:7
149:1 154:20	212:15,19	244:4,5,22	278:12 281:5,6
154:21 155:8	213:3,12,15	245:22 248:10	281:20 282:1,2
155:12,20,21	214:20,21	248:18,19	283:19,21
155:24 156:11	215:12,17,20	249:3,4,8,9,14	284:1,3,10,12
159:11,14,21	216:3,5,20,25	249:15 250:13	285:3,4,19
159:22 160:3	217:1 219:24	250:20 251:20	286:2,3,8,11
160:12,19,20	222:2,3 223:16	251:22,24,25	287:1,5,6,14,19
165:14 167:8	223:19 224:2,8	252:3,4,21	287:20,22
170:19,22	224:14,21	253:5,19,24,25	288:5,10,11,22
171:1,9,10,16	225:3,8 226:24	254:21 255:8	289:1,2,17
172:10,19	227:22 228:1	255:11,16,21	290:12,16
173:16,24	228:12,16,25	255:25 256:3	292:14,23,25
174:1,7 175:9	229:4,5,8,9,12	256:16,17,20	295:7,9,14,15
175:11,12	229:15,19,20	256:21 257:4	296:6,10,11,21
176:22 177:6	229:24 230:4,9	257:13,17,18	296:22 297:3
177:10,15	230:15 231:6,8	257:20,25	297:10,22
179:4,6 180:12	231:16 232:19	258:17,19,22	299:12 301:14
181:7,10 184:3	233:8,10,16,17	259:24 260:3,4	301:22 302:10
186:25 188:19	233:19 234:11	260:10,11	302:11 304:2
188:20 189:6	235:6,11,13,18	261:5,6,12,13	304:14,24
190:2 191:8,11	235:23 236:5	261:22,23	305:8,12,13
191:24,25	236:10,11,13	263:4,13 264:4	306:15,22
192:3,4,14,15	236:14,17,18	264:5 265:6,9	307:13 308:25
192:17,18	236:22,23	266:8,10,16,17	309:1,4,11,12
193:6,19 194:4	237:23 238:1	266:19,20	309:14,15,18
194:7,10,14,15	238:15,23	267:4,11,20	309:22 311:5,9
194:20,21	239:12,15	268:17,25	311:23,24
196:7,23 197:5	240:1,2,6,7,11	269:2,14,15,18	313:2,6 314:11
197:14,15,25	241:1,11,12,14	269:20,25	314:16 315:3
199:5,6 201:22	241:15,18,19	270:2,7,12,13	315:10,14,16
203:10 204:19	241:21 242:3	270:17,18	316:25 318:8
206:19 207:8	242:10,11,16	271:1 272:14	318:16,17

320:6 322:19 322:20 324:2,3 324:6,7,9,10,14 324:20 330:11
corrected 318:7
correcting 185:18
correctly 109:8 175:15 179:23 199:16,18 200:12 207:5 246:1 310:17
cost 4:22 51:6 105:9 170:15 170:18,21 174:16 215:17 215:22 227:18 227:20 228:22 230:18 232:15 236:2,3 237:18 237:18 239:2,2 243:6,8 244:2 252:9 265:19 265:20 270:14 270:15 280:25 281:24 288:24 303:12
costs 147:3 227:6 229:7 242:18 243:19 243:22 247:25 255:19 260:8 270:11,16 282:9 288:22 289:1
counsel 7:10 13:6,9,13,23,24 19:7 21:8,9 41:24 63:20,20 70:18,19,22 109:15 202:18 203:7 330:15
count 136:22
counted 137:25 139:24
counting 139:8
county 330:2 330:18
couple 18:24 21:7 56:9 69:21 147:9,22 243:2
course 19:10 49:15,18 103:25 105:2 224:2,25
court 1:1 7:7 8:25 19:20 57:2 80:13 108:9 212:12
courts 63:13
cover 100:7 235:16 313:25
coverage 235:20
covered 159:10 169:10
covering 92:24
covers 113:23 187:13
cpa 1:4 3:10 8:7 45:25 49:4
create 25:25 26:6 87:16 274:2
created 326:18 326:24
credence 225:13
credit 58:12 265:19
criswell 5:16,17 203:15,22,23 205:15 206:7 212:13 213:23 214:19,23 216:9,17 219:17,21 223:19 224:1 224:11,24 225:22 232:5 242:9 244:8,11 245:4 249:18 250:3,7 254:12 321:16,21 322:2 327:15
criswell's 205:2 208:12 214:6 215:10,24 217:12 221:4 226:3 231:16
criteria 216:1 262:19
criticism 207:23 211:4 250:21 251:7,9 259:9 278:21 279:1,15 280:10 293:25 294:2 310:21 310:23 311:7 311:25
criticisms 67:10,15 249:25 251:11 256:19
cromwell 42:16
curious 225:20 321:20
current 17:8 51:6 72:16 96:15 99:8 101:14 104:6 105:21 166:6 203:9 229:7 281:23 324:23
currently 51:20 171:2 234:7 235:4 263:12
curriculum 3:11
cut 137:6,11,16
cv 1:8 48:6 50:6 52:12 59:22 63:9 65:2 66:19

72:16

d

d 3:1 38:10
d.c. 2:15
damage 58:12 156:24,25 209:19,21 301:25 302:1 317:20,24
damages 11:1,3 11:4 16:25 33:6 49:16 55:5 63:12 64:16,25 76:21 78:19 154:9 155:17 156:19 205:22 227:3 247:22 255:14 267:17 290:10 301:18 309:16
dan 42:10
data 26:1,1,7 26:14 35:2 54:18,19,23 55:24 59:7 61:16 62:2 123:8 131:18 138:11 159:7 208:12 211:17 298:9 311:17 327:2
date 7:4 30:7 30:21 42:25 47:10 68:23 69:2,8 73:17 74:10,10 75:25 77:11 80:25 81:8,17 82:13 82:23,24 92:11 92:12 97:14 99:16 120:15 121:15,16 122:24 124:21 133:4 134:13 134:18,25 135:1,4,9 136:1 140:4 155:24 158:19,20,25 160:24,25 182:18 183:25 188:16,17 194:12 197:11 198:12 301:21 305:19 318:16 320:4 321:14
dated 135:13 151:18,20 152:2 227:19 228:24 248:7 267:2,8
dates 88:25 99:15 114:3 116:4,6 119:4 135:20 184:21 218:12
daugomah 2:18 7:8
david 2:13 6:9 6:10,12,13 8:2 300:5,6 301:1
david.r.ortiz 2:15
day 69:8 116:12 118:2,15,15 119:5 122:12 122:12 124:24 171:5 179:21 308:17,18 312:9,15 323:10 324:4 324:22,23 325:22 327:5 330:17
days 116:13,17 123:24
deal 328:9
dealing 93:12
dealt 42:4 93:10
death 64:4
deborah 227:8 228:24 248:1 252:20 253:3
december 48:17 77:19 86:7 97:16 114:7,8 135:13 136:2,16 139:18 151:18 151:20 152:2 152:19 165:18 248:7 252:10 267:2,8 271:15 271:16
decide 312:2
decided 25:6
deciding 60:12
decision 19:20 19:21 26:24 27:2,7
decisions 36:16 217:19
deems 266:1
defendant 2:12 230:1
defendant's 229:14,17
defense 11:2 32:2 39:21 58:8 63:20 67:20 232:9,14 259:23 322:16 322:21
deferred 53:24 54:3
definitely 103:19
delaney 2:9
delay 90:25
department 2:13 3:8,19,22 4:21 5:1,4 8:3 13:6,9,18 14:16 16:19 21:11 22:10 31:9,19

32:1 41:18 42:5 42:21 70:13 71:2,9,17 73:8 80:21 84:1 87:3 88:23 89:8 90:3 90:11 91:17 93:11 94:1 104:1 106:21 108:21 109:3,9 110:24 119:1,2 119:8,23 120:11,21 129:9,13 132:24 133:6 133:15 140:3 141:9,11 146:2 146:17 147:8 148:2 159:3 181:5 182:7 214:15 232:17 244:21 261:21 261:25 262:9 262:21 263:10 293:14 307:8
dependent 209:22
depending 163:10 224:9
deponent 66:11 81:23 83:10 155:11 185:22 246:9,12,14,19
deposed 8:20
deposition 1:4 3:12,14,17 7:2 8:19 14:13 65:2 68:9,11,23 69:2 69:23 71:25 109:24 151:23 152:20 163:22 187:19 212:9 220:17 221:18 293:12 311:22 327:13 328:10 328:17 329:1,9 330:5,7,12,13
depositions 299:1,6
depressive 217:23 218:5 224:20 271:5
describe 113:15 123:2 217:16 259:4 310:3
described 34:6 34:20 164:21 165:8 244:14 314:5
description 25:21 73:17 74:11 94:24 98:5 101:3 111:12,18,22 112:24 113:15 113:22 116:16 120:6 121:15 121:19 122:12 122:13 134:5 134:13,14,25 194:7 220:12
descriptions 187:17
descriptive 326:13
detail 73:21 74:6 123:7,22 124:2 127:18 132:22 133:10 146:10 214:11
detailed 112:2 133:3 145:22 147:2
details 149:7
determination 35:2 159:19 160:3,18 195:10 208:25 212:17 213:12 267:18 268:19 272:23 328:14
determinations 34:22 160:19 202:14,16 203:9 223:1 268:24 270:3 296:8 306:19
determine 54:13 61:17 158:18 163:20 164:19 187:7 206:2 211:6 212:13 227:5,9 238:10 247:24 248:2,13 255:18,23 260:6 290:14 309:20 311:2 312:8,13
determined 18:1 27:8 34:5 159:24 209:24 210:18 213:9 238:11 248:16 252:1 315:9,10
determines 25:7
determining 61:25 312:3
develop 171:7 171:13
diagnoses 161:4 189:22,23 222:23 224:19 225:3,5,10,14 269:25
diagnosis 187:16 190:4,7 194:6 220:12 220:15 223:23 224:1,7 294:22
diagnostic 190:23 191:7 191:19,23 192:9,21 194:4 194:6 197:18

199:19 217:7 220:11 270:24 271:4 272:3,13 305:17
dialysis 264:4
die 174:6
difference 60:17 239:3
different 11:2 15:11 44:4 46:9 58:1 61:10,19 64:2,3,6 88:17 106:3,18 109:21 136:23 137:22 161:11 162:11 163:9 187:16 190:14 190:14 192:24 195:15 204:14 214:4 224:19 225:2,5,8,10,14 226:16 227:17 230:18 231:12 239:18,25 243:2 244:8 245:3 249:9 250:7 253:8 260:12 265:13 268:20 272:3 289:6 297:17 314:4 315:22
differential 179:20 183:7
differentiate 258:1
differently 303:5
differing 67:24 68:2
digits 16:3
direct 95:25 147:3 239:2
direction 129:23 138:11 142:1
director 97:23 115:17 126:15 126:25
disabilities 162:11 164:13
disability 11:13 24:13 25:5,15 26:7,13 27:15 27:21 28:19 32:5,11 33:1 34:17 35:10 52:13,22 54:5 54:11 55:9 56:4 56:16 58:4 62:6 62:9,10,16,23 65:6,20 130:5 158:21 159:12 159:13,15 161:3,8,10,11 161:16 163:2 164:19 165:3,5 165:19 166:14 166:18,20 167:7,11,21 168:15 169:3 170:7,11,24 171:8 172:23 173:6 176:2,3 176:11,13,19 176:24 177:14 177:18,19 178:1,2,3,12,17 178:21,24 179:3,7 180:3 182:6 183:23 186:4,6 193:14 194:19 195:11 195:18 196:3 196:23 197:2 197:24 215:5 215:10 216:2 222:9 224:8,13 225:2 242:5,13 253:23 266:25 267:9 268:12 268:16,19 272:25 295:24 296:25 297:24 303:11 314:9 314:22 315:9 325:4
disagree 292:15 292:18
disclose 13:5 41:23 70:21 89:24 109:14
disclosing 90:20
disclosure 13:22 19:6 37:25 95:14 97:2
discount 230:20 242:21
discounted 181:23 230:24 230:25 241:5 242:1 326:4
discuss 37:22 214:24 230:7 250:6 280:23 328:17
discussed 12:12 32:18 52:19 70:25 84:5 93:4 107:3 125:9 126:14 163:21 165:25 204:2,4 204:15 232:5 245:1,3 250:2 251:7 257:11 259:10,15 260:15 266:14 266:23 268:15 278:23 279:3 279:16 280:8 280:11,15 281:22 289:7 294:18 295:11 295:14 302:22

305:1 310:19 310:24 315:24 319:6
discussing 84:3 232:4
discussion 7:16 79:16 109:12
discussions 12:14 13:13 38:1 89:17 283:14
disease 20:5 189:8,17
diseases 18:19 18:23 50:11 174:10
disorder 217:23 218:5 271:6
distinction 46:2
distinguish 60:14
distress 217:24
district 1:1,1
divide 45:18
divided 54:6
division 1:2
dixon 43:21,22 48:20,23
doctor 285:10
document 1:10 14:10,20 15:22 16:9 24:11 26:21 48:10,12 75:22 77:5,7,12 85:19 86:19 87:4,19,23 97:25 98:4 101:16,24 102:21,23 103:1 104:9,21 105:7,9 120:7 121:19 122:14 123:25 124:11 126:5 128:9 131:16,17 132:16 135:11 138:17 202:20 317:6,9
documentation 120:20
documents 3:13,15,18 26:15 33:10 36:6,10,15,21 68:12 70:11 71:2,5,10,20 72:1 73:2 74:22 75:10 76:1 86:13,15,20 87:8,10,10,13 87:15 88:16 106:25 107:11 109:1,4,7,9,17 109:23,25 114:25 142:1 142:10 148:1 148:21 150:1,6 150:19,24 151:16 154:7 158:21 159:6 182:9,11 187:15,20,22 187:23 202:2,4 202:10,11 213:24,25 221:9 293:23 298:9
doing 9:6 32:1 33:22,23 58:3 60:19 61:23 86:9 124:10,23 128:3,12 141:21 157:24 238:14 285:17 315:12
doj 36:7 41:24 57:24 182:11 229:22
dollar 35:23
dollars 119:9
door 132:1
double 139:7
downs 6:9,10 300:5,6 301:5,6 302:2,9 303:5 303:19 304:22 305:14 307:12 307:23 308:3 327:25
downs's 306:25
dr 21:19 22:2,9 38:19,24 39:19 39:20 42:23 53:25 66:25 67:10 142:23 143:4,19,21 144:2 157:18 157:22 158:8 158:11,22 159:12,24 160:2,9,17 164:16 175:11 175:15 180:13 187:11 190:11 195:2 201:20 201:25 202:15 202:17 203:8 213:2,8,13 223:3,6 231:14 231:17 234:6 236:1,12,17,20 237:12,20 238:12,22 239:11 241:10 242:2,19,24 245:2 261:19 264:15,18,24 265:10,24 266:15 267:9 267:18 268:1,4 283:1 285:10 286:19 287:5 287:21 294:11 295:18,23 296:8,17 302:16 304:5

304:16 312:25 313:1,4,8 314:8 315:6,10 320:16 322:17 322:17 323:22 324:8,12,25 325:8
drawn 267:14
drive 2:5
drop 293:5,10 293:15,23
dubravka 37:11
due 122:9 165:4 165:18 248:9 279:11 292:6
duly 8:8 330:5
duration 288:8
dyer 5:22,23 247:8,11 248:9 248:15 249:7 250:1,8 252:15 253:8,12,13,19 253:23 254:12
dyer's 247:10 247:15
dysfunction 222:15

e

e 2:1,1 3:1
eagles 42:10
earlier 31:15 32:18 52:19 63:16 66:23 69:8 93:5 95:13 96:25 98:25 101:9 112:13 127:3 142:24 180:16,19 186:7 203:7 238:21
early 205:8 291:20 293:24
earning 60:15 60:20 61:8,15 62:17 258:2,9 260:20,23 261:4,8 290:22 290:25
earnings 60:7 60:13,14,18,22 61:7,17,20 62:1 256:23 257:4,8 257:12,16,21 257:24 258:2,9 260:17 261:8 261:10 291:1 292:1
easier 185:13 217:4
eastern 1:1
economic 11:1 11:3,4 33:6 44:16 54:22 55:5 63:12 156:18,24,24 301:25 302:1 322:17
economics 44:21 45:3,11 45:21
economist 44:12,14 45:24 46:1
economists 37:7 44:18,24
educate 33:2
education 60:23 216:11 252:8
effect 147:5
effective 80:25 81:8,17 92:12 182:18 184:21 194:12 197:8 197:11 305:19
effort 311:2
eight 94:12
either 18:7 35:10 41:11,20 75:25 87:25 93:17 103:15 112:5 152:1 171:15 202:4 208:20 210:11 227:21 230:2 232:11
elicit 90:1
eligibility 234:1 235:21 283:24 284:7
eligible 177:13 234:9 262:17
emailed 93:16 147:12
employed 10:4 10:8,10 43:11 43:19 46:15 48:19 73:3 147:22 293:13
employee 47:12
employee's 31:5
employees 47:25
employers 44:4
employment 44:8 61:20
encompass 64:18,21 154:12
encompassed 202:11
ended 15:14,14 43:25
ends 76:10,11 78:1,3,6 80:24 81:16 82:9 100:20
engaged 12:14
engagement 83:25 113:11
engagements 60:1

enter 30:7 88:22 118:5,6 118:13
entered 84:1 111:10 122:19
entire 100:8
entities 10:8
entitled 330:6
entity 10:3 44:5
entries 30:20 118:2 121:14
entry 73:16 74:10 194:3 197:13,17 218:14
equals 218:22
equate 307:14
erectile 222:15
eric 132:3
erik 130:11,12
error 272:7
esq 2:4,8,9,13 2:14,18,19,19 2:20
essentially 12:21
established 27:16
estimate 31:23
et 107:5 234:2 240:6
evaluate 155:17 205:21 209:16 227:3 247:22 255:14 290:10 301:17 309:16
evaluated 230:4
evaluation 296:20
events 330:16
everybody 7:19 66:9
evidence 209:22
evidenced 27:3
exact 46:15 121:17 124:20 169:1 233:24 263:11
exactly 95:16 128:6 169:22 191:4 202:3 239:8 269:23
exam 49:24
examination 3:3 8:10 330:8 330:11
examine 140:10
examined 8:8
example 22:25 24:3 26:23 28:12 30:7,21 36:15 53:25 116:7 124:4 132:11 133:12 142:23 159:23 162:25 163:1 169:18 171:5 172:2 173:20 178:11 195:5 196:20 202:13 213:23 235:25 324:12
examples 178:10
exceed 86:3
excel 36:18 221:1 274:10 274:13,15,16 274:19,25 327:21
excels 275:4,7
except 302:14 325:8
excess 181:13 181:21
excuse 144:15 155:22 158:19 209:4 265:25
executed 150:14
exemplary 196:14 323:19
exhibit 3:8,10 3:12,14,16,19 3:22 4:1,3,6,9 4:12,15,18,21 5:1,4,7,9,12,13 5:15,17,18,20 5:21,23,24 6:1 6:2,4,5,7,8,10 6:11,13,14 14:1 14:8 24:5 48:6 48:8 59:21,21 66:20 68:7,10 68:16,17,19,20 68:22 69:3,4,14 69:15,22 71:23 71:23 72:3,6,9 72:14 75:6,12 75:12,19,21,24 76:7,11,15,16 77:4,8,25 78:3 78:6,13 79:11 79:24 80:11,22 81:2,5,10,11,14 81:18 82:6,20 83:18,23 85:10 88:6,8 89:2 90:9 91:20,21 91:23 92:7,23 93:2 94:4 97:9 100:12,14 101:23,23 102:20,24 104:8,11 105:6 105:11 106:24 107:3 108:10 108:11,12,13 109:19,23,25 110:2,7,19 114:6,17 115:23 117:3 119:11 121:2 127:11,14

128:25 130:10
134:2 137:20
138:20 139:16
141:9 145:10
145:11,16
148:10 153:7
153:10,12,15
161:23,24
181:4 182:1
186:18,24
188:8 201:8
202:5,6 203:21
203:22,24,25
205:3,16
214:18 226:6,7
226:9,10 230:7
244:19 245:17
247:9,12,13
253:17 254:3,4
254:7,8 255:3
277:5,9,10
289:16,20,21
289:22,23
298:21 300:4,5
300:8,10,12,13
300:14,15
307:22 308:11
316:19,22,24
321:11,18
327:18,24
328:2
exhibits 3:7
98:24 107:20
108:16,20
146:3 152:17
204:6 323:12
expect 78:25
289:11 308:3
318:11 319:15
319:23
expectancies
172:13
expectancy
155:2,5 172:14
173:2,8,13,17
173:22 174:2,9
174:11 176:18
215:19 241:25
269:5,8,10,13
282:10 285:23
303:12 326:4
expected 60:18
expense 157:9
212:23 213:1
231:18,21
240:20 241:24
267:24 286:25
287:3
expenses 54:1
64:19 157:13
158:6 169:19
227:16 231:11
234:16 238:21
248:21 256:8
266:12 280:21
281:15 282:21
286:14 294:10
302:13 312:24
313:15 324:24
experience
24:24 33:22
44:16 50:10
52:21 53:5
59:22 60:1 61:5
63:9 208:23
209:3 216:11
240:16 252:8
experienced
40:18
expert 3:9,21
3:23 4:21 5:2,5
5:12,15,18,21
5:24 6:2,5,8,11
10:10 14:17
16:13 39:2 40:8
40:23 53:18
63:11 68:3
70:18 76:19
78:17 110:3,8
121:3 122:2
125:2 135:15
135:25 142:19
150:2,7,15
153:7 155:18
156:3,9,25
203:21 205:23
209:7,10
210:11 226:22
227:4 229:22
231:14 232:9
232:14 247:8
247:16,23
248:6 254:3
255:3,7,15
259:23 267:1
275:5 276:13
277:6 289:5,12
289:25 290:11
301:6,19 302:2
302:23 308:4
308:24 309:17
311:4 316:4
318:5,7,12
319:2,11,12,16
319:16 320:9
322:22
expertise 18:10
25:9 51:18
54:21 55:2 63:5
129:7,17 130:4
156:15 323:15
323:16
experts 21:13
21:25 37:4 38:1
38:17 39:19,23
41:6 51:7 66:25
67:4 142:16
144:7 208:20
209:4,4 249:10
287:12 304:13
320:23 323:16
325:14
expires 330:22
explain 115:11
126:1,12 131:8
179:15 182:15

196:13 207:23 211:13 222:7
explained 48:23 56:13 58:16 117:8 147:24 154:7 164:6,9
explains 192:25
explanation 123:12,16 326:10
exposure 159:17,20 248:10
express 240:17 289:11 298:15 319:5
expressed 20:25 45:3 251:19 299:16
expressing 256:18 258:15 265:5 266:18 324:13
expression 141:18
extend 98:6 99:11
extended 98:16
extent 13:21 19:5 20:25 27:13 37:25 56:14 58:3 70:17 87:23 90:19 95:14 97:1 149:3 177:14 206:6 231:1 252:14 256:2 277:22 282:15 290:18 302:8 303:18 303:25 314:18 315:2
extra 162:21

f

f 2:4 5:22,23
face 79:25
fact 167:6 174:5 194:3 197:1 207:13 208:24 209:5 209:12,22 210:12,20,23 210:24 211:5,9 216:17 224:11 225:13 238:9 248:13 257:11 258:21 264:2 266:1,7 312:1 318:15 319:13 321:1
factfinder 312:2,13
facts 64:6 155:2 168:6,8 210:16 210:18 251:8 292:7,15,17 293:16,20,23 311:17 312:2
factual 292:5 294:2
fading 144:22
failed 291:25 292:11
fair 9:13
fairly 72:22
fall 20:18 117:7 129:4 136:9
falling 45:19
familiar 14:19 14:21 38:16 39:18,23 40:1,5 40:24 232:23 254:19
fancher 6:12,13 300:9,11 308:10,12,13 308:14,20,23 310:23 314:4 314:20,25 315:3,19,24 316:3
fancher's 300:17 309:8 310:5 311:3,19
far 12:25 15:23 25:5 115:13 120:2 129:11 129:17 158:7 158:24 176:16 186:21 214:2 226:13 282:16 286:24 287:14 289:6
faults 68:4
favorite 297:16
february 1:4 6:15 7:4 22:16 110:4,9 117:22 118:14 121:4 124:4 127:15 218:21 227:19 330:17
federal 24:6,7 63:12
feel 25:8 151:10 188:6 250:24
female 37:12
field 16:24 44:17 61:5 63:11 76:20 78:18
figure 161:15
figures 35:23 57:1,14,22 59:12 142:25 227:24 230:9 231:2 242:13 287:11 315:10
file 16:15 87:9 210:3
filed 20:21
files 133:20
final 138:8 205:9 207:14 273:24 274:10

finalized 327:2
finally 227:8 248:2
financial 25:24 49:8,11,16 63:12
find 24:15,15 77:11 270:20 306:20
finder 208:24 210:13 211:5,9
fine 66:10 80:8 82:1 144:23 155:13 188:10 200:25 246:13 276:7,9,18,21 300:20,23,25
finished 138:18
finishing 46:13
firm 9:23,25 10:1 126:19 129:9
firms 15:11
first 8:8 9:20 10:24 12:13 15:3,4 16:12 38:9 40:1,1 83:24 86:12 109:22 110:9 110:18 112:1 113:6 127:13 137:10 138:13 138:14 145:9 145:10,11,19 153:17 154:23 157:7 158:24 181:17 183:11 188:18 197:9 198:9 199:23 205:8,21 215:3 219:2 230:16 232:1 236:16 250:12 255:13 259:18 262:12 277:12 278:6 290:5 294:9 301:5,12 309:16
fit 274:17
five 19:18 20:6 21:22 31:23,25 66:9 190:1 244:9
fluctuate 193:2
fluctuates 189:5
fluctuation 189:7
fluctuations 224:12 225:1
focused 23:22 154:16
folder 327:5,6
follow 163:16 185:13
followed 204:23
following 16:19 145:23 197:11 199:24 205:18 277:14 290:10 309:10,11
follows 8:9
footnote 159:10 159:24 202:15 248:4,5 266:24 266:24 295:16 295:20
footnoted 29:14 35:21
footnotes 23:2
forecast 230:17
foregoing 149:25 150:18 151:14 330:5,9
forensic 16:24 25:17,21 37:7 44:9,13,16,18 44:20 45:3,10 45:11,20,21,24 45:24 46:1,5 47:23 48:3 76:20 78:18 129:13 154:8
forensically 54:22
forensics 49:8 49:11 110:24 129:8,24
forget 38:9 187:19
forgot 42:24
form 11:9,21 12:16 16:4 18:13 23:24 24:17 26:3 28:8 33:25 34:9 38:18 50:13,20 54:8,24 56:10 57:3 58:13 64:10 65:7,14 65:22 67:11,25 70:14 71:13 73:9 85:12 86:10 87:17 88:3 89:10 90:16 100:5 101:18 104:3 107:15 109:11 113:12,24 115:14 118:8 118:16 120:23 122:22 127:1 127:23 129:20 130:6 132:19 132:25 135:2 137:2 139:2,21 140:9 141:22 144:11 146:5 146:12 148:4 149:2 150:9 151:1 152:5,24 155:9 156:17 157:16,25 159:4 160:5,13

162:15 163:7
164:7 166:1
167:13,22
171:17 173:25
177:20 178:4
178:22 179:5
182:8 183:13
191:13 192:22
193:16 195:13
196:8 201:12
204:21 205:5
206:8 207:9,18
209:14 212:18
213:4 215:13
216:4 221:6
223:10,20
224:15 225:4
231:7 232:8,20
233:2,18 238:7
238:16 239:5
242:17 245:5
251:15 253:14
264:22 272:17
273:16 275:2
275:10 276:15
277:25 279:23
280:18 286:9
286:20 291:3
291:21 295:1
302:25 303:20
312:4 322:10

formal 74:21

format 73:23
134:18,25
274:25

formed 38:23

forms 317:21
317:24

formulas
274:17,23,25
275:8 327:22

forth 43:25
172:19

fortis 146:11

forvis 5:7,9
10:2,11,12,19
15:10,14,16,20
19:2 21:17
22:11 29:22
30:6,19 31:2,3
31:10 43:12,15
44:1 46:9,10,10
46:13,17,21
47:13,15,18
48:24 73:24
74:17 84:2,9
85:8,10 86:8
87:3,5 88:9,21
89:8 91:8,12,16
92:9 93:9,25
94:13 95:20
97:23 100:1,2
102:12 104:1
105:3 106:6,20
106:22 110:14
110:24 111:11
113:10 114:21
118:5,25 119:9
120:11,19
122:20 126:15
126:17 129:3
129:14 130:12
131:25 132:24
133:3,9,21
140:3,24 141:4
146:1 147:7
148:25 205:1

forvis's 90:10

forward 47:6
122:8 134:22

forwarded
93:16

forwards 139:8

found 31:10
40:17

foundation
18:14 24:18
57:4 58:14
67:12 68:1
70:15 71:14
73:10 85:2,13
86:11 87:18
89:11 90:17
100:6 101:19
102:4,14
111:14 112:16
113:2 118:9,17
120:24 122:23
123:5 130:7
133:1 135:3
140:10 141:23
146:13 148:5
149:3 152:6,25
160:6,14
162:16 166:22
167:14,23
169:5 170:13
171:18 172:11
177:21 178:5
189:10 195:14
196:9 202:7
205:6 209:2
210:1 223:11
223:21 233:4
234:21 286:10
307:24 312:5
312:19 322:11

four 14:6,6
15:24 16:3 42:1
65:3 75:14
104:14 105:15
120:6 121:23
125:9 185:3
244:9 254:10

fourth 162:4

frame 31:6
85:16 114:4
192:19 220:6

frank 5:25 6:1
255:4,5

free 151:10
188:6

frequency
288:8

front 24:4
66:21 75:7

104:13 123:17 135:11 153:18
fryar 40:2,3,3 41:9 227:19 229:10 233:14 249:13 251:23 270:16 281:1 288:25
fryar's 227:25 228:2,14 232:12 236:21 237:20,22,24 238:10 256:11 266:2 269:8 324:22 326:2
fryer 227:20
fryer's 285:11
full 8:15 31:3 49:21 60:22 164:10 215:3 330:9
fund 260:7
funding 86:3 96:19,23
funds 24:8
further 21:24 59:9 119:10 120:1,20 132:22 133:9 133:20 168:13 174:19 176:10 203:12 259:13 327:12 328:20 330:15
future 28:14 50:25 51:12 53:13 54:19 64:20,24 169:19,21 170:5 173:23 176:16 179:3 181:22 193:4 193:15,23 195:10 196:3,7 208:17 215:11 216:3,18 225:14,17 227:6 228:19 228:20,22 230:12,19,24 231:11,21 232:16 233:7 233:15 234:15 236:9 237:3 240:19 241:16 241:24 242:7 247:25 248:20 249:3,7 251:18 252:10 253:22 255:19 256:8 256:15 259:18 260:7,14,17 262:9 263:6,25 264:7,20 265:20 266:3 267:24 268:7 280:24 281:9 281:19,22,24 282:17,21 283:8,18,19 284:1,17,21 286:7,24 287:7 287:23 295:6 303:7,14 304:1 313:13,18 314:14

g

gain 62:12
game 91:2
gather 328:14
geared 25:14
general 23:7 24:12,25 25:3 25:21 116:16 120:5 121:18 122:13 134:5 134:14 135:21 138:12 162:24
generally 30:6 30:9 31:2,24 40:17 64:7 89:19 132:2 156:3
generic 205:10 211:1
georgetown 2:10
getting 138:9 138:14 199:7 300:1
give 25:20 41:19 42:25 80:13 90:2 101:21 102:2 123:21,23 155:10 162:21 162:24 166:6 210:20 300:8 315:5 322:6 326:2
given 17:16 28:2 32:16 103:11 141:17 174:5 187:17 220:9 320:22 330:11
giving 326:6
glad 321:17
go 7:13 15:18 26:18 27:6 31:14 35:23 41:2 44:20 59:8 70:4 72:15 73:1 79:12,21 80:1 80:12,15,19 84:12 85:18 86:19 87:4 90:23 94:24 98:4 99:5 108:1 108:10 125:1 136:15 138:5 141:11 148:9 149:10,17,19 150:16 151:4 154:22 158:5 158:14 165:16

166:5,12 168:20 182:21 187:3 188:25 189:13 190:21 191:18 192:8 194:2 196:17 197:16 198:18 198:18,19,19 205:16 213:11 214:10 217:2 219:3,4,7 231:5 236:19 238:20 240:4,12 241:6 246:22 255:10 270:19 272:11 276:19 287:25 297:11 300:7 301:8 311:1 315:20 321:11 323:13,20

goal 291:10

goes 47:22 63:10 110:10 114:17 132:1 137:20 144:12 199:22

going 9:12 14:1 21:23 24:4 34:24 41:2 48:6 57:1 58:17 59:20 65:24 68:6,10,18,22 70:20 72:5,14 75:11,21 77:3 77:23 79:8,10 79:20,21,25 80:11,14 91:20 94:4 95:25 97:9 100:10 102:20 104:8 105:6 106:23 107:2 107:19 108:8 108:10,15 114:5 117:2 121:2 122:1 125:21 126:11 129:1 130:10 134:1 138:20 144:19 145:9 146:22 148:13 149:9 152:9,13 152:14,21 153:4,6,12 154:8 156:7 157:6,22 158:3 162:24 166:4 170:17 172:21 174:19 193:25 195:5 196:13 196:16 198:21 200:23 202:24 203:14,20 204:9 206:11 206:21 212:21 213:17 215:1 216:8 219:8,23 226:4,5,12 227:3,14 228:18 230:6 231:10 239:13 240:12,17 243:1 246:3,4 246:10 247:4 247:17 251:17 254:1,2 255:6 259:17 260:17 261:14 263:22 266:12,21 277:4,12,13,23 278:4 279:5,25 280:21 281:21 282:20 284:14 286:13 288:2 289:19 290:5 290:21 293:4 294:8,14 296:13 300:3,7 302:12,18 304:21 308:9 309:2 313:25 314:13 315:20 316:11,18,18

golkow 7:8

good 8:12 9:6 66:1,5,9 92:7 144:18 145:6 188:10 200:20 276:3

goodman 43:22 48:20

googling 23:8

gotcha 139:10

gotten 199:8

government 11:6,11 16:13 24:14 51:10 52:3,13 53:5 56:14 57:1 58:10,17 65:21 89:18 90:22 112:13 157:15 168:25 169:11 169:14 213:9 232:10 234:19 234:23 235:3,9 248:8 262:20 265:21 270:11 270:16 275:14 275:17 283:17 288:21 289:1 304:23

government's 266:3

grab 198:20 219:5 246:15

graduated 48:16

grayed 84:13

great 66:12 274:16 299:25

greater 222:23

gregory 322:22

group 2:8 7:23 7:25 8:1 37:7

groups 152:16
guess 12:13 14:6 19:17,20 24:1 28:1 34:11 34:24 41:25 49:21 54:9 58:8 58:15 60:13 74:8 77:24 93:10,17 122:20 129:18 130:14 131:5 131:13,14 132:15 135:4 140:12 147:25 157:23 164:14 183:10 193:10 198:21 208:13 210:22 213:11 219:8 220:22 230:13 237:13 249:25 285:17
guessing 8:19 162:7
guidance 223:4
gumb 43:23,24
guys 149:6

h

hackett 318:6,8 318:13,23
hager 130:17
half 46:11 86:21 137:11 174:6,7 192:19
hand 68:22 72:5 75:21 102:16 106:10 108:8,15 153:7 153:12 203:20 226:5 254:2 277:4 289:19 300:3,21 316:19 321:17 330:16
handed 161:23 253:18
handing 14:10 100:11 247:9
happen 171:11 223:19
hard 250:24
hardcopy 275:1
harley 130:17 130:18 131:24
hartwell 299:2
heading 153:24 157:7 158:3,15 198:24 206:12 227:15 230:12 257:3 259:18 293:10
headings 306:10 326:12 326:18,25
health 279:10
healthcare 52:14 213:10
hear 41:16
heard 18:24
hears 209:5
held 50:1,3
hello 21:21
help 24:16 131:15 138:11 274:25 278:11 306:11 310:6 327:2
helped 142:17
helping 131:18
henry 143:19 143:21 144:2 231:14 232:2,5 232:6,14 233:22 234:16 234:19 236:1 236:12 241:20 243:14,19,25 245:2 261:15 268:10 270:11 270:17 282:22 287:8,22,23 288:22 289:2 324:8,18
hereunto 330:16
hidden 221:1
hide 274:17
hierarchy 115:11 117:7 126:13 129:5
higher 174:3
highest 163:11 219:1
hired 9:20 10:15,20 43:24
historical 180:21
hit 90:22
hodgkin's 296:4
hold 44:11 327:13 328:12
home 279:10
hope 145:6
hopefully 316:14
hospital 24:7
hour 46:24 47:1 47:19 65:25,25 117:19 118:14 124:5 126:9,20 200:24 207:7 207:14,20 208:1,3,5 211:23 212:2 312:9,15
hourly 46:19 46:23 47:11,14 85:4 95:18 115:23 117:16 119:6
hours 20:12 31:5 49:19,22 73:13 74:3

111:6,11,18
112:21 113:23
114:3 116:8
118:7 119:5
120:2,4 121:11
122:11,18
123:24 124:21
126:6 127:19
127:20,20,21
128:3 132:12
132:16,23
133:18 134:4
135:20 207:20
208:6,7 209:23
211:6 212:13
279:10
household
64:22 206:15
207:7,15
208:21,25
209:10,25
210:4 212:10
212:14 250:11
251:12 259:2,3
259:10,15
279:7,25
280:10,16
howard 6:6,7
290:1,19
291:14,19
292:6,12
294:17 297:12
298:14 299:22
327:23
howard's
293:12 295:25
297:5 298:24
hudson 2:19
hughes 43:21
43:22 48:20,24
huh 9:7,8
218:19 300:18
hunter 299:2
husband
278:11
husko 136:8,14

i

idea 94:21
identified 29:9
65:18 87:24
152:23 158:8
202:4 248:8
321:11
identify 7:10,19
80:15 295:19
illness 160:1,2
160:10,11
163:3,15 164:3
171:7,14,15
176:14,21
178:13,24
180:5 184:8
194:23 195:7
195:12 196:4,5
254:20 267:16
296:1,6
illnesses 178:8
178:20
illustrations
250:18
illustrative
206:24 249:22
251:4 278:9,17
280:5 310:4,13
impact 195:21
322:1
impacted
178:20
imply 315:13
improvement
177:18 178:1
inception
113:11
include 16:18
73:13,13,16
120:7 121:19
122:14 128:9
142:24 143:1
147:3 210:4
274:17 315:6
included
112:25 132:16
148:15 243:19
253:13 274:8
288:9 316:3
includes 73:1
113:19 148:19
180:8,9 183:8
239:7 304:12
305:25 310:4
including 168:8
169:2 215:9
315:19 326:24
incorporate
143:10,20
incorrectly
245:24
increase 88:25
89:7 90:15 95:4
96:19 103:23
170:14 218:4
230:17
increased 90:11
95:11 96:23
117:23 165:5
165:18
independent
46:12 47:10
48:1 159:18
261:24 266:19
267:15 286:4
296:20 313:12
independently
143:25 155:7
243:24 325:13
325:20
india 125:22
indicate 30:23
186:24 188:17
202:14 260:6
264:17 303:10
313:4
indicated 27:14
66:23 72:7
88:17 103:2,15
127:7 187:1

269:5 271:9 272:4 317:14 325:2
indicates 319:1
indication 114:2 116:11 116:15
individual 38:9 41:6 106:13 118:1 121:12 121:14 123:24 125:22 127:18 162:10 183:24
individual's 167:21
individually 323:20
individuals 21:17 30:19 48:1 51:3 100:2 115:12 120:6 121:23 125:10 125:18 128:25 129:10,16 130:25 131:11 138:7 140:18 299:1 324:12
inflation 230:23 242:20 263:6 285:22
inform 32:18
information 26:18 28:2 36:1 61:13 73:7 112:20 122:20 124:1,22 142:7 143:4,10,14,20 144:1 151:16 154:25 155:1,6 155:6 159:2 167:4 182:4 205:10 213:3 213:13,22 214:6 221:5,8 221:22 224:14 274:20 275:3 287:13 297:9 302:16 326:25 327:18
informed 11:20
initial 131:22
initially 137:6 284:5
injuries 33:11 279:12 292:7
injury 32:3 63:17 64:4 188:19 190:9 248:9 271:24 307:15
input 30:24 74:14 111:17 131:18 138:11 205:7
inputs 327:2
inputting 287:11
insomnia 271:5
instance 213:8 296:4
instruct 13:21 41:23 70:21
instruction 70:16 90:18 93:3 95:12 96:24
instructions 112:12
insurance 24:7 24:8
intend 21:1 57:13 62:22 201:8 245:8 253:12 276:11 279:2,20 281:17 282:16 298:15 316:2 317:13,23 318:18 319:5
intended 62:6 62:16,24 180:2 182:16 187:14
intending 258:1 264:17 278:21 290:24 315:12
intends 328:3
intention 221:3
interchangea... 291:2
interested 330:16
intern 126:3
internet 22:19 23:4 25:14 27:13,14,19 28:7,25 29:5,8 29:12 32:17 52:18
interpreted 56:23
interviewing 210:6
introduction 154:23 155:16 156:22 205:17 227:1 247:18 247:20 255:10 277:13 290:6 301:8 309:2,8
investigation 232:25
investment 260:8
invoice 110:18 112:9 113:6 116:1,6 118:21 119:19,22 120:7,12,20 121:7 122:19 124:12 126:21 128:8 130:4 131:20 132:7 133:12 134:6,7 134:10 136:15 145:22 148:1

invoices 5:7,9 72:25 73:11 74:6 86:3 91:4 97:6 107:4,11 110:14 115:12 123:21 127:12 127:17 129:12 133:5 134:3,20 134:24,24 138:22 139:23 140:12,19 141:8 146:1,8 148:18
involve 12:5 13:22 19:6 37:25 58:4 65:4 65:5,12,19 70:17 89:9 90:3 95:14 97:2
involved 18:19 37:15 38:2 41:8 46:14 57:21 64:1 66:25 67:19,24 84:25 113:8,9 140:25 168:25 169:11 201:20 205:1 208:19 235:9 283:15
involvement 231:1 245:1 282:22
involving 60:1 65:20 168:8
issue 50:11 67:18 206:23 207:6,12 212:15 249:1 249:19 250:16 251:2 256:14 257:6,17,22 258:21 259:6 278:15 280:3 281:8,18 292:13 293:1 310:11 312:16
issued 19:23 131:21 136:18
issues 208:14 286:6 292:2 311:12
item 242:18 265:9 321:15
items 4:1 80:24 156:14 190:15 214:14 230:18 234:6,10 264:16 265:11 265:14,25 266:1 287:25 288:7

j

j 22:2
j.d. 205:23
jacqueline 6:3 6:4
january 9:24 37:18 86:7 98:7 98:18 117:22 127:15 139:18 218:17 321:13 330:22
jefferson 5:15 5:17
jenna 2:4 7:21 65:24
jennifer 93:17 97:20,22 99:21 126:12,20 127:19 128:15 131:13 133:18
jfb 2:6
ji 21:19 22:2,9 42:23 53:25 142:23 157:22 158:8,11 159:12,24 160:2,9,17 175:11,15 180:13 187:11 190:11 201:20 201:25 202:15 202:17 213:2,8 213:13 231:17 238:22 239:11 241:10 242:19 248:7 266:15 267:2,9,18 268:4 286:19 287:5,21 294:11 295:18 296:17 302:16 304:5,20 312:25 314:8 315:10 324:12
ji's 143:4 157:18 158:22 164:16 195:2 203:8 223:3,6 295:23 296:8 313:1,4,8 315:6 323:22 325:8
jimmy 5:19,20
job 9:7 12:21 230:17
joined 48:20 293:23
jordan 114:18 114:20 115:19 116:25 117:11 117:13,15 127:20 128:18 131:13 136:8 136:12,14
journals 44:23
judge 209:15
july 184:24
jumped 231:25
june 125:3
jury 212:12
justice 2:13 3:8 3:19,22 4:21 5:1,4 8:4 13:6 13:10,18 14:16 16:20 21:11 22:10 31:10,20

32:1 41:18 42:5 42:21 59:13 70:13 71:2,9,18 73:8 80:21 84:1 87:3 88:23 89:9 90:4,11 91:17 93:11 94:1 104:2 106:21 108:21 109:3,9 119:1,2,8,23 120:11,21 132:24 133:7 133:15 140:4 141:10,11 146:3,17 147:8 148:2 159:3 182:7

k

k 184:13 185:25 186:9 187:5,8 222:6,10,17 223:2,8
katharine 130:20
katherine 131:24
keep 14:7 30:6 30:10,19 112:14 246:3,9 246:10 316:10
keeping 30:13
kept 29:16,22 74:9 77:23
kidney 18:8,11 19:3,12,19 20:8 50:18 141:6 264:3 270:24 272:2,12 305:18
kind 11:7 30:5 33:11 45:21 61:24 63:25 64:4 84:12 89:13 132:5 144:22 185:13 204:21 258:4 266:18
kingston 114:18,20 115:19 117:15 127:20 128:18 136:12
kingston's 116:25
kitchen 141:18 246:18
klotzbucher 2:14 8:3
knee 200:7,7
know 8:18,22 10:18 16:6 18:22,25 19:1 23:8,13,17,19 29:21 30:3,12 31:9 33:9,13 35:14 36:1,6 37:11,15,21 41:13 60:22,23 66:7 70:25 71:1 71:17 73:7,11 73:12,21 74:19 74:21,24 77:9 78:22,24 90:14 91:7,11,15 92:23 93:9 95:8 95:10,16,17 96:22 98:12,23 103:12 104:4 105:1 106:11 106:16 112:23 118:23 126:5 128:6 129:22 129:23 130:8 131:16,18 134:17 137:9 138:12,12,17 141:3 144:16 147:7,21 150:5 150:10 152:15 164:9 167:16 168:21 171:10 171:20,23,24 174:25 178:7 178:23 187:9 191:4,5 195:21 195:25 200:11 202:3 210:2 217:15 220:11 220:14 222:12 223:22 238:25 239:3 246:2 254:14 266:22 272:5,7 274:14 274:16 275:20 275:25 276:1 291:16 299:8 307:21,25 317:3 318:24 320:1 326:13
knowledge 10:7 30:18 46:25 50:9,18 52:21 61:3,6 77:13,20 83:24 93:24 141:3 146:1,7 275:19
knowledgeable 40:18
known 67:19

l

l 2:14
label 199:10 290:24 291:9
labeled 14:14 219:22 258:17
labels 14:11
labor 103:7
lack 292:17
lamacchia 2:8 7:12,24,24 80:4 83:15 107:21 245:18 246:18 300:18
language 191:11 192:1,3

270:25
laramore 5:19 5:20 226:4,8,21 227:12 228:23 233:15 234:9 234:15 240:1 243:2 244:9,18 245:9 248:23 253:1 254:12
laramore's 226:6,17 232:7 239:20 240:5 244:25 245:16 245:24
large 330:4
late 9:22 10:25 308:17,18
laura 115:2,5 115:18 117:10 117:11,17,18 126:17 127:7 131:13
lawyer 13:17 57:25
lawyers 21:11
leadership 7:23 8:1
learned 327:20
leaving 126:17 126:17
lectures 50:2
led 106:25
left 14:14 46:10 46:17 47:9,13 47:18 97:20 101:1 120:15 127:7 131:14 163:16 164:17 195:19 200:7 219:3,6 248:17
legal 2:8 7:25 19:20 149:18
legally 210:3
lejeune 1:7 7:3 9:21 11:12 15:1 16:15 17:4 22:23 33:12 34:22,25 35:5,8 50:11 54:7,7 59:13 73:5 84:2 86:9 94:2 100:3 106:7 107:13 110:15 113:10 114:12,24 118:7 125:14 131:1 140:4 158:17,23 159:16,20 160:1 163:15 164:3,11,12,18 165:6,19 166:8 171:6,8,14 176:14,20 178:13 179:18 179:19 180:5 182:19 187:8 188:19 189:23 190:8,15 195:11 196:6 220:15 222:18 222:21 223:2,8 248:10 267:1 267:10 271:24 294:23 295:20 295:25 296:6 306:4 314:10
lend 225:12
lengthy 72:23
leslie 2:8 7:24
letterhead 132:5
letters 149:14
letting 312:1
level 115:8
license 45:25 49:4
licenses 49:3
life 40:10,12 51:2 53:17,19 53:21 58:7 143:9 155:2,4 170:1 172:12 172:14 173:2,8 173:13,17,21 174:2,9,11 176:18 212:5 215:19 226:19 226:21 227:7 227:25 228:23 229:2,10,11,14 229:18,18,22 230:1,3,11 231:3,6 241:23 241:25 243:4 243:12 245:1 248:1 251:20 252:20 253:3 255:20 256:11 259:22 260:1 265:11,12 268:1 269:4,7 269:10,13 270:9 281:25 282:5,7,10 285:11,22,22 287:1,9 288:4 288:13,21 303:12 326:4
lifetime 224:2
likelihood 283:7
likely 124:2
limited 13:10 156:15 304:1
line 89:20 129:4 135:16,25 136:3 162:4 264:12
lines 94:16 147:19
lioy 130:11,12
list 5:13,17,20 5:23 6:1,4,7,10 6:13 22:16 36:12 41:1,3 86:16 87:15

88:1 151:19,20 151:21 152:3,4 152:18 153:13 203:23 214:19 222:15 225:21 225:23 226:1,8 244:18 245:21 245:25 247:11 253:19 254:5 255:4 267:3 277:7 289:17 290:2 298:21 298:25 299:9 300:6,11 304:10 306:21 306:25 307:12 307:23 308:11 316:21 317:17 321:8 328:1
listed 67:7 87:21 114:4 157:19 164:16 220:9 267:14 298:9 307:2
lists 317:15 320:23 321:2,6 321:10 322:1 322:16
literally 246:20
litigation 1:7 7:3 9:21 10:5 12:7 15:2 17:4 34:25 49:17 50:11 52:5 55:19 73:6 86:9 91:18 94:2 100:3 106:8 107:13 110:16 113:10 114:12 118:7 125:14 129:19 131:2 150:15 168:24 180:6 194:25 196:6 201:20 274:8 275:21 317:14
litigative 5:2,5
little 26:4 65:25 79:5 109:21 162:21 185:12 193:1 227:17 231:12 253:4 263:23 265:12 271:22
live 43:2 173:16 174:1 269:4,13
lived 43:5,6 211:21
living 62:9 170:15,18,21 172:4 174:16 215:17,22 303:13
llamacchia 2:10
llc 2:8 46:5,6,8 47:23 48:4
llp 15:7,9 48:21 84:6,7 85:8 94:13
lobby 8:12
local 211:21
located 7:5
location 1:15 330:7
long 43:5 108:18 246:2 316:12
longer 42:7 115:7 117:6 130:21 141:16 172:14 173:17 174:1
look 11:1 17:22 28:13,18 33:10 41:5 44:3 57:25 61:16,20 62:2,4 64:24 69:22 75:22 78:12 86:20 88:7,11 90:4 92:3 97:14 98:3 106:19 107:8 109:19 110:18 114:16 134:23 136:3 139:6,22 141:4 145:15 150:12 151:5,12 153:17 159:23 167:15,18 174:24 179:24 182:20 184:20 185:11 188:1 188:21 190:17 191:18 192:8 196:15,25 198:8,10,14,17 198:23 202:9 209:15 210:7 214:17 217:3,4 217:5 218:12 219:15 222:4 226:14 234:22 240:18 244:17 260:18 266:24 270:22 286:23 288:3 301:5 322:5
looked 22:18 49:2 56:20 72:16 73:11 75:5 76:13 86:23 87:11,20 87:24 93:1 98:24 100:4 109:2 112:12 115:13 127:3 127:18 129:11 129:17 132:2 134:3 141:8 145:12,13 146:3 148:3 150:7 154:6,17 165:10 186:19 197:17,22

199:18 220:24
223:14 226:18
239:21 240:25
244:7,10,20
248:22 305:7
305:11 317:15
317:16 326:11
looking 11:8
15:21 23:12
24:12 25:14
61:15,22 66:19
69:14 83:23
88:16 89:2 90:9
96:5 110:2
113:6 115:22
132:7 133:14
135:15,24
136:3 137:20
139:16 148:14
176:10 181:4
182:23 184:18
185:19 187:21
187:25 188:10
188:12 194:1
205:2,15
218:11 220:2
221:25 224:17
231:11 256:7
267:22 270:5
273:6 290:5
295:16 297:5
297:18 308:21
323:10
looks 48:16
98:16 113:7
126:8 128:17
134:24 136:17
137:21 198:15
200:9 224:18
244:6 271:3
272:18
losing 186:10
186:11
loss 60:2,5,6,8
60:12,13,14,15
60:18,20,21
61:7,8,19 62:1
62:17 208:10
208:25 210:4,6
212:2 260:19
260:23 261:4,8
261:8,9
losses 208:4
306:1
lost 33:6 207:7
208:21 209:24
209:24 211:24
212:10 222:10
222:12 257:8
257:12,16,21
257:24 258:2,9
258:9 291:1
lot 19:22 36:6
40:7 86:13
137:4 139:23
151:9 205:1
266:23 315:21
325:12
lots 41:14
lower 185:11
lowest 163:11
lump 260:8
lunch 138:6
144:18 145:2,6
lymphoma
296:4

m

m 3:10 5:12,15
5:18,21,24 6:2
6:5,8,11 153:8
m.d. 248:7
267:2
ma'am 328:24
made 11:11,12
17:23 22:7
23:23 27:3
34:16,21 35:1
35:12,18 36:25
56:16 144:7
159:18 166:19
168:17,18,19
170:18 172:8
172:13 173:16
174:14 189:18
213:18 214:2
215:9,12
242:14 254:23
268:9,13
272:22 278:23
291:19 294:3
295:13 306:19
330:8,10
maff 1:4 3:10
8:7
magnitude
141:1
main 111:25
131:15
make 12:2 18:2
19:25 29:1
32:19 33:3 34:5
34:16 36:2
52:19 56:2
59:10 79:10
87:1 97:5
135:10 177:11
178:16,19
179:10,23
195:6 199:15
199:17 202:16
202:25 207:14
209:17 211:20
211:23 212:25
213:12 222:25
243:3 267:6
269:17 270:2
270:20 279:2
292:22 313:12
313:25 326:16
327:9 328:13
makes 208:24
311:2
making 91:3
139:7 170:10
179:2 268:23

274:5 284:10 285:15,16
management 77:24 115:1 120:7 121:19 122:14,21 123:9,25 124:11 126:5 131:17 138:18
manager 115:6 115:18 117:13 126:18 130:18
managers 129:22
managing 110:23 115:16 115:17
manner 30:20 32:11 58:1 112:13,20 169:1 204:19 213:18 233:24 240:9 302:4
march 49:8 120:16 158:18 184:22 185:5 188:2,13 305:19
marjorie 318:6 318:8,12
mark 5:12,14 14:1 24:5 48:6 68:6,10,19 71:22 80:14 83:2 99:18 104:8 105:6 107:19 108:9 108:11 153:8 153:13 321:18
marked 14:8 48:8 68:17,20 72:3,6 75:11,19 77:3,8 79:11,22 80:18 81:2,11 81:18 82:6,20 83:18 100:10 100:14 102:20 102:24 104:11 105:11 108:12 108:13 153:6 153:10,15 203:21,24,25 226:9,10 246:1 247:9,12,13 254:3,7,8 277:5 277:9,10 288:7 289:20,21,22 289:23 300:4 300:12,13,14 300:15 316:19 316:22
market 61:16 62:2
marking 71:23
markow 130:20
married 136:10
mason 115:2,5 115:18 117:10 117:18 127:7
master 49:7,10
matching 220:25
material 327:6
materials 5:13 5:17,20,23 6:1 6:4,7,10,13,14 22:14,15 23:15 36:11 41:3 86:16,25 87:14 87:25 151:9,19 151:21 152:3 152:16,18 153:13 203:23 214:18 225:21 225:23,25 226:7 244:17 245:21,25 247:11 253:18 254:5 255:4 277:7 289:16 290:1 298:22 298:24 299:9 300:6,10 306:20,25 307:12,22 308:11 316:20 317:15,17 320:14,22 321:2,5,10,12 321:25 322:15 328:1
math 131:25 136:19 176:25 187:1 218:24 238:5,15,18
matter 7:3 22:11 29:17,23 93:22 124:19 154:3 156:9 157:2 169:9 216:10,13 252:7 322:9
matters 49:17
maximum 85:15 90:23
mazars 10:2,11 10:12,19 15:10 19:2 21:17 22:11 29:22 30:6,19 31:3,10 43:12 44:1 46:9 46:10,13,17,21 47:13,16,18 48:24 73:24 74:17 84:2,10 85:9,10 86:9 87:4,5 88:22 91:16 92:9 93:9 93:25 94:13 95:20 97:23 100:1,2 104:1 105:3 106:6 110:14,24 111:11 113:10 114:22 118:6

118:25 119:9 120:11,19 122:20 126:16 129:3,14 130:13 132:24 133:9,21 140:3 140:25 141:4 146:1,11 147:7 148:25
mazars's 15:20 31:2 102:12 205:1
mean 14:21 22:22 30:15 35:4 64:3 129:8 129:21 131:8 135:9 161:8 163:13 177:3 263:19
means 94:17 147:20 238:25
meant 66:2 208:2
medical 24:8 51:7 53:18 54:1 58:10 64:19,20 157:9,12 158:6 169:15,19 175:4,18 176:5 193:24 212:23 213:1 227:6,16 228:19,20,22 230:12 231:11 231:18,21 232:16 234:15 236:9 237:3 238:20 240:19 241:7,16,24 242:18 247:25 248:21 249:3,7 249:9,17 250:8 251:18 252:10 255:19 256:8 256:15 259:18 260:14 262:1 263:15,24,25 264:7,20 265:13 266:12 267:24 268:4,7 278:5 280:21 280:24 281:9 281:14,19,22 281:24 282:17 282:21 284:4 284:17,22 286:14,24 287:3,7,24 294:10 296:15 302:13 310:22 311:18 312:24 313:15 322:5 323:23 324:23
medicare 24:9 24:14 28:14 51:11 53:2 234:19 283:3,7 284:8 285:11 286:1,5 313:24
medicine 50:7
meet 21:21
meeting 21:21 112:6
meetings 42:13 42:20
member 105:24 112:21 142:17
members 137:13 205:7
mentioned 142:24 186:7 261:15 307:19
merger 15:12
mergers 15:11 43:25
mess 90:24 188:7
met 8:12 21:19 37:6,8,15,17 39:20 41:20 42:23
method 207:6 244:15
methodologies 249:2 256:14 257:7,23 258:22 281:8 281:19 292:25
methodology 64:8 163:19,25 164:6,10,21 179:12 213:18 239:18 240:8 241:23 242:9 244:14 263:5 268:14 289:6 292:3,14,21 294:16 302:20 311:11 314:5 315:23
michael 5:15 5:17 40:3 42:14 227:19 255:20 260:25 268:10 270:16 281:1 282:1 288:25 326:2
microphone 247:5
middle 15:18 149:11
miller 143:19 143:21 144:2 231:14 232:2,6 232:7,14 233:22 234:6 234:16,20 236:1,17,20 237:20 238:12 241:20 242:2 242:24 243:15 243:19,25 245:2 261:15 264:18,24 265:10 268:10 270:11,17 282:22 283:15

285:14,25 287:8,22,23 288:22 289:2 324:18
miller's 170:2 236:12 237:12 237:23,24 263:3,18 264:15 265:24 285:10,17 324:8,25
mind 41:7 317:4
mine 80:13 254:24 317:3
minus 181:17 183:8
minute 44:3 79:13 108:1 155:10 246:8 246:22
minutes 21:22 66:9 246:6 316:13 323:1
misleading 206:25
missing 177:9 220:5,20 221:5 221:22 224:14 297:13,16,20 327:17,24 328:1
misstates 149:3 325:17
misunderstand 74:13
misunderstood 74:8
mitigating 291:25 292:1
mix 116:21
modification 4:10,13,16,19 82:4,17 94:25 95:4 97:11 98:6 100:17 101:4,5
money 91:3 119:24 260:7
month 145:22 145:23 147:4 190:1 197:7,9 199:24,24
monthly 54:10 54:13,16 145:21 146:23 147:2 161:17 162:20 180:20 182:22 184:14 186:1,10,13,22 271:20 328:5
months 49:20 185:3 271:3
morning 8:12
morris 8:17
morse 1:20 7:7 330:3,20
motion 119:13
mount 1:15 7:5 43:3,6
mousser 5:25 6:1 254:2,4,6 255:4,5 256:3,7 257:3 261:22 262:2,7,16 263:11 264:3 264:21 265:7 267:4 268:20 269:23 276:8 276:12 297:20 327:19
mousser's 267:23 268:24
move 145:9 203:14 212:21 226:2 246:17 247:4,17 259:2 308:9
moving 250:11 312:22
multiple 116:12
multiply 208:1

n

n 2:1 3:1
name 7:8 8:16 15:18,20 31:5 31:16 37:14 38:9,10,19 39:5 43:13,21 74:21 92:9 97:19 114:18 115:2 116:25 125:24 130:3 136:18
names 131:10 135:23 137:22 138:2
narrowed 19:23 20:1,4,10
narrowly 154:16
national 49:14 162:2,5 165:11 173:19 214:14 244:21 307:6
navarro 143:10 143:15 227:8 228:24 229:7 229:14,22 230:3 233:14 240:23 241:2 241:21 242:23 243:13 248:2 249:12 251:20 252:20 253:3 282:4
navarro's 229:3 230:7,14 231:3 232:11 232:16 236:3,4 236:9,21 242:3 243:5 252:2 324:1
nc 2:5
necessarily 87:19 124:17 162:12 163:13

321:18
necessary 238:11
need 40:25 48:13 50:25 51:10,19 66:7 88:25 99:22 129:11 169:10 233:15 245:14 250:6 259:14 263:13 264:3 264:21 273:25 291:15 307:20 317:2 321:18 321:19 323:13 326:16 328:14
needed 87:8 91:5 95:11 96:23 101:10 112:19 119:4 147:17 160:20 228:22 252:10 265:14 281:24 284:5,17 315:6
needs 7:19 51:5 169:15,21 229:8 263:16 284:4 296:11 307:21
negotiation 85:1 93:21
negotiations 85:3
neither 330:15
neo 227:21,22
neoplasm 270:24 272:2 272:12
network 53:6 232:18
neutral 5:3,6
never 58:24 135:6 225:16 317:4
new 78:22 88:23 105:21 105:25 125:22 128:25 135:23 138:2 171:7 231:14 269:24 294:22
nice 21:21
nine 18:4,7 19:18,23 20:2 20:10,21 45:4 136:23 137:8 137:17 138:5 153:23 154:11 156:2 164:22 166:19 204:18 204:22 214:9 217:12,20
non 164:18 296:4 306:17
north 1:1 39:8 330:17
notary 330:4 330:22
note 113:15 158:16 159:18 160:25 177:25 178:6,16,19 220:13 221:22 292:22 317:19 327:14 328:8
noted 29:14 30:20 97:24 179:11 180:13 204:17,25 214:20 244:19 253:4 292:10 292:13 298:24 327:4
notes 29:16,22 111:24 274:15
notice 3:12,14 3:17 68:8,11,14 68:16,19 69:23 71:25
noting 303:10
november 110:10 135:24 136:4
number 14:8 15:15,15 16:2 16:15 19:21 41:19 42:4,6 48:8 49:19,19 49:20 58:21 68:17,20 72:3 72:15,22 75:15 75:19 77:4,8,15 79:3 80:20,24 81:2,7,11,16,18 82:6,20 83:1,18 88:8 91:25 92:4 96:1 100:14 102:21,24 103:19 104:11 105:11 107:6,9 108:12,13 121:10 127:14 128:25 132:8 134:4,8,11 135:12 139:3 141:17 152:10 152:22 153:10 153:15 166:6 168:9 175:4,8 175:18 176:17 181:20 184:17 198:20 203:24 203:25 207:15 210:5 211:1,6 211:14,18 212:13 224:12 226:9,10 228:14 236:15 236:15 238:12 240:20 247:12 247:13 254:7,8 260:9 263:3 277:9,10 285:6 285:7,9 287:24

288:1 289:22
289:23 291:14
299:1 300:12
300:13,14,15
303:24 312:8
315:6 316:22
316:24 317:19
320:10 325:9
325:22 326:11
numbered
36:14
numbers 15:24
22:6 32:22
57:15 75:14,16
75:18 79:7
140:6 156:10
180:22 181:9
182:2,5 228:3
228:15 229:21
230:15 237:11
237:20,22,23
237:23 238:18
238:22 239:1
239:25 240:17
241:10,13
242:15 260:5
264:8,11,13
268:5,8 284:24
285:3,18
287:19,21
292:4 296:16
296:16,21,23
296:25 302:14
302:16 303:25
313:1 321:16
321:20,24
324:19 325:1
numerous
323:11
nw 2:14

o

o 38:10
oath 8:23
object 11:9,21
12:16 16:4
21:24 26:3 28:8
34:9 38:18
50:13,20 54:8
54:24 56:10
57:3 64:10 65:7
65:14,22 67:11
67:25 70:14
71:13 85:2,12
86:10 88:3
100:5 107:15
109:11 115:14
127:1,23
129:20 132:19
132:25 135:2
144:11 146:5
146:12 148:4
151:1 155:9
156:17 157:16
157:25 164:7
166:1,22
167:22 170:13
172:11 173:25
177:20 178:22
179:5 182:8
183:13 191:13
192:22 193:16
196:8 201:12
202:7 206:8
207:9,18 209:2
209:14 210:1
212:18 213:4
215:13 216:4
221:6 223:10
224:15 225:4
231:7 232:8,20
233:2,18
234:21 237:16
238:7,16
242:17 245:5
251:15 253:14
272:17 273:16
275:2 276:15
277:25 279:23
280:18 286:20
291:21 295:1
302:25 303:20
307:24
objection 12:9
17:12,18 18:13
19:4 21:2 22:20
23:24 24:17
25:1,10 26:9,20
27:9 28:3,15,21
29:18,25 31:11
31:13 32:7,13
33:18,25 35:19
36:4 38:25
40:20 45:5,14
51:13,22 52:6
52:15,23 53:8
53:14 57:10,17
58:13 59:3,15
62:8,19 63:1,6
67:17 71:4
72:11 73:9,20
73:25 75:1 87:7
87:17 89:10
90:16 101:18
102:3,13
103:18 104:3
108:23 111:13
111:20 112:15
113:1,12,24
116:19 118:8
118:16 119:13
120:23 122:22
123:4,4,13,18
124:6,14 128:4
130:6 133:22
137:2 139:2,21
140:9,15,21
141:22 142:8
142:15 143:5
143:16,22
144:3 146:19
149:2 150:9
151:13,15
152:5,24 159:4
160:5,13
162:15 163:7
167:13 168:3

168:10,16
169:4,13,23
170:25 171:17
172:5 174:8
175:16,23
176:6 177:1
178:4 189:9,19
190:3,10 193:7
195:1,13 203:1
205:5 210:14
210:21 211:10
213:14 223:20
224:4 225:9,15
233:9 234:3,12
235:5,12,17,22
237:16 239:5
245:11 252:16
254:22 256:4
258:12,18,23
262:3,10,24
263:14 264:22
265:8,22 266:9
267:19 269:1,6
269:19 270:1
272:8 275:10
275:22 283:10
283:20 284:2
284:11 285:20
286:9 289:13
291:3 292:16
292:24 294:4
295:8 297:1,1
298:7,17
299:17 304:3
304:15 306:7
308:5 309:5
311:10 312:4
312:18 313:14
313:20 314:21
315:15 316:5
318:1,19 319:8
319:18,24
320:7,18
322:10 323:17
324:15 325:6
325:17 326:19
objections 3:16
71:24 74:23
148:11 149:19
149:25 150:18
330:8,10
obligated 85:24
obtain 14:13
302:15
obtained 49:4
182:5 187:23
296:17
obviously 297:9
occur 168:14
193:6
occurred
194:12 199:3
offer 52:2
263:11
offered 51:20
offering 52:9
53:11 238:4
263:12
official 188:7
330:17
offset 56:8,14
57:2 58:12,21
169:19 175:18
175:21 232:12
236:8 237:9
264:13 265:10
265:19 266:7
284:15 287:24
315:5,7
offsets 11:5,7
11:18,19,24
23:21 55:6,7
56:5,12 57:8,23
58:1,9,25 65:12
65:21 155:19
156:4,6,19
157:2,8 175:3
206:2 212:22
216:13,23
227:9 231:10
231:19 237:19
238:11 243:14
248:3,8,14
255:24 261:14
264:23,25
265:5,15 266:3
282:20 285:5
287:17 290:15
296:15 301:19
302:4,10,13
304:10 306:2
309:21 315:13
323:23,25
oh 15:17,17
38:2 80:5 83:14
91:22 135:7,15
317:3
okay 8:15,18,22
8:25 9:6,11,20
10:14,18,23
12:20,25 13:4
14:1,22,25 15:5
15:21 16:1,8,11
17:2 18:4,22
19:10,15 20:20
20:24 22:9 23:6
23:11 24:9,10
24:22 25:5,20
25:25 26:6,17
26:23 27:6,12
28:12,24 29:4
29:16 30:12
31:1,9,22 32:24
35:7 36:14 37:3
37:19,21 38:12
39:11,16 40:5
40:10,14 41:2
41:10,16 42:11
42:24 43:2,11
43:18 44:11
45:9 46:4 47:5
47:18,22 49:2,7
49:18,23 50:1,6
51:8,17 52:12
52:18 53:1,4,20
54:3,20 55:21

56:7,20,22,25	113:21 114:5	166:12,13	216:22 217:2
57:13 58:24	114:11 116:4	170:17 172:18	217:20 218:3
59:20 60:12	116:24 117:2	172:21 173:1	218:11 219:10
61:10,13 63:4	117:12 119:21	173:11 174:17	220:1 221:3,14
63:19 64:15	120:5,18	174:19,24	221:17,25
65:11 66:11,12	121:23 122:1	175:3,20 176:1	222:20 223:25
67:9,15,23 68:6	122:17 123:16	176:10,23	224:7 225:12
69:1,9,12,19	124:10 125:1	177:8,11,12,17	225:20 226:20
70:4,8 71:8,22	125:16,18,21	178:19 179:1,9	227:1,14 228:5
72:14,19 74:8	126:6,24	181:8,12,19	228:10,18
74:16,16,22	127:10,10	182:4,13	229:6,21 230:6
75:5,24 76:3,7	128:2,13,18,24	183:20 184:1,8	230:22,25
76:13 77:3,11	129:16 130:17	184:12 185:5,5	231:5,10 232:4
78:8 79:10 80:5	130:25 132:4	185:10,14	233:21 235:1
80:11,18 81:5	133:12 134:22	186:21 187:12	235:25 236:15
82:15 83:1,5,17	136:7,11,13,20	187:25 188:9	236:19 237:3,6
83:23,23 84:5	137:23 138:1,4	188:21,25	237:9 238:2,14
84:12 85:18	139:16 140:1	189:13 190:17	238:20 239:13
86:6 87:1,23	141:14,17	190:21 191:2,7	239:17,23
88:6,11,21 89:6	144:21,24	191:10,23	240:3,8,12
91:20 92:3,7,11	145:15,25	193:21 195:24	241:6 243:1,11
92:23 93:24	146:22 149:9	196:12,25	243:18 244:3,6
96:8,22 97:9	149:17 150:12	197:6,10,12,16	244:13,24
98:3,14 99:1,10	151:4,11 152:9	198:23 199:15	245:14,23
99:18 100:10	153:4,4 154:1	200:17,19	246:2,11 247:5
100:25 101:8	154:14,19,22	203:6,14 204:9	247:20 248:17
101:15,23	155:4 156:1,7	204:12,17	248:20 249:16
102:10 103:7	156:22 157:6	206:11,21	250:11,15
103:11 104:23	159:9 160:17	207:3,12,22	251:11,17
105:20 106:16	160:22 161:18	210:10 211:4	252:5,25
106:19,23	161:21 162:3,5	211:13 212:21	253:11,17
107:2,19,25	162:10 163:24	213:17,22	254:1,15,19
108:15 109:19	164:25 165:2	214:2,13 215:1	255:2 256:22
110:7,13	165:15 166:4	215:16 216:8	257:1 258:7,15

258:21 259:1
259:13,17
260:12 261:2,9
263:8 264:6,10
266:12 267:13
267:22 268:3
268:18 270:5
271:16 272:1,7
272:11 273:12
273:25 274:5
274:13 275:7
275:13,19
276:2,2,22
278:4 279:1,5
279:19,25
280:21 281:4
281:21 282:9
282:20 283:13
283:23 284:7
284:24 285:2
288:2,16,20
289:4,19
291:12 294:21
296:13 297:5,9
297:11,15,23
298:1,4,13,24
299:8,11,20
301:5,12
302:12,18
303:23 304:8
304:19 305:6
305:10 306:13
307:11,20
308:9 309:7
310:19 312:22
313:23 315:2,8
316:9,18 317:4
317:11 318:5
318:15 320:4
321:15,24
322:7 325:25
326:10 327:4,7
old 24:11
once 90:21,22
103:15 147:14
162:17 188:11
284:15,19
306:5
one's 185:12,12
227:17
ones 152:19,20
190:12
ongoing 271:6
open 327:14
328:12
opened 321:3
operating
169:2
opine 51:18
157:22 209:10
opined 159:15
opines 264:19
opining 50:24
51:9 52:2
216:23 283:16
opinion 38:23
39:13 52:9 57:7
57:14 58:25
59:12 64:8
155:19 156:4,9
156:12 157:1
157:13 168:13
175:20 176:7
208:8 209:5,6
210:15,19,24
212:7 216:12
228:11,14,21
235:2 238:4,8
240:16 248:6
249:21 250:17
251:4 252:9,14
258:16 259:8
261:1,10,11
262:14 266:19
267:1 278:17
279:10 280:4
281:14,18,23
282:6,15
301:19 302:3,9
302:12 303:18
303:25 311:4
311:18 312:6,7
315:3,4 318:6,7
318:11 323:23
323:24 324:4
324:13 326:9
opinions 12:5
20:24 21:1
40:19 45:1,11
45:19 46:2
53:11 56:22
62:23 67:24
68:2 87:21
157:7,19 201:9
209:7 212:22
228:18 233:6
233:12 235:9
245:8 249:6
253:11 259:17
262:6 263:15
264:15 265:5
268:10 274:10
276:11 281:21
285:1,10
287:15 289:7
289:10 294:9
295:22,23
298:14 299:15
304:13 308:2
312:23 315:23
316:2 317:23
319:5,7,15,23
322:2,9 325:8
325:21
opportunity
330:11,14
opposed 136:1
209:12 312:2
323:15
opposing 39:2
67:3
option 284:21
284:21,25,25
order 4:1,3,6
16:2 28:25
32:18 75:14

79:9 80:23 81:6
81:15 100:12
224:20
orders 329:4,8
organ 186:10
186:11 222:11
222:12
organizations
44:22
organized
163:11 204:18
original 42:7
68:13,15
188:13,21
189:18
originally
19:16,22 20:4
ortiz 2:13 8:2,2
11:9,21 12:9,16
13:8,20 16:4
17:12,18 18:13
19:4 21:2,23
22:20 23:24
24:17 25:1,10
26:3,9,20 27:9
28:3,8,15,21
29:18,25 31:11
31:13 32:7,13
33:18,25 34:9
35:19 36:4
37:24 38:18,25
40:20 41:22
45:5,14 50:13
50:20 51:13,22
52:6,15,23 53:8
53:14 54:8,24
55:13 56:10
57:3,10,17
58:13 59:3,15
62:8,19 63:1,6
64:10 65:7,14
65:22,24 66:10
67:11,17,25
68:13 69:6,7,10
70:14,20 71:4
71:13 72:11
73:9,20,25 75:1
80:2,8 81:22,24
82:1 83:4,9,13
83:17 85:2,12
86:10 87:7,17
88:3 89:10,15
89:19,22 90:16
91:21 93:3
95:12 96:24
99:14 100:5
101:18 102:3
102:13 103:18
104:3 107:15
107:23 108:23
109:11,13
111:13,20
112:15 113:1
113:12,24
115:14 116:19
118:8,16
119:13 120:23
122:22 123:4
123:13,18
124:6,14 127:1
127:23 128:4
129:20 130:6
132:19,25
133:22 135:2
137:2 139:2,21
140:9,15,21
141:22 142:8
142:15 143:5
143:16,22
144:3,11,19,23
146:5,12,19
148:4 149:2
150:9 151:1
152:5,24 155:9
155:13 156:17
157:16,25
159:4 160:5,13
162:15 163:7
164:7 166:1,22
167:13,22
168:3,10,16
169:4,13,23
170:13,25
171:17 172:5
172:11 173:25
174:8 175:16
175:23 176:6
177:1,20 178:4
178:22 179:5
182:8 183:13
189:9,19 190:3
190:10 191:13
192:22 193:7
193:16 195:1
195:13 196:8
200:20,23
201:12 202:7
203:1,16 205:5
206:8 207:9,18
209:2,14 210:1
210:14,21
211:10 212:18
213:4,14
215:13 216:4
219:19 221:6
221:16,17
223:10,20
224:4,15 225:4
225:9,15 231:7
232:8,20 233:2
233:4,9,18
234:3,12,21
235:5,12,17,22
237:16 238:7
238:16 239:5
242:17 245:5
245:11,19,22
246:5 251:15
252:16 253:14
254:22 256:4
258:12,18,23
262:3,10,24
263:14 264:22
265:8,22 266:9
267:19 269:1,6
269:19 270:1

271:11 272:8
272:17 273:16
275:2,10,22
276:3,7,9,15,18
276:21 277:25
279:23 280:18
283:10,20
284:2,11
285:20 286:9
286:20 289:13
291:3,21
292:16,24
294:4 295:1,8
297:1 298:7,17
299:17,21,25
300:16,20,23
300:25 301:3
302:25 303:20
304:3,15 306:7
307:24 308:5
308:13,15,17
309:5 311:10
312:4,18
313:14,20
314:21 315:15
316:5,12,15,23
317:1 318:1,19
319:8,18,24
320:7,18
322:10 323:3
323:17 324:15
325:6,17
326:19 328:9
328:16,23
329:5
outside 34:7
51:17 63:4
overhead 239:7
own 46:11
261:11 282:6

p

p 2:1,1
p.a. 2:4
p.m. 329:10
page 3:3 70:4
72:15 85:20
95:24 101:24
102:23 104:10
105:8 107:2,9
110:9,10 114:5
114:16 115:22
117:2,21
119:11,19
120:22 121:2
122:1 125:1,21
126:11 127:13
128:24 130:10
133:14 138:14
145:15 148:13
149:9,10,11,19
149:20 150:16
151:4,6 152:11
153:17,18,18
160:23 165:15
165:16 188:1
190:18 194:1
196:16 197:1
198:9 204:2
206:21,22
215:3 217:13
217:16 230:6
231:22 256:13
263:22,23
277:12,13
279:5,6 281:7
284:20 286:13
290:5 291:15
293:10 295:17
296:13 305:16
308:21,23
311:15 314:13
pages 106:13
187:13 188:11
paid 47:11
93:14 107:12
120:11 215:25
261:20,21
264:19 283:3
painstaking
214:11
paper 123:17
papers 273:4
273:13
papillary
190:24 191:10
192:1,13
194:17 197:3
197:18 200:5
paragraph
59:23 138:13
148:14 149:11
149:20 150:13
151:5,5 154:24
155:15 157:12
157:24 166:5,9
166:12 172:21
172:23 174:21
213:2 215:3
228:5,11 232:1
236:16 248:22
260:18 291:24
292:11,22
293:10 301:12
301:16 302:13
paragraphs
205:9 250:12
291:15
part 56:11
65:20 138:9
158:24 203:2
210:3 230:13
233:21 270:22
282:7 312:22
participate
293:14
particular
10:19 18:10
26:13,24 50:17
129:17 130:4
226:14,16
partly 207:19
207:22
partner 93:17
110:23 115:16
129:3,8 130:12
131:25 141:12

partner's 136:18
parts 205:3
party 330:15
pass 172:10,15 173:21
passing 328:18
past 38:2 61:20 64:24 157:8,12 158:6 167:8 175:4,18 176:11 212:23 213:1 216:18 231:18 238:20 241:7 242:6,18 249:16 250:8 250:11 251:12 253:22 259:2,3 263:24 266:12 268:3 278:5 279:7,25 280:10,16 285:21 286:14 287:3 294:10 296:15 302:13 303:7,13 304:1 310:22 312:10 312:24 313:15 314:14 323:23
patience 328:22
patricia 127:21
pay 27:21 46:19 46:24 58:10,17 61:23 62:4 91:4 97:6 119:8 169:15 170:11 232:10 234:5,7 235:3 243:17 263:17 264:15 283:18 284:9 285:12
paying 170:4 170:12 235:4 262:1
payment 119:23 133:7 133:16 234:10 272:24
payments 11:11,12,23 54:11,14,17 56:15 58:17 170:24 171:1 179:3 235:15 239:3 304:23 313:9,13
payor 24:14 53:5 65:21
payors 234:19 262:20
pdf 274:21
pdfs 274:14
peeked 69:18
pending 66:6 330:16
pension 214:16 307:9
people 22:10 26:1 119:5 131:4,20,23 136:23 137:10 140:25 174:6 174:10 205:1
people's 228:6
percent 147:15 147:24 162:13 162:14,17,17 162:18 163:1,4 163:6,12 178:12,14 186:4,5,7 187:5 188:22 189:5,8 189:14 190:2,2 190:2 191:15 192:6,16,20,20 192:20 193:10 194:10,17,19 195:17 196:22 197:2,12,19 198:4,11,13,13 198:19,22,25 199:5,5,20,23 217:8,21,22,25 218:4,9,13,13 218:14,21,23 219:2,4,7,8,24 220:9 222:2,6,9 222:23 223:15 223:16 224:21 224:21 270:23 271:5 272:2,14 305:19,24 306:15,17 307:14
percentage 178:17 191:15 192:5,16 193:6 194:9,17 219:2 222:2 224:19 305:19
percentages 182:21 217:12 225:2,8 273:10
percents 218:22
perform 85:9 87:6 154:2 212:14 296:19
performance 84:17 85:10 88:12 92:15 98:7
performed 32:16,25 89:8 110:15 122:25 122:25 209:11 216:10 240:15 252:6 293:1
period 17:8 84:17 85:9 86:6 88:11 92:15,24 95:17 97:7 98:6 100:8 101:11 111:7 112:25 117:22 121:11

122:12 126:7 134:5 138:2 184:20 185:2 190:1 211:25 217:13,20 222:22 224:24 225:6 278:12 297:25 310:6
periods 116:17
person 41:20 60:19 73:18 126:18 141:15 161:9 208:12 229:12,15
person's 60:23
personal 29:16 32:3 37:3 63:17 64:4 279:11
personalized 209:18
personally 164:25 205:13
persons 10:8 53:21 118:2
pertain 105:17 239:25
pertaining 104:17 216:1 257:3
pertains 24:8 239:14
peter 319:12,17
ph.d. 261:15
phi 4:2,5,8,11 4:14,17,20,23 5:8,11
phone 21:20
pick 87:4
piece 79:4 106:14 123:17
pieced 79:9
piecemeal 79:6
pieces 201:23
pii 4:2,5,8,11 4:14,17,20,23 5:8,11
plaintiff 7:23 7:25 26:25 39:21 51:9 54:5 58:18 209:12 209:18 210:7 211:2,20 237:19 267:17 298:13 314:19 317:20
plaintiff's 209:13
plaintiffs 2:3 3:12,14,16 11:2 11:3,13 18:7 19:17,19 20:5,7 20:8 38:13,13 39:23 41:14 50:25 52:5 55:10 56:17 58:7 63:20 68:11,19 71:25 120:8 121:20 122:15 124:1 128:10 132:18 141:5 151:15 153:23 154:11 155:18 156:23 164:23 166:19 167:11 168:9 168:14 169:10 169:21 171:6 171:12,13 172:14 173:12 173:21 178:3 179:12 205:22 214:10 227:4 229:11,18 230:2 234:18 247:23 254:13 254:20 255:2 255:15 266:23 268:15,21 277:19 280:9 282:3 283:16 290:11 294:22 301:18,24 302:1,23 303:8 305:7,11 309:17 314:6 315:25 317:25 327:21
plan 58:7,7 226:19,21 227:7 228:1,23 229:3,11,11,15 229:18,19,23 230:1 231:3,6 241:24 243:4 243:12 245:2 248:1 251:21 252:20 253:3 255:20 256:11 259:23 260:2 265:12,12 268:2 281:25 282:6,7 285:11 287:1,9 288:5 288:21 293:13 299:13,15 320:16
plane 130:14
planned 293:24
planner 40:10
planners 143:9
planning 40:13 270:10
plans 51:2 53:17,19,21 170:1 230:4
pleasant 1:15 7:5 43:3,6
please 7:10 8:6 8:15 34:13 137:15 185:21 246:16 291:16 313:7
plenty 91:3
plus 49:22 186:4 187:5,5

222:6
pocket 237:18
point 20:20 77:14 128:15 138:6 205:21 206:1 248:6,13 254:23 255:13
pointed 136:2
points 227:2 247:21 248:18 255:11 277:15 277:16,18,22 290:6 301:9 309:3,13 317:21 320:24
police 293:13
poorly 112:5
portion 108:19 250:2 256:19 280:17
portions 325:3 325:4
position 44:8 176:3 258:7
positions 50:2,3
possession 275:8
possibility 172:9
possible 223:18 223:25
possibly 9:16
post 305:18
potential 11:5,7 11:18 55:6,7 56:12 58:1 60:22 61:17 155:20 206:3 216:12 227:10 248:3,14 255:24 290:15 301:20 309:21
pratt 43:23,24
precedes 293:21
predecessor 84:9
predecessors 88:22 91:16 110:14 146:2
predict 233:15
preliminary 131:22 202:18
prematurely 292:6
premise 160:18 291:19
premised 168:24 169:9 243:12
preparation 132:17
prepare 11:4 21:6 205:4,13 210:23 229:2 273:14 317:9
prepared 51:3 53:21 205:23 206:7 227:4,7 227:19 228:24 229:10 243:12 247:23 248:1 253:3 255:15 255:20 260:2 267:2 270:10 270:15 280:25 281:25 288:5 288:25 290:12 309:17 326:9
preparing 141:4
present 2:17 42:21 53:19 55:4,17,22,24 56:6 57:2 64:12 64:15 79:8 155:23 156:5 156:10,13 169:2 179:20 181:19,20 206:2 216:12 227:6,9 228:21 230:8,14,20 236:8 240:22 241:3,5,22 242:1,12 243:9 244:4 245:9 247:24 248:3 248:13 252:1,9 252:23 253:12 255:18,23 260:9 263:3,7 280:24 281:23 282:13 285:13 285:18,23 290:14 301:21 309:20 324:4 324:22 325:22 326:3,4
presented 50:2 57:22 155:18 156:23 205:22 227:4 231:2 236:9 247:23 255:14 284:5 290:11 301:18 301:25 302:1 309:17
press 316:16
pretty 154:15 156:15 202:9
prevailed 39:14
previous 96:10 99:7
previously 75:5 76:14 109:2 117:8 126:14 154:6,17 187:18 201:15 204:25 226:18 226:23 241:1 244:10,20 251:18 253:9 254:11 262:20

272:4
principal 103:8 103:12,16 104:20 105:1 105:20 111:4
principals 106:4,6
print 29:9
printed 221:2 273:22,23 274:11
prior 38:19 91:8 93:1 112:18 127:17 144:12 149:3 201:17 259:5 264:14 305:2 325:18
privilege 96:25
privileged 21:25 89:13 90:20 93:4 95:13,15 97:2 109:14
privy 274:20
probably 86:21 138:6 174:6 179:11 198:21 203:2 217:4 299:14 306:10 316:10
problem 211:8 211:17 291:18 292:20
process 230:16 268:14
produce 70:11 71:1 108:22 109:10 150:1 150:19
produced 22:15 71:10,18 75:10 75:17 77:5 79:5 80:20 88:1 102:8,19,22 104:9 105:7 146:18 149:1 150:25 152:19 152:20 275:20 328:13
product 138:8 138:16 273:24
production 3:13,15,18 68:12 70:6,9,12 71:3,11,19 72:1 77:6 106:24 109:7 148:11 328:6
products 4:4,7 81:7,16
professional 37:4 154:2,12 154:14 204:4 216:11 240:16 252:8 330:4,21
program 28:20 170:11
programs 24:14 51:11,20 52:3 53:6 168:25 169:11 170:3 235:9
progression 47:6 269:24
project 114:24 140:24 141:1
projected 147:4 176:17 179:17 234:16 243:6 261:19 270:16 283:2 289:2
projecting 282:10
projection 147:2
projections 146:23 147:23 147:25 179:3 193:4 286:1 295:6 328:5
promise 106:15
pronouncing 200:11
proportion 294:23
prostate 159:25 160:9,11 194:7 194:19,23 195:7 223:16
provide 9:17 16:13,24 55:4,5 60:8 76:19 78:17 108:21 109:8,16 147:2 155:18 157:1 169:21 175:17 187:16 208:8 209:5 220:16 221:11 227:24 228:13 233:14 233:25 236:1 237:15 238:25 249:21 250:17 251:3 259:7 260:7 267:23 275:14 278:16 280:4 281:4 283:8,9,17 284:9 286:7 287:23 301:18 302:3,9 304:10 312:25 327:16
provided 14:12 18:4 19:13 20:11 26:15,16 26:19 35:2 36:2 45:4 48:7 52:3 52:14 54:5,23 55:10,24 71:5 73:8,21 79:3 85:4 113:16 119:6 131:16 132:23 142:10 142:13,20 154:25 156:2

158:21 159:2,6 177:23 182:6,9 182:10 201:15 201:21 202:2 202:21 203:7 206:24 208:11 211:1,14,18,22 212:1,16 213:10,25 221:8 230:1 232:15 236:2 237:25 248:24 265:20 267:8 270:11 272:24 275:16 278:11 284:8 287:24 288:22 294:12 299:10 304:16 310:5,13 311:3 311:5,18 318:9 320:14 321:22 327:22 328:7
providers 52:2
provides 180:19 227:20 229:6 278:9 311:17
providing 154:8 156:3,8 156:10 157:13 201:17 208:9 210:15 212:4 232:10 238:17 304:9 312:7,7 324:13
provision 204:3 310:20
provisions 302:22
pruiett 2:9 316:25
public 330:4
publically 161:19
published 50:2 180:22
pull 26:1,7 145:10 288:12
pulled 23:3
purchase 16:2 75:14
pure 41:25
purported 69:7 156:4
purpose 27:16 95:3 98:5,15 101:4 155:16 205:17 247:21 277:14 290:9 301:17 304:8 309:9
purposes 10:4 23:8 222:17 233:23 260:19
pursuant 242:6 288:16,17
put 37:9 87:10 111:11 116:22 124:2,18,24 132:5 138:14 142:2,14 143:14 144:1 187:20 188:17 210:5 254:24
putting 175:13 176:1

q

qualifications 226:22 247:16 255:7 301:7 308:24
qualified 63:11
queries 25:25 26:7
question 9:1,11 9:12 30:16 34:12 66:6 89:25 90:7 112:1 152:10 152:13 170:18 203:13 224:23 226:1 259:1 262:12 276:6 305:15 309:7 322:21
questioning 185:17
questions 9:17 35:14 89:20 144:13 297:21 316:9 325:12 327:13 328:20 328:23
quick 316:11
quickly 245:15 323:2
quote 311:22

r

r 2:1,13 38:10
racine 2:5
random 211:14 211:16
rate 4:22 46:19 46:23 47:14 85:4 101:5 103:9 104:20 104:23 105:1,8 105:20,21,21 105:25 106:4 106:11,18 111:2,3 117:16 117:23 119:6 128:13 181:3,6 182:24 183:2,7 183:9,11,11,22 199:4,11 200:1 200:4,15 214:16 219:5 219:10,13,22 219:22,23 222:5,6 306:5,6 306:14 307:9
rated 163:3 270:23 271:5
rates 95:18,21 101:10,16

103:13,16,24 104:4,6 106:3,5 106:17,20,21 111:4 115:23 170:12 181:3 184:14,15 186:2,13,22 200:18 202:19 216:6 219:14 242:21
rather 229:18
rating 161:3,8 161:11,16 163:2,10,14 164:19 167:21 171:8 178:12 178:17 182:19 186:4,6,15 187:4 189:1 190:13 194:17 194:19 195:18 196:23 197:2 217:18 218:20 218:25 219:4 220:9 271:19 305:25 307:18
ratings 25:6,8 26:24 27:2,7 35:22,24 36:15 158:21 159:12 159:13,16 162:7 163:16 164:10,11,17 164:18 165:3,5 165:7,19 166:14,18,21 167:7,11 168:9 168:15 171:20 172:23 173:6 176:20 177:23 178:3,21,24 179:7 180:8,9 180:19,21 181:2 182:6,10 182:17 183:8 187:17 189:20 190:14 192:24 193:15 198:10 198:13,17 199:8 215:5,10 215:25 216:1,6 221:11 224:8 224:13 240:5 266:25 267:10 267:13 268:24 269:17 272:19 273:1,8,10 295:24 297:24 303:11 307:5,7 314:9 327:17
reached 10:21
read 72:23 98:14 132:4 145:19 151:10 310:17 330:11
reading 199:16
real 228:13
really 9:6 61:12 93:21 163:8 183:14,23 198:8,16,24 238:4 264:6 298:10 303:25 323:1
reason 9:15 24:3 109:20 167:4 168:4,20
reasonable 167:19
reasonableness 144:9
rebuttal 318:5 318:7 319:1
recalculate 195:17
recall 20:1,11 20:17 39:1,9,10 39:13,17 42:11 58:3,20 65:19 67:1,6,9,15,21 67:23 68:4,23 69:16,19 70:8 89:6 103:22 129:12 145:13 148:7 172:12 201:17,19,25 221:24 226:16 234:17,23 321:4
recalling 21:20 58:2 101:9 112:18
receive 47:19 119:3 173:7,22 176:18 179:17 234:10 262:8 262:18 264:21 272:20
received 26:24 36:5,7,22 47:1 49:7 69:20 74:22,25 106:12 109:22 109:24 138:8 151:24 157:14 165:6,17 166:7 166:8 171:20 179:17 197:24 199:3 221:12 313:5
receiving 158:17,25 159:1 161:1 171:3 180:4,7 183:24 188:18 199:2 213:23 262:8 273:2
recent 135:5
recently 31:7 37:17 74:5
recess 66:15 108:5 145:2 201:3 246:25 276:25 323:6

recognize 48:10
recollection 59:5,7 86:8 103:24 113:9 128:2 131:9 137:16 293:7
record 7:2,11 7:13,15,16,18 7:20 8:16 9:1 30:9 66:3,14,17 79:13,15,16,18 79:20 80:2,19 108:1,4,7 145:1 145:4 201:2,5 245:15 246:22 246:24 247:2 276:20,24 277:2 323:5,8 328:8 329:2 330:10
recorded 330:8
records 29:17 30:5,13 72:25 73:2,2 107:4,25 123:22,23 124:3 148:18 148:20,20 162:6 165:11 307:7 322:5
recovery 194:24 195:8 196:5
recreate 275:5
red 120:15
redact 94:19
redacted 94:17 94:22
reduce 172:16 291:25
reduced 171:22 178:14 197:19 269:7,10,13 272:13 282:10 285:22
reduction 177:19,25 178:17 235:10 235:15,20
reductions 178:20
reevaluate 231:5
refer 103:3 131:9 143:9 152:15,16 165:12,20 206:18 280:22 312:25 313:9
reference 151:19 152:3
referenced 3:7 36:10 87:14 101:9 154:3
references 94:8 161:22 162:1 307:3
referred 10:22 23:6 31:17 86:16 180:16 180:18,24 181:25 186:24 187:18 204:5 214:13 245:24 306:22
referring 88:18 98:1,23 154:10 161:18 173:11 175:1 186:18 197:1 231:13 232:6 326:14 327:11
refers 103:2 151:15,17 166:9 206:15 232:2 313:5
reflect 124:20 124:21 221:4 240:5 296:24
reflected 120:21 122:18 181:21 196:19 197:13 198:6 199:21 200:13 214:3 217:13 217:21 218:16 220:2 224:13 224:24 272:16 273:21 305:23 306:13
reflecting 73:3 107:11 148:21 222:7 264:2 291:7
reflects 44:3 267:24
regard 170:7 296:9
regarding 12:5 33:16 49:16 65:12 150:14 156:25 157:1 157:18 224:20 228:21 249:3 256:15 281:9 281:19,23 302:2,3,9 311:4 314:22 315:23
regardless 34:24 70:24 124:23
registered 330:3,21
regularly 60:10 125:19
reimburseme... 234:2
relate 190:11
related 11:12 29:22 33:12 34:22 54:7,7 107:12 150:1,6 158:17,23 159:16,25

160:9,11 163:15 165:5 165:19 171:7 171:14 179:18 179:19 182:19 187:8 189:22 189:23 190:8 190:12,15 191:6 195:3,16 196:4 220:14 224:10,10 225:3 238:10 248:9 249:17 250:8 266:25 267:10,16 278:6 295:20 295:25 296:5 306:3 310:22 314:10 330:15
relatedness 159:19 202:13 202:25 203:9
relates 1:10
relating 29:17 150:19,24
relationship 48:2
relay 13:12
relayed 13:1,7 13:14,18
relevant 129:18
reliability 142:6
reliable 293:15 293:20 311:16
relied 34:7 109:10 159:11 160:2 201:24 201:25 202:15 203:6 205:4 214:17,23 229:3,17 230:2 241:1 242:15 242:19 243:25 282:4
relies 251:23
rely 17:17 22:6 158:18 159:2 202:17 238:22 323:14
relying 51:2,6 54:22 158:8,11 162:8 175:14 175:17 213:2 213:13 233:22 236:1,12 239:10 249:10 249:12,13 251:19 253:2 259:22 261:2 267:8,18 268:4 268:8 282:5 285:25 295:18 314:8 326:1
remain 98:20 177:13 269:22 269:23 293:13
remained 17:7
remaining 163:6
remember 39:5 137:5 190:12 202:23 284:16
removal 227:21 305:18
renal 296:5 305:17 307:15
render 57:14 62:22 64:9 201:9 275:9 276:12 278:21 281:18 282:16 299:15 308:3 316:3 317:23 318:11 319:15 319:23
rendered 10:9 58:24 111:12 134:6 136:24 145:24 146:24 148:1 254:21 295:22 304:13
rendering 45:2 56:22 59:11 228:12 233:6 233:12 235:2 249:5 252:15 261:11 262:6 262:14 277:23 282:6 303:19
renders 40:19
repeatedly 325:15
repeating 175:14 228:6 266:15 286:18 294:11
rephrase 9:13 54:14
replaced 203:8
replacement 200:7
report 5:12,15 5:18,21,24 6:2 6:5,8,11 10:9 22:5 24:6 27:4 35:21 36:11 39:2 46:3 67:19 68:3 131:22 132:17 136:19 153:8,18 155:24 156:24 156:25 157:18 158:22 161:25 164:16 165:13 165:15 170:9 172:19 173:19 174:20 175:13 179:7 188:17 195:2 201:7,11 201:15,17,21 201:24 202:1 202:18 203:7,9 203:21 204:3

204:10,13
205:3,4,23
206:12,18,23
210:23 211:2
211:15,19
213:2 214:5
221:4 223:3,6
226:3,6,15,17
227:4,7,11,15
227:18 228:8
228:24 229:3,3
229:8 230:8
231:16 232:7
232:11,12,15
232:16 233:22
233:23 236:4
236:10,13,21
236:21 237:5
239:14,20
240:10,23
243:5,7,19,22
244:25 245:10
245:17,25
246:12 247:8
247:10,15,23
248:1,7,24
249:2,6,20
250:2,3,13,17
251:3 252:2
253:8,13 254:4
254:25 255:3
255:15,20
256:10,15,20
256:23 257:2,8
257:24 259:5,7
259:23 260:2
261:19 263:18
263:22 264:5
264:14 265:1,2
265:6,24 266:2
266:2,15 267:2
269:5,8,9
270:17 276:13
277:6,8 278:4,7
278:16,22
280:2,3,17,23
281:5,9,15
282:7,11,17,18
283:1 284:5,16
286:14 288:14
289:5,8,12,25
290:11,21
291:5,13
293:15,20
294:12,17
295:17,23
296:14 298:4
298:16,22
300:4,9,17
301:9,22,25
302:2 304:22
308:4,10,23
309:9,17,25,25
310:3,11,12
311:2,15,16
312:23,25
313:1,4,8
315:18 316:4
318:6,7 319:2
319:11,13,16
320:9,17
322:23 323:22
324:14,22
325:23 326:1,2
326:7,7 327:19
reported 1:20
reporter 6:20
7:7 9:1 80:14
108:9 330:1,4
330:21
reports 11:4
17:22 18:4
19:13,23 20:11
20:21,25 21:8
22:25 23:3,7,23
28:10 29:2,5,10
29:13,14 34:21
38:5,8 45:4,12
53:24 72:20
86:17 87:14,16
87:25 136:24
137:8,17 138:5
138:10,13,19
140:20 141:5
141:19 142:3,5
142:7,14,16,19
142:25 143:1
143:11,14,21
144:2,8,13,15
145:9 151:18
152:2,17,18
153:5,23
154:11 156:2
163:20 168:23
169:8,12
196:15 202:24
204:7,18,22
205:2,12 213:1
226:13 228:7
234:20,22
239:20 242:3
242:23 247:17
253:9 254:10
254:21 256:9
259:5,11
260:15 266:14
267:7 273:7,21
274:9 278:24
279:17 280:12
283:14 285:21
286:19 289:8
293:6 294:11
294:19 295:12
295:18 297:7
299:24 301:7
301:14 302:15
302:23 306:22
308:25 310:20
310:24 317:13
317:16 318:12
318:20,23
322:17,19
323:11,14
324:2,3,9,11
325:3,5,14,20
326:12,23

327:3,21
represent 69:1 75:9 77:4 102:7 102:22 180:2 182:16 183:6 187:14
representation 157:23
represents 179:15,16 236:7
request 3:8,12 3:14,20,22 5:1 5:4 14:16 68:11 70:5,12 71:3,11 71:19 77:6 95:19 106:24 107:6,8 109:6 148:15 149:13 151:17 152:1 152:10,22 328:6
requested 17:4 72:15 107:3,10 146:16
requests 3:17 70:9 72:1 148:11 151:10
required 16:19 118:24,25 236:4 279:11
requirement 4:22 112:23 293:14
requirements 30:13 234:1
requires 131:25
research 23:8 23:19 25:13 27:13,15,19 28:7,18,25 29:6 29:8,12 32:18 35:12,17,20 52:19 54:10 286:4
researched 23:19 27:22
residual 222:2
residuals 217:8 217:22 218:9
resources 24:16 24:19 34:7 214:20
respect 11:17 11:19 15:1 22:19 26:12 33:1 34:17 45:2 46:16 50:10 55:7 56:4 100:3 100:23 102:11 106:7 108:20 109:6 143:8 157:3,14 167:10 170:23 174:14 175:21 193:14 201:9 215:24 225:20 226:21 228:20 230:11 233:21 237:14 245:9 248:12,20 249:7 250:1,3,7 251:12 252:15 253:2,7,12 257:2 259:10 260:13 261:12 262:16,21 267:9 273:6 276:12 277:24 278:5,22 279:16,21 280:9,12,16 281:14 283:15 285:15 289:4,8 289:11,25 290:19 291:12 291:13 294:2 294:17,18 295:18,24 298:13 303:5 303:19 305:14 305:15 308:3 308:20 310:21 313:23 314:9 314:19 315:3 315:18,22,25 316:3 317:12 317:24 318:12 319:6,16 322:2 324:18 326:22 327:14,23,25
response 9:18 70:12 71:3,10 71:18,21 74:23 75:11 77:6 90:1 90:2 149:18 151:7,12 152:15
responses 3:16 71:24 74:23 148:10
responsive 151:16,25 152:22 328:6
rest 134:1 176:24 184:19 192:2 212:5 242:14
restate 250:25
restated 228:14
restating 228:15
restrictions 205:10
resume 44:2 50:4 67:7
retained 19:1,2 21:25 38:1 63:17,19 150:2 150:6
retainer 150:13
retention 149:14
retire 293:24

retired 291:20 292:6
retirement 27:20,21 208:13
returning 59:20
returns 62:4
review 11:3,5 19:11 23:16 34:21 44:22 72:9 87:11 99:23 113:19 120:8 121:20 122:14 124:1 124:11 126:5 128:9 129:12 131:25 132:16 172:20 178:2 220:5 291:16 299:6,13 318:18 319:13 320:16 321:1,5 322:19
reviewed 21:8 36:22 38:5,8,11 59:7 68:3 142:1 142:18 167:12 220:14 227:18 253:1,9 254:11 256:9 257:15 277:19 298:25 299:11 308:25 317:12,19 318:5,10,16 319:1,11 320:9 320:15 321:9 321:20,22 322:8,22
reviewing 70:8 131:15,17 137:6 156:18 167:6 172:12 221:21 298:10
revisit 145:8
rey 129:2 130:15
richard 130:23
ridge 2:9
right 14:12 15:23 37:12 42:18 66:8,13 68:6 79:24 82:12,24 92:1 97:15 109:24 120:3 138:3,25 139:15,20 144:17,25 167:4 180:25 181:2 188:14 196:1 197:23 198:25 200:6 201:1 220:16 224:11 226:20 231:24 236:16 265:23 269:22 276:23 279:6 287:14 305:18 308:15 313:17
rivas 299:3
role 46:9 114:23 126:1 126:12,25 210:10,12 211:9 325:20
roles 131:10
room 41:15
rough 139:6
round 197:6
rounds 198:22 219:9
roy 110:22 115:16 129:6
rpr 1:20 330:21
run 110:8
russo 322:22
ruzicka 2:19
ryan 299:2
rybolt 319:12 319:17

s

s 2:1 184:13 185:24 186:3,3 187:5,7 222:21 223:2
s's 223:7
salaried 47:12
salary 47:15
sarah 136:16 136:19
saw 71:21 220:5,24 321:22
saying 9:7 15:16 62:3 124:22 212:1,3 265:14 274:1 326:8
says 14:15 15:6 15:22 16:11,12 16:18,23 54:10 56:13 59:25 73:1 76:18 79:24 80:22,25 81:8,9 82:13,23 84:7,17,21 85:20 92:9 94:13 95:3 96:10,14 97:15 98:4,19 103:8 110:3 122:2 135:25 146:23 147:1 148:18 149:24 150:17 151:13 153:19 154:1 155:22 165:3 172:22 179:24 181:13 183:11 188:22 189:1 191:10 194:9 199:10 205:17,21 206:12,22 215:4 216:9 227:15,15 231:21 238:9

240:19 241:7
241:16 247:21
248:6 249:19
263:24 277:13
290:9 301:16
306:8 309:9
319:11 320:9
sc 1:15,21 2:10
scenario 208:11
208:16 211:22
212:4 236:25
236:25 237:14
237:14
scenarios 265:1
schedule 4:22
70:2,5 84:14
85:20 96:4,9
99:6 105:8
269:17
scope 11:19
12:4 16:8,12
17:3,6,11 32:17
51:17 56:11
63:4 76:14,25
78:13,17,25
88:16 154:6
156:20 204:6
204:14 206:6
216:9 227:11
240:15 252:6
seal 330:17
searches 23:22
28:13
second 7:13
56:1 114:16
115:22 137:11
145:15 148:19
151:19 181:18
186:6 190:17
194:1 196:16
197:1 206:1
208:11 217:14
217:17
secondly 159:9
seconds 246:20
section 76:14
76:15 111:24
145:16 146:22
214:4 239:13
239:19 240:9
250:9 256:8,22
257:1 259:4,11
259:15,21
260:13,18
266:22 280:22
281:8 282:16
282:18 284:15
284:19 291:14
291:24 293:4
294:1,8,9,15,17
295:13 302:19
305:2 309:8,24
311:14
sections 259:22
283:14 294:19
295:12 323:14
see 14:15 15:4,5
15:22 16:8,16
16:21,23 31:5
59:23 60:3
69:24 70:1,5
75:25 76:5,13
76:15,18,22
81:1,8,10,21
82:5,10,19,24
84:6,15,19,23
85:22 86:20
88:9,12 89:3
92:1,5,8,13,18
92:20,22 94:6
94:10,12,14,16
95:1,6 96:2,8
96:12,16 97:12
97:17,19 98:8
98:13,19 99:6
100:19,25
101:3,6 102:5
103:1,5,8,20
104:15,20,23
105:10,14,20
105:24 107:6,9
110:2,5,11,20
111:8 112:8
114:9,18 115:3
115:23 116:4,9
117:3 118:20
119:10 120:1
120:14 121:5,7
121:21 122:2,5
123:16 125:4,7
125:24 126:22
127:13,22
131:23 132:2,8
132:13 134:12
135:7,23
136:17 145:16
146:23 147:1
148:15,17,21
149:10,15,20
149:22 150:3
150:21 151:7
153:20 154:4
157:10 161:5
163:15 165:21
166:9,13
172:23 173:3,9
174:22 175:6
178:10 179:24
179:25 181:14
182:25 183:4
184:21 185:11
188:23,25
189:3,14,15
190:19,22,25
191:16,19,21
192:5,9,11,23
197:20 198:11
205:18,24
206:4,13,16
207:1 208:17
211:25 212:6,9
215:6 216:15
217:6,9 218:1,2
218:3,20

219:16 220:23 222:1 237:1 240:18,20 241:7 247:18 249:23 250:19 252:12 257:9 257:22 259:19 260:21 261:16 271:7,15 272:2 277:16 278:18 279:7,13 280:6 281:2,11 282:23 283:4 286:16 290:3,7 290:22 292:7 293:17 299:4 303:16 305:16 305:21 307:1,2 310:1,8,15 311:20 317:21 319:3 320:12 320:13,23 322:15
seeing 69:16 135:6 221:24
seeking 194:24 195:8 196:5 267:17
seems 139:15
seen 14:22,25 38:19,21 56:21 71:20 72:7 74:6 77:7 108:16,18 135:6 178:15 256:23 259:5 293:6 297:7 301:13 317:6
selection 112:3
self 46:15
send 93:13 298:11
senior 114:21 115:19,19 117:13 128:19
sense 19:25
sent 15:3 72:10 73:12 133:5,6 141:9
sentence 59:25 63:10 113:16 145:19 148:19 153:24 160:24 161:1 165:2 204:16 206:22 207:4 249:19 251:2 279:6 293:19,21
separate 46:4 273:12
separately 110:1
september 47:8 47:9
series 321:15
serve 211:5
served 20:21 151:22
service 119:5 196:4 307:15
services 3:9,20 3:23 4:4,7,21 4:22 5:2,5 14:17 16:14,18 64:22 74:11 78:18 84:14 85:21 96:5,10 99:6 110:3,8 111:12,19 113:16 114:6 120:15 121:3 122:2,13,25 125:2 129:25 134:5,14 135:16,25 145:23 146:24 147:3 148:1 154:2,13,15 204:5,5 206:15 207:8,16 208:21 209:1 209:10,25 210:4 212:10 212:14 232:11 235:10,16 250:12 251:12 259:3,3,10,15 278:10 279:7 280:1,10,16 310:5
serving 210:12
set 15:16 106:20,21 172:19 201:10 324:23
setting 296:15
settled 59:8
seven 126:6 137:22
shahnasarian 113:7 143:9,15 229:25 230:3 249:13 255:21 260:2 261:3,6 268:11 270:6 270:10 282:1,5 287:1,9 288:5 324:6
shahnasarian's 260:25 261:10 261:19 268:1 283:1 288:13 288:18,21
shanelle 2:19
sheets 73:1 107:4 148:16 148:20,25 328:5
show 35:22 123:22 139:19 182:17 198:6 199:20 218:15 220:1,18 265:18 271:9 273:5 292:8

321:7
showing 293:23 306:14
shown 273:15
shows 50:6 52:12 99:7 111:6 116:7 188:13 198:9 220:19 224:25
sic 25:7 230:7 304:17
side 11:2 40:14 41:11 198:18 219:3,6
sides 40:16
sifted 36:8
sifting 86:13
sign 93:14,19 330:14
signature 99:22 330:12,14,20
signatures 98:10
signed 82:13,23 82:24 83:11 92:11 93:18 97:14,24 100:1 101:1
signer 97:20
signing 93:22
similar 30:9 33:5 58:9,15 134:3 208:15 209:17 213:19 223:19 242:8 244:6 256:8 277:18 278:23 280:8 293:25 295:12,17 297:6 301:13 302:22 305:6 305:10 310:19
simple 189:21
single 102:23 104:9 105:7
sit 128:5 168:6 168:19 171:23 195:25 202:3 203:4 220:15
sites 307:18
situation 33:8 147:24 198:15 208:13 228:4 231:13 238:17
situations 32:4
six 31:23,25 138:1
skipping 166:4 166:8
smaller 104:5
smc 184:13 185:24 222:21 223:2,7 271:18
smith 2:4 7:22
solely 13:5 263:16
solicitation 4:1 4:3,6,10,13,16 4:19 80:23 81:6 81:15 82:4,17 97:11 100:17
solvency 28:19 286:6
somebody 141:10
someone's 60:6 61:17
sorry 7:12 18:16 19:16 31:13 35:8 37:9 37:14 39:12 55:9,12,13,15 55:15 59:21 61:1 65:16 79:13,19 80:5 81:22,25 83:6 91:22 98:9,10 114:7 125:23 135:6,10,15 149:10 155:11 156:24 158:6 158:15,25 184:17 185:15 186:18 188:2 203:12 217:3 218:18,18 219:17 225:22 226:5 231:20 231:25 232:1 243:21 262:11 262:11 271:12 277:5 286:19 300:19 301:2 301:25 308:14 308:16,20
sort 33:7 123:11 131:19 208:13 239:7
sound 138:25 139:20 140:7
sounds 138:3 140:5 265:23
source 155:3,5 298:8
sources 61:22 61:25 206:23 208:15,15 249:20 250:16 251:3 253:21 259:7 278:15 280:3 310:12 311:11
south 7:5 39:8 330:1,4,18
southern 1:2
sow 15:23 76:4 98:19,23
speak 9:2 21:19 33:15,21 53:20
speaking 156:3
special 161:13 162:19 163:16 177:8 184:14 186:1,13,22 271:20

specialized 50:18 211:19
specific 122:19 131:5 192:25 193:24 211:19 224:17 229:7 265:9
specifically 135:21 205:15 211:2 226:15 265:11
specified 227:7 247:25 255:19
speculate 222:14 225:16
spelled 22:2
spent 20:12 73:4,19 74:12 126:6 131:1 312:9
split 74:5
spoke 70:19
spoken 13:24 21:13,16,17 22:12 38:12 121:24
spot 37:10 42:18
spotted 132:3
spouse 172:3,6 172:9,13 209:13
spouses 172:18
spreadsheet 273:18,20,21 274:2
spreadsheets 36:18 274:4,6 274:11,13,15 274:19,24 327:21
spring 20:17
src 4:23
staff 10:11,15 73:13 74:3 103:9,13,16 104:23 105:24 106:4,6 112:21 127:3 137:12 142:17 205:7 327:1
staller 41:7 205:23 206:12 206:19,23 207:6,24 212:16 227:5 227:15,18,25 228:13 237:5,6 247:24 249:2 249:20 250:1 250:16 251:3,8 251:23 255:16 256:14,19 257:8,15,23 258:8,16 259:7 278:4,16 280:3 280:11 281:9 281:15 290:12 290:21,25 291:4,8,18 292:11,21 293:15,19 294:1 309:18 309:25 310:3 310:12,21 311:1,8,16 312:1,16 319:2 319:7 326:2
staller's 228:8 237:23 248:24 249:6 250:13 256:10 257:2 259:4 264:5,9 265:1 266:1 269:8 278:7,22 280:1,23 281:5 285:1 291:13 310:11 321:3 324:21
stamp 120:15
stamped 80:3
stamps 80:7
standard 329:6 329:7,8
star 74:20
start 46:11 134:12 188:1 196:20,21 197:12 217:5 228:19 306:1,2 312:24
started 95:18 135:12 138:17 161:1 188:18
starting 80:12 134:10 190:22 218:20
starts 91:25 149:20 162:2
state 8:15 63:13 66:2,3 71:8 113:18 156:22 165:16 213:9 236:7 238:8 249:1 252:5 256:13 266:25 278:14 279:9 280:2 293:9 310:10 311:1 311:15 314:14 330:1,4
stated 99:15,17 154:16 200:15 212:7 228:6 276:13 282:11 289:12 293:11 325:15 330:7
statement 15:7 15:23 75:6,13 76:4 77:22 78:23 98:25 145:12 154:17 278:20 292:11
statements 78:9 99:2 278:24

280:9
states 1:1 2:13 3:16 8:4 71:24 149:25 150:18 151:15 161:2 234:6 282:25
stating 157:21 166:7 208:8
statistical 208:11 211:17 214:14
statistics 173:19 209:17 210:8
status 305:18
statute 56:13 56:20,23
stay 79:1 171:21
stayed 12:22
stenographer 185:20 329:3
stenographic... 330:8
step 230:16,17
steps 231:1
stick 170:8
stop 90:25
straight 218:24
street 2:9,14
stress 218:6
strickland 110:22 115:9 115:16
strike 119:14
stubs 61:24 62:4
studying 44:24
stuff 148:12 156:8
subject 37:22 149:21,24 150:17 151:14 279:20
submit 120:19 145:21 147:11 147:16,17
submittal 145:17
submitted 91:16 94:1 119:22 133:15 141:13 146:2,8 147:7,10,21,21 148:2 149:6
subpoena 69:23 70:1
subscribe 330:12
subsequent 15:19
substance 37:22 41:17 70:21 109:14
substantive 19:6 38:1
subtract 237:15
subtracted 264:20
subtracting 184:2 208:2
sufficient 24:23
suggest 144:20
sum 260:8
summaries 273:23
summarize 74:3 250:12 257:1 278:6 280:1 291:10 309:3
summarized 31:4
summarizing 228:8 248:23 284:20
summary 116:24 135:21 154:24 155:1 174:20,24 187:15,21 216:8 221:9,11 240:13,14 242:8 252:5 256:10 267:23 267:24 278:14 281:5 286:23 286:24 298:10 301:13 303:23 304:9,11,12 310:10 313:8 324:14 327:17
summer 20:18
supplemental 6:14 22:15 151:21 225:23 225:25 316:20 317:17
supplementary 24:7
supplied 22:14 26:14 187:11 263:18
supplies 84:14 85:21 96:5,10 99:6
supply 26:2
support 16:14 29:13 223:7 249:21 250:17 251:4 259:8 278:16 279:9 280:4 311:17 312:14
supposed 11:17 112:14
sure 34:16 56:2 59:10 74:20 79:10 87:1 91:3 97:5 135:10,17 139:7 172:13 177:11 179:10 179:23 199:12 199:14,15,17 202:9 211:24

212:25 213:12
224:3,5 234:13
243:3 254:14
258:6 267:6
270:20 274:5
276:5 313:19
313:25 316:24
327:9
surgery 227:21
surprise 140:14
sustained
177:18 178:1
swear 8:6
sworn 8:8
330:5
system 28:14
30:25 36:8
52:22 74:14,16
86:19,22 87:4,9
87:11,24
122:21 131:16
135:19 146:11
187:20 236:5

t

table 85:19
162:8 165:10
165:12,20
166:9 174:25
175:1 176:2,25
179:15,16,24
180:17 181:9
182:2,13,14,15
186:14 187:2
187:12,13,14
188:1,12
190:13,17,18
190:19 192:23
194:2,3 196:16
196:17,19,19
196:20,25
197:13,14
198:7,9,17,23
199:9,21 200:4
200:14 216:19
217:4,5,13,14
217:15,17
218:16,18
219:4,7,16
220:2,3,17,19
221:10,25
222:4 224:25
236:24 240:18
243:3,11,17
244:6 253:2,4
270:6,9,14,19
270:21,22
271:10,11,12
271:14 272:16
275:1 284:14
286:24 288:3
288:20,24
296:14 297:6
297:11,19,19
298:11 304:22
304:23 305:6
305:10,15,23
306:8,13,24
307:1,7,16,19
327:16
tables 164:2
165:3 174:5
179:10,14
181:3,6,24
182:21 186:15
186:19,23
187:4 199:18
214:4,16,22
217:3 218:25
221:4 227:18
238:10 240:3
243:1,3 244:7,9
244:19 253:1
270:5,15
273:14,24
274:2,8,12
275:9 280:25
288:2,25 297:5
297:6,12,13,17
297:20 298:2,6
304:21 305:7
306:21 307:9
315:19,21
326:22,24
327:19,20,24
tackaberry
299:3
take 8:19 39:25
66:4,8 75:22
99:22 139:14
142:23 163:14
164:15 182:20
187:4 188:5
195:16 206:22
207:6,12
208:14 212:15
219:1,6 246:3,7
249:1,19
250:16 251:2
256:13 257:6
257:22 258:21
259:6 278:15
280:2 281:8
295:5 310:11
312:16 316:11
322:25 325:21
taken 66:15
100:12 108:5
145:2 201:3
246:25 276:25
323:6 324:19
330:7
takes 49:19
talk 79:22
221:17 308:21
321:19
talked 35:15
56:4 87:8 90:18
231:15 234:24
talking 101:13
172:24
tasks 131:5
tax 15:14,15
62:4
taxpayer 119:9
tbd 288:7,12,16
288:17

teaching 50:1
team 29:21 125:13 126:2 126:13 130:2 131:15
teams 125:16
technologies 7:9
ted 2:19
telephone 41:20
tell 23:15 31:24 38:20 39:25 77:16,20 90:1 101:15 109:20 124:12 128:8 139:19 151:23 184:12 185:25 187:13 193:24 202:10 203:3 220:16 239:8 266:6 321:7
telling 45:23 158:22
ten 41:25 42:12
termination 64:5
terminology 258:5
terms 98:20
terry 5:22,23 247:8 253:8,12 253:13
testified 8:9 12:20 17:7 63:13,22 76:25 208:20
testify 21:1 24:24 58:21 99:17 279:20 317:13 330:5
testifying 274:7
testimony 16:24 65:3,12 65:20 67:1 76:19 78:16 88:2 148:23 149:4 154:20 167:19 168:2 208:24 209:9 210:20 228:10 280:14 293:12 296:24 311:23 312:12,14 319:12,17 325:16,18 326:23 330:7 330:10
thank 83:17 90:5 91:23 98:11 136:7 145:7 185:16 185:22 231:23 263:21 301:3 317:1 326:10 328:21,24
thereof 330:16
thing 46:15 56:1 61:24 72:23 132:6 133:6 208:14 211:20 214:5 236:20 237:13 285:17
things 23:3,11 24:12,13 33:7 91:1 116:22 131:19 145:8 179:1 196:12 270:21 274:18 327:14 328:12
think 8:13 20:15 32:8 40:12 41:9 42:7 42:17 43:15,23 65:9 69:3,7 75:5 83:4,13 95:24 97:24 100:11 101:20 106:9,19 120:25 130:18 137:19 141:12 147:17,20 152:7 169:24 169:25 179:22 182:3 186:7 201:16 202:22 212:6 217:3 221:15 224:16 225:21 226:1 228:2,3 231:17 238:21 245:23 249:18 253:10 257:11 265:23 266:13 298:4 316:12,15 320:20 322:4 322:13,18 323:1,11,25 328:2 329:5
thinking 112:2
third 59:25 117:21 151:21 248:5,12
thomas 43:23 43:24
thought 74:9 101:13 137:16
three 106:3 152:16 185:13 187:6 205:8 227:2 244:9 247:20 255:11 277:15,16 320:23
time 1:13 7:9 7:14,17 9:23,25 12:15 17:8 20:20 30:5,8,13 30:20,22 31:4,6 41:6 42:23 55:12 60:19 61:23 66:1,4,5 66:13,16 68:4

73:1,2,3,18
74:10,11,14
79:14,17 85:16
95:17 97:6
99:22 100:8
101:11 103:25
105:3 107:4,4
107:24 108:3,6
108:18 111:7
111:17,25
112:4,9,14,24
114:4 115:17
116:17 118:2,5
121:11,14
122:12,18,20
123:22,23
124:2,17 126:3
126:7,16 127:5
127:8,18
128:20 131:1
133:3 134:4
138:2 144:17
144:18,25
145:3 148:16
148:20,20,21
148:24 149:5
167:12,21
169:2 170:24
178:13 179:7
184:20 185:2
185:20 192:19
200:20 201:1,4
201:13,19
220:6 222:22
224:24 225:1,6
246:23 247:1
276:3,6,23
277:1 278:12
297:25 299:14
310:7 319:20
319:22 323:4,7
328:4,12,21
329:1 330:7,8
330:10
times 31:22,25
41:19,25 42:13
56:9 103:16
184:9,18
185:13 208:6
tinnitus 198:2
200:10 217:24
218:14,15
title 97:19
290:22
titled 46:5
222:5 256:23
291:8 293:4
309:25
today 8:19 9:16
21:6 69:15
128:5 148:3
150:8 168:6,19
168:21 171:23
171:24 181:23
186:8 193:22
257:19 279:3
280:15 299:16
317:7 319:6
325:12 327:6
327:10 328:22
today's 7:4
216:5
together 56:18
79:4,9 106:14
116:22 138:15
161:14 164:11
187:6 198:16
told 74:5
138:25 202:18
took 27:2 54:18
179:2 263:2
top 14:15 15:5
15:21 80:22
94:6 103:1,5
105:10 110:19
113:16 135:22
136:1 153:19
194:2 206:22
263:24 272:11
286:15 305:16
311:15 314:13
topics 169:25
tosic 37:13
39:20 322:17
total 31:5 84:21
86:2 89:4 90:10
91:15 92:20
96:10,15 99:7,8
101:21 119:19
121:7 122:9,11
125:6 133:13
138:21,23
139:9,19 140:2
165:19,24
177:4 179:16
183:18,23
196:22 198:24
199:11,25
200:6,15,16
216:18 219:11
219:22,23
222:5 230:20
237:15,25
238:3 239:1
241:4 243:8,9
244:3 287:17
288:9 303:13
304:1,10 306:6
314:14 315:5,6
315:7 323:24
totaling 287:13
totally 180:7
199:7
totals 140:1
track 18:19
50:10 120:8
121:20 122:14
124:1 128:10
132:18 160:1,1
160:10,11
163:3 164:3
176:14,20
180:4 188:19
190:8 194:23
195:7,12
254:13,20

267:16 271:24 296:6 317:20
trained 44:19 44:19
training 24:24 33:22 44:15,23 50:9,18 52:21 61:5
transcribed 330:9
transcript 329:3
transcription 330:9
transplant 264:4
travel 147:4
treated 186:23
treatment 186:21
trial 65:3 171:5 208:24 209:23 210:2,19,20 212:12 312:12 317:20
trials 18:20
tricare 51:11 53:7 169:19,20 234:18 243:18 283:3,7 284:8 285:12 286:1,5 313:24
tricia 1:4 3:10 3:18 5:12,15,18 5:21,24 6:2,5,8 6:11,15 7:2 8:7 8:17 60:1 63:10 72:2 153:8 329:1
trier 209:5 238:9 266:1,7
triwest 53:6 232:17,23 233:1,7,13,24 234:10,17 236:5 243:21 313:24
true 89:20 214:9 257:19 302:6 330:10
trust 24:8
trustees 24:6
truth 330:6,6,6
try 9:2,8 79:8 90:23 179:11 211:5
trying 13:11 24:15,15,22 27:12 34:11,15 35:11,13,16 56:2 86:21 89:12 90:4 102:8 106:15 138:4 163:24 183:20 196:14 196:17 251:1 254:17 265:18 266:6 270:20 291:9 306:20
tukes 6:3,4 277:6,8,24 279:11,21 280:17 281:25 282:11 285:12 286:13 288:3 289:5,11,17
tukes's 278:11
turn 91:20 94:4 97:9 127:11 153:4 161:16 179:9 182:13 226:4 254:1
turning 88:6 128:24 179:14 187:12 204:2 215:3 247:15 255:2 301:6 308:12 309:24
turns 307:19
two 42:14 44:21 74:2 78:14 113:8 115:12 139:12 143:9 145:8 156:14 181:25 186:23 187:13 198:13 205:8 214:14 214:19 218:22 222:23 226:13 226:17 230:16 230:25 239:1 239:20 244:19 247:24 248:17 250:12 253:21 264:8 271:3 287:18 290:6 292:1 296:16 297:17 299:23 307:3 309:2,13
twofold 291:23
type 14:19 30:9 31:25 51:4 64:7 64:8 126:18 148:1 233:25 234:2 263:13 283:24 284:3
types 23:11,15 33:23 63:22 273:5
typical 64:1 73:23 140:24
typically 60:8 61:15 74:9 124:25

u

u.s. 3:8,19,22 4:21 5:1,4 14:15
uh 9:7,8 218:19 300:18
unable 14:13 212:14
unchanged 98:21
under 8:22 15:6 15:17,22 16:8,9

16:11,12,23 21:24 44:18,19 45:10,19 46:8 59:13 76:14,18 88:7 92:15 96:8 96:9 103:7 110:25 129:22 129:23 138:10 141:25 153:24 155:15 157:12 160:23 194:9 200:14 204:3 212:22 222:5 231:19 232:17 236:5 257:3 259:3 271:4 282:17 284:24 293:10 296:15 309:8 310:10 312:17

underneath 157:8 278:14

understand 8:25 9:4,12,17 10:23 11:8 12:4 13:12 16:1 18:18 23:2 24:22 27:7,12 27:23 30:15 34:12,15 35:11 35:17 56:3 64:6 86:21 87:2 138:4 161:7 163:25 179:12 182:14 186:1 191:2 196:18 196:22 207:3 207:12 210:10 251:1 254:17 275:1 291:17 326:16 327:15 328:4

understanding 11:14,16 17:3 17:10 23:14 25:14 56:8 60:20,24 62:5 62:13,15 74:24 78:8 85:7 86:24 90:21 93:21 109:7 119:3,12 119:21 120:10 120:19 133:13 137:1 138:21 140:2 148:24 162:11,19 179:23 184:15 194:22 199:18 207:5 216:22 251:6 265:4

understood 12:1,12,21 33:10 326:15

undertake 143:3

unfortunately 220:4

united 1:1 2:13 3:16 8:4 71:24 149:25 150:18 151:15

unknown 288:8

unsigned 83:20

unspecified 217:23 218:5

unsupported 206:25 310:14

update 89:1 95:20 101:5 221:3,10 296:12

updated 15:20 48:13 77:18,22 95:21 101:10 220:17 260:1 328:13

updating 327:16

uploaded 36:7

urothelial 190:24 191:10 192:2,13 194:18 197:3 197:18 200:6 270:25 272:2

usa 4:2,5,8,11 4:14,17,19,23 5:7,9

usdoj.gov 2:15

use 15:15 26:1 58:11 60:21 61:13 69:15 124:18 141:18 180:15 186:11 196:14 202:19 208:15 222:11 222:13 260:5 323:19

used 35:2,21 56:8 80:6 87:15 163:19 164:1 165:12 173:19 174:6 181:8 182:1 204:22 206:23 207:6 223:3 249:2,20 250:16 251:3 256:14 257:7 257:21,23 259:7 273:13 274:2,6 275:9 278:16 280:3 281:9,19 291:4 292:21 310:12 311:11 323:22 323:24 324:1,3 324:8

uses 73:24 74:17

using 15:14 165:3 179:11 232:17 258:4 291:1 306:19 306:21 324:11

usually 112:3 208:23 322:5
utilized 261:18 282:25
utilizes 234:20

v

v23 77:21,25 104:13
v24 77:21 78:3 105:14
v25 77:21 78:6 103:2
va 23:20 62:14 179:25 180:2 180:10 264:15 264:19 306:8
vaguely 14:21 58:2
validate 26:18 28:1 141:20 143:13 144:1
validated 325:14
validating 142:6
validity 143:4 326:6
valuation 16:25 76:20 78:19 129:9,24 154:9
valuators 49:14
value 53:19 55:4,17,25 56:6 64:12,15 155:19,23 156:4,5,13,13 179:21 181:19 181:20 206:2 216:12 227:6,9 228:22 230:8 230:14,21 236:1,8 240:23 241:3,5,22 242:1,12 243:9 244:4 247:24 248:3,14 252:1 252:9,23 255:18,23 260:9 263:4,7 278:10 280:24 281:23 282:13 285:13,18,23 290:14 301:19 301:21 309:20 310:4 324:4,23 325:22 326:5
values 55:22 156:10
vanslyke 2:18
variables 170:23
variance 183:3 183:6 184:2,5
various 63:13 64:18 128:10 131:10 132:17 156:10 161:4 163:2 215:9 225:1
vba 23:13,16,20 24:13,25 25:3 25:15 26:7,12 27:15 35:3,16 54:17 58:4 158:20 159:6 161:2,3,10 176:2,3,11,24 177:23 179:16 182:9 187:15 187:23 197:8 213:17,25 216:18 239:14 242:5 266:25 267:9 268:12 268:15,19 269:16 272:24 296:24 303:14 304:1,23 307:2 314:2,9,14,22 315:9 325:4
vba's 165:3
vendors 101:5
venues 63:14
verbally 13:1,3
verified 325:20
verify 144:1,14 155:7
veritext 1:15 7:5
version 14:14 83:20
versus 46:8 124:11 164:4 199:7 258:9 290:25
veteran 34:17 34:24 52:13 62:7,17,24 170:7 172:3 178:11 196:2
veteran's 26:21 170:24
veterans 25:5,7 28:19 32:5,10 33:1,1,16 52:22 54:3 55:8 62:6 62:16,23 65:6 130:5 158:4,14 160:23 169:2 170:10 177:14 180:3 181:5 214:15 215:2 216:2 232:18 244:22 261:21 261:25 262:9 262:21 263:10 266:21 294:14 302:18 303:6 307:8 314:1
vha 313:5,9,18
vha's 313:12
viability 28:13 233:7 235:2 261:25 283:17

video 1:4 7:2 329:1
videographer 2:18 7:1,8,14 7:17 8:5 66:13 66:16 79:14,17 108:3,6 144:25 145:3 201:1,4 246:23 247:1,6 276:23 277:1 323:4,7 328:25
view 60:17
vitae 3:11
vocational 40:12
voice 144:22

w

wa 1:20 330:21
wage 60:2,5,8
wages 33:6
wait 83:14 135:9
waived 330:14
waiving 149:21 149:24 150:17 151:14
walk 47:5
wallace 2:20 117:3,4,5,15 118:6 127:19 128:22 133:19 318:6,8,13,21
wallace's 120:2 318:23
walton 93:18 97:20,22 126:12 127:20 128:15 133:19
walton's 99:21
wang 248:7 267:2
want 13:12,20 34:16 37:21 41:16 59:10 70:25 72:23 87:1 109:13 135:10 152:12 179:9 182:13 188:5,7 207:3 212:25 243:3 246:3,7 313:25 316:10,11,24 323:19,20 327:13,14 328:11
wanted 87:5 97:5 145:8 148:9 163:25 177:11 199:15 266:24 270:19 291:17 327:9 328:8
wants 9:1
ward 2:4 7:22
wardandsmit... 2:6
washington 2:15
water 1:7 7:3 73:6 246:14,15
way 30:3,17 35:10 45:18 74:15 79:22 80:10 107:10 138:18 161:13 176:4 189:11 190:5 212:11 275:25
wayne 6:6,7 290:1 298:14
we've 12:12 27:16 48:15 65:24 74:24 84:3 87:20 99:2 100:4 106:14 115:12 121:24 125:9 126:13 129:11,16 130:2 131:12 134:3 141:8 174:15 181:25 200:23 204:14 226:12,23 239:24 244:25 246:2 251:7 253:9 254:11 259:5,9,14 266:13,22 268:14 273:6 277:19 279:2 279:16 280:8 280:11,15 289:7 294:18 295:11,14 297:6 301:13 302:21 305:7 305:11 306:21 308:25 310:24 315:20 327:4
website 23:20 62:14 273:9
websites 35:21 307:1,4
week 49:21 207:20,20 208:3,5,6,7 211:23,24 212:2
weeks 49:19 69:21
welcome 66:4 72:24
went 32:22 33:9 43:8 95:24 105:21,25 153:5 190:1 192:19 201:7 201:23 212:24 213:19 214:4 215:8 217:21 220:4 223:15 224:21 240:9 242:9 249:17 262:19 273:9 317:3 322:18

westerlind 299:2
whatnot 210:3
whitney 2:20
wife 308:22 310:5 311:3,19
wii 304:16
william 6:12,13
wilmington 2:5
winter 20:18
withdraw 259:1
withhold 102:9
witness 3:9,21 3:23 4:21 5:2,5 8:6 14:17 16:14 78:17 110:3,8 121:3 122:2 125:2 135:16 135:25 209:12 210:11 328:18 330:5,7,10,11 330:12,13,16
witnesses 210:20,23,24
word 56:9,15 257:21
wording 138:12
words 11:18 262:12
work 9:20 10:8 10:20 11:19 12:4,13 15:1,7 15:23 17:3,7,11 19:10 22:12 31:2,25 32:2,17 40:7,8 43:2 44:22 46:16,19 47:1,2,11,19 48:3 73:5 75:6 75:13 76:4,25 77:22 78:9,17 78:23,25 84:2 85:8 87:6 88:16 89:7 90:10,25 91:17 93:15 98:25 102:12 106:7 110:15 110:25 114:12 125:19 137:7 138:23 140:4 141:20,25 142:13,17,18 142:19 145:12 147:18 150:2,6 150:14,20,24 154:7,17 204:6 204:14 205:1 216:9 240:15 252:6 261:7 273:14
worked 22:11 30:8,8,21,22,23 31:6,19 41:7,10 42:12 44:19 73:18 104:1 105:3 114:3 116:5,8,18 121:11 123:24 132:12 133:18 135:21 136:23 292:12
working 20:13 44:17 80:6 100:2 125:13 129:21,23,24 131:1 273:4,13
works 163:9
worksheets 273:13
would've 27:20 27:22 137:4
wrap 316:10 323:1
writing 13:2
written 138:8 201:21 202:20
wrong 137:15 159:11 160:17 160:19 246:2 296:9,10
wrongful 64:4 64:5
www.clarkbo... 1:22

x

x 3:1

y

yeah 24:1 55:13 99:17 103:19 125:15 126:15 135:17 139:12 156:12 181:2 183:17,19 185:4,9 200:22 220:8 221:19 228:17 243:20 246:13 247:6 304:25 328:16
year 37:19 46:10 77:17,19 86:6,12 88:18 88:21 89:3 90:12,15 92:16 92:25 98:17 103:3,12 137:10 170:15 182:18 190:1 192:19 211:25 217:12,20 230:18
yearly 260:7
years 15:3,12 23:18 39:3 42:1 43:7 44:18,25 57:24 65:3 74:2 103:13 112:18 292:1 312:10
yep 263:21 323:3
yount 1:4 3:10 3:18 4:2,5,8,11 4:14,17,19,23 5:7,9,12,15,19 5:22,25 6:3,6,9

6:12,15 7:2 8:7
8:13,17,18 46:5
47:22 48:3
66:19 72:2
108:15 127:21
145:6 153:8
247:4 277:4
323:10 327:15
329:1
yount's 150:2
151:22

z

zakaryan 299:3
zero 99:7 208:6
zoom 2:18,19
2:19,20 41:21

Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate. The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

DISCLAIMER: THE FOREGOING FEDERAL PROCEDURE RULES ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY. THE ABOVE RULES ARE CURRENT AS OF APRIL 1, 2019. PLEASE REFER TO THE APPLICABLE FEDERAL RULES OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.

VERITEXT LEGAL SOLUTIONS

COMPANY CERTIFICATE AND DISCLOSURE STATEMENT

Veritext Legal Solutions represents that the foregoing transcript is a true, correct and complete transcript of the colloquies, questions and answers as submitted by the court reporter. Veritext Legal Solutions further represents that the attached exhibits, if any, are true, correct and complete documents as submitted by the court reporter and/or attorneys in relation to this deposition and that the documents were processed in accordance with our litigation support and production standards.

Veritext Legal Solutions is committed to maintaining the confidentiality of client and witness information, in accordance with the regulations promulgated under the Health Insurance Portability and Accountability Act (HIPAA), as amended with respect to protected health information and the Gramm-Leach-Bliley Act, as amended, with respect to Personally Identifiable Information (PII). Physical transcripts and exhibits are managed under strict facility and personnel access controls. Electronic files of documents are stored in encrypted form and are transmitted in an encrypted

fashion to authenticated parties who are permitted to access the material. Our data is hosted in a Tier 4 SSAE 16 certified facility.

Veritext Legal Solutions complies with all federal and State regulations with respect to the provision of court reporting services, and maintains its neutrality and independence regardless of relationship or the financial outcome of any litigation. Veritext requires adherence to the foregoing professional and ethical standards from all of its subcontractors in their independent contractor agreements.

Inquiries about Veritext Legal Solutions' confidentiality and security policies and practices should be directed to Veritext's Client Services Associates indicated on the cover of this document or at www.veritext.com.

Exhibit 791

- - - - - -

E R R A T A

- - - - - -

PAGE	LINE	CHANGE
68	4	"Faults" should be "thoughts"
REASON:		correction
86	24	"based" should be "listed"
REASON:		correction
113	7	"Shahnasarian" should be "Strickland"
REASON:		correction
163	10	"how" should be "what"
REASON:		Correction
163	11	"In" should be "from"
REASON:		
REASON:		
REASON:		
REASON:		
REASON:		
REASON:		

ACKNOWLEDGMENT OF DEPONENT

I, Tricia Yount, do hereby certify that I have read the foregoing pages, and that the same is a correct transcription of the answers given by me to the questions therein propounded, except for the corrections or changes in form or substance, if any, noted in the attached Errata Sheet.

Tricia Yount 3/24/2026

WITNESS NAME DATE

Subscribed and sworn to before me this 24 day of March, 2026

My commission expires: _____

Donna M. Phillips NOTARY PUBLIC SOUTH CAROLINA

Notary Public 06/01/2029

Exhibit 792

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF NORTH CAROLINA

IN RE: CAMP LEJEUNE WATER LITIGATION	Case No. 7:23-cv-00897
This Document Relates to: ALL CASES	

VIDEOCONFERENCE VIDEOTAPED DEPOSITION
OF
PETER RYBOLT
Friday, March 13, 2026
(Remotely via Zoom)

Reported by: Christine A. Taylor, RPR

Job No.: 7947839

On March 13, 2026, commencing at 9:00 a.m., the videotaped deposition of PETER RYBOLT was taken via Zoom pursuant to notice and pursuant to the Federal Rules of Civil Procedure, on behalf of the Defendant.

* * *

REMOTE APPEARANCES:

Representing the Plaintiffs:

WEITZ & LUXENBERG
BY: BENJAMIN VANSLYKE, ESQ.
3011 West Grand Boulevard
24th Floor
Detroit, Michigan 48202
313.800.4170
bvanslyke@weitzlux.com

and

WARD AND SMITH, P.A.
BY: JENNA BUTLER, ESQ.
127 Racine Drive
Wilmington, North Carolina 28403
910.794.4800
jfb@wardandsmith.com

and

BELL LEGAL GROUP
BY: LESLIE LAMACCHIA, ESQ.
219 Ridge Street
Georgetown, South Carolina 29440
843.438.7480
llamacchia@belllegalgroup.com

Representing the Defendant:

U.S. DEPARTMENT OF JUSTICE
BY: MICHAEL CROMWELL, ESQ.
WILLIAM KLOTZBUCHER, ESQ.
DAVID ORTIZ, ESQ.
310 New Bern Avenue
Raleigh, North Carolina 27601
919.500.4282
michael.w.cromwell@usdoj.gov
william.v.kotzbucher@usdoj.gov

Also Present:

David Lane, Videographer

C O N T E N T S

	PAGE
EXAMINATION BY MR. CROMWELL	8
EXAMINATION BY MR. VANSLYKE	242

* * *

E X H I B I T S

EXHIBIT	DESCRIPTION	PAGE
Exhibit 1	Expert Testimony 2022 to Present	12
Exhibit 2	Subpoena and Notice of Deposition of and Request for Production of Documents to Peter Rybolt	22
Exhibit 3	Subpoena and Amended Notice of Deposition of and Request for Production of Documents to Peter Rybolt	22
Exhibit 4	Plaintiffs' Objections and Responses to Defendant's Notice of Deposition of and Request for Production of Documents to Peter Rybolt	22
Exhibit 5	Plaintiffs' Designation and Disclosure of Phase III "Damages	29

	and Offsets" Rebuttal Expert Witnesses	
Exhibit 6	Expert Report of Peter Rybolt, January 20, 2026	33
Exhibit 7	Peter Rybolt - First Supplemental Materials Considered, March 9, 2026	37
Exhibit 8	Peter Rybolt - Second Supplemental Materials Considered, March 10, 2026	37
Exhibit 9	4/6/2025 Letter to Benjamin VanSlyke from Peter Rybolt	42
Exhibit 10	8/31/2025 Cirque Analytics Invoices PLG-EXPERT_RYBOLT_0000000003 - 17	42
Exhibit 11	Article: M21-1, Adjudication Procedures Manual, Prologue	93
Exhibit 13	Article: The Valuation of Earning Capacity Definition, Measurement and Evidence	120
Exhibit 14	Expert Report of Chad Staller - Howard case	133
Exhibit 15	38 CFR 4.10 (March 5, 2026)	145
Exhibit 17	10/7/2021 Policy Letter 21-01	165
Exhibit 18	M21-1, Part IV, Subpart ii, Chapter 1, Section A - Determining the Need for Review Examinations	171

Exhibit 19	38 CFR 3.327 (March 10, 2026)	176
Exhibit 21	Article: How VA Disability Compensation Affects Military Retirement Pay	212
Exhibit 22	CBO - Veterans' Disability Compensation: Trends and Policy Options	227
Exhibit 23	Press Release: Blumenthal & Veterans Service Organizations Slam Dangerous Narrative that VA's Disability Compensation Process is Too Generous at Hearing	236
Exhibit 24	Article: A Second Trump Term Would Decimate Veterans' Healthcare and Benefits	237
Exhibit 25	38 CFR 3.957 (March 11, 2206)	184

(Exhibits 12, 16, and 20 were not used.)

P R O C E E D I N G S

* * *

THE VIDEOGRAPHER: We are now on the record. My name is David Lane, videographer for Golkow, Veritext division.

Today's date is March 13, 2026. Our time on the record is 9:00 a.m. Pacific Time.

This remote video deposition is taking place in the matter of Camp Lejeune Water Litigation.

Our deponent today is Peter Rybolt.

All parties to this deposition are appearing remotely and have agreed to the witness being sworn in remotely. Due to the nature of remote reporting, please pause briefly before speaking so that all parties are heard completely.

All counsel will be noted on the stenographic record.

The court reporter today is Christine Taylor and will now swear in the witness.

* * *

PETER RYBOLT,

having first been duly sworn, was examined and testified as follows:

* * *

THE VIDEOGRAPHER: Please begin.

EXAMINATION

BY MR. CROMWELL:

Q. Good morning, Mr. Rybolt. How are you today?

A. I'm good. How are you?

Q. I'm doing well.

Will you, just for the record, please state your full name?

A. Peter Rybolt.

Q. And, Mr. Rybolt, as indicated before, my name is Michael Cromwell. And I am an attorney with the U.S. Department of Justice, and I am representing United States in the Camp Lejeune Water Litigation in which you are testifying today. You understand that?

A. Yes.

Q. Okay. And, Mr. Rybolt, you have been deposed before; is that correct?

A. Yes.

Q. And are you familiar with the general rules and the procedures of depositions?

A. I am.

Q. Okay. You have done very well so far. I'll be asking questions. You'll be answering them. Obviously, the court reporter will be taking answers down. Please wait for me to finish my question, and I will do the same and let you finish your answer.

Obviously, doing this remotely, giving just a little bit of time because of any kind of delays just being done in a remote fashion; is that fair?

A. Sure.

Q. Counsel may object on your behalf. But unless otherwise specifically instructed, you may answer the question; is that fair?

A. That's my understanding, yes.

Q. Okay. And if you would, and you've done well so far, answer verbally, right. If you can answer questions yes or no, you may do so. Transcripts don't pick up head nods and so forth. Exactly. So I appreciate verbal answers only.

A. Of course.

Q. If you don't understand a question, which I undoubtedly will ask some poor ones, please, you know, let me know, and I will do my

best to rephrase the question. Is that okay?

A. Sure.

Q. If you do answer the question, I will assume you understood the question and you answered accordingly; is that fair?

A. I think that's reasonable.

Q. If you need a break for any reason today, just let me know. The only request is that if I have a question pending, I request that you answer the question and then we can take a break. Is that okay?

A. Yes.

Q. All right. Mr. Rybolt, any reason, medical or otherwise, that you cannot hear, understand, or respond to my questions to the best of your ability today?

A. No.

Q. Okay. And as previously noted, your deposition is occurring remotely. Where are you presently located for your deposition?

A. In Los Angeles, California.

Q. And are you in your house or at an office?

A. I'm in my house today.

Q. Okay. Is anyone in the room or in

your house with you today?
A. No.
Q. Okay. Besides your computer that you're obviously using to take the deposition, do you have any kind of electronic communication devices with you or near you?
A. Well, my phone, but it's over there on the table.
Q. Okay. Understand. Just we simply ask that during the course of the deposition that you refrain from using electronic devices, obviously except for your laptop that you'll be using to communicate and access any exhibits that we use; is that fair?
A. Of course. Yes.
Q. Okay. Because this deposition is occurring remotely, I will be uploading any exhibits that we use into the chat. You can download those exhibits from the chat. So I would just ask that you have that function open so that you're able to access the exhibits.
A. I have it now.
Q. Okay. And, Mr. Rybolt, you understand that you're testifying under oath as if you would be testifying in front of a judge in

a court of law; is that correct?

A. Yes.

Q. And you have given not only deposition testimony before but trial testimony as well; is that correct?

A. Depositions, trial, other hearings, arbitrations, yes.

Q. Understood. And I'm going go ahead and enter into the chat what we've marked as Exhibit 1. And if you would, just let me know when you receive that.

A. I have. Let me open it up. Okay. And it's open.

(Exhibit 1 marked for identification.)

Q. So Exhibit 1 is simply a list of expert testimony from you that was produced to the United States dated 2022 to the present; is that correct?

A. That's correct.

Q. And according to your testimony list, you last gave deposition testimony in 2025; is that right?

A. I believe -- yes, I believe that's correct.

Q. Okay. Is that current? Have you given any sort of deposition testimony since then?

A. No, I don't believe so.

Q. Okay.

A. And the answer to the first part of your question is, yes, I believe it's current.

Q. Okay. Thank you.

Just to complete that out, you have not given any sort of trial or arbitration testimony in addition to what's listed in Exhibit 1; is that correct?

A. Since 2022, that's correct. Yes, several things -- everything keeps getting pushed this year. I don't know why, but yes.

Q. Understood. Exhibit 1 indicates that you have testified approximately eight times either in deposition or in trial or in an arbitration since 2022; is that fair?

A. That sounds right.

Q. You have listed three arbitration matters that you've identified as confidential, and I understand the basis for that. Can you, generally speaking, give me the subject matter in which you were testifying about in those three

arbitrations?

A. Let me remind myself what they were.

Q. Sure. We can start with the first one.

A. Sure.

Q. At the top is listed confidential from the year 2025, and this has took place in the DGA arbitration. What does DGA, first, stand for?

A. The Directors Guild of America.

Q. Understood. Do you recall the subject matter in which you were offering a declaration or report in that case?

A. There was -- I think I can tell you generally that it was a dispute regarding residuals that producers pay.

Q. Understood. Okay. And the second one listed has confidential again from 2025 and is JAMS, obviously a common arbitration site. Can you recall what sort of opinions or, generally speaking, the type of testimony you were offering in those -- that case?

A. Trying to recall. I should remember this. It was just last year. Oh, yes, it was a case involving the film industry involving

violations of a development contract. Things of breach of contract, I guess.

Q. I was going to say were you offering opinions with regards to damages from a breach of contract, generally speaking?

A. Generally speaking, I think that's fair.

Q. Okay. And then the third one listed on Exhibit 1 listed as confidential is from the years 2023 until 2024, and taking place at the American Arbitration Association; is that correct?

A. That's correct.

Q. And do you recall generally the subject matter in which you were offering testimony or opinions about?

A. Broadly, I would say it was the claims related to copyright trademark and breach of contract.

Q. Gotcha. Understood. Okay.

You have also listed on Exhibit 1 testimony from a case entitled SMC Specialty Finance, LLC, versus on Han Samping, et al., dated 2025; is that correct?

A. That's correct.

Q. And this was a -- is this contractual fraud lawsuit? Is that what this is about?

A. Yeah. That would be a fair characterization, yes.

Q. And what kind of testimony were you offering in that case?

A. It was generally related to amounts due to the various parties in -- related to the contracts between them.

Q. Okay.

A. The breach of contract.

Q. So that case involves you offering testimony with regards to damages stemming from a breach of contract?

A. Broadly speaking, yes.

Q. Okay. The next case was Summerton v. Goldco Direct, LLC. Do you see that?

A. Yes.

Q. And is this case about the Telephone Consumer Protection Act?

A. Yes, it was.

Q. Okay. And what kind of testimony were you offering in this case?

A. We were attempting to help define the class and class damages.

Q. What kind of damages were you opining on in that case?

A. Damages related to -- well, that's an interesting question. But violations of the telephone -- TPA, which was kind of an interesting concept. But, yes, you know, what are damages if you are -- if there are -- for the sake of violations of the TPA. Does that make sense?

Q. It does. It does. Okay.

The next case you gave deposition testimony was with regards to the In Re: Trust B of the Hooten Family Trust dated 2024. Do you see that?

A. Yes.

Q. What kind of opinions or testimony were you offering in that case?

A. This was a dispute between relatives regarding the disposition of assets in a family trust, and I worked on determining what was owed to whom.

Q. And this had to deal with trust litigation; is that right?

A. Correct.

Q. Okay. And then the last one is --

and forgive me if I'm pronouncing this incorrectly. Jaeschke v. Bella and Canvas, LLC, et al., dated 2023 and 2024; is that right?

A. Correct.

Q. And my understanding, this case was about dispute involving intellectual property, media, and entertainment; is that right?

A. True. It was an individual who had claims against -- for violations or unauthorized use of his image.

Q. Gotcha. And what kind of opinions or testimony were you offering in that case?

A. It was quite limited and it related to examining sale records for certain categories of products.

Q. Gotcha. Okay.

Mr. Rybolt, have you ever testified in a wrongful death case before?

A. I've testified in cases in which there were personal injuries or wrongful death, usually in the construct of a product defect case.

Q. Gotcha. How many times have you testified in such a case?

A. I don't recall if I've testified in

such a case. I've worked on many where I would have managed the case. I don't believe I ever testified a case on that particular topic.

Q. Okay. So as you sit here today, you've never testified in a wrongful death case?

A. To the best of recollection, no.

Q. Okay. And the same would be true, you've never testified in a personal injury case?

A. Well, it really depends on how you define that. If you're talking about an individual claiming some sort of bodily harm, no. But there are, of course, other forms of injury.

Q. Sure. Yeah. So if we're confining personal injury to somebody alleging, you know, bodily harm to themselves, have you ever testified in such a personal injury case before?

A. Under that specific definition of a single individual claiming bodily harm, no. But in other cases, there were many individuals involved in which bodily harm or wrongful death were at issue. Or for that matter, other matters in which there is a loss of earnings, that comes up quite frequently, whether it's individuals or, you know, corporate entities, business entities.

Q. What -- when is the last time you

testified about an individual incurring lost earnings?

A. I don't recall the exact date, but I've testified in multiple cases involving loss of earnings related to wrongful termination or breach of contract.

Q. Have you ever been asked to testify about veterans benefits in any way?

A. I think there that there have been matters that I have worked on in which veterans benefits were an element of the analysis. But not -- I have not testified on that specific topic.

Q. Okay. Have you ever been asked to calculate a veterans disability benefits before?

A. As I said, I believe veterans benefits have been part of other calculations about lost earnings or compensation, that has come up before.

Did you ask if I have testified on that subject? Or did you just ask --

Q. I have asked, did you testify -- have you ever testified in that --

A. No, I have not testified on that, on a case that involved that particular calculation.

Q. So when you say there were cases you have been involved in, what exactly -- what kind of case were you involved in where you were offered or you were working on issues involving veterans disability benefits?

A. It would have been claims perhaps or related to broader injuries where veterans benefits were some element of the calculation or similar mentioned benefits, disability benefits of other kinds, things like that. That comes up from time to time.

Q. What kind of cases does it come up in if not a personal injury or wrongful death kind of case?

A. Where perhaps someone has claims for, you know, where there's other -- some other interruption of income that could come up. Perhaps we're looking at how it would have affected some other asset, like a trust, for example. You know, whether those benefits stream into another vehicle. It comes up.

Q. Are you aware of any court ever excluding or limiting your opinions or testimony in a case?

A. No.

Q. Okay. Mr. Rybolt, you are testifying today as a result of a notice of deposition and subpoena that you received; is that correct?

A. Yes.

Q. Okay. And I'm going to go ahead and introduce Exhibits 2, 3, and 4.

(Exhibits 2, 3, and 4 marked for identification.)

BY MR. CROMWELL:

Q. Bear with me.

A. Which one do you want me to look at?

Q. Sure. So, Mr. Rybolt, just for the record, Exhibit 2 is the notice and deposition sent to you on February 20, 2026.

Exhibit 3 is the amended notice dated March 4, 2026.

And Exhibit 4 is plaintiff's responses and objections to Exhibit 3.

Just for clarity, if you would, open Exhibit 3.

A. Okay.

Q. And I can share my screen as well here.

A. I have Exhibit 3 open if that's what you're going to share.

Q. I worry sometimes that it slows down the broadband. So I'll share it just for the moment.

A. Okay.

Q. Mr. Rybolt, what we're looking at is Exhibit 3. This is the subpoena and notice of deposition you received and is dated March 4, 2026; is that right?

A. Correct.

Q. Okay. And if we scroll to the bottom of Exhibit 3, there is a section entitled "Attachment A"?

A. Uh-huh. Yes.

Q. And it lists a set of -- of requests for documents that were sent to you. Have you ever reviewed these requests before?

A. Yes, I did.

Q. Okay. And are you aware of counsel providing responses and objections to these requests?

A. I am aware of that.

Q. Okay. And if we pull up Exhibit 4, and these are plaintiffs' objections and responses to defendant's notice of deposition and of request for production of documents to Peter

Rybolt; is that correct?

A. Yes.

Q. Did you have any role in formulating the responses and objections in here?

A. I discussed Appendix A with counsel, and he sent me a draft which I reviewed.

Q. You reviewed these responses?

A. Yes.

Q. Okay. And did you also provide documents that were responsive to the document requests as well?

A. There was nothing responsive to your requests other than our engagement letter and invoices, I think, which I believe counsel provided to you.

Q. Okay. Just for clarity you understand that counsel did provide your retention or engagement letter as well as the invoices that you have submitted for working on this case; is that right?

A. That's my understanding.

Q. Okay. Are you aware of any other documents that are responsive to these requests that were not produced aside from those we just discussed?

A. I am not aware of any.
Q. Okay. Go ahead and stop sharing that.
All right. Mr. Rybolt, what, if anything, did you do to prepare for today's deposition?
A. Well, reviewed my report, reviewed back up, and discussed with counsel.
Q. When you say --
A. Excuse me. Let me amend that. Counsel and members of my team.
Q. Okay. Sorry, did not mean to interrupt you.
When you say you reviewed backup, what are you referring to?
A. I looked at the documents that are cited in my report.
Q. Okay. Did you review all of the documents you recited or just a select few?
A. I would think that I reviewed most of them. There might have been some, like my CV or something, that I didn't feel a need to review or something like that.
Q. Understood. Did you -- did you meet with any attorneys in preparation for your

deposition today?

A. Yes.

Q. And without telling me the substance of those meetings, can you tell me how many times you met with these attorneys and for how long?

A. That's probably not a precise response. I've talked to Ben several times since the report was filed. But I think we did two specific sessions where we talked about preparing for deposition.

Q. Okay. And how long were those sessions?

A. I think the first one was roughly an hour, and the second one was roughly two hours.

Q. Okay. Were members of your team involved in those deposition prep sessions?

A. One member.

Q. Okay. Can you tell me who that was?

A. His name is Josh Brown.

Do you need me to spell that for Christine.

Q. No. Thank you.

Have you had any communications with anyone other than an attorney or members of your team about your deposition today?

A. No.

Q. Have you ever had any communications with any of the individual plaintiffs in this litigation?

A. No.

Q. Have you had any communications with any of the plaintiffs' treating physicians in this case?

A. No.

Q. Okay. Have you had any communications with any other experts who have been disclosed in this case?

A. No. Let me -- just to be absolutely clear, certainly not in connection with this case. It's possible that I've had some interaction with one or more of the experts in the past, but nothing that comes to mind.

Q. Okay. Have you ever had any interactions with Mr. Chad Staller before?

A. Not that I recall.

Q. When did you first become aware of Camp Lejeune litigation?

MR. VANSLYKE: Objection.

THE WITNESS: Well, under the CLJA or more broadly?

BY MR. CROMWELL:

Q. Well, let's start with were you familiar with any Camp Lejeune litigation prior to being engaged as an expert?

A. I think I was generally aware that there were claims of water contamination. I don't -- I don't have much more of a memory than that. But I think I was generally aware of it.

Q. Okay. Prior to being engaged in this case, these particular cases, were you ever sought out as an expert for prior litigation involving Camp Lejeune water?

A. No.

Q. Okay. You understand you have been hired as an expert witness offering a report and testimony in Camp Lejeune litigation; is that correct?

A. In this matter, yes.

Q. And you understand that you are named by plaintiffs as a rebuttal expert witness; is that right?

A. That's my -- I guess that's my general understanding.

Q. Okay. Going to go ahead and introduce Exhibit 5.

(Exhibit 5 marked for identification.)

BY MR. CROMWELL:

Q. And, Mr. Rybolt, this is what we've marked as Exhibit 5 is "Plaintiffs' Designation and Disclosure of Phase III Damages and Offset Rebuttal Expert Witnesses" dated January 20, 2026; is that correct?

A. If you say so. I have not seen the date yet.

Q. Sorry. I can share my screen just for a moment.

A. Okay.

Q. If you look here, these are "Plaintiffs' Designations and Disclosures of Phase III Damages and Offsets Rebuttal Expert Witnesses," and it has listed you, Mr. Peter Rybolt, under each of the respective diseases: Kidney cancer, leukemia, non-Hodgkin's lymphoma, bladder cancer, and Parkinson's disease; is that correct?

A. I'm just reading the document along with you. I haven't seen this document before, I don't believe.

Q. Okay. Are you -- and I'll stop

sharing this.

Are you familiar with each of the 22 current plaintiffs in the Camp Lejeune litigation?

A. Define familiar.

Q. Well, let me put it a different way. You are not offering expert opinions specific to each plaintiff; correct?

Your opinions apply equally to each case in which a plaintiff has received or will receive VBA disability benefits and the U.S. is seeking an offset; is that correct?

MR. VANSLYKE: Objection.

THE WITNESS: I am responding -- I don't know if I think that the characterization that I'm responding to each plaintiff in which that is true, but broadly or in general to the plaintiffs for which that is true. Does that make sense?

BY MR. CROMWELL:

Q. I think we're probably saying the same thing. I'm just trying to make sure that we are.

You would agree with me you're not

offering any kind of specific case-specific opinions that only apply to a individual plaintiff; correct?

MR. VANSLYKE: Objection.

THE WITNESS: I think we're saying the same thing. But, again, just to be clear, I'm offering opinions about instances in general in which the government is claiming offsets based on VBA disability benefits. That could be said to affect plaintiffs individually. That's just the little part that I'm struggling with. But I am not responding or calculating damages with respect, I guess, to individual plaintiffs, if that's what you mean.

BY MR. CROMWELL:

Q. Understood. And the difficulty trying to parse it apart. It seems like your opinions apply equally across to each of the plaintiffs that you've identified as a VBA bellwether plaintiff; correct?

MR. VANSLYKE: Objection.

THE WITNESS: Sorry, Ben.

I don't know about equally. But,

yes, I think they apply to the plaintiffs that are identified in my report.

BY MR. CROMWELL:

Q. Okay. And in your report you refer to plaintiffs as VBA bellwether plaintiffs; is that right?

A. Yes.

Q. Okay. And just for simplicity's sake, if I use the term "VBA bellwether plaintiffs," can we agree it's the same way in which you've used that term in your report just so we have a common understanding?

A. I think that's fair.

Q. Okay. And based your usage of that term, the term specifically refers to 14 of the 22 plaintiffs; is that correct?

A. Just to -- yes, that is correct with respect to my report. I think it is -- or could be a little bit of a moving target. I'm not trying to make that definitional with respect to the claims in the case if that makes sense. But those our -- I am referring to 14 specific plaintiffs generally in my report.

Q. Well, the opinions that you're offering in this case are specifically with

regards to the following cases: Mr. Mark Cagiano, Jefferson Criswell, Cometto Davis, David Downs, David Fancher, Joseph Gleesing, Bruce Hill, Allan Howard, Scott Keller, Jerry Laramore, Gary McElhiney, Frank Mousser, and Edgar Peterson and Richard Sparks; is that correct?

A. Well, I don't have my report in front of me, and I didn't memorize all of the names. If you're reading that from my report, from the footnote where I identified those plaintiffs, then I'm willing to accept that that's the correct list.

Q. Okay. Well, just for completeness, I will go ahead and enter your report, which we've marked as Exhibit 6.

(Exhibit 6 marked for identification.)

A. Okay. I have it open.

Q. Okay. And if you would do -- look at what's marked as page 1, it's PDF page 3, at the bottom you have a footnote number 4; is that correct?

A. Yes.

Q. And the individual plaintiffs I just named are the plaintiffs you have identified as

the VBA bellwether plaintiffs; is that right?

MR. VANSLYKE: Objection.

THE WITNESS: If you give me -- sorry, Ben, did you object?

MR. VANSLYKE: Yes, but you can proceed.

THE WITNESS: Okay.

Mr. Cagiano, Mr. Criswell, Mr. Davis, Mr. Downs, Mr. Fancher, and Mr. Gleesing, Mr. Hill, Mr. Howard, Mr. Keller, Mr. Laramore, Mr. McElhiney, Mr. Mousser, Mr. Peterson, and Mr. Sparks. So I think we agreed.

BY MR. CROMWELL:

Q. Okay. As far as you know, as you sit here today, you are not offering expert opinions relevant to any other bellwether plaintiffs in these cases; is that correct?

MR. VANSLYKE: Objection.

THE WITNESS: I think we get into a little bit of a legal conclusion. I don't want to foreclose the possibility that other plaintiffs could emerge with the same issues, but to my knowledge, sitting here today, those are the 14.

BY MR. CROMWELL:

Q. Understood. Have you seen any kind of information, deposition testimony, or expert opinions with regards to any of the other bellwether plaintiffs?

MR. VANSLYKE: Objection.

THE WITNESS: I don't believe so.

BY MR. CROMWELL:

Q. Okay.

A. I don't recall looking at other expert -- or expert reports regarding other plaintiffs. Although, I believe there was one that was initially identified and then settled or withdrew. So that might be an exception.

Q. Understood. The report that you have produced that we've marked as Exhibit 6, this is the only report you have created in these cases; is that correct.

A. In the Camp Lejeune cases?

Q. Yes.

A. Yes, this is -- this is it.

Q. As you sit here today, do you have any intention of offering any other reports in these Camp Lejeune cases?

A. Well, it's not up to me. But I have

not been asked to do so at this point.

Q. Is it fair to say that this report sets out the totality of and the scope of the opinions you plan to offer in these cases?

A. At least at this point, that's my understanding.

Q. Okay. To put it differently, at this point, you are not planning or offer or form any additional opinions; is that correct?

A. I haven't been asked to go beyond what's here, but that could happen obviously.

Q. Okay. But as you sit here, you have not been asked to do that; correct?

A. Correct.

Q. Okay. Looking at Exhibit 6, your report, you provided a materials considered list which you attached as Appendix B to your report; is that correct?

A. Yes.

Q. And this is the list that begins on page -- PDF page 37 of Exhibit 6; is that correct?

A. That appears to be correct, yes.

Q. Okay. You have also provided what we've entitled "First Supplemental Materials

Considered List," and this is what we have marked as Exhibit 7. I'll go ahead and enter that as well as Exhibit 8.

(Exhibits 7 and 8 marked for identification.)

BY MR. CROMWELL:

Q. If you look at Exhibit 7, Mr. Rybolt, this is entitled "First Supplemental Materials Considered" dated March 9, 2026; is that correct?

A. Yes.

Q. And this identifies the depositions of Andrew Brod, Andrew McIlroy, and Tricia Yount; is that correct?

A. That's correct.

Q. Did your review of these depositions affect the opinions you're offering in this case?

A. Not in any meaningful way.

Q. Did they affect your opinions in any kind of way?

A. I don't believe so. There was very little discussion or response to what I said, so I don't believe that they were terribly informative.

Q. Okay. Exhibit 8 is entitled "Second Supplemental Materials Considered" dated

March 10, 2026; is that correct?

A. Correct.

Q. And in this, you have cited to two documents. One is CLJA_USA_Yount_139 and this is a table for Plaintiff Howard. You've also cited to CLJA_USA_Yount_140 through 141, and it's a table for Plaintiff Criswell; is that correct?

A. Again, I'm reading the document along with you. But, yes, actually, I mean, this is my document. I'm sorry. Yes, I agree with you, that's what this says.

Q. Okay. Did your review of these tables affect your opinions in this case or alter them?

A. No.

Q. Okay. Did you review the testimony of the United States expert, our nonretained expert, Jadine Piper, in this case?

A. I don't recall having done so.

Q. Okay.

A. No, I don't recall.

MR. VANSLYKE: Counsel, I will represent to you that we do not yet have a copy of that transcript to have been provided to him.

MR. CROMWELL: Understood. All right. Fair to say you have not read it then.

THE WITNESS: I think that's fair.

BY MR. CROMWELL:

Q. Okay. You have in your report, going back to Exhibit 6.

A. Okay.

Q. And just generally speaking, you have cited to a number of legal cases both in your report as well as in your materials considered list; is that correct?

A. That's correct.

Q. You've also cited to a number of federal statutes, both in your materials considered list and in your report; is that correct?

A. That's correct.

Q. Do you normally cite to federal statutes or state statutes as well as case law in your -- in the reports you prepare?

A. Yes.

Q. Okay. Do you, yourself, research these cases or someone on your team research these cases?

A. Yes.
Q. Is the answer -- I guess it was compound. So do you research these cases that you use in your reports?
A. I have -- yes, I do that research, members of my team might do that research. We might be pointed to some things by counsel in some cases. But, yes, I do that research.
Q. Are there any cases or statutes that you cite and rely upon in your report that were pointed to you by counsel?
MR. VANSLYKE: Objection.
THE WITNESS: Not that I recall.
BY MR. CROMWELL:
Q. Okay. Mr. Rybolt, did you attend law school?
A. No.
Q. You are not an attorney; is that correct?
A. I am not an attorney.
Q. And, therefore, you have not passed the bar in any kind of jurisdiction; is that correct?
A. I have never passed the bar.
Q. Did you ever obtain a degree in legal

studies?

A. Legal studies were a part of my MBA, but I do not have a degree in that field.

Q. Okay. You have a number of footnotes in your report that cite to various publications by the Congressional Budget Office; is that fair?

A. I think there are citations to that, yes.

Q. You also have a number of citations to federal regulations, or CFRs, that are related to VA disability; is that right?

A. Correct.

Q. Prior to preparing your opinions in this case, when -- have you ever relied upon reports by the Congressional Budget Office before?

A. Yes.

Q. And what kind of context or opinions that you've offered before?

A. I'm not sure that I recall a specific instance, but it's something that I've certainly researched before.

Q. Okay. Same thing. When -- have you used and relied upon federal regulations that have to deal with VA disability benefits before?

A. Specifically, with respect to VA disability, I don't recall any examples of that, but it's certainly possible.

Q. Okay. But as you sit here, you don't recall any?

A. Nothing comes to mind.

Q. Okay. We discussed before in response to the subpoena that you received, you provided a retention or engagement letter; is that right?

A. Yes.

Q. As well as a compilation of invoices; is that right?

A. That's my understanding.

Q. Okay. I'm going to go ahead and enter into the record what we've marked as Exhibit 9 as well as Exhibit 10.

(Exhibits 9 and 10 marked for identification.)

THE WITNESS: I just want to, while we're pausing here, clarify a point. I think I cite CFR -- two different CFRs and one source from the Congressional Budget Office. So there might be multiple cites to the same source.

BY MR. CROMWELL:

Q. Understood.

A. I think your question was you've cited the Congressional Budget Office several times. And I just wanted to clarify that point.

Q. Gotcha.

A. I'm sorry. What are -- what am I supposed to be looking at?

Q. So we're just looking at what we've marked as Exhibit 9.

A. Okay.

Q. And I'll go ahead and share my screen. Exhibit 9 is dated August 6, 2025, and this is essentially an engagement letter that you have sent to plaintiffs' counsel; is that correct?

A. That's correct.

Q. And you're familiar with this letter?

A. I am.

Q. You signed it?

A. I did, I believe. If you can show me the signature, I think I did.

Q. Absolutely. Is that your signature below?

A. Yes, it is.

Q. Okay. I'm just looking at the engagement letter, second paragraph. It indicates that you will lead the engagement and the subject of our work is expected to include damage assessment and economic analysis; is that correct?

A. That's correct.

Q. Were you always engaged to offer opinions about benefits offered by the Department of Veterans Affairs?

A. I'm not sure I understand your question.

Q. Sure. At the time you sent this engagement letter, was it your expectation that you would be offering opinions with regard to disability compensation or disability benefits that are offered by the Department of Veterans Affairs as part of your expert opinions?

A. I don't believe that we had gotten that specific. I think we probably talked generally about veterans benefits and what they were, you know, asking me to be engaged on. But I don't think we had gotten into very specific discussions of the case, if that's your question.

Q. Okay. Well, you were engaged in

August of 2025; is that right?

A. Correct.

Q. Are you aware or do you know whether you were disclosed as an affirmative expert on behalf of plaintiffs?

A. I don't know one way or the other.

Q. Okay. Let me shop sharing this and bring up what we've marked as Exhibit 10.

All right. Mr. Rybolt, Exhibit 10 is a compilation of invoices produced to the United States. They are Bates numbered PLG-EXPERT_RYBOLT_3 through 17; is that correct?

A. I don't see the 17, but I see the 3.

Q. This is the last page, 17.

A. Sure.

Q. Okay. Are you familiar with these invoices?

A. Yes.

Q. Are you the one who prepares these invoices?

A. No. Those are prepared by another member of the staff.

Q. Okay. Who prepares them?

A. Josh usually -- Josh Brown usually does a pass, and then we have a research

assistant, I think is her title, Von Pinckney. I think it's P-I-N-C-K-E-Y.

Q. Okay. Do you have any reason to disagree with the information contained in the invoices that have been submitted by you in this case?

A. I have no reason to -- it depends on what you're talking about. I suppose, although, you're making a pretty general statement. But, yes, I think they're presented fairly.

Q. Are you aware of anything incorrect in these invoices that you submitted?

A. I'm not aware of anything. But if you have a particular question, I'm happy to respond to it.

Q. Do you have any reason to disagree with the time entries or descriptions that have been submitted in this case?

A. Disagree? I have no reason sitting here to think anything was incorrect.

Q. Your bills -- your first bills were from August 2025; is that correct?

A. Correct.

Q. And you've mentioned one, but you have three -- two other -- you have two team

members that you indicate in your invoices, is that correct? Mr. Josh Brown, Ms. Aurora Massari; is that right?

A. I'm only looking at one, but I think they're the only ones that had time on this case. There could be some other incidental time --

Q. Okay.

A. -- from other people.

Q. If there was time from other people, who would that be? Because I'm only aware of these two other individuals based off your invoices?

MR. VANSLYKE: Objection.

THE WITNESS: Well, to -- sorry.

If you scroll through, I can see if there are other names attached.

BY MR. CROMWELL:

Q. Mr. Brown, Ms. Massari.

A. Yeah, I think that's it.

Q. These are from January. Are you aware of anybody else besides Josh Brown or Aurora Massari working with you on your reports in these cases?

A. No.

Q. Again, Mr. Brown -- his original

title is manager and it looks like he's eventually a director. What was his role in assisting you with the preparation of your reports?

A. He generally managed the research and analysis or at least elements of the research and analysis working with Aurora that we did for the report. He assisted, to a limited degree, with drafting maybe write-ups of some of that research or analysis. But, generally, that's about it.

Q. Okay. And what role did Aurora Massari have in assisting you in the preparation of your reports?

A. Mostly, she worked at Josh's direction implementing the, perhaps, research or analysis.

Q. And you indicated that Mr. Brown may have helped write part of your report in this case; is that correct?

A. He did some initial drafts of some limited sections, I think. Mostly just write-ups of, perhaps, a particular area of research or something like that.

Q. Okay. We're going to look at Exhibit 10 and Bates Number ending in 13.

Do you see this page with title "Time Detail for In Re: Camp Lejeune Water Litigation"; is that correct?

A. Uh-huh.

Q. And for Mr. Brown, it indicates various entries where he has included the description "draft report"; is that right?

A. Uh-huh.

Q. Can you tell me what portions of your report that you submitted that he drafted?

A. Well, let me be clear. I mean, I've already given you some sort of general description. I don't recall specifically what he might have worked on. But let me be clear that whatever he drafted -- I draft my reports myself. I typically rewrite or rework extensively whatever he's given me.

And that's not an insult to Josh. It's just that I prefer to put things in my own voice, validate things in my own way.

So, yes, he does assist, just as I think people do at firms like mine all over the country in helping to draft certain limited sections, but it's my report.

Q. So just to clarify, it's not abnormal

in your experience that you would have other team members that assist in drafting your report?

A. It's not at all unusual.

Q. Okay. Back to my question before, though, even though you might have rewritten them, do you recall what sections of your report he initially drafted?

A. I don't recall right now.

Q. Okay. Same question. It indicates that Massari had certain tables that she was responsible -- or was preparing. Do you know what tables those are referring to?

A. I don't recall specifically. I didn't work directly with Aurora very much. It was Josh.

Q. Okay. Does the fact that you had team members help you in drafting your reports mean that these are not your opinions that you hold?

A. No.

MR. VANSLYKE: Objection.

BY MR. CROMWELL:

Q. So these are all your opinions; is that correct?

A. I signed my name to it.

Q. Okay.
A. It's my report.
Q. Understood. Based off the invoices that you have submitted, I did not see any invoices for September or October; is that correct?
A. It's correct that you didn't see them. I didn't see them either.
Q. Okay. Do you know, as you sit here, whether there were invoices for September or October 2025?
A. I assume the answer to that is no or we would have produced them.
Q. Okay. Look at page -- a Bates Number ending in 6 of Exhibit 10. And this is page 1 of 3 for your November 30, 2025, invoice; is that right?
A. Yes.
Q. And under the description of work, you've indicated develop draft report outline and arguments; is that correct?
A. That's what that says.
Q. Okay. You would agree with me at this point, November 2025, you did not have any of the United States experts' reports; is that

correct?

A. I don't recall the exact timing. I recall that there were two sets of reports that we received.

Q. When you say "two sets of reports," do you know what reports you're referring to?

A. Your economists' reports, I think.

Q. Okay. So did you have and use reports that were produced by the United States experts in April or May of 2025?

A. Sitting here without --

MR. VANSLYKE: Objection.

THE WITNESS: -- looking at docs considered, I don't recall that specifically.

BY MR. CROMWELL:

Q. Okay. In your materials considered list -- well, let me -- let's go back to Exhibit 6. And we're going to look at your materials considered list, which is Appendix B; is that correct?

A. Yes, that is correct.

Q. Okay. And you have various categories. First is legal materials. Second is damages assessment forms. And then you have a

section entitled "Expert Reports"; is that right?

A. Yes.

Q. Okay. And I'm scrolling down, and it looks like you have listed all the reports -- not all the reports -- many of the reports from Ms. Yount, Mr. Brod, and Ms. Tosic from December 15 -- dated December 15, 2025; is that correct?

A. There are -- yes, many reports from December 15, 2025.

Q. You would agree with me there aren't any reports from those experts from April or May of 2025; is that correct?

A. I don't see anything listed here, that's correct.

Q. Okay. As you sit here, though, did you have access to their reports from April or May of 2025?

A. I don't have a specific -- excuse me, a specific recollection. But just based on this list I would say that, no, we did not receive those and we did not review them.

Q. Okay. If you were preparing draft report outlined in November of 2025 and the United States experts reports weren't produced

until December of 2025, can you tell me what portions of your opinions you had already reached at that point?

MR. VANSLYKE: Objection. And I'm going to instruct you not to answer to the extent that it implicates conversations with counsel.

THE WITNESS: Your question assumes that I had reached opinions at that point. There's a lot to drafting a report that doesn't go into actually what the opinions are.

BY MR. CROMWELL:

Q. Okay. Had you reached any opinions as of November of 2025?

A. I don't recall specifically. I would note for the record, though, that there are -- looks like there are reports from earlier periods, the October dates, at the top of the list.

Q. You're referring to plaintiffs' expert Chad Staller?

A. Yes. I apologize. Yes, that's correct.

Q. Okay. Are there any other expert

reports that you're referring to?

A. Not that --

MR. VANSLYKE: Objection.

And, again, I will instruct you not to discuss conversations with counsel. But to the extent you can answer otherwise, please go ahead.

THE WITNESS: I see that the reports that we received from defendant's experts were in December.

BY MR. CROMWELL:

Q. Right. Did you review any other experts besides those or Mr. Staller's reports from October of 2025?

A. Not -- not that I recall.

Q. Okay. Do you have any kind of estimate, as you sit here, as to how much you have billed for your work in these cases?

A. I don't recall. But I can sum them up quickly, if you like.

Q. That's okay. You don't have any reason to disagree with the amounts that have been billed in these invoices?

A. No. I don't think February has been prepared yet or if it has, it hasn't been sent to

counsel.

Q. Okay. Do you have any kind of estimate as to what amount of time and/or charges you incurred for February 2026?

A. I don't recall. I don't believe I've seen that yet. It would not have been massive. It would have been a little bit of prep and review.

Q. Okay. All right. Let's look at -- sticking with your report, we're going to look at Appendix A, which is a copy of your CV; is that correct?

A. Sure.

Q. So just for completeness of the record, this is Exhibit 6, your report, Exhibit A -- or Appendix A. My apologies.

A. Sure.

Q. Okay. And this is the resume and CV you submitted with your report; is that correct?

A. It appears to be.

Q. Has your CV or resume been updated since January 20, 2026?

A. It's possible. I don't -- I don't specifically recall. I update it periodically.

Q. As you sit here, you don't recall

updating it since it's been produced in January 2026?

A. I don't believe so.

Q. Okay. If we scroll down, we're looking at -- there's a section entitled "Your Education"; is that right?

A. Yes.

Q. And it indicates you have a bachelor's of fine arts from Webster College Conservatory of Theater Art; is that correct?

A. That's correct.

Q. You received that in 1982?

A. I did.

Q. Just curious, is that Webster like St. Louis, Missouri, Webster, is that --

A. Yes, it's now known as Webster University, but it was Webster College when I went there.

Q. Understood. Are you from St. Louis?

A. I'm originally from Missouri. I think we moved to St. Louis when I was about one or something like that.

Q. Got it. I was just curious. I lived there for a while, not that it relates to the deposition. I'm just curious.

A. Yeah. No, I grew up in U City and then we moved to Arizona.

Q. All right. You have, after obtaining your bachelor's in 1982, you worked as a freelance producer, director, and actor; is that right?

A. Yes.

Q. And you also founded what's known as the Edgar Road Theatre Company; is that right?

A. I did.

Q. Is that in Chicago?

A. It was.

Q. You also were the director of development of the Organic Theater; is that right?

A. Yes.

Q. And you were the managing director of The Next Theatre; is that right?

A. I was.

Q. And you are also the director of development at the Nightlight Theatre; is that right?

A. It's Northlight. One word.

Q. I apologize.

A. That's okay.

Q. Director of development at the Northlight Theater; is that right?

A. Yes.

Q. After about -- it looks about 30 years of working in performing arts, you went and obtained your MBA at the University of Southern Cal; is that right?

A. Probably 25 years, but roughly, yes.

Q. Okay. And you graduated with your MBA in 2006; is that right?

A. I finished -- I actually walked in 2007, but I finished in 2006.

Q. Thank you. Just curious, what led you to seeking and obtaining your MBA after working in performing arts for 25 years?

A. I think that's between me and my therapist. I was anxious for a change. I was -- it's difficult to make a living in the arts. And I am a very curious person and I had long been thinking about it, an advanced degree. And my ex-wife dragged me out to Los Angeles against my will, and I decided the time was right to go to grad school.

Q. Okay. Obviously, you have a particular career now. Do you still do any work

in the performing arts at all?

A. I have some loose affiliations. I do some freelance consulting a little bit with some arts organizations. I was on the board of the LA Master Chorale for a time. So I have some affiliation. But I'm not actively pursuing employment in the arts, if that's your question.

Q. It isn't. I was just curious if you had involvement still.

It looks like after you obtained your MBA you worked for a group called Analysis Group, Inc.; is that right?

A. Correct.

Q. Can you generally tell me what your role was while you were there?

A. I generally worked -- actually started as an associate and supported work of various teams and experts in various litigation matters, in all, probably something like three to four hundred matters over the course of -- what was it? -- 16 plus years that I was there, and generally advanced.

So there's not a whole lot of distinction between the roles of an associate or manager or vice president. You tend to manage

more cases and leverage yourself in different ways. But the work stays essentially the same.

Q. Did you have an area -- so let me step back.

Was your work while at Analysis Group, Inc., generally working as or in assisting someone who was involved in litigation?

A. Yes. I started managing cases early on. Generally, that's the role that conducts all of the day-to-day work or manages all of the day-to-day work. Generally, on behalf of a testifying expert. Sometimes that's an internal person. Sometimes that's an external expert, an academic expert, or professional expert, things like that. And then, eventually, I started testifying on my own.

Q. Okay. When did you start testifying on your own, if you recall?

A. I think -- I think the first time was in 2013.

Q. Okay. Did you have any particular subject matter or area of focus while working at Analysis Group, Inc.?

A. My work was quite broad and covered a lot of ground. I will say that I was generally

known as the entertainment guy, and I did a lot of work in entertainment litigation. But that's certainly not -- not by any means is that all that I did.

I worked in bankruptcy, divorce cases, class action cases, antitrust from time to time, and, of course, lots of intellectual property and breach of contract tort and so on.

Q. Okay. Did you ever do any work on behalf of a U.S. government?

A. I think Analysis Group certainly did work. I'm trying to recall if I was involved in any of those cases. I don't -- nothing is coming to mind, but I would say I probably did at some point, but Analysis Group as a firm certainly did at that time.

Q. Okay. Did you have any involvement in working on cases that involved the U.S. Department of Veterans Affairs?

A. Again, I would say that there are -- Analysis Group worked on cases. I would be almost certain that they worked on cases involving Veterans Affairs, but I don't recall specifically working on those.

Q. Okay. Do you recall ever working on

cases that involved veterans disability compensation or disability awards?

A. Well, again, I think pensions, disability awards, and similar kinds of construct including probably VA benefits have been part of other cases. I'll stop there.

Q. When you say "part of other cases," I'm trying to understand how were those cases involving disability awards? I'm not referring to pensions, but disability awards or compensation.

A. Well, how does a pension differ from a disability award or disability payment.

Q. I'll put it a different way. Do you treat disability -- or VA pensions as the same as VA disability awards?

A. I -- there may be a distinction. I'm not sure exactly how you're using those terms in terms of different programs or benefit streams. But mechanically, mathematically, there's not much difference, if any.

Q. Okay. I didn't have a definition in mind. You had mentioned pensions and or -- and disability. So I didn't know if you a had distinction in mind.

A. Well, that's why I'm grouping them together because I think the analysis is the same, whether you're talking about a pension, whether you're talking about a disability, benefit, whether you're talking about some sort of insurance or annuity. Fundamentally, at a fundamental level, those are all sort of treated the same, mathematically, quantitatively, in terms of how they work and how they function.

Q. When you say the analysis is the same, what kind of analysis are you referring to?

A. Well, for example, if you were trying to understand income to a marital estate in a divorce case, those would be something that you would want to consider if you were going to divide the assets.

There could be other cases involving trusts, for example, in which pension benefits are an element of the trust or an asset of the trust. Things like that.

Q. Got it. Those are the kind of cases you've been involved in?

A. I've been involved in those kinds of cases, sure.

Q. Okay. After Analysis Group, you

became VP of Cirque Analytics in 2023; is that correct?

A. That's correct.

Q. And you're still there?

A. I am.

Q. The same thing?

A. Yes.

Q. Has your work at Cirque Analytics generally been the same as it was as a VP at Analysis?

A. At Analysis Group?

Q. Group. Yeah, sorry.

A. Yeah, they're generally the same. We're in the same industry. We do many of the same types of things.

Q. Okay. Do you do any kind of consulting or nontestifying work as part of your job?

A. That comes up, sure.

Q. What would you say the percentage of testifying to nontestifying work is for your position?

A. It depends on what you are -- are you talking about billable work, the percentage between testifying and nontestifying? Or, I

mean, I do other things for the company that aren't billable that would certainly take up some of my time.

Q. Sure. And I'm referring to, like, admin, like, stuff, work for clients, so billable work for clients. What kind of percentage would you say you allocate to nontestifying work versus testifying work?

A. Nontestifying would probably be -- it would certainly vary, but maybe 10 percent.

Q. Got it. So the vast majority of your work, it involves testifying work; is that correct?

A. That's correct.

Q. Okay. Looking at your CV again within Exhibit 6, under your past positions, you have a section entitled "Representative Expert Engagements." Do you see that?

A. Yes.

Q. And I'm paraphrasing it, but it indicates you have been engaged in breach of basic agreements, misappropriation of trade secrets, copyright infringement, trademark infringement. Is that a fair generalization of this category?

A. Well, there are others, but yes.
Q. Okay. That would also include fraud, defamation, royalty accounting as well?
A. That -- yes, those are included as well.
Q. Okay. You also have a section entitled "Selected Professional Experience"?
A. Yes.
Q. What is the difference from representative expert engagements and selective professional experience? What distinction are you drawing there?
A. So I think, as I mentioned earlier, I've been doing this for almost 20 years. I've worked on literally hundreds of engagement. The majority of those, I'm not necessarily the testifying expert, but I have worked in all of these other areas. And so that's representative of those kinds of engagements.
Q. So representative expert engagements is where you've been working on cases, but you're not necessarily the testifying expert, is that what you're referring to?
A. The other way around.
Q. Okay. Just --

MS. BUTLER: Hey, guys, I'm sorry to interrupt, but I think Ben got disconnected.

THE VIDEOGRAPHER: All right. We're going to go off the record 10:13.

(Recess taken from 10:13 a.m. until 10:21 a.m.)

THE VIDEOGRAPHER: We're back on the record at 10:21 a.m.

BY MR. CROMWELL:

Q. Mr. Rybolt, just before we broke, we had discussed the concept of a VA pension. Can you tell me, in your own words, what a VA pension is?

MR. VANSLYKE: Objection.

THE WITNESS: I'm not sure that I can distinguish that necessarily from VA benefits generally. They're, I believe, retirement benefits and disability benefits and other benefits that would fall into that category.

BY MR. CROMWELL:

Q. Okay. But as you sit here, you can't distinguish for me what a VA pension is versus VA disability benefits are?

A. I'm not --

MR. VANSLYKE: Objection.

THE WITNESS: Sorry. I'm not specifically aware of what those distinctions might be.

BY MR. CROMWELL:

Q. Okay. You indicated that you have used VA pension or VA disability benefits as treating them as income in certain expert engagements; is that correct?

A. They would have been, sure, elements of income or revenue in certain contexts.

Q. Okay. Other than working on cases where VA disability compensation is treated as income or revenue, can you tell me what other expert engagements you had in which VA disability compensation was involved?

A. Can you repeat that?

Q. Sure. I'll do my best.

Other than working on cases where VA disability compensation is treated as income or revenue, can you tell me what other expert engagements you've had in which VA disability compensation was involved?

A. I don't think I'm aware of -- I mean, VA disability compensation would be income or

revenue in any case. I'm not aware of any exceptions to that.

And maybe I need to clarify how I am using the word "income" or "revenue." It is a positive stream, a benefit to the recipient of some amount of money.

Q. Have you ever -- let me piece this apart a little bit. In any of the cases that you have worked on as an expert, have you ever been asked to calculate a veterans disability rating?

A. The disability rating, no.

Q. Have you ever been asked -- in any of your expert engagements, have you ever been engaged to determine what kind of compensation a veteran would receive due to their disability ratings?

A. Are you asking me if I was asked to make the calculation based on a disability rating --

Q. Yes.

A. -- or if I was asked to simply observe?

Q. The first.

A. I have not been asked to make a calculation of a benefit based on a disability

rating.

Q. We were talking about your CV a little bit. And I think -- and just -- we're going to cover just -- I don't want to be redundant, but I think Ben dropped off, so I want to make sure that I'm not, like, prejudicing anything here.

You had indicated to me that there is a difference between the section entitled "representative expert engagements" and "selected professional experience" in your CV. Can you describe for me the difference between those two categories in your resume?

A. In the first, I was engaged for the purpose of providing expert testimony. Although, it does necessarily mean that I gave expert testimony since, you know, sometimes cases settle or get thrown out or whatever, right.

Q. Sure.

A. In the other -- in the second category, it's more broadly expert -- or excuse me, consulting work that I've done in litigation.

Q. Okay. I was sharing it. I'll share it again. Just looking at Exhibit 6, which is your report and your appendices, and this is your

CV, and looking at your representative expert engagements here -- do you see where I'm looking?

A. Yes.

Q. You have been engaged as an expert to offer testimony in breach of basic agreement cases; is that correct?

A. Yes.

Q. You have been engaged to offer testimony in misappropriation of trade secrets and breach of contract cases; is that correct?

A. Yes.

Q. You've been offered -- asked to offer testimony or opinions in breach of contract, trade infringement, and copyright infringement cases; is that right?

A. Yes.

Q. You have been asked to offer testimony in breach of contract, fraud, and defamation cases; is that correct?

A. Yes.

Q. You have been asked to offer testimony in royalty accounting cases; is that correct?

A. Yes.

Q. And you have been asked to offer

opinions and testimony in copyright infringement cases; is that correct?

A. Yes. Yes.

Q. And you've been asked to offer opinions or testimony in trademark infringement cases; is that correct?

A. Yes.

Q. Any general topics that I'm missing from your section on representative expert engagements?

A. Well, you listed everything that I listed there. It's not intended as an exhaustive list. There are probably other areas, if I sit here for a minute and think about them.

Q. Sure. But you would agree that these are the primary areas in which you have offered testimony in the past?

A. Those -- those are the areas that I've chosen to put on my CV, so I think that's a fair characterization.

Q. Okay. With regard to your selected professional experience, and you indicated this is more in a consulting fashion versus the testifying expert; is that right?

A. Typically in most, if not all, of

those cases, I would have been managing the case on behalf of the expert.

Q. Gotcha.

A. But it would have been, you know, obviously, very similar work.

Q. Okay. And you provided work in general commercial litigation where you applied financial accounting and statistical concepts and methods in a broad range of commercial litigation; is that right?

A. Yes.

Q. In this section, do any of these engagements involve you performing work on behalf of the Department of Veterans Affairs?

A. Not that I recall.

Q. Okay. Have you personally ever performed work on behalf of the Department of Veterans Affairs?

MR. VANSLYKE: Objection.

THE WITNESS: I think I have the same answer to that question.

BY MR. CROMWELL:

Q. Okay.

A. I haven't been engaged by the Department of Veterans Affairs outside of my

consulting work, if that's maybe your question.

Q. Well, I guess we should step back. Have you ever been engaged to perform work on behalf of the Department of Veterans Affairs regardless of whether it's in consulting or testifying fashion?

A. Nothing comes to mind.

Q. Okay. Have you ever performed or been engaged to perform work against the Department of Veterans Affairs?

A. Nothing comes to mind.

Q. Okay. You have a few other sections in here. One is "Other Intellectual Property." And it says you have evaluated damages and related claims in copyright, trademark, trade dress, and patent infringement litigation, as well as misappropriation of trade secrets, false designation, and false advertising disputes. Is that correct?

A. That's what my -- the document says, yes.

Q. Okay. Generally speaking, you seem to have a lot of experience in testifying about, like, lost profits and commercial cases. Is that a fair assessment?

A. Yes, that's -- that's reasonable.
Q. I also notice you have a lot of experience in testifying about disgorgement of profits in commercial cases; is that correct?
A. That's correct.
Q. Last section -- or not the last, but the next section is entitled "Media and Entertainment." And it says you have experience in media and entertainment matters; is that correct?
A. Yes, I do.
Q. And then your -- I think it's the last section, you have a section entitled "Securities" and you have experience in commercial litigation involving various securities related actions; is that right?
A. I do.
Q. And you've listed things, such as mortgage-backed securities, shareholder actions, ERISA litigation, litigation for purchasing securities and securities lending; is that right?
A. Yes, that's correct.
Q. Okay. In your resume, you do not specifically list an experience section entitled personal injury or wrongful death; is that right?

A. I don't have that section, no.
Q. In your resume, you do not have an experience section related to veterans disability determinations; is that correct?
A. I do not have that section, no.
Q. Okay. The last part of your CV is entitled "Publications and Presentations." Do you see that?
A. Yes.
Q. And it appears to list approximately ten publications and presentations; is that right?
A. That's roughly correct.
Q. Do you know if any of the publications you have on here are peer-reviewed publications?
A. Yes. The publication in Landslide was reviewed. "Lost Profits Damages: Principles" is a book which was edited by Mr. Boyles and Mr. Kinrich. In that sense, it is peer reviewed because they certainly read and reviewed and commented on my work. And they are professionals in the business.
I believe causation in the role of the damages expert for the ABA would have been

reviewed. Although, it might have been a limited review.

Q. Sure. I understand.

A. Les Nouvelles certainly does a review and passes back comments, so that's the "More Blurred Lines."

I think the others would -- there may have been commentary from other professionals on some of the others but probably on a more limited level.

Q. Understood. Okay.

Do any of your publications or presentations have to do with veterans disability awards or compensation and how they operate?

A. I have not written on that subject, no.

Q. Do any of your publications or presentations have to do with offsets at all?

A. Well, offsets are a common concept that appear in almost every case or at least are to be considered in any case where you're looking at damages. It's a common English term.

If you're speaking specifically about the way that you've used offsets, I guess, or your economists have, and in the context of

veterans' disability payments, you know, perhaps not that narrow. But offsets have come up in many cases.

Q. In what kind of cases -- well, let me step back. How do you -- how do you use the term "offsets" when you're saying that many cases involve offsets?

A. Well, an offset is just, you know, an amount of money that equates to another to ensure that we are not double counting. So, for example, in disgorgement cases, very often we're trying to understand what were the sales, the -- perhaps, I'll assume that we're talking about infringement, infringing sales of the defendant. The plaintiff may be entitled to some of the profits or all of the profits on those infringing sales. Plaintiff might also be entitled to their own losses, but not if it's the same sale.

Very often with a direct competitor relationship, the sales by some or all of the sales made by the defendant would have been sales that the plaintiff would have made in the absence of the wrongful conduct. So those two things offset. That's -- that's an example of an offset.

Q. Understood. I appreciate that.

In the context of benefits provided by a state or federal government using that term in that context, do any of your publications or presentations have anything to do with offsets as I just defined it?

A. I'm sorry. It was in the context of disability payment?

Q. Of benefits offered by a federal or state government.

MR. VANSLYKE: Objection.

THE WITNESS: Let me just check. I think that would be a stretch at best. I don't think any of these directly deal with that topic.

BY MR. CROMWELL:

Q. Okay. Do any of your publications or presentations have to do with the appropriateness of offsets as we've -- as I'm using it and just defined it, and when they may or may not be applied in a given case?

MR. VANSLYKE: Object.

THE WITNESS: Sorry, Ben, you objected?

MR. VANSLYKE: Yes, but you can

proceed.

THE WITNESS: I would say to some degree "More Blurred Lines, the Downstream Infringement and Disgorgement of Profits" in Les Nouvelles, it deals directly with the issue of disgorgement and how disgorgement is determined, which, you know, we're doing a comparison and a contrast between three similar cases in which the results were very different.

To some extent, that deals with offsets or how disgorgement is determined. I'm thinking -- let me look at the others.

BY MR. CROMWELL:

Q. Did that article or presentation involve anything with regards to benefits offered or provided by a state or federal government?

A. No.

Q. Okay. Do any of your publications or presentations have to do with calculating lost earning capacity?

A. Probably all of them.

Q. All of them do?

A. Well, earning capacity, expected earnings, actual earnings, they're all part of

the same calculation. They apply in almost every case. You're trying to understand what earnings would have been and the absence of some wrongful conduct. That includes effects -- possible effects on actual earnings, earnings capacity, expected earnings.

Q. Just to make sure I'm clear, do any of your publications or presentations have to do with how you calculate lost earning capacity?

A. As in a mechanistic way, is that your question?

Q. What -- as far as what inputs go into determining lost earning capacity?

A. I don't think I talk about a methodology of determining lost earnings in that -- in the way that you've just defined it. Although, it's at least indirectly implicated in almost all of these.

Q. That's what I was -- I'm trying to figure out if you're ever published on the methods for determining lost earning capacity because these are one of the topics you're testifying about.

A. Again, I think lost earnings capacity goes hand in hand with lost earnings. In any

instance, in where you're looking at lost earnings, you're going to be looking at lost earnings capacity. Now, you may not need or want to do a calculation or it might not be available to you. In some cases, it just depends on the facts of the case.

Q. Understood. When you say lost earnings and lost earning capacity go hand in hand, what do you mean?

A. Well, they're all part of lost earnings.

Q. Okay. Do any of your publications have -- or presentations have to do with comparing or defining lost earnings versus lost earning capacity?

A. It's such a basic concept, I don't think I specifically called that out.

Q. Okay. So is the response no, you don't -- none of your publications involve that topic?

A. Well, my response was it's such a basic concept that I don't think I would have called that out. If you'd like, I can look back at these and see if I might have done that.

Q. Well, this is my time to ask; right?

A. Sure.

Q. So I'm just asking if any of your publications have to do with comparing or even defining lost earnings with lost earning capacity?

A. I don't think any of these articles or presentations specifically address -- perhaps proving lost causation, there would be some discussion of the distinction between them. But I wouldn't -- I don't recall writing an article in which I was -- you know, the focus of the article was trying to parse these things. Does that make sense?

Q. Sure. That makes sense.

Do any of your publications or presentations have to do with or involve the use of life expectancy in calculating damages and personal injury or wrongful death cases?

A. I have used life expectancy data in various contexts. Now, earlier we defined a personal injury as a single plaintiff with bodily harm. That's not the only application of life expectancy tables.

Q. Okay. But do any of your publications or presentations have to do with the

use of life expectancy?

A. That might be -- that might be an element of ERISA litigation involving welfare plans. Although, I don't think so. I don't -- to the best of my recollection, none of these specifically bring up the use of life expectancy tables.

Q. Okay.

A. Except possibly the ERISA article.

Q. All right. Share this. All right. Mr. Rybolt, you were asked to review and respond to issues specifically with regards to the use of Veterans Benefits Administration offsets to reduce the recoveries available to plaintiffs; is that correct?

MR. VANSLYKE: Objection.

THE WITNESS: I don't have the exact language in front of me.

BY MR. CROMWELL:

Q. Okay. Well, that's fine. We will -- we'll use the owner's manual.

A. That sounds right. You omitted something.

Q. Go to page 3. We're back on Exhibit 6. This is your report. And I'm simply

looking at paragraph 1 --

A. Right.

Q. -- of your report and specifically asking -- having you confirm that you were asked to review and, where appropriate, respond to issues raised by experts for the United States in the reports dated December 15, 2025, specifically with regard to the use of Veterans Benefits Administration, or VBA, offsets to reduce the recoveries available to plaintiffs.

First of all, did I read that correctly?

A. You read that correctly.

Q. And you would agree with me that's what you were asked to review and, when appropriate, respond to?

A. Yes. I would say I was asked to review and respond to your experts' use of offsets in the context of Veterans Benefits Association benefits.

Q. Okay. Have you ever been asked to testify or offer expert opinions on this very same topic before?

A. Well, again, offsets come up quite a bit in any sort of damages analysis. If your

question is specifically with respect to VBA disability benefits, I don't recall having done that, but I'm not saying it wasn't an element.

Q. As you sit here, you don't recall having offered testimony or opinions in other cases specifically with regards to the use of VBA offsets to reduce the recoveries available to plaintiffs; is that correct?

A. It is an unusual use. So, no, I have not.

Q. Okay. Just stepping back, Mr. Rybolt, are you a veteran?

A. I am not.

Q. Before -- before being engaged in this case, have you ever looked at or relied upon VA disability statutes or regulations in offering expert opinions?

MR. VANSLYKE: Objection.

THE WITNESS: Oh, gosh, I mean it's probably come up, especially, you know, I think I mentioned some divorce and trust cases where the disability benefits were an element. I probably looked at some VA regulations or something similar to that.

BY MR. CROMWELL:

Q. Sorry, I didn't mean to cut you off. Go ahead.

A. I guess I can stop there.

Q. Do you recall the cases in which you have done that before?

A. Well, I'm thinking specifically of a divorce case and at least one trust case where that was an element.

Q. Where what was an element?

A. Disability benefits.

Q. Did offering opinions with regards to disability benefits require you to look at VA disability statutes of regulations?

A. I would assume that I probably did, but I don't have a specific recollection.

Q. Okay. Before being engaged in this case, have you ever looked at VA policy manuals that dictate how disability determinations get made?

A. Policy manuals, I don't know if I would have had access to those. So, no, I don't recall having done that.

Q. Okay. Have you ever been asked to opine on or testify about the unreliability of life expectancy tables before?

MR. VANSLYKE: Objection.

THE WITNESS: I've certainly talked about and used life expectancy tables. I think I probably rebutted that as well. Or worked on cases in which that was an element and we probably talked about whether they were an appropriate tool under the context.

BY MR. CROMWELL:

Q. You agree with me you've used life expectancy tables to calculate damages in different cases before?

A. Yes.

Q. Have you ever been asked to opine on or testify about the longevity of government programs before?

MR. VANSLYKE: Objection.

THE WITNESS: Do you mean expected longevity or -- what do you mean?

BY MR. CROMWELL:

Q. Sure. We'll start with that. Have you ever been asked to opine on the expected longevity of government programs before?

A. Not that I recall.

Q. Have you ever been asked to opine on

or testify about the likelihood of what decisions government programs, like the VBA, may or may not do in the future?

MR. VANSLYKE: Objection.

THE WITNESS: I'm trying to decipher your question a bit. There are many cases in which one would look at evidence from the data that are available to predict or analyze the likelihood of a given event. Comes up quite a bit. I think that's what I've talked about here in my rebuttal here to your experts. In the narrow context that you defined, I don't recall having done so. But, again, this is a pretty standard analysis.

BY MR. CROMWELL:

Q. Well, just to be clear, because I understand that you may discuss the likelihood of certain things in the future, but my question is a little bit more specific. Have you ever been asked to opine or testify on the likelihood of what decisions government programs like the VBA may or may not do in the future?

MR. VANSLYKE: Objection.

THE WITNESS: I don't recall having

testified on that specific subject.

BY MR. CROMWELL:

Q. Okay. Do you know what a disability benefits questionnaire is or a DBQ is?

A. Do I know what it is?

Q. Yes.

A. I think we might have taken a look at one of those, but I wouldn't say that I'm -- I couldn't tell you, you know, lots of details.

Q. Who is "we" when you're saying that?

A. My crew.

Q. Okay. And your group in formulating your opinions in this case?

A. I don't recall specifically. But it seems like something that we might have taken a look at. So I'm speculating a little bit and maybe I should just stop.

Q. Okay. I guess to clarify, as you sit here, do you recall one way or the other whether you or your team looked at disability benefits questionnaires in formulating your opinions in this case?

A. I think I'll have to answer no given that I don't have that specific recollection.

Q. Okay. Can you tell me what a

disability benefits questionnaire is?

A. I don't -- I don't think I can define that for you.

Q. Do you know what manual the VBA uses for processing and adjudicating claims for disability compensation benefits for veterans?

MR. VANSLYKE: Objection.

THE WITNESS: Your question is am I familiar with it or am I aware of it?

BY MR. CROMWELL:

Q. Do you know what manual the VBA uses for processing and adjudicating claims for compensation related to benefits to veterans?

MR. VANSLYKE: Objection.

THE WITNESS: I don't believe I can tell you what the answer to that is sitting here today.

BY MR. CROMWELL:

Q. Okay. Are you familiar with what the -- I'm sorry.

Are you familiar with the M21-1 adjudication procedures manual is?

A. Sitting here today, I can't tell you an answer to that. I'm not saying I have never looked at one, but I couldn't -- I couldn't tell

you that sitting right here.

Q. Okay. I didn't mean to keep sharing that the entire time.

A. That's okay.

Q. Let me -- I will go ahead and enter what we've marked as Exhibit 11 and drop it into the chat.

(Exhibit 11 marked for identification.)

BY MR. CROMWELL:

Q. Let me know once you receive that.

A. I have it.

Q. Okay. Mr. Rybolt, what I've introduced as Exhibit 11 is the prologue to the M21-1 adjudication procedures manual. Have you ever seen this before?

A. If I have, I don't recall it sitting here today.

Q. Okay. Do you know one way or the other whether this is available online?

A. I couldn't tell you that sitting here today.

Q. Okay. If you look at the introduction here, which is on PDF page 1, and it indicates that "M21-1 adjudication procedures

manual, M21-1, serves as a general guide for processing and adjudicating claims for compensation, pension, and related benefits for veterans and their dependents. It is based on the statutes and regulations set forth in Title 38 of the United States Code, U.S.C., and Title 38 of the Code of Federal Regulations, CFR, the legal authority governing Department of Veterans Affairs benefits."

First of all, did I read that correctly?

A. I believe you did.

Q. Okay. Have you ever looked at or used M21-1 adjudication procedures manual before?

A. Sitting here today, I don't recall having done so.

Q. Okay. Do you know what factors or inputs go into making a VA disability -- disability ratings determination?

A. I think at a high level. I understand that it is based on population statistics related to specific diagnoses. I think a number of dependents is a factor. But beyond that, I don't think I can be more specific.

Q. Okay. Do you know whether a veterans earnings, past earnings, or even their earning capacity is an input or factor in making a VA disability ratings determination?

A. My understanding is those things are not factors.

Q. Okay.

A. And I'll back up. I think a number of dependents, but I think that might going to the benefit itself rather than the rating --

Q. Understood.

A. -- just to correct myself.

Q. Understood. Are you familiar with the process for obtaining VA disability ratings?

A. No.

Q. Are you familiar with the process for altering a veterans disability rating?

A. I believe we have the understanding generally that those can be revisited and reevaluated. But more specifically than that, no.

Q. So putting aside that a veterans rating can be reevaluated, are you familiar with the process for altering a veterans disability rating?

A. I am not.
Q. Okay. Have you ever been asked to opine on what damages are or are not permitted under a particular law before?
MR. VANSLYKE: Objection.
THE WITNESS: I think what you're asking me is if I've drawn a legal conclusion as to what remedies are available. I would say, absolutely, as a damages expert that I have an understanding of what remedies are available under specific laws, but I'm not opining to that point.
BY MR. CROMWELL:
Q. Understood. I appreciate the distinction you're drawing. I get that.
You are familiar with the Camp Lejeune Justice Act of 2022; correct?
A. Yes. Yes, I am.
Q. You have read it, you've cited and relied upon it in your expert report?
A. I think we do cite it and, yes, I have read it.
Q. Okay. Are you familiar with those -- section that regards to offsets,

Section 804(e)(2)?

A. Yes.

Q. As you sit here, are you offering any opinion regarding whether offsets are permitted under the Camp Lejeune Justice Act?

MR. VANSLYKE: Objection.

THE WITNESS: I think you're calling for a legal conclusion. I'm not offering any legal -- excuse me -- conclusions or opinions. What I'm offering is my understanding as a damages expert as to the consequences of calculations and assumptions made by your experts.

BY MR. CROMWELL:

Q. Understood. But I just to understand the confines. You agree with me you're not offering an opinion regarding whether offsets are permitted by themselves under the Camp Lejeune Justice Act; correct?

A. Yes. To the extent you're defining a legal conclusion, that's not my role.

Q. If they are permitted under the Camp Lejeune Justice Act, would you agree that you're not offering any opinion regarding the amounts that should be offset in any given case?

MR. VANSLYKE: Objection.

THE WITNESS: Assuming they are permitted -- your question is assuming they are permitted, I am not opining as to the amount that is permitted, is that your question?

BY MR. CROMWELL:

Q. Correct.

A. Again, I think that sounds like a legal conclusion. I'm trying to offer my perspective as a damages expert on the consequences of various assumptions.

Q. Okay. If we can go back to Exhibit 6, which is your -- your expert report.

A. Yes.

Q. And I'll share my screen just to make things easier. And, here, I'm looking at page 10, which is PDF page 12 of Exhibit 6. And if you look at Footnote 21, you have a paragraph here that says, "Throughout this report, I assume as given the values of VBA disability payments. In other words, the government has determined the value of lost earning capacity in its own policy decisions. I do not offer an opinion about how those values are determined or how those values

are calculated."

First of all, did I read that correctly?

A. I believe you did.

Q. Okay. You agree with me you're not offering an opinion about how the values of the VBA disability payments were determined or how those were calculated; is that correct?

A. That's correct. In the context of those footnote, that's correct.

Q. Okay. As you sit here, are you planning to offer any kind of opinion as to the amounts that each individual bellwether plaintiff should be able to offset?

MR. VANSLYKE: Objection.

THE WITNESS: I don't understand your question.

BY MR. CROMWELL:

Q. Okay. Have you calculated any numbers with regards to what you think is the appropriate level of offset -- an individual bellwether plaintiff should be able to offset with regard to VBA disability benefits, or are you not offering that opinion?

A. I don't believe VBA bellwether

plaintiffs are offsetting anything. So I'm not -- I don't understand your question.

Q. So let me just -- if I'm understanding you correctly, is it your opinion that the amount of VBA disability benefits that each bellwether plaintiff is entitled to is zero dollars; is that correct?

MR. VANSLYKE: Objection.

THE WITNESS: I'm sorry. Can you repeat that?

BY MR. CROMWELL:

Q. Sure. Let me take a step back.

You -- well, actually, we'll get to that -- we'll get to it, and I'll try to clarify in just a moment.

A. Okay.

Q. In your report, you do not note or identify anywhere whether you are holding the opinions that you're offering to a reasonable degree of economic certainty; is that correct?

A. No, I don't include that attestation.

Q. Okay. What does the term "reasonable degree of economic certainty" mean as a forensic economist?

A. Well, let me back up. I think that

was something that we used to include in expert reports de facto. I think it may have been required by Rule 26 or something similar. I think that was dropped and people -- I don't see it nearly as often as I used to.

But the question that I have in -- I'm going to answer your question with a question, I'm sorry, and I will get to an answer.

But your question assumes that there is more than one degree of certainty or something or professional attestation. That's the part that I quibble about. I do every report to the same way same level of certainty, same level of professionalism. It's something that I would present to my colleagues or to my peers for review and comment. It is my best work in every case. There is no other degree.

Q. Okay. What -- do you have any particular -- as you sit here, do you have any particular standard for which you're holding the opinions that you're offering in this case?

A. The one that I just described.

Q. Okay. So you -- do you -- do you or do you not hold the opinions that you're offering here to a reasonable degree of economic

certainty?

MR. VANSLYKE: Objection.

THE WITNESS: Well, I think -- I think that's what I just said. If that's not what I just said, then, yes, absolutely, this is my best work.

BY MR. CROMWELL:

Q. Just so I'm clear, you are holding the opinions that you're offering here to a reasonable degree of economic certainty?

A. As I just said, yes. Absolutely.

Q. Okay. What does -- so going back to the question before. What does reasonable degree of economic certainty mean to you as a forensic economist though?

MR. VANSLYKE: Objection.

THE WITNESS: I just defined that.

BY MR. CROMWELL:

Q. Could you give me your answer again then?

A. It is my best work. It is work that I would happily submit to my colleagues or my peers in the industry for their review and comment.

Q. Okay.

A. It is what I believe is the appropriate response to the questions or the assignment.

Q. Have you offered -- sorry, didn't mean to cut you off. Sorry.

A. Sorry. I just said "if you will."

Q. You have prepared other expert reports before; is that correct?

A. Quite a few.

Q. And have you included in those reports before whether you are holding the opinions being offered in those cases to a reasonable degree of economic certainty?

A. As I said, there are -- that used to be pretty standard language that was included in my experience. That's not usually included anymore. It's not my practice to include an attestation to that degree. Because, frankly, I feel like it's unreasonable -- well, not unreasonable, but sort of redundant or unnecessary.

Q. Okay. Do you ever offer expert opinions to an absolute certainty?

A. I don't know that there is such a thing.

Q. There's not such a thing as an absolute certainty. Why not?

A. I don't know. I've studied philosophy.

Q. So there's no absolute certainty because you've studied philosophy, is that --

A. I think we can -- I think we can say pretty clearly and absolutely that, you know, certain mathematical equations come out with an answer. I can say that I'm absolutely certain about that. But, you know, beyond that, you know, there's always some little level of uncertainties, right, isn't there?

Q. Yeah. I think I get what you're saying. I mean, when you're making or creating your opinions as an expert, you would agree that there's some level of uncertainty about what may or may not happen in the future; correct?

MR. VANSLYKE: Objection.

THE WITNESS: Yes. Trying to anticipate future events is usually accompanied by some degree of uncertainty.

BY MR. CROMWELL:

Q. In other words, you can't ever be 100 percent certain about what's going to happen

in the future, you don't have a crystal ball, so to speak?

A. I think that's fair. Sure.

Q. And I think you would agree with me, but would you agree that holding opinions to a reasonable degree of economic certainty does not require absolute certainty?

A. I think that's what the sentence means, if that's your question, yes.

Q. Okay. Let's look at the various opinions you're offering. We're going to go back to Exhibit 6, your report. And you have a section entitled "Summary of Opinions" which is Section 2; is that correct?

A. Yes.

Q. Okay. And the first opinion -- your first opinion is that because "None of the VBA bellwether plaintiffs' expert reports assert damages claims for lost earning capacity, thus the use of a benefit intended to compensate plaintiffs for a loss of earning capacity as an offset is inapt."

First of all, did I read that correctly?

A. You added the word "because," but I

don't object. Yes, you read it correctly other than that.

Q. My apologies. I'm not sure where I got that.

A. It's okay.

Q. Okay. And then your second opinion, which is the second bullet point, indicates that even if VBA disability benefit offsets are appropriate, the United States analyses are, in your words, fundamentally speculative; is that right?

A. Yes. Comma.

Q. And you note that in many cases the government's experts analysis includes material omissions that render their methodology and conclusions unreliable; is that right?

MR. VANSLYKE: Objection.

THE WITNESS: That wasn't exact, but I think you captured the essence of it.

BY MR. CROMWELL:

Q. Yeah. I guess I wasn't trying to quote them verbatim in this part. But I was just asking if my understanding is the same as what you've written here.

So -- and the basis for this second

opinion, in your view, is that those experts in part failed to consider fluctuations and ratings for injuries attributed to Camp Lejeune exposure; is that right?

A. That's one of the omissions, yes.

Q. Another one of those is those experts have failed to consider fluctuations in ratings for injuries unrelated to Camp Lejeune exposure; is that correct?

A. That's also correct.

Q. Another one of those is the expert's failure to consider fluctuations in life expectancy; is that correct?

A. That's correct.

Q. Another one is the expert's failure to consider amounts withheld from VBA benefits as a result of military pensions; is that correct?

A. Or vice versa, yes, that's correct.

Q. Okay. And then the last point you say, the experts failed to consider the inherent uncertainties of future VBA disability benefits; is that correct?

A. That is also correct.

Q. And this is the list of factors that you are relying upon for your second opinion; is

that correct?

MR. VANSLYKE: Objection.

THE WITNESS: The omissions that I've identified that -- yes, that lead to my opinion.

BY MR. CROMWELL:

Q. You have further opined that if an offset based on VBA disability benefits were applied to damages other than loss of earning capacity, the plaintiff would be left -- less than fully compensated for their losses; is that correct?

A. That's what I've written there, yes.

Q. So, generally speaking, these three bullet points contain the scope of the opinions that you're offering in this case; is that right?

A. Well, I think there are many more details that are discussed in the remainder of the report.

Q. Sure.

A. This is intended as a summary, obviously. But I think it's a reasonable summary, if that's your question.

Q. Okay. If we look at page 8 or PDF page 10 of Exhibit 6, first point opinion is that

the government offset arguments lack economic foundation; is that right?

A. Yes.

Q. Immediately under there, you note that the government's proposed offsets do not tie to a specific claim?

A. That's right.

Q. Okay. What literature are you relying upon and have you cited in your report for your opinion that an offset must tie to a specific claim of damages?

A. My 20 years of experience in this business, the research I've done, the training I've done, all contribute to that, in addition to the -- whatever articles and chapters that I've cited that I think are in support.

Q. Putting aside your experience and training, I'm trying to understand specifically what citations or literature you're relying upon for your opinion then offset must tie to a specific claim of damages?

A. Well, I don't need any other support. I'm allowed to rely on my experience and training and understanding damages analysis. I am a damages expert. And an offset is a common word.

And it's used in all kinds of contexts and litigation, as I've said earlier. And I have not -- as a colleague of mine said, I think it's such a basic concept that it probably has never been written down.

Q. Right. Just so I'm clear, there isn't any particular scientific or economic article or literature that you're relying upon for your opinion that an offset must tie to a specific claim of damages; is that correct?

MR. VANSLYKE: Objection.

THE WITNESS: I have not cited an article for that specific statement, although, I believe the literature is generally consistent with that that I've read as well as my training and experience.

BY MR. CROMWELL:

Q. You -- we previously talked about your familiarity with the Camp Lejeune Justice Act; correct?

A. Generally speaking, yes.

Q. Can you tell me where in that act you have reviewed -- where it says that offsets are tied to a specific claim of damages?

MR. VANSLYKE: Objection.

THE WITNESS: I don't believe it appears in that act.

BY MR. CROMWELL:

Q. Okay. Your second point in this particular topic is that the loss of earning capacity is not equivalent to lost earnings. I apologize, I was trying to get there as I was reading. This is on page 10, PDF page 12.

A. That's correct.

Q. And you note here that the VBA disability benefits are intended to compensate the beneficiary for a loss of earning capacity, not lost earnings.

First of all, did I read that correctly?

A. You did.

Q. And for this, you cite to 38 U.S.C. Section 1155; is that correct?

A. That is -- yes, that's -- that's what's in that footnote.

Q. As you sit here, are you planning to offer opinions on how to interpret federal statutes regarding VA disability compensation?

A. To the extent you're asking about a

legal opinion, of course, I'm not doing that.

Q. Okay. Prior to your involvement in this case, have you ever been asked to interpret or rely upon 38 U.S.C. Section 1155 before?

MR. VANSLYKE: Objection.

THE WITNESS: Again, I would not have been asked. And if I had been asked, I wouldn't -- I would refuse to interpret statutes. I do cite them when they are consistent with my understanding or inform my understanding of how economic and financial concepts are applied in the context of damages analysis.

BY MR. CROMWELL:

Q. Okay. When you say "VBA disability benefits are intended to compensate the beneficiary for a loss of earning capacity, not lost earnings," are you saying that VBA disability benefits are intended to compensate the beneficiary only for a loss of earning capacity?

MR. VANSLYKE: Objection.

THE WITNESS: That's my understanding based on the information that I've cited.

BY MR. CROMWELL:

Q. Okay. In other words, it's your opinion that VBA disability benefits are not meant to compensate a beneficiary for anything other than their lost earning capacity; is that right?

MR. VANSLYKE: Objection.

THE WITNESS: That's my understanding as I approached this paragraph, yes, that's my understanding and that's what's consistent with what's said in the footnote that I've cited.

BY MR. CROMWELL:

Q. Okay. Are there any publications or economic principles you're relying upon to support your conclusion that VBA disability benefits are only intended to compensate for the loss of earning capacity?

A. Well, a distinction I'm making --

MR. VANSLYKE: Objection.

THE WITNESS: -- is between lost earning capacity and lost earnings. And it's clear from -- you know, even if you and I disagree and even if the court comes in and says, okay, it's for some other things, the fact remains that the

government treats them separately. The VBA disability benefit as a means tested, it isn't based on your actual earnings and it isn't affected by your actual earnings. You can be making 400,000 as a tenured professor at some private university, you still get the same VBA disability benefit. By the same token, it follows that they are not the same thing.

BY MR. CROMWELL:

Q. Well, let me -- I understand your point. I want to discuss that topic in just a moment. But I want to make sure I'm getting an answer to my question, which is, is there a publication or economic principle you're relying upon to support the conclusion that we just talked about that VBA disability benefits are only intended to compensate for loss of earning capacity?

MR. VANSLYKE: Objection.

THE WITNESS: Well, I cited 38 U.S.C. 1155 in support of that point. And I have demonstrated that the government treats them separately.

Are you asking hypothetically could

there be some other element that's intended to compensate? Certainly, someone could draw that legal conclusion and distinction. But from what I've seen, I don't have any evidence of that.

BY MR. CROMWELL:

Q. Okay. So aside from the language in 38 U.S.C. 1155, you can't point me to anything you're relying upon to support the conclusion that VBA disability benefits are only intended to compensate for the loss of earning capacity?

MR. VANSLYKE: Objection.

THE WITNESS: Yeah, just to clarify, you're inserting the word "only" and that doesn't appear in my first sentence. But that is, in fact, what the statute says. So ...

BY MR. CROMWELL:

Q. Okay. Let's discuss earning capacity then. Generally speaking, you defined lost earning capacity as the hypothetical measure of a person's ability to compete in the labor market; is that right?

A. Well, the full sentence is it's a generally forward looking hypothetical measure of

a person's ability to compete in the labor market. Its earning potential as the -- as I said, I think, elsewhere in that paragraph.

Q. Okay. Right. Let's go on -- so you go on to say a reduction in earning capacity measures how much an injury or illness reduces a claims earning potential; correct?

A. That's the next sentence, correct, you read that correctly.

Q. And you go on to define lost wages or lost earnings as a measure of actual loss due to an interruption or reduction in earnings that is directly attributable to the injury or illness at issue; correct?

MR. VANSLYKE: Objection.

THE WITNESS: Yes. In this specific context, yes, that's how I would distinguish them.

BY MR. CROMWELL:

Q. Okay. What factors do you consider when determining someone's lost earning capacity?

A. Well, are you talking about hypothetically? In what context are you asking me that question?

Q. Well, I mean we're discussing lost

earning capacity in these cases. But I guess, broadly speaking, when you are determining or calculating someone's lost earning capacity, are there certain factors that you include to make that determination?

For instance, a person's education, their age, occupation, where they live, trying then to get a sense for how you make the calculation or determination as to someone's lost earning capacity?

A. Well, for example, if you were, let's say, trying to assess the earning capacity for somebody who just completed their residency in brain surgery at Johns Hopkins, I think there would be available data on that and one could calculate lost earning capacity on the basis of that available data.

So, yes, I think you mentioned some factors that would be useful in making that calculation, age, education, location, and so on.

Q. Okay. Do you ever consider the person's historical earnings or wages when determining lost earning capacity?

A. I think it can be a factor. But it isn't necessarily determinative by itself.

Q. Okay. But you would agree it's a factor?

A. It could be a factor. It really depends on context.

Q. Okay. It's your opinion, though, that there is a distinction between lost earnings and lost earning capacity; correct?

A. Well, as I think we testified earlier, we would divide it into potentially three separate sections, which is historical loss of earnings or actual loss of earnings, expected loss of earnings, which might be a projection into the future based on past earnings. And then if more hypothetical construct of what is their earning potential, what have they lost, what opportunities do they not have as a result of whatever the injury is.

Q. Okay. Well, just to make sure I understand, even if, for instance, lost earning capacity, past lost earnings, and future lost earnings may be different economic concepts, you would agree that a person's historical lost earnings does play a role in calculating a person's lost earning capacity?

A. Again, it depends on the context.

MR. VANSLYKE: Objection.
BY MR. CROMWELL:
Q. Okay.
A. It depends on context.
Q. In this context, with these VBA bellwether plaintiffs that you're offering opinions on.
A. Well, for example, I mean --
MR. VANSLYKE: Objection.
THE WITNESS: -- a person could decide -- sorry -- for a person -- a person could decide that they don't want to be a neurosurgeon and they just go out and get a job as a -- I don't know, you know, they're working at Starbucks. I think that that earnings history isn't necessarily reflective of or a factor in determining what they could be earning as a trained neurosurgeon. Right. I mean they are separate.
I'm not saying that one isn't potentially a factor in some cases. It just depends on the facts of the case.
BY MR. CROMWELL:
Q. Okay. If we look at page 12 to your

report, Exhibit 6, PDF page 14, you have a footnote -- I'll scroll back up. Footnote 27. And in that footnote, you have noted there is -- "This is also consistent with a large body of economic literature describing these concepts and the differences between them."

And when you're referring to "these concepts," you're referring to the concepts we've been talking about; right? The concepts of lost earning capacity versus lost earnings?

A. That's correct.

Q. So the first article you cite here is by Stephen Horner and Frank Slesnick entitled, "The Valuation of Earning Capacity Definition, Measurement and Evidence," in the Journal of Forensic Economics; correct?

A. That's correct.

Q. Okay. I'm going to introduce what we've marked as Exhibit 13.

(Exhibit 13 marked for identification.)

BY MR. CROMWELL:

Q. Going out of order.

MR. VANSLYKE: Counsel, I think this might be -- I understand. You're marking

it as Exhibit 13 instead of 12.

MR. CROMWELL: Yes. Just consistent with what the parties have done in the past to the extent that exhibits --

MR. VANSLYKE: I understand. Thank you.

BY MR. CROMWELL:

Q. Mr. Rybolt, do you have the ability to pull up Exhibit 13. I will share my screen with you as well.

Mr. Rybolt, what we've marked as Exhibit 13 is the same article you cited and relied upon entitled "The Valuation of Earning Capacity Definition, Measurement and Evidence," by authors Stephen M. Horner and Frank Slesnick; is that correct?

A. That's correct.

Q. Okay. And you have reviewed and relied upon this article for the opinions you're offering in this case; is that correct?

A. Yes. As cited and in support of the statement in my report.

Q. Fair to say you're familiar with the article?

A. Broadly. It's been a while since I

reviewed it.

Q. Okay. If we can, we're going to look at Exhibit 13 and it's page 16, but it's PDF page 4. There's a section entitled "The Legal Environment." Do you see that?

A. Yes.

Q. And halfway down the page, there's a section entitled "Definition"; is that right?

A. Yes.

Q. And essentially it says, "The law generally defines earning capacity to be, quote, the ability to earn money, and impairment of earning capacity means the diminution of loss of the ability to earn money"; is that correct?

A. Correct. That's what it says.

Q. You generally agree with that definition?

A. I think -- I think that's a fair definition.

Q. All right. Under Section C, which is entitled "Evidence for Impairment of Earning Capacity," the authors note -- missed something here. I apologize. I think I've missed my place somewhere.

A. Do you want to try it conceptually?

I'm okay with that.

Q. Well, let me -- let me ask you this. The authors note that often the most reliable evidence of earning capacity will be past earnings and is the most common basis for estimated expected earnings. Would you agree with that?

MR. VANSLYKE: Objection.

THE WITNESS: I'm sorry, can you repeat how you worded that?

BY MR. CROMWELL:

Q. Sure.

A. Just want to make sure I'm understanding.

Q. I'll break it apart because I think I made it compound.

Would you agree that often the most reliable evidence of earning capacity will be a person's past earnings?

A. Again, it really depends on context, you know, for the example I gave. I don't think past earnings would be, you know, indicative at all or informative at all. If you had somebody who had a 20-year history working at, you know, IBM as a midlevel management employee, maybe it's

a little bit more informative. In fact, probably a lot more informative. It really just depends on context.

Q. Okay. I think I'm looking at the wrong thing. Can we go off the record for one minute, please.

A. Want to take a break? I could use a little bit.

MR. CROMWELL: Yeah. Oh, sorry, I just realized it's 2:30 here, which is --

THE WITNESS: 11:30.

MR. CROMWELL: Do you need a lunch break? I don't know if you need it or not.

THE VIDEOGRAPHER: Want to go off the record real quick?

MR. CROMWELL: Yes, please.

THE VIDEOGRAPHER: Going to go off the record at 11:30 a.m.

(Recess taken from 11:30 a.m. until 11:39 a.m.)

THE VIDEOGRAPHER: Back on the record at 11:39 a.m.

BY MR. CROMWELL:

Q. Mr. Rybolt, before we broke, we were discussing Exhibit 13. This is an article you've

cited and have relied upon for some of your opinions in this case. I wanted to follow up and just kind of take a step back. If I can, I'm going to reshare Exhibit 13 with you.

And I'm still looking at -- this is the first page, title page. And there is a section entitled definitions, actual earnings, expected earnings, and earning capacity. Do you see that section?

A. Yes.

Q. This identifies essentially the three categories of earnings that you were referring to previously; is that correct?

A. I think that it does a pretty good job actually.

Q. Okay. And there is a section on actual earnings, expected earnings, and then another section on earning capacity on page 15 or PDF page 3; is that correct?

A. Yes.

Q. Okay. And under this particular section, the authors note here often the most reliable evidence will be past earnings, which is also the most common basis for estimating expected earnings. In other words, the legal

standard of loss in personal injury cases is usually earning capacity, but the evidentiary requirements of the legal process often lead to an estimation of earning capacity that is identical to an estimation of expected earnings.

First of all, did I read that correctly?

A. I believe you did, yes.

Q. Generally speaking, do you agree that -- first of all, do you agree with that statement?

A. Well, I think they've accurately characterized the situation. But, again, it depends on context. I've given you examples of that. Sometimes the most reliable evidence is not past earnings. But, yes, sometimes the legal standard in personal injury cases is usually earning capacity, but they're right. Sometimes the evidentiary requirements might be limiting.

So -- but what my point is, is that they are distinguished and can be distinguished and, in fact, the government through its actions is distinguishing them. So ...

Q. Well, you are familiar with Mr. Chad Staller's reports in these cases, are you not?

A. Broadly, yes.
Q. They were listed on your materials considered list; is that correct?
A. Yes, they were.
Q. And are you familiar with the manner in which Mr. Staller calculated lost earning capacity in each of the cases in which he's offering an opinion?
A. Well, as I noted in my report, I think he's called it lost earning capacity. But I would characterize what he's done as lost earnings.
Q. Okay. Well, I'm just asking if you're familiar with the manner in which he's calculated lost earning capacity?
MR. VANSLYKE: Objection.
THE WITNESS: I'm broadly familiar. I didn't, you know, inspect each and every calculation. That wasn't my assignment.
BY MR. CROMWELL:
Q. Okay. Well, just while we're on the topic, you would agree that Mr. Staller is using historical earnings to calculate lost earning capacity in each of the individual plaintiffs he's offering an opinion on?

MR. VANSLYKE: Objection.

BY MR. CROMWELL:

Q. Are you not?

A. I would not characterize it that way. I think he did. But that's not how I would characterize it.

Q. Would you -- so do you disagree with Mr. Staller's own characterization of his opinions?

A. I think his use of language was just inconsistent with mine.

Q. Okay.

A. I think it's more a question of semantics than methodology.

Q. Well, we were talking about whether lost earnings are a factor in determining lost earning capacity. So I don't know that it would be necessarily semantics. What I'm trying to figure out is whether lost earnings in the context of these cases is appropriately used to determine lost earning capacity.

Do you agree in the context of these cases that it is an appropriate to use historical lost earnings to determine lost earning capacity for these plaintiffs?

MR. VANSLYKE: Objection.

THE WITNESS: In these cases, no, because we already have a calculation of lost earnings capacity. And as I've already said, I don't think Mr. Staller has actually calculated lost earning capacity. I think I would put his calculations into the first two categories, which is actual lost earnings and expected lost earnings.

BY MR. CROMWELL:

Q. Okay. If we can look at -- still on Exhibit 13, we're going to look at page 18, which is PDF page 6. The very first full paragraph that starts with "for the average injured worker." Do you see that?

A. Yes.

Q. In that second line, it starts with "Although, past earnings do not necessarily dictate earning capacity, there may not be a legal requirement to do so, such information is likely to be presented to the trier of fact by one party or the other. This earnings data is likely to have an impact on the eventual compensation award. This is true because past

behavior is, after all, strong evidence of what a person was capable of doing in the past and, absent identifiable changes, strong evidence of what they would be capable of doing in the future. Actual earnings data is often the starting point for measuring capacity."

First off, did I read that correctly?

A. I think you did.

Q. You agree if there is no information to the contrary, it is usually assumed that actual earnings demonstrate earning capacity, at least according to these authors?

A. I think that's what they say. And in this case, we don't need to do that. We have a calculation of earning capacity. It's the disability benefit, which is treated as a separate compensation mechanism for veterans who have been disabled as separate and apart of from their earnings. As a matter of fact, their earnings, their actual earnings aren't a factor in determining the VA disability benefit.

Q. I understand, but I'm -- my question is pretty narrow. You agree that the authors here are saying that if there is no information to the contrary, it is usually assumed that

actual earnings demonstrate earning capacity?

A. Well, yeah, sure. I mean, you know, given context, if you don't have any other information, that would tend to dispute that point. And as -- in the example that I gave, you've got a long earning capacity for -- you know, in a particular field at a particular level, then that's probably -- I agree, that's probably a pretty good indication. And in many cases, that would be your best available evidence. But there are exceptions to that and based --

Q. Understood --

A. -- and it's not really even relevant in my opinion.

MR. VANSLYKE: Counsel, I'm going to ask that you let the witness finish his answer.

THE WITNESS: Well, I did.

BY MR. CROMWELL:

Q. You would agree that according to these authors in personal injury cases, it is usually assumed that actual earnings demonstrates earnings capacity, at least according to these authors?

MR. VANSLYKE: Objection.

THE WITNESS: I think what they are saying that it is often the only evidence available. But that's not always the case, as I've said, and I think they have acknowledged that there are exceptions. And, by the way, they also distinguish the two. So I think that's important to recognize.

BY MR. CROMWELL:

Q. All right. Well, it's your opinion that because none of the VBA bellwether plaintiffs' expert reports asserts damages claims for lost earning capacity, the use of a benefit intended to compensate plaintiffs for a loss of earning capacity as an offset is inapt, right? That's your first kind of general opinion?

A. I think that's accurate.

Q. And I think we talked about this before. You reviewed each of the applicable reports from Mr. Chad Staller; is that correct?

A. I probably reviewed one or two and then glanced at the others.

Q. Okay. But you have listed each of them in your materials considered list; is that

correct?

A. Yes.

Q. And from your review, you understand that Mr. Staller has offered opinions asserting lost earning capacity for numerous individual plaintiffs; correct?

MR. VANSLYKE: Objection.

THE WITNESS: Those were his words. And in my report, as I noted, I disagree with his use of that terminology because I don't think that's what he's calculated.

BY MR. CROMWELL:

Q. Okay. I'm going to just as an example introduce what we're going to mark as Exhibit 14.

(Exhibit 14 marked for identification.)

BY MR. CROMWELL:

Q. Are you able to access Exhibit 14, Mr. Rybolt?

A. I'm sorry, you've been pulling them all up, so I didn't --

Q. I'm going to -- I'm going to. I just wanted to make sure you have access to them. That's all.

A. I do, yes.
Q. All right. So I will share my screen. And just for the record, this is Mr. Chad Staller's expert report in the Howard case; is that correct?
A. It appears to be, yes.
Q. This is one of the same reports you had access to and reviewed; is that correct?
A. I did.
Q. If we look at page 3 of Mr. Staller's report, there is a Section 5 entitled "Lost Earning Capacity"; is that right?
A. There is.
Q. And his first line there, it says, "To estimate Mr. Howard's earning capacity absent the diagnosis, we utilized Mr. Howard's annualized regular earnings at the time of his 2008 retirement," and he totals it at $65,873.60 as our base.
First off, did I read that correctly?
A. I believe you did.
Q. Okay. Based on Mr. Staller's own language, you understand that what he's doing is utilizing Mr. Howard's historical earnings to calculate earning capacity; correct?

MR. VANSLYKE: Objection.

THE WITNESS: As I've said a few times now, I disagree with his use of the earning capacity -- earning capacity. I think he's calculated lost earnings.

BY MR. CROMWELL:

Q. Well, just to be clear, I'm asking a different question. I understand you disagree with Mr. Staller. I'm asking that you -- if it's your understanding that Mr. Staller is utilizing Mr. Howard's historical earnings to calculate Mr. Howard's earning capacity?

A. Well --

MR. VANSLYKE: Objection.

THE WITNESS: I'm having trouble with how you're characterizing that because I don't believe he is calculating lost earning capacity. So that's what he said he's done. I agree with you there. That's what he said he's done. But I don't agree that he is using that term as I have used that term in my report and as that term is used in those articles that I cited. Fair enough?

BY MR. CROMWELL:

Q. Okay. But you would agree with me that's what he does for each of the plaintiffs in which he's offering an opinion; correct?

MR. VANSLYKE: Objection.

BY MR. CROMWELL:

Q. Of lost earning capacity?

A. He states that it is lost earning capacity. I disagree with his use of that term, period. We'll stop.

Q. Understand. But for each report in which he opines on lost earning capacity, you understand, whether you agree with what he did or not, his calculations are based upon the individual plaintiffs' historical lost earnings; correct?

A. He begins -- to the best of my recollection in each case and certainly in this case, he is beginning with some record of past earnings to begin his calculation.

Q. Okay. To estimate a plaintiffs' earning capacity -- well, strike that. Understood. You have disagreed with Mr. Staller's use of the phrase "earning capacity," and what you think -- believe it means is actual loss, not a loss of potential; is that

accurate?

A. I think that's fair, yes.

Q. Okay. Do you know -- well, I think I asked this before, you've never spoken or corresponded with Mr. Staller before?

A. No, I haven't.

Q. Okay.

A. Not to the best of my knowledge. It's possible that our paths have crossed in the past, but not that I recall.

Q. Okay. So given that, fair to say you do not know whether he agrees with your assessment of whether he used the term earning capacity loosely or inexactly; correct?

A. I don't know. I have no idea.

Q. I just want to be clear, though, you agree that you are not offering any opinions regarding what lost earning capacity these plaintiffs may have incurred due to their injuries; correct?

A. No, I disagree. I think the government has already done that for us. That's the value of the disability benefit.

Q. So your opinion is that in a case in which a plaintiff has or is seeking a disability

benefit offset, that automatically equals the amount of lost earning capacity for that same plaintiff?

MR. VANSLYKE: Objection.

THE WITNESS: I don't think that's what I'm saying. That sounds overly broad.

BY MR. CROMWELL:

Q. Okay. Do you agree that your -- well, hold on.

Then let's clarify what your opinion is with regards to the role of a plaintiff's disability awards with regards to their lost earning capacity.

Are you going to be offering -- are you planning to offer an opinion as to the specific amounts of lost earning capacity each plaintiff -- each VBA bellwether plaintiff has incurred?

MR. VANSLYKE: Objection.

THE WITNESS: I think that's what I just answered, which is I think the VBA disability benefit serves that purpose. So I don't think we need to calculate.

BY MR. CROMWELL:

Q. Okay. So you have not done your own separate calculations to determine that amount?

A. I was not asked to do that level of calculation, no.

Q. Okay. So your opinion as to the lost earning capacity for each VBA bellwether plaintiff is simply the same amount as those offered by the U.S. economists; is that correct?

A. I think --

MR. VANSLYKE: Objection.

THE WITNESS: Sorry, Ben.

I think my -- I think I even say this in the report. I have not been asked to evaluate whether the disability benefits or their calculation were reasonable or to assess them. I'm accepting them as reasonable compensation for lost earning capacity.

But I have -- just to be clear, I have no opinion as to whether that's a factual statement or a reasonable statement. I'm accepting them.

BY MR. CROMWELL:

Q. Okay. But are you offering any kind of opinion regarding the amounts then that these

individual plaintiffs -- that lost earning capacity, these individual plaintiffs may have incurred, are you simply relying upon the United States experts for those numbers?

MR. VANSLYKE: Objection.

THE WITNESS: Well, to be clear, I haven't performed any calculations. What I'm talking about are damages concepts, right. And these appear to be wholly separate revenue streams, right. I can give you a hypothetical based on Mr. Howard, if you like, that explains my point.

BY MR. CROMWELL:

Q. This wasn't my question. I'll move to strike.

Are you offering any opinion as to the amounts of lost earning capacity these individual plaintiffs have incurred?

A. I am not separately evaluating lost earning capacity for any of these individual plaintiffs. I am accepting the VBA's calculation based on the disability benefit.

Q. Understood. Okay.

A. Fair enough?

Q. Thank you. Yes, thank you.
Have you -- strike that.
In your review of Mr. Staller's reports, you understand that he is offering in part opinions regarding individual plaintiffs future potential earnings; is that correct?
A. In some cases, I think that's correct.
Q. And to do so, that would be based in part on the person's work-life expectancy; correct?
A. Yes, I believe that's correct. Yes.
Q. In offering such an opinion, doesn't that presume that the individual plaintiff will, for instance, not change careers?
A. Well, I think it assumes more specifically that their income will be consistent, and I don't recall any adjustments Mr. Staller might have made, but -- with their past earnings.
Q. If they change careers and have much lower income, you would agree that the projection of future earnings would be wrong in that instance; right?
MR. VANSLYKE: Objection.

THE WITNESS: There are factors that could affect whether or not, you know, the calculation of expected earnings is incorrect, yes.

BY MR. CROMWELL:

Q. Does the fact that they could be incorrect render his opinions unreasonable or speculative, in your words?

A. Well --

MR. VANSLYKE: Objection.

THE WITNESS: From a plaintiff's perspective, it's probably the best estimate of expected earnings. So, yes, is it possible that his actual earnings could divert from that. Yes, and I would assume based on his history of actual earnings that the best estimate of his future earnings -- excuse me -- expected earnings, I think, would be based on that fact right. Could it divert that from that? Sure. Does that make it unreliable, you're getting into an interpretative area, you know, not prepared to go there.

BY MR. CROMWELL:

Q. Well, I'm asking -- your a forensic economist; correct?

A. Yes.

Q. So does the fact that a person may or may not -- well, does the fact that a person may work less or more than their work-life expectancy render opinions based upon that work-life expectancy unreliable?

A. I don't believe so.

Q. Okay. Does the fact that someone may work more or less than their work life expectancy render opinions that rely upon that work-life expectancy speculative?

A. So for both this and the prior answer, my answer is that these are the best estimates the plaintiff typically has available to them. So the reliance on the best available data is done with the understanding that, yes, these may not be 100 percent perfect predictions of what that plaintiff earns, but they're based on the best available evidence. And that's usually the acceptable standard in my understanding.

Q. So, in your experience as a forensic economist, is it reasonable to reliable upon

work-life expectancy tables?

A. In the absence of other evidence, that's a pretty good place to start.

Q. Okay. Same would be true for general life expectancy tables, I would assume; is that correct?

A. Again, in the absence of other available evidence, that would be a pretty good place to start.

Q. Okay. Let me stop sharing Exhibit 14. And we'll go back to your report, Exhibit 6. And we touched on this before, right, you note that VBA disability benefits are intended to compensate the beneficiary for a loss of earning capacity, not lost earnings; right?

A. Start of paragraph 30, is that where you are?

Q. Yes.

A. Yes.

Q. You are familiar with 38 CFR part 4, correct, you cite and rely upon it in your report?

A. If you're asking me if I can recite it, no. But if I cited it, yes, I'm familiar with it.

Q. So -- sorry, didn't mean to interrupt you.

A. Sorry.

Q. If we're looking at Footnote 22 of your report, you agree you cited to 38 CFR Section 4.1; is that right?

A. Yes.

Q. Okay. Did you look at other sections of 38 CFR part 4?

A. I would think that I did. I don't recall them specifically sitting here.

Q. Okay. Go ahead and enter Exhibit 15.

(Exhibit 15 marked for identification.)

BY MR. CROMWELL:

Q. Please let me know once you've gotten -- received that.

A. It's in the window. Yes, I have it.

Q. Okay. And what I've shared you and marked as Exhibit 15 is 38 CFR Section 4.10 entitled "Functional Impairment"; is that correct?

A. Yes.

Q. Have you seen this section before?

A. I'm sure that I looked at it.

Q. Okay. And it starts off with "The basis of disability evaluations is the ability of the body as a whole or of the psyche or of a system or organ of the body to function under the ordinary conditions of daily life including employment."

First off, did I read that correctly?

A. I believe you did.

Q. Would you agree with me that a person's ability to function in employment is simply one piece of information considered when making a disability determination?

MR. VANSLYKE: Objection.

THE WITNESS: I have no basis for answering that question.

BY MR. CROMWELL:

Q. Okay. So you don't know one way or the other as you sit here?

A. I believe I cited what they -- what is described as a basis for making that determination which is population averages. But I'm not obviously sitting in the chair making that calculation.

Q. Well, do you know whether, you know, a person's ability to function in employment is

considered at all in making a veteran's disability determination?

MR. VANSLYKE: Objection.

THE WITNESS: Again, I'm not the person who makes those determinations. I can tell you what is described in the 38 CFR in terms of how that's calculated, which is based on average, averages -- average earnings for a population or the average impact of a disease on a given population. Beyond that, are there other factors that are considered, I'm not sitting in that chair.

BY MR. CROMWELL:

Q. Okay. You indicated before, and correct me if I'm wrong, that when disability determinations are being made, a person's employment and the amount they make has no role in making a disability determination; correct?

A. My understanding is that past earnings and actual earnings are -- do not affect the disability payment except perhaps with limited exceptions.

Q. Do you know what those exceptions are?

A. I don't know all of them. I think I recall that if you have 100 percent disability and you have some actual earnings, that that might affect your determination. But the specifics of that, I don't recall.

Q. Understood. Have you ever heard of -- well, that's okay. Never mind.

Is it your understanding that disability -- VA disability evaluations looks at a person's ability to function under ordinary conditions and of daily life?

MR. VANSLYKE: Objection.

THE WITNESS: Again, repeating what I've said, I'm not sitting in that chair. I can tell you that they are looking at data that are consistent with the average effect of certain conditions on a general population.

BY MR. CROMWELL:

Q. You're saying the average effects on a given population is one of the factors they use to determine whether a person is disabled or not?

A. Excuse me for interrupting.

That is my understanding. The earnings or the impairment on a given population

is used to determine the VBA benefit. Excuse me.

Q. Do you know -- well, let me step back. Are you familiar with how VA disability evaluations are performed?

A. Are you talking about medically? No.

Q. I'm not talking about medically. I'm just asking are you familiar with what disability examinations are? We'll start there.

MR. VANSLYKE: Objection.

THE WITNESS: The specifics of that process, no, I'm not familiar.

BY MR. CROMWELL:

Q. Okay. Do you know what a veterans service representative is?

A. Specifically what their function and role is, I don't know. I'm not familiar with that.

Q. Okay. Same question, do you know what a rating veterans service representative is?

A. I'm sorry, can you -- I didn't understand.

Q. Sure. Do you know what a rating veterans service representative is?

A. I think my answer is the same. I don't have a specific familiarity with that role.

Q. Okay. Do you know what kind of questions are asked during a disability examination?

A. Well, I think I've answered that. But I'm not familiar with that process, no.

Q. Do you know what kind of information a veteran needs to provide during a disability examination?

A. I think my answer, again, has to be the same. I'm not familiar with the specifics of that process.

Q. Okay. Have you ever seen a disability benefits questionnaire?

A. I think you asked me that earlier.

Q. Have you ever seen one?

A. To my -- best of my recollection, I don't recall having seen one.

Q. All right. When applying for VA disability, you agree that veterans are not required to provide proof of employment; correct?

A. That would be my understanding.

Q. For instance, they're not required to produce salary information or information from their employer?

MR. VANSLYKE: Objection.

THE WITNESS: Well, I'm not sure what they're required to produce. As I've said, I'm not familiar with the very specifics of the process. But my understanding is that the benefit is not dependent upon a salary history or even actual employment.

BY MR. CROMWELL:

Q. I was going to say break that apart. You agree it's not dependent upon whether a veteran is actually employed or not; correct?

A. That's my understanding.

Q. Okay. You gave an example earlier, and I meant to ask about it at the time. You would agree that a VBA disability benefit for a given injury or condition is the same whether the claimant has a high earning capacity or a low earning capacity; correct?

A. I think --

MR. VANSLYKE: Objection.

THE WITNESS: -- my understanding -- sorry. My understanding is that the VBA disability benefit is not contingent upon or based on earnings.

BY MR. CROMWELL:

Q. You would agree that the VBA disability benefit for a given injury or condition is the same whether the claimant has a below average earnings history or above average earnings history?

A. Earnings history or earnings capacity?

Q. This question is about earnings history.

A. My understanding is that it is an attempt to understand the average impairment based on population statistics for a given injury or illness. So in that sense, it is related to earnings capacity based on averages for the population. But it is not based -- my understanding is that it's not based on actual earnings.

Q. Okay. So you'd agree that the VBA disability benefit for a given injury or condition is the same, whether the claimant has a below average earning history or above average history?

A. My understanding is that actual earnings history or actual earnings is not a factor in that determination.

Q. I think you said -- testified about this before, you understand that a veteran can obtain VA disability benefits even though they are working?

A. That's my understanding.

Q. You have opined that reducing a plaintiff's overall damages award on the basis of a unrelated VBA disability benefit would leave the plaintiff less than financially whole; is that generally accurate?

MR. VANSLYKE: Objection.

THE WITNESS: I -- sorry. I think that's a fair characterization.

BY MR. CROMWELL:

Q. And you understand these VBA bellwether plaintiffs are receiving disability compensation payments; correct?

A. That's my understanding, yes.

Q. And you understand that some, if not all, depending on the plaintiff, of those payments are related or presumed to be related to conditions they obtained from being at Camp Lejeune; is that correct?

A. I think you -- yes. I think my understanding is that the disability benefits are

based in part on disability injuries or diseases related to their exposure at Camp Lejeune. Did I express that?

Q. Yeah, I think we agree.

A. Yeah.

Q. You'd agree with me that if not for their time at Camp Lejeune they would not these plaintiffs would not be receiving disability compensation for service-connected conditions they claim are from Camp Lejeune?

MR. VANSLYKE: Objection.

BY MR. CROMWELL:

Q. Follow?

A. Not really.

Q. If -- if they were never at Camp Lejeune, you'd agree with me that they won't -- they would not be receiving disability compensation for the same injuries they claim are from Camp Lejeune?

MR. VANSLYKE: Objection.

THE WITNESS: I think that involves conclusions as to facts that I wasn't asked to opine on. If they were never at Camp Lejeune then I would assume they wouldn't have Camp Lejeune related claims

if that's your question.

BY MR. CROMWELL:

Q. It is my question.

A. Okay.

Q. Yeah. You understand that in these cases, plaintiffs are separately seeking various forms of economic damages stemming from the presence of injuries they assert come from their time at Camp Lejeune; correct?

A. Let me see if I can turn that around. I understand that these plaintiffs were unable to pursue claims against the government for all of their losses and that's what this litigation is intended to determine.

Does that answer your question?

Q. I think it answers a different question.

My question is: Is it your understanding that plaintiffs are seeking various forms of economic damages that they allege stem from injuries that they presume came from their time at Camp Lejeune?

MR. VANSLYKE: Objection.

BY MR. CROMWELL:

Q. That's all I'm asking.

A. I think that there are damages, yes, or losses, additional losses related to their injuries and illnesses sustained at Camp Lejeune.

Q. It is your opinion that VBA disability benefits may only offset damages claims for lost earning capacity; correct?

A. You keep inserting the word "only." I don't know that I can state unequivocally that it's only. But just taking the words of the documents on their faces as I've decided them, that's what it's stated. And it's clearly separate from actual earnings.

Q. I guess I'm asking you are there other categories of damages in which you think in your opinion VBA benefits may offset against?

A. That's not my initial assumptions based on the statements and behavior of the government. I do understand that there are special monthly compensations that might be for other purposes. But I have not been asked to look into that or opine on that point.

Q. Okay. It's your opinion that none of the VBA bellwether plaintiffs are asserting a claim for lost earning capacity; is that correct?

MR. VANSLYKE: Objection.

THE WITNESS: Well, I think that misstates the documents. But I think initially they were not submitting claims related to sort of -- let's say, for example, nonpayment of their disability payments or reconsideration reevaluation of their VA disability payments. That might be a separate category. But broadly -- and then I think subsequent to or later they submitted amended claims in which they've made a conditional claim related to VA disability claims -- payments. Excuse me.

BY MR. CROMWELL:

Q. All right. I'm going to share your report again. Real simple question, Mr. Rybolt. It's your position that none of the VBA bellwether plaintiffs expert reports assert damage claims for lost earning capacity; correct?

A. Can you read the rest of the sentence in the footnote?

Q. Well, I'm going to start with that's the first part of my question; right?

A. I agree that's the first part of that sentence.

Q. Okay. If none of the VBA bellwether plaintiffs in your view are asserting claims for lost earning capacity and VBA disability payments in your view may only offset against claims for lost earning capacity, then is the natural conclusion of those two things that the offset for any benefits paid from the VA for disability is zero dollars?

MR. VANSLYKE: Objection.

THE WITNESS: That was a long hypothetical. Can you try it again?

MR. CROMWELL: Madam Court Reporter, can you repeat the question, please.

(The reporter read back the last question.)

MR. VANSLYKE: Same objection.

THE WITNESS: So a couple of things. Again, you inserted the word "only." But I would say that the VBA disability payments have not been an element of plaintiffs's claims as far as I understand and, therefore, can use them to offset other claims in claims related to other losses would be inappropriate. The claimants aren't at issue. I do understand that subsequent to -- well, I

think it was before I filed my report, but that to the plaintiffs have more recently filed an amended damages claim form in which they assert contingent claims. So stop.

BY MR. CROMWELL:

Q. Is the question answer to my question, yes, it's zero dollars or, no, it's not zero dollars?

MR. VANSLYKE: Objection.

THE WITNESS: I think I just answered that.

BY MR. CROMWELL:

Q. Okay. In your view, should any amount of disability benefits be permitted to be offset in these cases?

MR. VANSLYKE: Objection.

THE WITNESS: I think that would be subject to items of proof. I think that the -- to the extent that you can, in your filings, establish that the VA disability benefit was for purposes other than earnings capacity, then that could conceivably lead to an offset against some forms of claims. But I don't believe

you've established that at this point.

BY MR. CROMWELL:

Q. So without that being established, is it your view that you wouldn't be able to use any of the benefits paid by the VBA to these plaintiffs to offset any damages award?

MR. VANSLYKE: Objection.

THE WITNESS: My assumption and my understanding is that the VA disability benefit is for lost earnings capacity and is considered independent of actual earnings. So, yes, I do think those things are disconnected and there would be no offset.

BY MR. CROMWELL:

Q. Okay. Thank you. All right. You are offering the disability ratings --

A. I want to add something to that prior answer just to be absolutely clear.

I'm not trying to assert a legal opinion in saying so, but as a damages expert and approaching this from a damages perspective, I believe that to be an accurate characterization. Is that fair?

Q. That's fine.

You are familiar with the disability ratings for some of these individual plaintiffs; is that correct?

A. Broadly speaking.

Q. Would you agree with me that simply because a plaintiff's disability rating may change does not mean that it is likely that it will change?

MR. VANSLYKE: Objection.

THE WITNESS: Well, I mean, there is some likelihood that it could change, right. I don't know specifically what that likelihood is.

BY MR. CROMWELL:

Q. That's the answer to my follow-up. Have you attempted to measure the likelihood that any plaintiffs' individual disability ratings may change in the future?

MR. VANSLYKE: Objection.

THE WITNESS: I think we cited examples, several examples from among the plaintiffs, and also we also cited, I believe, a national statistic about ratings changes or -- I think it was just ratings increases, so not even decreases.

So I do think we have some estimates of what that probability is.

BY MR. CROMWELL:

Q. Okay. Have you -- have you, as you're sitting here today, prepared an estimate of a likelihood that any of these individual VBA bellwether plaintiffs' disability ratings will change in the future?

A. I don't think that's a relevant question. The question is that the observation can change.

Q. Mr. Rybolt, that's simply not a response to my question, and I'll move to strike.

A. I think it is a response. I get to respond as I choose, just as you get to ask questions as you choose.

Q. That's not entirely accurate. But you may answer the question. I will ask the question again. Go ahead.

MR. VANSLYKE: Objection.

THE WITNESS: I've forgotten what the question was. You asked me something about probability.

BY MR. CROMWELL:

Q. For any of these VBA bellwether

plaintiffs, have you calculated the likelihood in which their individual disability ratings will change in the future?

MR. VANSLYKE: Objection.

THE WITNESS: So in order to make that calculation -- and the answer is no, but let me explain. In order to make that calculation, I would need to have data from the VA on some reasonable sample of likely -- or similarly situated individuals in order to make that estimate. So, no, I have not been asked to do that analysis.

BY MR. CROMWELL:

Q. Okay. Are you familiar with how VA disability ratings decisions are changed?

MR. VANSLYKE: Objection.

THE WITNESS: Are you asking about a process at the VA?

BY MR. CROMWELL:

Q. Yes.

A. I am not familiar with the specific workings of those processes at the VA.

Q. Okay. Do you know one way or the other whether for a person's disability rating or

particular injury to change, they need to undergo a routine future examination?

MR. VANSLYKE: Objection.

THE WITNESS: That's my understanding that they would need to be reevaluated at some level.

BY MR. CROMWELL:

Q. And even if there is an examination, you understand that a recommendation would need to be made to change that disability rating; correct?

A. I think that's -- I don't know the answer to that one way or the other.

Q. Okay. Do you know once -- or if a recommendation is made to change someone's disability rating, whether it is automatically changed?

A. I don't know the answer to that.

Q. Okay. We just mentioned a moment ago the idea of routine future examinations. Do you understand what those are?

A. Routine future examinations?

Q. Uh-huh.

A. I don't -- I don't have an understanding of what that is other than common

English interpretation of that.

Q. Well, I think maybe we touched on it before, but I just want to make sure I understand. Do you understand that a routine future examination must be performed before a veteran's disability rating can be changed?

MR. VANSLYKE: Objection.

THE WITNESS: I have the general understanding that every examination occurs that can lead to a ratings change. Beyond that, I don't have much knowledge of the specifics of that process.

BY MR. CROMWELL:

Q. All right. Are you familiar with VA policy letters?

A. That's a term of art that I am -- you know, I may have seen them in the course of this case. But it's a term of art that I'm not terribly familiar with.

Q. Okay. I'll go ahead and introduce what we've marked as Exhibit 17.

(Exhibit 17 marked for identification.)

BY MR. CROMWELL:

Q. I'll give you a moment.

A. I see it. Okay.
Q. I'll share my screen.
A. Okay.
Q. Maybe. Maybe I will. Maybe I won't. There we are.
Okay. Just for completeness, Mr. Rybolt, what we've identified as Exhibit 17 is a VA policy letter 21-01 and is dated as of October 7, 2021; is that correct?
A. That's what I see, yes.
Q. Okay. Have you ever seen this before?
A. I don't specifically recall.
Q. Okay. Under the purpose section on this letter, it states, "This letter provides instruction to regional office claims processors regarding scheduling of routine future examinations or RFEs"; is that correct?
A. That's what the sentence reads, yes.
Q. Okay. Are you familiar with what was the impetus for this particular policy letter?
MR. VANSLYKE: Objection.
THE WITNESS: No.
BY MR. CROMWELL:
Q. Under "background," if you would,

read with me. "Generally, examinations will be required if it is likely that a disability has improved or if evidence indicates there has been a material change in a disability or that the future rating may be incorrect."

First off, did I read that correctly?

A. Not quite. You said future instead of current in that sentence.

Q. Okay. With that change, did I read that correctly?

A. Yes.

Q. Under analysis and conclusion, which is just the next section, it states that the "Compensation service analyzed data on all veterans who had an RFE conducted in fiscal years 2018, 2019, and 2020. The analysis revealed that the majority, 77 percent, of conditions reviewed were confirmed and conditioned. Only about 10 percent of conditions were reduced and the remaining 13 percent of conditions were increased."

First of all, did I read that correctly?

A. I believe you did.

Q. Would you agree with me that at least

according to this VA policy letter, the VA compensation service in analyzing data on all veterans who had RFEs conducted in fiscal years 2018, 2019, and 2020, that the majority, or 77 percent, had their conditions confirmed and continued?

MR. VANSLYKE: Objection.

THE WITNESS: I agree that that's what this paragraph, says.

BY MR. CROMWELL:

Q. Meaning they stayed the same; correct?

MR. VANSLYKE: Objection.

THE WITNESS: Again, I believe that's what this paragraph says.

BY MR. CROMWELL:

Q. Do you have any reason, as you sit here today, to disagree with that?

A. I do not.

MR. VANSLYKE: Objection.

BY MR. CROMWELL:

Q. Have you seen these numbers before?

A. I -- I believe that I have, actually.

Q. Okay. Do they play any role in the particular opinions you're offering today?

A. No.

Q. Okay. Based off these numbers hypothetically if they are true, would you agree that any plaintiff that went for a routine future examination would more likely than not have their condition confirmed and continued?

MR. VANSLYKE: Objection.

THE WITNESS: I would agree that that's what this paragraph states. But I don't think that's the point of my observation about the possibility of ratings changes.

BY MR. CROMWELL:

Q. Okay. You agree that one can reasonably conclude that each plaintiff is willing to accept continuing benefits from the VBA disability program; correct?

MR. VANSLYKE: Objection.

THE WITNESS: I think that statement is consistent with the observations that they haven't made any claims regarding their VA disability benefits. So assuming that that's true, and it may not be, but assuming that that's true, then I would assume, yeah, that it's a reasonable

assumption that the plaintiffs aren't contesting their VBA disability benefits.

BY MR. CROMWELL:

Q. Would you agree that it would be rational behavior for a plaintiff to continue to receive or seek to receive their VBA disability benefits?

MR. VANSLYKE: Objection.

THE WITNESS: Can you -- what? Would it be irrational for them to want to continue?

BY MR. CROMWELL:

Q. Would it rational? Do you agree -- as an economist, do you agree it's rationale behavior for a plaintiff to be willing to accept continuing benefits from the VBA disability program?

MR. VANSLYKE: Objection.

THE WITNESS: Is it -- I'm sorry rational -- I want to make sure I understood your question correctly. Is it rational behavior for them to want to continue to receive their VA disability benefits?

BY MR. CROMWELL:

Q. Yes.
A. All else being equal, yes, I think that's rational.
Q. I mean, conversely, you wouldn't expect, right, a veteran to seek to stop receiving their VA disability benefits?
MR. VANSLYKE: Objection.
THE WITNESS: I have no idea.
BY MR. CROMWELL:
Q. Would you agree consider that rational or irrational behavior?
MR. VANSLYKE: Objection.
THE WITNESS: All else being equal to decline a benefit or an income stream to which you're entitled, yes, that would be irrational behavior.
BY MR. CROMWELL:
Q. We previously discussed the M21-1 adjudication procedures manual. Do you recall that?
A. I recall it generally, yes.
Q. Okay. Going to go ahead and enter what I'm marking as Exhibit 18.
(Exhibit 18 marked for identification.)

A. Excuse me, just to clarify, was this the same as Exhibit 11?

Q. It is not. I'll explain. This is a another part of the same manual.

A. Okay. And you're pulling it up?

Q. I am pulling it up, yes.

A. Okay.

Q. Just for the record, this is M21-1 adjudication procedures manual part 4, subpart 2, Chapter 1, Section A entitled "Determining the need for review examinations."

Do you see that in front of you, Mr. Rybolt?

A. Yes, I see the top of the page.

Q. Okay. And it indicates an overview, right, this section contains the topic determining the need for review examinations which we've been discussing in some detail?

A. Right.

Q. If we look at PDF page 2, there is a section, we've -- this is for 4, 2, 1, A, that's where we are. This is 1B. You see where I'm looking?

A. Yes.

Q. And it's entitled "Scheduling Future

Review Examinations and Compensation Cases." And it states, "Exercise prudent judgment and refer to 38 CFR 3.321(b) in determining the need for review examination. It is the policy of the Veterans Benefits Administration to request future examinations only when absolutely necessary, and every effort should be made to limit cases where future examinations are requested."

First off, did I read that correctly?

A. I believe you did.

MR. VANSLYKE: Objection.

BY MR. CROMWELL:

Q. Do you understand -- or is it your understanding that it is VBA policy to request future examinations only when absolutely necessary?

MR. VANSLYKE: Objection.

THE WITNESS: Well, I can see in this document that's an -- to the extent that that's an expression of policy that your characterization is accurate.

BY MR. CROMWELL:

Q. Do you have any independent knowledge one way or the other?

A. Of what VBA policy is?
Q. On this topic.
A. I do not.
Q. Okay. Would you also agree that at least according to VBA policy that every effort should be made to limit cases where future examinations are requested?
MR. VANSLYKE: Objection.
THE WITNESS: I think that's what the document says.
BY MR. CROMWELL:
Q. Do you have an opinion one way or the other whether these VBA bellwether plaintiffs will need to undergo a future reevaluation?
MR. VANSLYKE: Objection.
THE WITNESS: I think it's likely based on the statistics that you've shown me that their diseases -- that their diseases will progress one way or another, either getting worse or by improving. I think that's a reasonable assumption.
You cited a statistic that I think was 13 percent in a given year, right. Over the course of a few years that could be a pretty substantial number of cases.

And in each case, if those benefits would have gone down, then your statement, your request for an offset is overstated and those plaintiffs would be undercompensated.

So these probability questions that you're asking really don't enter into it. Depending on what the policy it is --

BY MR. CROMWELL:

Q. They don't enter into what -- oh, sorry. They don't enter into what?

A. Depending on what the policy is, if the Court's intent is to ensure that each plaintiff is adequately compensated for their losses and the fact that even one of them might experience a loss of benefits in the future making -- meaning that your offset is overstated, the Court might choose to disagree with that. I'm not saying that they should. I'm not saying that that's what the law requires. I'm just making that observation as a damages expert.

Q. Based upon what though?

A. My 20 years of experience. My training. My background. The numerous cases that I've worked on.

Q. Okay. I'm going to enter into evidence what we've marked as Exhibit 19 and I will share that.

(Exhibit 19 marked for identification.)

THE WITNESS: I have it.

BY MR. CROMWELL:

Q. All right. This is 38 CFR Section 3.327 entitled "Reexamination"; is that correct?

A. That's what the document says.

Q. Have you ever seen this particular CFR before?

A. I think I've probably glanced at it, yes.

Q. Okay. This states, "Reexaminations, including periods of hospital observation, will be requested whenever VA determines there is a need to verify either the continued existence or the current severity of a disability. Generally, reexaminations will be required if it is likely that a disability has improved or if evidence indicates that there has been a material change in a disability or that the current rating may be incorrect. Individuals for whom reexaminations

have been authorized and scheduled are required to report for such reexaminations."

First of all, did I read that correctly?

A. I believe you did.

Q. Given your analysis in this case, do you know whether any of the VBA bellwether plaintiffs in these cases have had reexaminations that have been authorized and scheduled?

MR. VANSLYKE: Objection.

THE WITNESS: I don't believe I have information to that effect, although, I can see in the data that their ratings have changed. So I think I can make the reasonable inference that there was some reexamination.

BY MR. CROMWELL:

Q. Mr. Rybolt, I apologize, that's not what I asked. I asked simply, do you know whether any of the plaintiffs in these cases have had reexaminations that have been authorized or scheduled?

MR. VANSLYKE: Objection.

THE WITNESS: I'll give you the same answer.

BY MR. CROMWELL:

Q. I don't know the answer to the question. Do you know whether they've been scheduled or not?

A. I think --

MR. VANSLYKE: Objection.

THE WITNESS: -- it's a reasonable inference given the data, but I have not -- I don't have separate information on them seeking the reexamination that you're describing.

BY MR. CROMWELL:

Q. So your assumption is that they -- it's reasonable to assume that they have been, but you don't know that they are. Is that a fair characterization of what you just said?

A. I am not sure. What do you mean by "are." Are intending to? Is that --

Q. Now that they've been authorized and scheduled?

A. I don't have separate information on that point, no.

Q. So as you sit here, you don't know whether any of these VBA bellwether plaintiffs have had a reexamination authorized or scheduled?

MR. VANSLYKE: Objection.

THE WITNESS: Again, I think that's a reasonable inference from the fact that their disability ratings have changed over time which we can see in the data. But I don't have some sort of document that establishes, you know, that a reexamination was, as you said, requested and approved, I think was your language.

BY MR. CROMWELL:

Q. Okay. Were you given access to any of the plaintiffs' VBA records to review in this case?

A. That's a pretty broad category. Are you referring to records of their disability benefits, for example, or their disability ratings. Yes, we've seen those.

Q. You've seen all the VBA documents that have been produced by the VBA for each of the individual plaintiffs?

MR. VANSLYKE: Objection.

THE WITNESS: I don't -- I don't know that that's true one way or the other.

BY MR. CROMWELL:

Q. Well, I'm asking. They're not listed

on your materials considered list. I'm curious whether you had access and reviewed them at all?

MR. VANSLYKE: Objection.

THE WITNESS: Well, so I gave you an example of data that was produced. And I'm not aware of anything besides that. But you asked whether I had seen all of the materials produced, and I have no way of knowing that.

BY MR. CROMWELL:

Q. Okay. Have you seen any disability benefits questionnaires, ratings decision sheets for any of the individual plaintiffs?

A. I don't recall that.

Q. Okay. If you don't recall seeing them, is it fair to say you haven't reviewed such records in this case for the individual plaintiffs?

A. No, I don't think that's fair. I mean, if they're listed, then I probably did look at them at some point, but it's not a memory test and I don't specifically recall what you are asking.

Q. If they are not listed on your materials considered list, is it a fair

interpretation that you have not reviewed those records?

A. I think that's reasonable because I made every effort to list everything we received.

Q. All right. Continuing to look at Exhibit 19, this is 28 CFR Section 3.327. If you look at Section B, it's entitled "Compensation Cases." Do you see that?

A. I see that.

Q. Have you ever seen this particular section of the CFR?

A. I'm sure I've probably looked at it, as I've mentioned before, but I didn't memorize it.

Q. Okay. If you look at B(2), it says, "No periodic future examinations will be requested. In service connected cases, no periodic reexamination will be scheduled."

And then it lists a number of items; correct?

A. Yes.

Q. For instance, under B(2)(i), it says, "No periodic reexamination will be scheduled when the disability is established as static"; is that correct?

A. That's what the sentence says.
Q. Do you know whether any of the VBA bellwether plaintiffs have had any of their disability conditions considered static?
MR. VANSLYKE: Objection.
THE WITNESS: Again, I wasn't asked to review any data relevant to that question.
BY MR. CROMWELL:
Q. Okay. Moving on, looking at 3.327(B)(2)(2) states that "No periodic reexamination will be scheduled when the findings and symptoms are shown by examinations scheduled in paragraph 2(B)(1) of the section or other examinations and hospital reports to have persisted without material improvement for a period of five years or more."
First off, did I read that correctly?
A. I believe you did.
Q. Did you evaluate any of the VBA bellwether plaintiffs in these cases to determine if they have had disability conditions that have persisted without material improvement for a period of five years?
MR. VANSLYKE: Objection.

THE WITNESS: I think we have data with which we could calculate that, at least within the limited range of data that we have. But we were not specifically asked to make that calculation.

BY MR. CROMWELL:

Q. So as you sit here today, you're not -- you have not made those calculations or offering opinions on that topic?

A. I am not offering opinions on that point, that's correct.

Q. Okay. Same question, a little bit different though. Did you evaluate any of the plaintiffs in these cases to determine if they have had a service-connected condition that has been in effect for ten years or more?

A. Specifically within the time frame ten years or more?

Q. Uh-huh.

A. I don't believe we looked at that specific question, no.

Q. Okay. Are you aware that service connection for any disability which has been in effect for ten years or more will not be severed

except when it's showing that the original grant was based on fraud or is clearly shown in their records that the person concerned did not have a requisite service or character of discharge?

MR. VANSLYKE: Objection.

THE WITNESS: Yes, I'm not aware of that specific requirement or condition.

BY MR. CROMWELL:

Q. Okay.

A. And, I'm sorry, was that your question? Was I aware of that?

Q. Yeah.

A. I'm not aware of that specific question.

Q. All right. I'll go ahead and enter into evidence what we previously marked as Exhibit 25.

(Exhibit 25 marked for identification.)

BY MR. CROMWELL:

Q. I will share my screen with you.

Again, this is from 38 CFR and this is Section 3.957 entitled "Service Connection." Do you see that?

A. I'm sorry, we're back on Exhibit 25?

Q. We are on Exhibit 25, yes.
A. Yes, I see the document.
Q. Have you ever seen or read --
MR. VANSLYKE: Counsel, I just want to note before we jump into this that at some point soon I think we're due for a lunch break if you've got a spot for a break coming up.
MR. CROMWELL: I do. I've got, like, maybe three minutes hopefully, then I agree.
BY MR. CROMWELL:
Q. Sorry. My question is are you familiar or have you ever seen 38 CFR Section 3.957?
A. Well, I'll just state, you know, because you've asked me now several of these, my recollection is that I did review the relevant sections. I don't -- I did not memorize them and, you know, I have no specific recollection as to this particular, you know, section of that -- of that CFR. That said, I'm happy to answer your questions.
Q. Okay. But did you review this one in preparation for your report or your testimony

today?

MR. VANSLYKE: Objection.

THE WITNESS: To my recollection, as I just said, is that I looked at all of the relevant sections including this one, but you know --

BY MR. CROMWELL:

Q. Understood.

A. I don't have a strong recollection of the document months later, is that clearer?

Q. No, I understand. It's not meant to be a memory test, but there's some familiarity with it, it's easier to ask you questions.

A. Okay.

Q. Okay. Under this section, it starts off by saying, "Service connection for any disability or death granted or continued under Title 38 USC, which has been in effect for ten or more years will not be severed except upon a showing that the original grant was based on fraud or it is clearly shown from military records the person concerned did not have the requisite service or character of discharge."

First off, did I read that correctly?

A. I believe you did.

Q. Okay. Would you agree that according to at least federal regulations that any service-connected condition a VBA bellwether plaintiff has had for more than ten years will not be severed absent showing fraud or clear records showing the plaintiff did not have the requisite service or type of discharge?

A. I agree that that's what this document says.

Q. Have you made any attempt or are you planning to offer any opinion as to whether any of the VBA bellwether plaintiffs have any service-connected conditions that they have had for more than ten years?

MR. VANSLYKE: Objection.

THE WITNESS: I would have to check. I don't -- well, no, I'll just answer more simply that, no, I have no intention of offering that specific opinion at this time.

BY MR. CROMWELL:

Q. Okay. I wanted to go back to Exhibit 19. Sorry. And Exhibit 19 is 38 CFR 3.327 and looking at B(2) and then (4). And this portion of the regulation states that "No

periodic reexamination will be scheduled in cases of veterans over 55 years of age except under unusual circumstances."

First off, did I read that correctly?

A. I believe you did.

Q. Did you make any determination as to the current ages of the VBA bellwether plaintiffs in these cases?

A. I believe we have that information.

Q. And based off the information that you have, is it your understanding that each of the VBA bellwether plaintiffs is over the age of 55?

A. I don't specifically recall that, but I'll accept your, you know, premise that it is.

Q. No reason to dispute it as we sit here?

A. I have no reason to dispute that.

Q. Okay. If each of the VBA bellwether plaintiffs is over the age of 55, would you agree that they would not -- they would not need a periodic reexamination except under unusual circumstances?

MR. VANSLYKE: Objection.

THE WITNESS: That's what the

document says, but I'll go back and say that we can see that ratings have changed over time. I think we can make the reasonable inference based on the data and statistics that you, in fact, have cited here today that ratings do change and can change. Even if they're in unusual circumstances, it's important to recognize that.

BY MR. CROMWELL:

Q. Do you know what constitutes unusual circumstances under this provision?

MR. VANSLYKE: Objection.

THE WITNESS: I do not.

BY MR. CROMWELL:

Q. Did you evaluate whether there were any unusual circumstances for these plaintiffs?

MR. VANSLYKE: Objection.

THE WITNESS: Since I don't understand what unusual circumstances are, it would be difficult for me to do that.

BY MR. CROMWELL:

Q. Okay. Back to Exhibit 18, and this is M21-1 adjudication procedures manual for the VA. And looking at 4.2.1.A.1.E, do you see that?

And it says, "Considering a veteran's age in connection with review examinations."

Do you see where I am?

A. Yes, I see that.

Q. If we start at the top, it notes that as is discussed in M21-1 part 4 subpart 2.1.A.1.D and with only rare exceptions, veterans over the age of 55 must not be routinely recalled for reexamination."

First off, did I read that correctly?

A. I believe you did.

Q. Would you agree at least based off VA adjudication manual that veterans over the age of 55 must not be routinely recalled for reexamination with only rare exceptions?

MR. VANSLYKE: Objection.

THE WITNESS: Well, I agree that that's what the document says. What the document doesn't say is whether the veteran themselves can, in some circumstances, request reexamination or reconsideration of their disabilities. Clearly, diseases can progress past the age of 55. And while this particular subset of plaintiffs, and I don't know

this for sure, are all over the age of 55, assuming that's true, I don't know that that's true for the entire potential list of plaintiffs. There could be many that are under 55.

So I'm straining to answer your questions. But, again, I think the question that I raise in my report is whether any of them might be reevaluated. And I think that's a definite possibility. I see that in the data.

BY MR. CROMWELL:

Q. Okay. Would you agree with me that based upon this VA policy and based upon the fact that presumably hypothetically each VBA bellwether plaintiff is over the age of 55, that it would be a rare exception for these plaintiffs to be recalled for a future reexamination?

MR. VANSLYKE: Objection.

THE WITNESS: I don't know how they define rare, but that is what the document says. I agree with that.

MR. CROMWELL: Okay. We can take a break. I know -- sorry, that went longer than 3 minutes, so I apologize. But it's

4:00 here, so it's 1:00 there. How long would you like for a lunch break, Mr. Rybolt?

THE WITNESS: I don't know. What do you guys need? I would be fine with 20 or 30 minutes, you know, something like that.

MR. CROMWELL: 30 minutes is fine with me. Sorry, Ben, I didn't mean to talk over you.

MR. VANSLYKE: I was going to say I think at least 30.

THE VIDEOGRAPHER: All right. We're going to go off the record at 1:00 p.m.

(Recess taken from 1:00 p.m. until 1:39 p.m.)

THE VIDEOGRAPHER: Back on the record at 1:39 p.m.

BY MR. CROMWELL:

Q. All right. Mr. Rybolt, we were talking about future evaluations for individual bellwether plaintiffs. And I meant to ask before, did you look at the VBA disability ratings that each plaintiff has for each of their service-connected conditions in this case?

A. We have data on their ratings.

Q. You have data. I'm curious, do

you -- did you use those disability ratings to formulate your opinions in this case at all?

A. I know we looked at it. If we relied on some analysis, it would be included in my report. We looked, for example, at, you know, instances in which ratings varied over time.

Q. Okay. Do you know what a total combined disability rating is under the VA's ratings schedule?

A. I do have an understanding of that.

Q. And what is your understanding of that?

A. That there is a formula for determining how ratings for different diagnoses interact. Now, I can't cite you the formula. But that's what I understand it is.

Q. Understood. Did you attempt to determine the current total combined disability rating for any of the VBA bellwether plaintiffs?

MR. VANSLYKE: Objection.

THE WITNESS: I don't recall having done so. I don't recall having been asked to do that.

BY MR. CROMWELL:

Q. Okay. Did you determine how long

each plaintiff has had a given service-connected condition?

A. I don't think we looked specifically at that question. We might have -- you know, if we looked at a particular -- how a particular plaintiff's ratings changed over time, we might, in fact, have been looking at that question. But we weren't stressing that point, if that answers your question.

Q. Okay. Did you make any determinations as to whether a given VBA bellwether plaintiff's service-connected condition will increase or decrease in the future?

MR. VANSLYKE: Objection.

THE WITNESS: I did not look at probabilities in that sense other than what's described in my report.

BY MR. CROMWELL:

Q. Okay. Is that true regardless of whether a service condition was -- is considered related or unrelated to Camp Lejeune?

MR. VANSLYKE: Objection.

THE WITNESS: I'm sorry, what is the nature of your question here?

BY MR. CROMWELL:

Q. So same question as before is whether, you know, did you make any determination as to whether a plaintiff's service-connected condition will increase or decrease in the future. I understand your answer.

My follow-up question, though, is that true regardless of whether a given service-connected condition is or is not related to Camp Lejeune water?

A. And, again, this goes to probability in the future.

Q. Yes. Yeah.

A. I did not look specifically at that question or attempt to measure that.

Q. Did you review -- well, I'll step back. In your materials considered list, you do not include reference to any of the plaintiffs' life care planners; is that correct?

A. Is there a reference? There may be a reference, but I don't think that we were asked to look specifically at life care plans.

Q. If we can take a look at it. I'm not familiar with any reference in there. But if -- we can pull up your Exhibit 6, which is your

report and materials considered. And these are the expert reports that you considered?

A. Uh-huh.

Q. And the only expert I understand that you looked at from plaintiffs was Chad Staller; is that correct?

A. That's correct.

Q. Okay. So fair to conclude then that you did not review any of the plaintiffs' expert reports for any of their life care planners; is that correct?

A. I believe that's correct.

Q. And you would not have seen their testimony; is that correct?

A. I don't believe that was shared with us.

Q. Okay. Did you review any of the expert reports for the United States life care planners?

A. I don't recall having done so, no.

Q. I guess -- and then the same would be true, you did not review any of the life care planner's testimony; is that correct?

A. That would have been outside the scope of my assignment.

Q. Okay. Did you review any of the expert reports of plaintiffs' specific causation experts?

A. Are you talking about medical experts?

Q. Yes.

A. I don't -- I do not recall having reviewed any of their medical expert reports.

Q. Okay. Similarly, is it fair to say you did not review any of the United States specific causation experts?

A. I do not recall having reviewed any of the medical expert reports.

Q. Okay. As we're sitting here today, you do not know what these experts are opining on as far as their conclusions with regards to the health prognosis for these VBA bellwether plaintiffs; is that correct?

A. I was not asked to review that information.

Q. Okay. So it's fair to say you don't know what their opinions are with regards to these VBA bellwether plaintiffs health prognosis?

A. Not in -- not in any specific level of detail for sure.

Q. Okay. As part of your opinions on this topic, you cited a study by the Congressional Budget Office from 2013. Do you recall that?

A. Yes.

Q. I'll look at pages 17 through 18 of your report, or PDF pages 19 through 20, and this is really paragraph 52. Do you see where I'm looking?

A. Yes.

Q. You write, "It stands to reason therefore that for any plaintiff who's non-Camp Lejeune related diagnoses develop or increase over time the corresponding offset for Camp Lejeune related diagnoses would potentially decrease. Indeed, such ratings increases are not uncommon. The Congressional Budget Office reported that in 2013, for example, disability ratings were increased for a total of 230,000 veterans out of approximately 3.5 million who were then receiving benefits, or roughly 1 in 15 that year alone."

First of all, did I read that correctly?

A. I believe you did.

Q. So 1 in 15, that's roughly 6 percent of the veterans who were receiving benefits that year; is that correct?

A. I think it's a little bit more than that, but sure.

Q. Okay. Do you know which of the VBA bellwether plaintiffs currently have a 100 percent disability rating?

A. I don't recall off the top of my head.

MR. VANSLYKE: Objection.

BY MR. CROMWELL:

Q. Okay. It's not an opinion you're offering in this case?

A. I wasn't asked to assess or evaluate actual disability rating.

Q. Okay.

A. I have -- I have the data and we did look at the data, but that wasn't an opinion I was asked to offer.

Q. Would you agree that if a plaintiff has a 100 percent disability rating, it is not -- they are not likely to seek a routine future examination?

A. I don't have any basis to opine on

that one way or the other.

Q. Okay. Well, if a plaintiff has a 100 percent disability rating, do you know what an increased disability rating for a given condition will do to their monthly compensation?

A. Are you talking about their monthly compensation as the VA -- VBA would determine it or would you say that -- or are you asking me about your economist's opinions.

Q. No. I'm simply based off how the VBA would determine it. What would -- if a plaintiff has a 100 percent disability rating, do you know what an increased disability rating for any given condition will do to the amount of monthly compensation that that plaintiff would receive from the VBA?

MR. VANSLYKE: Objection.

THE WITNESS: Well, my understanding and expectation would be that their disability rating would probably stay at 100, although their compensation could change.

BY MR. CROMWELL:

Q. If --

A. Theoretically.

Q. When you say it could change, what do you mean by that?

A. I recall an instance that may be similar to that in which somebody was either given or denied a special monthly compensation. But that could be unrelated. I am speculating a little bit about that.

Q. Okay. Putting -- I understand what you're suggesting. Putting monthly compensation aside, is it your understanding that once a plaintiff already has 100 percent disability rating, they would not be receiving an increased amount of monthly compensation even if one of their conditions received an increased disability rating?

A. I'm not sure I know the answer to that. My understanding would be that the rating would still be 100 percent. My assumption would be that their monthly benefit would be unchanged.

Q. Okay. But as you sit here, you don't know one way or the other?

A. I don't think I know that for, you know, beyond just my inference from what I understand about the case.

Q. Okay. If a plaintiff has 100 percent

disability rating, do you know what a decrease in a disability rating for a given condition will do to their monthly compensation?

MR. VANSLYKE: Objection.

THE WITNESS: Well, again, it depends on a lot of facts you haven't specified. It's possible that if someone is at 100 percent, depending on how the combined disability rating is exactly calculated and what the other diagnoses are, yes, it could result in a reduction in the rating, and I would assume a reduction in benefits.

BY MR. CROMWELL:

Q. I think you hit on my next question, which is just because a plaintiff who's at 100 percent disability may have a disability rating for a condition that decreases, it doesn't mean necessarily that their monthly compensation is going to change, that depends on other factors; correct?

MR. VANSLYKE: Objection.

THE WITNESS: I think you would have -- yes, sorry.

I think you would have to look at the

specifics of the case. I would assume that it is possible that that could happen.

BY MR. CROMWELL:

Q. You have opined that the United States experts erred by assuming that the actual duration of each plaintiff's life will be approximately equal to the average life expectancy; is that correct?

MR. VANSLYKE: Objection.

THE WITNESS: Yes.

BY MR. CROMWELL:

Q. You are familiar with the life expectancy tables provided by the National Center for Health Statistics; is that correct?

A. Broadly, yes.

Q. Have you used them as part of your expert opinions in other cases?

A. Yes.

Q. Would you agree with me that those particular life expectancy tables are empirically tested?

A. Well, I think they're empirically derived, if that's what you mean.

Q. Sure. We'll go with that. You would

agree with me that the tables from the National Center of Health Statistics are empirically derived?

A. My understanding is it would be based on a statistical analysis of the sample of the population with -- you know, under specific demographic characteristics. Is that fair?

Q. Understood. I get that.

Is offering an opinion regarding life expectancy part of standard methodology when evaluating economic damages in personal injury cases?

A. I can say that they apply as a standard methodology in many cases, not just personal injury.

Q. Okay. In determining life expectancy, if you take the meaning for a given demographic dependent upon age, race, gender, you understand that roughly half of the people in that population group will die before the life expectancy and the other half will live beyond that life expectancy?

A. If you're taking the median, yes.

Q. So in offering opinions for these plaintiffs, you are aware that a plaintiff could

die sooner than their life expectancy; correct?

A. Of course.

MR. VANSLYKE: Objection.

BY MR. CROMWELL:

Q. And they could live beyond their life expectancy; correct?

A. Yes.

Q. Now, if I'm understanding your opinions correctly, the fact that these plaintiffs may die before or after, I guess, their life expectancy, does that render opinions based upon those life expectancy calculations unreasonable?

MR. VANSLYKE: Objection.

THE WITNESS: It depends on context.

BY MR. CROMWELL:

Q. The context here with regard to these VBA bellwether plaintiffs?

MR. VANSLYKE: Objection.

THE WITNESS: From which perspective? What else? What about the context?

BY MR. CROMWELL:

Q. You have offered an opinion that plaintiff -- or the United States experts' opinions are unreasonable and speculative because

they rely on the life expectancy of these VBA plaintiffs to calculate future disability payments; correct?

MR. VANSLYKE: Objection.

THE WITNESS: Well, I think at the beginning of that section, I think it's the cumulative effect of the life expectancy used as well as the other criticisms that I offer there. The interplay of disability ratings with retirement benefits, for example. The interplay of disability ratings for both Camp Lejeune related illnesses and non-Camp Lejeune related illnesses, that the combined effect of this is to render their opinions unreliable, yes.

BY MR. CROMWELL:

Q. Well, I'm -- just to be clear, I'm focusing on the section of your report that specifically is suggesting that the government experts failure to acknowledge and account for variability and life expectancy renders their opinions unreasonable.

A. Yes.

Q. And so in that context, is it -- is

it your opinion that because they are relying upon life expectancy to calculate future disability benefits or compensation that their opinions are unreasonable?

MR. VANSLYKE: Objection.

THE WITNESS: Yes.

BY MR. CROMWELL:

Q. Okay. And is it because -- if I'm looking at your report correctly, is it because a plaintiff, like their given health conditions could, in fact, die before they're given life expectancy that renders it unreasonable?

MR. VANSLYKE: Objection.

THE WITNESS: Well, that's certainly a factor that should be considered. But that's not the only factor.

BY MR. CROMWELL:

Q. Can you tell me what the other factors are in this portion of your report?

A. Sure. It's my experience for having done this for, you know, close to 20 years now that the court is interested in ensuring the plaintiffs are adequately compensated. If half of your plaintiffs are going to be undercompensated because of the use of the median

or the mean of life expectancy, then I would think that the Court would want to be aware of that as an implication or result of the methodology you've chosen. So I pointed that out.

Q. So the use of empirically derived life expectancy tables by the United States experts, in calculating future disability payments, renders their opinions unreasonable or speculative in your view?

MR. VANSLYKE: Objection.

THE WITNESS: Excuse me, I'm sorry. Yes, given that assumption. If your assumption is -- and, again, I'm not offering this as an opinion, but it is my experience that our intent here is to ensure that plaintiffs are adequately compensated or fully compensated for their losses. If you're using the mean of a life expectancy ratio or the median, you're leaving about half of them out.

BY MR. CROMWELL:

Q. You would agree with me that the other half is being overcompensated in that scenario you're presenting; right?

A. Sure.

MR. VANSLYKE: Objection.

BY MR. CROMWELL:

Q. Okay. Are you -- well, one of the things you just mentioned before was the other items you indicate are -- make the United States experts' opinions unreasonable. One of them had to do with, you said, the interplay of veterans retirement. Can you explain what you mean by that?

A. Sure. I think I explained this in the report. But disability benefits can be affected one way or the other by, you know, any retirement benefits that are received.

Q. And you have indicated that the government's experts failed to control for the interplay of the veterans retirement and disability benefits when they calculated their offsets. Is that your opinion?

A. That's correct. It could affect the amount of the disability or the benefits that are ultimately received.

Q. How do you know that the government's experts failed to control for the interplay between those two benefits?

MR. VANSLYKE: Objection.

THE WITNESS: Well, I see no discussion of that, and I see no evidence of that in their analyses. I could be mistaken. Maybe I've overlooked something. But I don't recall anywhere where they considered that.

BY MR. CROMWELL:

Q. Did you make any effort to determine what plaintiffs' disability benefits should be in light of their entitlement to military -- or entitlement to military retirement?

MR. VANSLYKE: Objection.

THE WITNESS: No, I wasn't asked to do that.

BY MR. CROMWELL:

Q. Okay. You noted in your report. I'm looking at -- sorry, I should still be sharing. I apologize. Exhibit 6 on page 22, PDF page 24, you have noted that if for a given retiree his or her cumulative disability rating is less than 50 percent, the total payment to the veteran is the greater of the applicable VBA disability benefit and the applicable retirement benefit.

Did I read that correctly?

A. You did.

Q. And you cite to Footnote 54. And this is a article or something from the military wallet; is that correct?

A. That's what that -- that's what that says, yes.

Q. Do you know whether this website has any connection to the Department of Veterans Affairs?

A. I have -- I do not know.

Q. Did you do anything to vet or confirm the information that's contained on this website?

A. I would have asked my associate to do that. And I don't -- I would assume that he did that, but I don't know that he did.

Q. Okay. Did you look to see what the specific veterans affairs policies and procedures say regarding receiving VA disability compensation and military retirement pay?

MR. VANSLYKE: Objection.

THE WITNESS: Can you be more specific?

BY MR. CROMWELL:

Q. Did you look at any VA policies or guidelines as to how a veterans disability

compensation and military retirement pay interact?

MR. VANSLYKE: Objection.

THE WITNESS: I don't believe I had access to VA guidelines on that point.

BY MR. CROMWELL:

Q. Okay. If they were publicly available, would you rely on those policies rather than those set forth in the website you're referring to?

MR. VANSLYKE: Objection.

THE WITNESS: I think that would probably be preferred, but practitioners evidence can also be useful.

BY MR. CROMWELL:

Q. Okay. Well, let's look at it. I'm going to enter this as Exhibit 21. Stop sharing. All right.

(Exhibit 21 marked for identification.)

BY MR. CROMWELL:

Q. Mr. Rybolt, what we have marked as Exhibit 21 is article from Military Wallet entitled "How VA Disability Compensation Affects Military Retirement Pay"; is that correct?

A. Yes.
Q. This is the same citation that you were relying upon in your report; is that correct?
A. I believe that's correct.
Q. Okay.
A. Let me actually look and make sure.
Q. That's fine. Feel free to confirm.
A. Can you --
Q. Yes, I have control. Yeah.
A. Can you, I'm sorry, switch to my report so I can see what it's actually --
Q. Yes. So this is the citation we were referring to. Footnote 54.
A. I think the dates are different. Did I misread that?
Q. I think the date you're referring to is the updated version.
A. Okay. It appears to be the same.
Q. If I represent that the length that's provided is a link -- we lost Ben. So I will hold off on anything. We should go off the record.
A. Okay.
THE VIDEOGRAPHER: Did you say you

want to go off the record?

MR. CROMWELL: Yeah. Ben dropped.

THE WITNESS: We're going off the record, 2:05 p.m.

(Recess taken from 2:05 p.m. until 2:13 p.m.)

THE VIDEOGRAPHER: Back on the record. Time is 2:13 p.m.

BY MR. CROMWELL:

Q. Mr. Rybolt, we had just introduced Exhibit 21. And this is article from Military Wallet entitled "How VA Disability Compensation Affects Military Retirement Pay." Is that correct?

A. That's correct. It's no longer up.

Q. I'll share it. This is the same document that we noticed cited in your report; is that correct?

A. I believe that's correct.

Q. Okay. Looking at PDF page 4 of this exhibit. And, specifically, here it states the question: "Can you receive 100 percent VA disability and military retirement pay?"

And answer is: "Yes, if your disability rating is 100 percent, you can receive VA disability compensation, and your full amount

of military retirement pay. But you don't have to have a rating of 100 percent to qualify for concurrent receipt."

First of all, did I read that correctly?

A. I believe you did.

Q. Is it your understanding if you have a disability rating of 100 percent, you can receive a VA disability compensation and your full amount of military retirement pay?

MR. VANSLYKE: Objection.

THE WITNESS: That's what this article says or appears to say.

BY MR. CROMWELL:

Q. Are you familiar with concurrent receipt disability pay program?

A. If you're referring to the -- where you're pointing now in the following paragraph, I don't have specific knowledge of that program.

Q. Okay. I'm going to look here. It states that if you are a military retiree with a service connected or combat related VA disability rating of 50 percent or higher, you are eligible for CRDP, which stands for concurrent receipt disability pay; is that correct?

A. That's what that sentence says.
Q. Okay. And is that your understanding of the program?
A. Well, I'm just reading the document along with you.
Q. Okay. If I look back at Exhibit 6, which is your report --
A. Yes.
Q. -- you've written this sentence, "If for a given retiree, his or her cumulative disability rating is less than 50 percent, the total payment to the veteran is the greater of the applicable VBA disability benefit and the applicable retirement benefit; is that correct?
A. That's my understanding.
Q. Do you know where in this particular article that comes from?
MR. VANSLYKE: Objection.
THE WITNESS: Well, the passage that you just read refers to a disability rating of 50 percent or higher, not lower. My point was that if it's lower.
BY MR. CROMWELL:
Q. Understood. Understood. That was really going to be my question. Is your opinion

based off the inverse of the statement I just read essentially?

A. Well, I think that's logical.

Q. Okay.

A. I don't recall the article in its entirety, but that's my understanding.

Q. Okay. I'm going to scroll down and look at two programs. One is CRDP. The other one is entitled "CRSC" which is defined here as combat related special compensation.

Are you offering any opinions in this relate that combat related special compensation?

MR. VANSLYKE: Objection.

THE WITNESS: I haven't been asked to review those specific programs.

BY MR. CROMWELL:

Q. Okay. Under -- back on page 5, for the CRDP, it defines eligibility for military retirees who have a VA disability rating of 50 percent or more from a combat related or service connected injury, and parenthetical on the next page, "injury does not have to be sustained in combat."

First of all, did I read that correctly?

A. I believe you did.

Q. Is it essentially your understanding that this particular program that if a veteran has a disability rating of 50 percent or more, they're eligible for the CRDP?

A. That's what this article says.

Q. Okay. And if you scroll down and it identifies the effect to military retirement and for the CRDP, the veteran is to receive full retirement pay and VA disability pay without a reduction in either.

First of all, did I read that correctly?

A. I believe you did.

Q. Okay. Again, is that your understanding of this program as well? Any -- well, strike that.

Is it your understanding that under the CRDP that any veteran with a 50 percent or more disability rating is able to receive their full military retirement pay and disability pay without reduction in either?

A. Well, I can see that that's what the document says.

Q. Okay. Do you agree with that

statement though?

A. I don't have an independent understanding of what these different programs are or how they work, what the exceptions are, if there are any, or all of the ins and outs and specifics of these specific programs. I wasn't asked to opine on that.

Q. Well, understood. This is an article that you are relying upon, though, in your report; correct?

A. Correct.

Q. You have noted that -- and, sorry, we'll go back to your Exhibit 6, which is your report. You have noted that this retirement issue that we've been discussing may apply to at least VBA bellwether plaintiffs, Cagiano, Downs, Gleesing, Hill, and McElhiney, who each served long enough to qualify for retirement benefits; is that correct?

A. That's what this sentence says.

Q. Well, that's your opinion; right?

A. No, it's my understanding.

MR. VANSLYKE: Objection.

BY MR. CROMWELL:

Q. Okay. Well, how did you determine

that these individual plaintiffs were entitled to military retirement?

A. I think you can -- we can look at the footnote, Footnote 55.

Q. Sure. Yeah. It's right here.

A. I think I asked counsel. Honestly, I don't remember. But we may just have asked counsel which of these were open to retirement benefits.

Q. Okay.

A. Let me finish reading the -- Cagiano, Davis, and Hill have awarded -- have award line reasons of current retired and disability pay amount. So we have that evidenced as well.

Mr. Downs with an award line reason of retired pay adjustment and Mr. McElhiney and Mr. Welch with CONV-retire pay (spec law), I think that's how we derived that information.

Q. You derived the information above based off the VBA data that was produced to you?

A. I think we used that VBA data and those comments that are included in that footnote to infer that they are -- you know, that they are -- have retirement benefits available.

Q. Understood. For purposes of this

question, let's presume that each of these individual plaintiffs that I just discussed have 100 percent disability rating. If that's true, you would agree that these veterans are able to receive their full military retirement pay and VBA -- or VA disability pay without a deduction in neither?

MR. VANSLYKE: Objection.

THE WITNESS: Again, I'm not an expert. I believe that's what the article indicates. I'm not an expert with respect to these particular programs of the VBA or the VA. But that is what the article seems to suggest.

BY MR. CROMWELL:

Q. Okay. Just to be clear, when you say you're not an expert, you're referring to you're not an expert in the -- been talking about a few different programs. You agree with me you're not an expert in the VA's concurrent receipt disability pay program?

A. I am not specifically familiar with that program other than what's included in this article.

Q. And the same is true for the combat

related special compensation program?

A. I'm sure that there are many other programs that you can point to. But, no, I'm not familiar with that one either.

Q. Okay. Well, but you would understand that based off this article that the effect of our military retirement pay or given veteran is impacted by the total disability rating for a given veteran?

A. It is my understanding that those two can interact, yes.

MR. CROMWELL: Sorry, we're getting background from someone.

MR. VANSLYKE: Hey, David --

MR. CROMWELL: David, you're not muted.

MR. VANSLYKE: Thank you.

BY MR. CROMWELL:

Q. All right. I'll stop sharing that. Okay. You also -- I'm going to pull back up Exhibit 6, which is your report. All right. Point number 5, and this is your -- inside your second opinion. "The government's experts ignore additional factors and uncertainties that may affect VBA disability benefits in the future."

Is that correct?

A. That's what that says.

Q. Okay. And just, first, are you aware of any changes as of today that would change the disability ratings for any of the VBA bellwether plaintiffs --

MR. VANSLYKE: Objection.

BY MR. CROMWELL:

Q. -- that you have identified?

A. Over what period of time?

Q. From today moving forward.

MR. VANSLYKE: Objection.

THE WITNESS: Well, how would I know that?

BY MR. CROMWELL:

Q. I guess the answer is you don't -- you're not aware of any -- I mean, are there any changes that have taken place at the VA that will change the disability ratings for any of these VBA bellwether plaintiffs?

MR. VANSLYKE: Objection.

THE WITNESS: I'm not aware of anything currently.

BY MR. CROMWELL:

Q. Are you aware -- I apologize --

A. If what you're referring to is changes in the law or changes in allocations from Congress, I'm not aware of anything that would impact the VA's benefits in that way at this time.

Q. For these VBA bellwether plaintiffs?

MR. VANSLYKE: Objection.

THE WITNESS: Well, for any of the -- for any VA benefit -- beneficiaries, I'm not aware of there being legislation over the effect of their benefits at this time.

BY MR. CROMWELL:

Q. Okay. I think I know the answer, but are you aware of any changes as of today that will change the compensation rates for these VBA bellwether plaintiffs?

MR. VANSLYKE: Objection.

THE WITNESS: Again, I don't -- I am not aware of any. I wasn't asked to investigate to what Congress is considering.

BY MR. CROMWELL:

Q. In this point, our opinion number 5, to support your opinion, you list certain proposed, I guess, uncertainties; is that

correct?

A. Yes.

Q. And that includes changes and VA policy that may make it easier or more difficult for veterans to claim VBA disability benefits. Is that one of them?

A. That's the sentence as I read it, yes.

Q. And another one is changes in the VA's process for identifying service-connected disabilities; correct?

A. I've lost track of where you're reading. Oh, changes, yes, I see. Okay.

Yes, that's included in that list.

Q. And then you've also included changes in payment rates; is that right?

A. Correct.

Q. As well as coordination with other federal benefits?

A. Correct.

Q. As well as changes in the tax treatment of VBA disability benefits; is that correct?

A. That is also correct.

Q. For this particular opinion, you've

cited Footnote 56, and you have stated, "I understand the PACT Act listed new conditions that are presumptive that were previously denied as not being service connected. Such changes could also occur in the future impacting plaintiffs in the future and their VBA disability benefits"; is that correct?

A. That is -- you read that correctly.

Q. Well, do you understand or agree that in passing the PACT Act, Congress expanded the number of conditions that were compensated by the VBA?

A. That's my general understanding.

MR. VANSLYKE: Objection.

BY MR. CROMWELL:

Q. You've then wrote in your opinions -- oh, sorry, I already read that part.

The last sentence of this says such changes could occur -- also occur in the future impacting plaintiffs in the future and their VBA disability benefits. You agree that Congress could expand the list of conditions which are compensable by the VBA in the future; correct?

A. Certainly.

Q. You have further noted in your

opinions that advances in medical treatments for technology may improve outcomes and thereby disability ratings for some conditions; is that right?

A. You read that correctly.

Q. All right. You've noted that each of these six factors that you discuss or cited in your report come from a Congressional budget office report in 2014; is that right?

A. I'm not looking at the footnote, but I think that's right.

Q. The footnote is Footnote 57, and you cite to the Congressional Budget Office, "Veterans' disability compensation trends and policy options," dated August 2014; is that right?

A. Correct.

MR. VANSLYKE: Objection.

BY MR. CROMWELL:

Q. Okay. So I'm going to stop sharing that. All right. Mr. Rybolt, I am introducing what we've marked as Exhibit 22, which is that Congressional Budget Office report. And I will share my screen as well.

(Exhibit 22 marked for

identification.)

BY MR. CROMWELL:

Q. Is this the same report that you have cited and relied upon in your report?

A. I believe that's correct, yes.

Q. And just for the record, this is publication by the Congressional Budget Office entitled "Veterans' disability compensation, trends and policy options," dated August 14, 2014; is that correct?

A. Yes. You read that correctly.

Q. All right. And I'm going to turn on Exhibit 22 to page 10, which is PDF page 14th -- 14. And there is a section or a paragraph on the right entitled "Growth in VA's Disability Payments Since 2010"; is that right?

A. That's what that says, yes.

Q. Okay. And in this article you've relied upon states federal spending for VA's disability compensation program has almost tripled since 2000 rising from 20 billion that year to 54 billion in 2013, despite a shrinking population of veterans that is expected to decline further over the next decade.

First of all, did I read that

correctly?

A. I believe you did.

Q. You agree that based on this report by the CBO, it shows that VBA -- or VA disability compensation program has almost tripled since 2000; is that correct?

A. That's what the document says.

Q. Do you have any reason to disagree with that?

MR. VANSLYKE: Objection.

THE WITNESS: I don't.

BY MR. CROMWELL:

Q. The same paragraph further states, "Like Social Security and Medicare benefits, VA disability benefits represent mandatory spending. The amounts that individual beneficiaries are entitled to receive are not limited by annual appropriations."

First off, did I read that portion correctly?

A. I believe you did.

Q. Okay. Is it your understanding that VA disability benefits are funded by mandatory spending?

MR. VANSLYKE: Objection.

THE WITNESS: Well, you didn't finish reading the sentence. But that -- of the part that you read, that's what that says.

BY MR. CROMWELL:

Q. Okay. Does the remainder sentence of that impact whether VA disability benefits are part of mandatory spending?

MR. VANSLYKE: Objection.

THE WITNESS: Well, yes, they do fall into the category of mandatory spending, if that's your point.

BY MR. CROMWELL:

Q. Okay. Looking at further down there's a section entitled, "The rising number of veterans receiving disability compensation"; is that correct?

A. Yes.

Q. Starts with "From 2000 to 2013, the number of veterans who began to receive disability compensation jumped from about 85,000 to 290,000 annually. Over the same period, the total number of recipients increased by nearly 55 percent from 2.3 million to 3.5 million. See Figure 1 on page 2. Veterans from two eras, the Vietnam War and the Gulf War accounted for most

of the growth. See Figure 3. Combined, these two groups constitute almost three quarters of all recipients of VA's disability benefits in 2013."

First of all, did I read that correctly?

A. I believe you did.

Q. Is it your understanding that based off this report that the number of veterans who receive disability compensation increased from 85,000 individuals to 290,000 individuals?

MR. VANSLYKE: Objection.

THE WITNESS: That's what the document says.

BY MR. CROMWELL:

Q. Any reason to disagree with that?

A. No.

MR. VANSLYKE: Objection.

BY MR. CROMWELL:

Q. Okay. Looking at what's page 13 or PDF page 17 of Exhibit 22, there is a section entitled "Factors contributing to increases." And then there's a subheading entitled "Policy changes." Do you see that?

A. Yes.

Q. And if you look at the top, the second column, it starts with "One important set of policy changes affects Vietnam era specifically. VA has designated additional conditions that have been linked to exposure to Agent Orange as presumptive for veterans who served in Vietnam."

Did I read that correctly?

A. Yes, you did.

Q. Would you agree that based on this report, which you cited the general trend since at least 2000 is with the number of veterans receiving disability benefits to increase?

MR. VANSLYKE: Objection.

THE WITNESS: I think we saw that earlier that the number of beneficiaries did increase over this period.

BY MR. CROMWELL:

Q. And you'd agree that based on this report, the general trend since at least 2000 is for the amounts of disability benefits received by those veterans to increase as well?

MR. VANSLYKE: Objection.

THE WITNESS: In the aggregate, I believe that's correct. We saw that

earlier.

BY MR. CROMWELL:

Q. Okay. If we look at page 15, this is PDF page 19, there's a section entitled "Options for changing VA's disability compensation program." Do you see that?

A. Yes.

Q. Can you confirm for me that this is where you sourced your list of potential factors that may affect VBA disability benefits in the future?

A. This article, I believe is the source of that.

Q. Well, this portion of this article is what I'm asking about.

A. Specifically, I mean, I can't see the whole article. There may be other sections. There may be this section. But, yes, I believe this is the relevant section.

Q. Okay. As you sit here, are you aware of any of the options or uncertainties that you listed in your report or that come from this CBO report have ever been implemented by Congress?

MR. VANSLYKE: Objection.

THE WITNESS: I am not aware of any

changes. I didn't -- wasn't asked to track that. I didn't actually look into it.

BY MR. CROMWELL:

Q. Okay. Going back to your report as Exhibit 6. You also opine that uncertainties of future VBA disability benefits arise with proposed cost saving changes to the VBA disability rating system; is that correct?

A. That's what that says.

Q. What -- what cost saving changes are you referring to here?

A. I think it would be shown in the footnote which I can't see.

Q. You're referring to Footnote 58; is that correct?

A. I believe that's correct.

Q. And this is referring to a press release from the U.S. Senate Committee on veterans affairs entitled "Blumenthal and veterans service organizations slam dangerous narrative that VA's disability compensation process is too generous at hearing" dated October 29, 2025; is that right?

A. That's what that says.

Q. Does that particular press release speak to the cost saving changes you're referring to?

A. Well, if you read the rest of the footnote, you can see the headline, "a second Trump term would decimate veterans health care and benefits."

Q. That's the second cite you sort -- source you cite to for that statement?

A. I'm sorry, you're right. That's the second source.

Q. Do you know which if either of these cites that you have in Footnote 58 identify cost saving changes that are being proposed?

A. Well, if you give me time to review those articles, I can give you a more firm answer. I think we produced those to you. Certainly identified them. They're publicly available.

Q. Okay. Well, you've read the press release by U.S. Senate Committee on Veterans Affairs?

A. Yes, at some point I did.

Q. Let me introduce what we've marked as Exhibit 23.

(Exhibit 23 marked for identification.)

BY MR. CROMWELL:

Q. Mr. Rybolt, this is a press release entitled "Blumenthal and Veterans Service Organizations Slam Dangerous Narrative that VA's Disability Compensation Process is Too Generous at Hearing" dated October 29, 2025; is that correct?

A. Yes.

Q. This is the same press release you're citing in Footnote 58 of your report?

A. To the best of my recollection, yes.

Q. In here, do you understand that Senator Blumenthal is speaking out against a particular news article that criticized the scope of veterans benefits. Is that a fair generalization?

A. I think that's what the headline says, in fact.

Q. Do you understand that Senator Blumenthal wasn't debating an actual bill that would reduce the scope of veterans benefits?

A. I don't recall specifically --

MR. VANSLYKE: Objection.

THE WITNESS: -- one way or another.
BY MR. CROMWELL:
Q. Regardless, he was commenting on reports that had said VA's disability compensation was too generous; right?
A. Sure. He's responding to evidence from, you know -- from wherever. I actually would have to reread the article. But, yes, there was pressure being placed on the Veterans Administration to reduce benefits.
Q. Are you aware of any pending bills that --
A. I have not been asked to look into that.
Q. Okay. The second cite in Footnote 58 is to an article you cited which was a second Trump term would decimate veterans healthcare and benefits dated August 13, 2014; is that right?
A. You're moving around, sorry.
Q. I'm sorry.
A. That's correct. That's what that says.
Q. I will go ahead and enter Exhibit 24.
(Exhibit 24 marked for identification.)

A. I see it. Okay.
Q. All right. Okay. Just for the record, Exhibit 24 is a publication by the Veterans Healthcare Policy Institute entitled, "A Second Trump Term Would Decimate Veterans' Healthcare and Benefits"; is that correct?
A. That's what that says.
Q. And this is the same article or publication you're relying upon in your report; is that right?
A. To the best of my recollection, yes.
Q. Okay. Which veteran benefits have been changed or I guess to use the title decimated as a result of the President's second term as you sit here right now?
MR. VANSLYKE: Objection.
THE WITNESS: I don't think that's the point. But I don't know that they happen or not. I wasn't asked to track that.
BY MR. CROMWELL:
Q. Okay. So as you sit here, you're not aware one way or other of any changes?
A. I was not asked to track that.
Q. Okay. If you weren't asked to track

that, then is it fair to say you don't know whether any of the 14 VBA bellwether plaintiffs benefits have decreased --

MR. VANSLYKE: Objection.

BY MR. CROMWELL:

Q. -- since the current administration took office?

A. Well, to be clear, my point is not that they have decreased. The point is that there are many pressures under which they could decrease or be changed and your economists have not taken that into account. They're asking for a reduction in the claims against the government based on speculative analyses in which they don't consider these possibilities.

Q. Have you -- I'm sorry.

A. Sorry, let me just finish the thought.

And could on the basis of their assumptions in their analysis undercompensate many of the plaintiffs. Now I'm done.

Q. Sorry, did not mean to interrupt there.

Have you determined the likelihood of any of these changes occurring in the future?

MR. VANSLYKE: Objection.

THE WITNESS: I don't think that's relevant. But, no, I have not attempted to try to estimate the likelihood of these things occurring.

BY MR. CROMWELL:

Q. But you're suggesting that they could occur?

A. Certainly.

Q. Okay. I apologize, I didn't mean to stop sharing.

You have further noted in your fifth opinion here that reported workforce reductions at the VA may reduce the capacity to assess and reassess veterans health conditions; is that right?

A. That's what that says.

Q. And you are relying upon cites in Footnote 59, this is an article from NPR as well as The American Federation of Government Employees in support of that statement; is that right?

A. That's what that says.

Q. Do you know whether the VA has, in fact, implemented workforce reductions?

A. I wasn't asked to track that.

Q. Okay. So if you haven't tracked that, you're not aware of any of the track 1 VBA bellwether plaintiffs disability benefits decreasing because of any such reductions?

MR. VANSLYKE: Objection.

THE WITNESS: Again, that's not the point of the paragraph, but that's also correct, I don't -- am not aware of any actual decreases.

BY MR. CROMWELL:

Q. Okay. I'm just looking for my notes. Can we take five and I'm just going to look through my notes and see if I've got any kind of last minute things.

THE VIDEOGRAPHER: All right. We're going to go off the record at 2:47 p.m.

(Recess taken from 2:47 p.m. until 2:53 p.m.)

THE VIDEOGRAPHER: Back on the record. Time is 2:53 p.m.

MR. CROMWELL: Mr. Rybolt, I appreciate your time. That's all the questions I have for you. I will tender the witness.

MR. VANSLYKE: All right, Mr. Rybolt,

I have just a couple of questions. Give me one moment here.

EXAMINATION

BY MR. VANSLYKE:

Q. Okay. I am -- can you see that I'm sharing my screen?

A. Yes.

Q. Okay. And this is Exhibit 6 which is your report. And I'm on PDF page 6, which is page 4 of the document. Can you see that?

A. Yes.

Q. So I'm looking at your summary of opinions here. And I see it says that none of the VBA bellwether plaintiff expert reports assert damages claims for lost earning capacity, thus the use of a benefit intended to compensate plaintiffs for a loss of earning capacity as an offset is inapt; correct?

A. That's what that says.

Q. And it says, "As I discuss below, lost wages and a loss of earning capacity are separate economic concepts, thus no double recovery is threatened"; correct?

A. That's correct.

Q. In this report, are you attempting to

opine that the Court must apply these offsets as you have delineated?

A. No, I don't believe I am opining to that. I think that's ultimately up to the Court. I'm trying to articulate the implications of the application of these VBA benefits on damages or on claims against the -- against the government.

Q. And in your role as an expert economist, do you understand that your opinions are to assist the court in understanding how these categories should apply?

A. That's consistent with my understanding, yes.

Q. And in paragraph 2 -- or I'm sorry, bullet 2, I see even assuming the VBA disability benefit offsets proposed by the government where appropriate, the government's analyses are fundamentally speculative and in many cases include material omissions that collectively render the government's methodology and conclusions unreliable; correct?

A. That's correct. You read that correctly.

Q. And in your report, did you attempt to apply any sort of methodology to identify the

value of the appropriate offsets?

A. I was not asked to calculate the actual expected value of offsets, no.

Q. So your opinions do not include a particular amount that the offset should be; correct?

A. I was not asked to evaluate that.

Q. But am I correct that you are not opining that there cannot possibly be an offset; correct?

MR. CROMWELL: Object to form.

THE WITNESS: No, I don't believe I'm opining to that. I think -- I think I made it clear how I distinguish these things.

BY MR. VANSLYKE:

Q. So in the sections of your report summarized by this bullet, is it fair to say that your opinions are limited to a review of the offset calculations set forth by the DOJ's economists?

A. That's what I'm responding, to, yes.

Q. And is it your opinion here that upon review of those offset calculations, you find that they are fundamentally speculative and in

many cases include material omissions that collectively render the government's methodology and conclusions unreliable; correct?

A. That is my opinion, yes.

Q. And in the rest of this paragraph I see that it says these include the failure to consider fluctuations in ratings for injuries attributed to Camp Lejeune exposure, fluctuations and ratings for injuries unrelated to Camp Lejeune exposure, fluctuations, and life expectancy fluctuations and amounts withheld from VBA benefits as a result of military pensions or vice versa. And the inherent uncertainties of future VBA disability benefits themselves; correct?

A. You read that correctly, yes.

Q. And looking back to the previous sentence, it is your opinion that those factors collectively render the government's methodology and conclusions unreliable; correct?

A. Yes, I think taken as a whole. These weaknesses and their analyses have that effect.

Q. Are you opining that any of those factors by themselves would necessarily render the government's methodology and conclusions

unreliable?

A. I think that's a bit speculative. I think I would have to understand more about the what the context was and how we were applying them. It's possible. But I think really here in this instance I'm applying -- you know, referring to sort of the combined effect of all of these.

Q. Do you recall earlier today being asked questions, for example, about life expectancies creating a degree of uncertainty in calculations?

A. Yes.

Q. And do you recall testifying that when life expectancy tables are used, there is a degree of uncertainty involved in those calculations; correct?

A. Well, certainly. It's predictive of the future. We're trying to come up with the best estimate that we can. But context matters and how they're being applied does matter.

Q. Would you agree that the degree of uncertainty can be increased by adding other variables in addition to life expectancy?

MR. CROMWELL: Object to form.

THE WITNESS: Are you asking if, for

example, if, for example, disease or injury conditions would affect that result or could be used in conjunction with a life expectancy table to estimate a revised or adjusted life expectancy. Is that your question?

BY MR. VANSLYKE:

Q. I'll rephrase. So specific to this context, I see the fluctuations in life expectancy are one of the factors listed here; correct?

A. Sure.

Q. And I see that there are, for example, fluctuations in ratings for injuries unrelated to Camp Lejeune exposure as another factor listed here; correct?

A. That's correct.

Q. And would you agree that combining both of those factors leads to greater uncertainty than simply the uncertainty of fluctuations and life expectancy alone?

A. Sure. Those work in conjunction with another -- with one another, right. So each of these plaintiffs, as I understand it, have injuries or illnesses that could affect their

life expectancy. And so when -- especially when you put those together, you would -- you would compound that effect.

Q. And I see -- excuse me -- in the last bullet of the section running onto page 5 of the report, you opine that if an offset based on VBA disability benefits were applied for a given plaintiff and if that offset were applied against damages other than damages awarded to the plaintiff for loss of earning capacity, that plaintiff would be left less than fully compensated for their losses while granting the government a substantial windfall; correct?

A. Yes, that's what that says.

Q. So I want to be sure that I understand correctly. As an example, if a plaintiff has damages attributed to out-of-pocket medical costs and those were offset on the basis of VBA disability benefits, is that an example of what you're referring to?

MR. CROMWELL: Object to form.

THE WITNESS: That would be an example, yes.

BY MR. VANSLYKE:

Q. And is your opinion here that that

would leave them less than fully compensated for those out-of-pocket medical costs?

A. Certainly, that would have to be have a consideration in the analysis. And I don't see that happening.

Q. And I understand these three bullets to represent a summary of your opinions; correct?

A. That's correct.

Q. Does this fairly represent the scope of the opinions that you present in this report?

A. I think Mr. Cromwell asked me a very similar question. It is a summary. There are, you know, sort of sub opinions and elaborations that I can -- but I do think that this fairly summarizes my opinion.

MR. VANSLYKE: Thank you. I have nothing further.

MR. CROMWELL: Nothing further from me. Mr. Rybolt, thank you very much for your time.

THE WITNESS: Thank you, Mr. Cromwell. Appreciate it.

THE VIDEOGRAPHER: This ends today's deposition. We're going to go off the record at 3:04 p.m.

* * *

(Deposition concluded at 3:04 p.m.)

* * *

(Signature reserved.)

* * *

CERTIFICATE

I, CHRISTINE A. TAYLOR, Registered Professional Reporter, Certified Court Reporter, do hereby certify:

That PETER RYBOLT, the witness whose deposition is hereinbefore set forth, was duly sworn by me, and that such deposition is a true record of the testimony given by such witness taken stenographically by me to the best of my ability.

I further certify that I am not financially interested in the outcome of this action, a relative, employee, attorney or counsel of any of the parties, nor am I a relative or employee of such attorney or counsel.

IN WITNESS WHEREOF, I have hereunto set my hand this 28th day of March, 2026.

_____

CHRISTINE A. TAYLOR
Registered Professional Reporter
Certified Court Reporter #4736

ERRATA SHEET FOR THE TRANSCRIPT OF:

Case Name: Camp Lejeune Water Litigation

Deposition Date: March 13, 2026

Deponent: Peter Rybolt

CORRECTIONS:

Pg.	Ln.	Now Reads	Should Read	Reason
___	___	_____	_____	_____
___	___	_____	_____	_____
___	___	_____	_____	_____
___	___	_____	_____	_____
___	___	_____	_____	_____
___	___	_____	_____	_____
___	___	_____	_____	_____
___	___	_____	_____	_____
___	___	_____	_____	_____
___	___	_____	_____	_____

_____

Signature of Deponent

SUBSCRIBED AND SWORN BEFORE ME

THIS____DAY OF_____, 2026.

_____

(Notary Public)

MY COMMISSION EXPIRES:_____

&

& 3:4 6:8

0

0000000003 5:13
00897 1:3

1

1 4:11 5:24 12:10,14,16 13:12,16 15:9 15:21 33:20 51:15 86:1 93:24 172:10 172:21 182:14 198:21 199:1 230:24 241:3
10 5:8,12 6:1 38:1 42:17,18 45:8,9 48:25 51:15 66:10 98:18 108:25 111:9 167:19 228:13
10/7/2021 5:22
100 104:25 143:19 148:2 199:8,22 200:3 200:12,21 201:11,18,25 202:8,17 214:21,24 215:2,8 221:3
10:13 68:5,6
10:21 68:6,8
11 5:14 6:16 93:6,8,14 172:2
1155 111:19 112:4 114:22 115:8
11:30 124:11,19 124:20
11:39 124:20,22
12 4:11 6:18 98:18 111:9 119:25 121:1
120 5:16
127 3:10
13 1:13 2:1 5:16 7:7 48:25 120:19,20 121:1,9,12 122:3 124:25 125:4 129:13 167:20 174:23 231:20 237:18 252:2
133 5:19
139 38:4
14 5:19 32:15 32:22 34:25 120:1 133:15 133:16,19 144:11 228:9 228:14 239:2
140 38:6
141 38:6
145 5:21
14th 228:13
15 5:21 53:7,7 53:10 86:7 125:18 145:12 145:13,20 198:21 199:1 233:3
16 6:18 60:21 122:3
165 5:22
17 5:13,22 45:12,13,14 165:21,22 166:7 198:6 231:21
171 5:23
176 6:1
18 5:23 129:13 171:23,24 189:23 198:6
184 6:16
19 6:1 176:2,4 181:6 187:23 187:23 198:7 233:4
1982 57:12 58:4
1:00 192:1,13 192:14
1:39 192:14,16
1b 172:22

2

2 4:12 22:6,7,13 97:1 105:14 172:9,20,21 181:15,22 182:11,11,14 187:24 230:24 243:14,15
2.1.a.1.d 190:6
2.3 230:23
20 5:4 6:18 22:14 29:7 56:22 67:14 109:12 123:24 175:23 192:5 198:7 207:21 228:21
2000 228:21 229:6 230:18 232:12,20
2006 59:10,12
2007 59:12
2008 134:18
2010 228:16
2013 61:20 198:3,18 228:22 230:18 231:4
2014 227:9,15 228:10 237:18
2018 167:16 168:4
2019 167:16 168:4

2020 167:16 168:4
2021 166:9
2022 4:11 12:18 13:13,19 96:18
2023 15:10 18:3 65:1
2024 15:10 17:13 18:3
2025 12:22 14:7 14:18 15:24 43:13 45:1 46:22 51:11,16 51:24 52:10 53:7,10,13,18 53:24 54:1,15 55:14 86:7 234:24 236:8
2026 1:13 2:1 5:4,6,9,21 6:1 7:7 22:14,16 23:8 29:8 37:9 38:1 56:4,22 57:2 251:18 252:2,21
21 6:2 98:19 212:17,19,23 214:10
21-01 5:22 166:8
212 6:2
21572 251:20
219 3:14
22 4:12,15,19 6:5 30:2 32:16 145:4 210:19 227:22,25 228:13 231:21
2206 6:16
227 6:5
23 6:8 235:25 236:1
230,000 198:19
236 6:8
237 6:13
24 6:13 210:19 237:23,24 238:3
242 4:4
24th 3:5
25 6:16 59:8,15 184:17,18,25 185:1
26 101:3
27 120:2
27601 3:21
28 181:6
28403 3:10
28th 251:18
29 4:24 234:24 236:8
290,000 230:21 231:11
29440 3:15
2:05 214:4,5
2:13 214:5,7
2:30 124:10
2:47 241:17,18
2:53 241:18,20

3

3 4:15 22:6,7,15 22:18,20,24 23:6,11 33:20 45:12,13 51:16 85:24 125:19 134:10 191:25 231:1
3.321 173:3
3.327 6:1 176:9 182:11 187:24
3.327. 181:6
3.5 198:20 230:23
3.957 6:16 184:23 185:15
30 51:16 59:5 144:16 192:6,7 192:11
3011 3:5
310 3:21
313.800.4170 3:6
33 5:3
37 5:5,7 36:21
38 5:21 6:1,16 94:6,7 111:18 112:4 114:22 115:8 144:20 145:5,9,20 147:7 173:3 176:8 184:22 185:14 186:18 187:23
3:04 249:25 250:2

4

4 4:19 22:6,7,16 22:17 23:7,22 33:21 122:4 144:20 145:9 172:9,21 187:24 190:6 214:19 242:10
4.1 145:6
4.10 5:21 145:20
4.2.1.a.1.e 189:25
4/6/2025 5:10
400,000 114:5
42 5:10,12
4736 251:23
48202 3:6
4:00 192:1

5

5 4:24 5:21 28:25 29:1,5 134:11 217:17 222:22 224:23 248:5
50 210:22 215:23 216:11 216:21 217:20

218:4,19
52 198:8
54 211:2 213:14 228:22
55 188:2,13,20 190:8,14,24 191:1,5,16 220:4 230:23
56 226:1
57 227:12
58 234:15 235:13 236:12 237:15
59 240:19

6

6 5:3 33:15,16 35:16 36:15,21 39:7 43:13 51:15 52:19 56:15 66:16 71:24 85:25 98:14,18 105:12 108:25 120:1 129:14 144:12 195:25 199:1 210:19 216:6 219:13 222:21 234:6 242:8,9
65,873.60 134:18

7

7 5:5 37:2,4,7 166:9
77 167:17 168:5
7947839 1:25
7:23 1:3

8

8 4:3 5:7 37:3,4 37:24 108:24
8/31/2025 5:12
804 97:1
843.438.7480 3:15
85,000 230:20 231:11

9

9 5:6,10 37:9 42:17,18 43:10 43:13
910.794.4800 3:11
919.500.4282 3:22
93 5:14
9:00 2:2 7:8

a

a.m. 2:2 7:8 68:6,6,8 124:19 124:20,20,22
aba 77:25
ability 10:16 115:22 116:1 121:8 122:12 122:14 146:2 146:10,25 148:10 251:11
able 11:21 99:14,22 133:19 160:4 218:20 221:4
abnormal 49:25
above 152:4,21 220:19
absence 79:22 82:3 144:2,7
absent 130:3 134:15 187:5
absolute 103:23 104:2,5 105:7
absolutely 27:13 43:23 96:9 102:6,11 104:8,10 160:19 173:6 173:16
academic 61:14
accept 33:11 169:16 170:15 188:15
acceptable 143:22
accepting 139:16,22 140:22
access 11:13,21 53:17 88:21 133:19,24 134:8 179:11 180:2 212:5
accompanied 104:22
account 206:21 239:12
accounted 230:25
accounting 67:3 72:22 74:8
accurate 132:18 137:1 153:10 160:23 162:17 173:22
accurately 126:12
acknowledge 206:21
acknowledged 132:6
act 16:20 96:18 97:5,19,23 110:21,23 111:3 226:2,10
action 62:6 251:14
actions 76:16 76:19 126:22
actively 60:6
actor 58:5

actual 81:25 82:5 114:3,4 116:11 118:11 125:7,17 129:9 130:5,11,20 131:1,23 136:25 142:14 142:16 147:21 148:3 151:7 152:16,23,24 156:12 160:11 199:16 203:6 236:22 241:10 244:3
actually 38:9 54:11 59:11 60:16 100:13 125:15 129:6 151:11 168:23 213:7,12 234:2 237:7
add 160:18
added 105:25
adding 246:22
addition 13:11 109:14 246:23
additional 36:9 156:2 222:24 232:4
address 84:7
adequately 175:14 207:23 208:17
adjudicating 92:5,12 94:2
adjudication 5:14 92:22 93:15,25 94:14 171:19 172:9 189:24 190:13
adjusted 247:5
adjustment 220:16
adjustments 141:18
admin 66:5
administration 85:13 86:9 173:5 237:10 239:6
advanced 59:20 60:22
advances 227:1
advertising 75:18
affairs 44:10,18 62:19,23 74:14 74:18,25 75:4 75:10 94:9 211:9,17 234:20 235:22
affect 31:11 37:16,18 38:13 142:2 147:21 148:4 209:20 222:25 233:10 247:2,25
affected 21:19 114:4 209:13
affects 6:3 212:24 214:12 232:3
affiliation 60:6
affiliations 60:2
affirmative 45:4
age 117:7,20 188:2,12,20 190:1,8,13,24 191:1,16 204:18
agent 232:6
ages 188:7
aggregate 232:24
ago 164:19
agree 30:25 32:10 38:10 51:23 53:11 73:15 86:14 89:10 97:16,23 99:5 104:16 105:4,5 118:1 118:22 122:16 123:6,17 126:9 126:10 127:22 128:22 130:9 130:23 131:8 131:21 135:19 135:21 136:1 136:12 137:17 138:9 141:22 145:5 146:9 150:19 151:10 151:15 152:1 152:18 154:4,6 154:16 157:24 161:5 167:25 168:8 169:3,8 169:14 170:4 170:13,14 171:10 174:4 185:11 187:1,8 188:20 190:12 190:17 191:13 191:22 199:21 203:20 204:1 208:23 218:25 221:4,19 226:9 226:21 229:3 232:10,19 246:21 247:18
agreed 7:15 34:13
agreement 72:5
agreements 66:22
agrees 137:12
ahead 12:8 22:5 25:2 28:24 33:14 37:2 42:15 43:12 55:7 88:2 93:5 145:12 162:19 165:20 171:22

184:15 237:23
al 15:23 18:3
allan 33:4
allege 155:20
alleging 19:14
allocate 66:7
allocations 224:2
allowed 109:23
alter 38:13
altering 95:17 95:24
amend 25:10
amended 4:15 22:15 157:10 159:3
america 14:10
american 15:11 240:20
amount 56:3 70:6 79:9 98:5 100:5 138:2 139:2,7 147:18 159:15 200:14 201:13 209:21 214:25 215:10 220:14 244:5
amounts 16:7 55:22 97:24 99:13 107:16 138:17 139:25 140:18 229:16 232:21 245:11
analyses 106:9 210:4 239:14 243:17 245:22
analysis 20:11 44:5 48:6,7,10 48:16 60:11 61:5,23 62:11 62:15,21 64:2 64:10,11,25 65:10,11 86:25 90:15 106:14 109:24 112:13 163:13 167:12 167:16 177:6 193:4 204:5 239:20 249:4
analytics 5:12 65:1,8
analyze 90:9
analyzed 167:14
analyzing 168:2
andrew 37:12 37:12
angeles 10:21 59:21
annual 229:17
annualized 134:17
annually 230:21
annuity 64:6
answer 9:7,15 9:18,19 10:3,10 13:6 40:2 51:12 54:5 55:6 74:21 91:23 92:16,24 101:7,8 102:19 104:10 114:14 131:18 143:15 143:15 149:24 150:9 155:15 159:7 160:19 161:15 162:18 163:6 164:13 164:18 177:25 178:2 185:22 187:17 191:6 195:6 201:16 214:23 223:16 224:13 235:17
answered 10:5 138:22 150:4 159:11
answering 9:4 146:15
answers 9:5,21 155:16 194:8
anticipate 104:21
antitrust 62:6
anxious 59:17
anybody 47:21
anymore 103:17
apart 31:19 70:8 123:15 130:18 151:9
apologies 56:16 106:3
apologize 54:23 58:24 111:8 122:23 177:18 191:25 210:19 223:25 240:10
appear 78:20 115:15 140:9
appearances 3:1
appearing 7:15
appears 36:23 56:20 77:10 111:3 134:6 213:19 215:13
appendices 71:25
appendix 24:5 36:17 52:20 56:11,16
applicable 132:20 210:23 210:24 216:13 216:14
application 84:22 243:6
applied 74:7 80:21 108:9 112:12 246:20 248:7,8

apply 30:9 31:2 31:20 32:1 82:1 204:13 219:15 243:1,11,25
applying 150:18 246:4,6
appreciate 9:21 80:1 96:15 241:22 249:22
approached 113:8
approaching 160:22
appropriate 86:5,16 89:7 99:21 103:2 106:9 128:23 243:17 244:1
appropriately 128:20
appropriateness 80:18
appropriations 229:18
approved 179:9
approximately 13:17 77:10 198:20 203:8
april 52:10 53:12,17
arbitration 13:10,19,21 14:8,19 15:11
arbitrations 12:7 14:1
area 48:22 61:3 61:22 142:23
areas 67:18 73:13,16,18
arguments 51:21 109:1
arizona 58:2
art 57:10 165:16,18
article 5:14,16 6:2,13 81:15 84:10,12 85:9 110:8,13 120:12 121:12 121:19,24 124:25 211:3 212:23 214:10 215:13 216:17 217:5 218:6 219:8 221:10 221:13,24 222:6 228:18 233:12,14,17 236:16 237:8 237:16 238:8 240:19
articles 84:6 109:15 135:23 235:16
articulate 243:5
arts 57:9 59:5 59:15,18 60:1,4 60:7
aside 24:24 95:22 109:17 115:7 201:10
asked 20:7,14 20:22 36:1,10 36:13 70:10,12 70:17,21,24 72:12,17,21,25 73:4 85:11 86:4 86:15,17,21 88:23 89:14,22 89:25 90:21 96:2 112:3,7,7 137:4 139:3,13 150:2,14 154:23 156:20 162:22 163:12 177:19,19 180:7 182:6 183:5 185:17 193:22 195:21 197:19 199:15 199:20 210:14 211:13 217:14 219:7 220:6,7 224:19 234:1 237:13 238:19 238:24,25 241:1 244:2,7 246:9 249:11
asking 9:3 44:22 70:17 84:2 86:4 96:7 106:23 111:25 114:25 116:23 127:13 135:7,9 143:1 144:23 149:7 155:25 156:13 163:18 175:7 179:25 180:23 200:8 233:15 239:12 246:25
assert 105:18 155:8 157:18 159:4 160:20 242:15
asserting 133:4 156:23 158:2
asserts 132:13
assess 117:12 139:16 199:15 240:14
assessment 44:5 52:25 75:25 137:13
asset 21:19 64:19
assets 17:19 64:16
assignment 103:3 127:19 196:25

assist 49:21 50:2 243:10
assistant 46:1
assisted 48:8
assisting 48:3 48:12 61:6
associate 60:17 60:24 211:13
association 15:11 86:20
assume 10:4 51:12 79:13 88:14 98:20 142:16 144:5 154:24 169:25 178:14 202:12 203:1 211:14
assumed 130:10,25 131:23
assumes 54:8 101:9 141:16
assuming 98:2 98:3 169:22,24 191:2 203:6 243:15
assumption 160:8 170:1 174:21 178:13 201:18 208:13 208:14
assumptions 97:13 98:12 156:16 239:20
attached 36:17 47:16
attachment 23:12
attempt 152:11 187:10 193:17 195:15 243:24
attempted 161:16 240:3
attempting 16:24 242:25
attend 40:15
attestation 100:21 101:11 103:18
attorney 8:16 26:24 40:18,20 251:14,16
attorneys 25:25 26:5
attributable 116:13
attributed 107:3 245:8 248:17
august 43:13 45:1 46:22 227:15 228:9 237:18
aurora 47:2,22 48:7,11 50:14
authority 94:8
authorized 177:1,9,21 178:19,25
authors 121:15 122:22 123:3 125:22 130:12 130:23 131:22 131:25
automatically 138:1 164:16
available 83:4 85:14 86:10 87:7 90:8 93:20 96:9,12 117:15 117:17 131:10 132:4 143:16 143:17,21 144:8 212:8 220:24 235:19
avenue 3:21
average 129:15 147:8,9,10 148:16,20 152:4,4,11,21 152:21 203:8
averages 146:21 147:8 152:14
award 63:13 129:25 153:7 160:6 220:12 220:15
awarded 220:12 248:9
awards 63:2,4 63:9,10,16 78:14 138:13
aware 21:22 23:18,21 24:22 25:1 27:21 28:5 28:8 45:3 46:11 46:13 47:10,21 69:3,24 70:1 92:9 180:6 183:23 184:6 184:11,13 204:25 208:2 223:3,17,22,25 224:3,10,14,19 233:20,25 237:11 238:23 241:3,9

b

b 4:9 17:12 36:17 52:20 173:3 181:7,15 181:22 182:11 182:14 187:24
bachelor's 57:9 58:4
back 25:8 39:7 50:4 52:18 61:4 68:7 75:2 78:5 79:5 83:23 85:24 87:11 95:8 98:13 100:12,25 102:12 105:11 120:2 124:21 125:3 144:11

149:3 158:14 184:25 187:22 189:1,23 192:15 195:17 214:6 216:6 217:17 219:13 222:20 234:5 241:19 245:17
backed 76:19
background 166:25 175:24 222:13
backup 25:14
ball 105:1
bankruptcy 62:5
bar 40:22,24
base 134:19
based 31:9 32:14 47:11 51:3 53:20 70:18,25 94:4 94:21 108:8 112:24 114:3 118:13 131:12 134:22 136:13 140:11,23 141:9 142:16 142:19 143:7 143:20 147:8 151:24 152:12 152:14,15,16 154:1 156:17 169:2 174:17 175:22 184:2 186:20 188:10 189:4 190:12 191:14,14 200:10 204:4 205:12 217:1 220:20 222:6 229:3 231:8 232:10,19 239:14 248:6
basic 66:22 72:5 83:16,22 110:4
basis 13:23 106:25 117:16 123:5 125:24 146:2,14,20 153:7 199:25 239:19 248:18
bates 45:11 48:25 51:14
bear 22:10
began 230:19
beginning 136:18 206:6
begins 36:20 136:16
behalf 2:5 9:13 45:5 61:11 62:10 74:2,13 74:17 75:4
behavior 130:1 156:17 170:5 170:15,22 171:11,16
believe 12:24 12:24 13:4,7 19:2 20:16 24:14 29:24 35:7,12 37:20 37:22 43:21 44:19 56:5 57:3 68:17 77:24 92:15 94:12 95:18 99:4,25 103:1 110:14 111:2 126:8 134:21 135:17 136:24 141:12 143:9 146:8,19 159:25 160:23 161:23 167:24 168:14,23 173:11 177:5 177:11 182:19 183:21 186:25 188:5,9 190:11 196:12,15 198:25 212:4 213:5 214:18 215:6 218:1,14 221:10 228:5 229:2,21 231:7 232:25 233:12 233:18 234:17 243:3 244:12
bell 3:13
bella 18:2
belllegalgrou... 3:16
bellwether 31:22 32:5,9 34:1,17 35:5 99:13,22,25 100:6 105:18 119:6 132:12 138:18 139:6 153:16 156:23 157:18 158:1 162:7,25 174:13 177:7 178:24 182:3 182:21 187:3 187:12 188:7 188:12,19 191:16 192:20 193:19 194:12 197:17,23 199:7 205:18 219:16 223:5 223:20 224:6 224:16 239:2 241:4 242:14
ben 26:7 31:24 34:4 68:2 71:5 80:23 139:11 192:8 213:21 214:2
beneficiaries 224:9 229:16 232:16

beneficiary 111:13 112:17 112:20 113:3 144:14
benefit 63:19 64:5 70:5,25 95:10 105:20 106:8 114:2,7 130:16,21 132:14 137:23 138:1,23 140:23 149:1 151:5,15,23 152:2,19 153:8 159:22 160:10 171:14 201:19 210:24,24 216:13,14 224:9 242:16 243:16
benefits 6:15 20:8,11,15,17 21:5,8,9,9,20 30:11 31:10 41:25 44:9,16 44:21 63:5 64:18 68:17,18 68:19,19,24 69:7 80:2,9 81:16 85:13 86:8,19,20 87:2 87:22 88:10,12 91:4,20 92:1,6 92:13 94:3,9 99:23 100:5 107:16,21 108:8 111:12 112:16,19 113:2,16 114:17 115:10 139:14 144:13 150:13 153:3 153:25 156:5 156:15 158:7 159:15 160:5 169:16,22 170:2,7,16,24 171:6 173:5 175:1,16 179:16 180:12 198:21 199:2 202:13 206:11 207:3 209:12 209:14,18,21 209:25 210:10 219:18 220:9 220:24 222:25 224:4,11 225:5 225:19,22 226:7,21 229:14,15,23 230:6 231:3 232:13,21 233:10 234:7 235:7 236:17 236:23 237:10 237:18 238:6 238:12 239:3 241:4 243:6 245:12,14 248:7,19
benjamin 3:4 5:10
bern 3:21
best 10:1,16 19:6 69:18 80:13 85:5 101:16 102:6 102:21 131:10 136:16 137:8 142:12,17 143:15,17,21 150:16 236:13 238:11 246:19 251:10
beyond 36:10 94:24 104:11 147:11 165:11 201:23 204:21 205:5
bill 236:22
billable 65:24 66:2,5
billed 55:18,23
billion 228:21 228:22
bills 46:21,21 237:11
bit 9:9 32:19 34:21 56:7 60:3 70:8 71:3 86:25 90:6,10,20 91:16 124:1,8 183:13 199:4 201:7 246:2
bladder 29:20
blumenthal 6:8 234:20 236:5 236:15,22
blurred 78:6 81:3
board 60:4
bodily 19:11,15 19:18,20 84:21
body 120:4 146:3,4
book 77:19
bottom 23:10 33:21
boulevard 3:5
boyles 77:19
brain 117:14
breach 15:2,4 15:18 16:11,14 20:6 62:8 66:21 72:5,10,13,18
break 10:7,11 123:15 124:7 124:13 151:9 185:7,8 191:24 192:2
briefly 7:18
bring 45:8 85:6
broad 61:24 74:9 138:7 179:14

broadband 23:2
broader 21:7
broadly 15:17 16:15 27:25 30:18 71:21 117:2 121:25 127:1,17 157:9 161:4 203:16
brod 37:12 53:6
broke 68:10 124:24
brown 26:19 45:24 47:2,18 47:21,25 48:17 49:5
bruce 33:3
budget 41:6,15 42:23 43:4 198:3,17 227:8 227:13,23 228:7
bullet 106:7 108:15 243:15 244:18 248:5
bullets 249:6
business 19:24 77:23 109:13
butler 3:9 68:1
bvanslyke 3:7

c

c 4:1 7:1 46:2 122:20
cagiano 33:2 34:8 219:16 220:11
cal 59:7
calculate 20:15 70:10 82:9 89:11 117:16 127:23 134:25 135:11 138:24 183:2 206:2 207:2 244:2
calculated 99:1 99:8,19 127:6 127:15 129:6 133:11 135:5 147:7 163:1 202:9 209:18
calculating 31:14 81:20 84:17 117:3 118:23 135:17 208:8
calculation 20:25 21:8 70:18,25 82:1 83:4 117:9,20 127:19 129:3 130:15 136:19 139:4,15 140:22 142:3 146:23 163:6,8 183:6
calculations 20:17 97:12 129:8 136:13 139:2 140:7 183:9 205:12 244:20,24 246:11,16
california 10:21
called 60:11 83:17,23 127:10
calling 97:7
camp 1:3 7:11 8:17 27:22 28:3 28:12,16 30:3 35:19,24 49:2 96:17 97:5,18 97:22 107:3,8 110:20 153:22 154:2,7,10,15 154:19,24,25 155:9,22 156:3 194:22 195:10 198:12,14 206:13,14 245:8,9 247:15 252:2
cancer 29:19 29:20
canvas 18:2
capable 130:2,4
capacity 5:17 81:21,24 82:5,9 82:13,21,24 83:3,8,15 84:5 95:3 98:23 105:19,21 108:10 111:7 111:13 112:17 112:21 113:4 113:17,21 114:19 115:11 115:19,21 116:5,21 117:1 117:3,10,12,16 117:23 118:7 118:20,24 120:10,14 121:14 122:11 122:13,22 123:4,18 125:8 125:18 126:2,4 126:18 127:7 127:10,15,24 128:17,21,24 129:4,7,20 130:6,11,15 131:1,6,24 132:14,16 133:5 134:12 134:15,25 135:4,4,12,18 136:6,8,11,21 136:24 137:14 137:18 138:2 138:14,17 139:6,18 140:2 140:18,21 144:15 151:17

151:18 152:7 152:14 156:6 156:24 157:19 158:3,5 159:23 160:10 240:14 242:15,17,21 248:10
captured 106:19
care 195:19,22 196:10,18,22 235:6
career 59:25
careers 141:15 141:21
carolina 1:1 3:10,15,21
case 1:3 5:20 14:13,22,25 15:22 16:6,12 16:16,19,23 17:2,11,17 18:5 18:12,18,22,24 19:1,2,3,5,8,16 20:25 21:3,14 21:24 24:20 27:8,12,15 28:10 30:10 31:1 32:21,25 37:16 38:13,18 39:20 41:14 44:24 46:6,18 47:5 48:19 64:14 70:1 74:1 78:20,21 80:21 82:2 83:6 87:15 88:7,7,17 91:13 91:22 97:25 101:17,21 108:16 112:3 119:23 121:20 125:2 130:14 132:5 134:5 136:17,18 137:24 165:18 175:1 177:6 179:13 180:17 192:23 193:2 199:14 201:24 203:1 252:2
cases 1:5 18:19 19:19 20:4 21:1 21:12 28:10 33:1 34:18 35:17,19,24 36:4 39:10,24 39:25 40:3,8,9 47:23 55:18 61:1,8 62:6,6 62:13,18,21,22 63:1,6,7,8 64:17,21,24 67:21 69:12,19 70:8 71:17 72:6 72:10,15,19,22 73:2,6 74:1 75:24 76:4 79:3 79:4,6,11 81:9 83:5 84:18 87:6 87:22 88:4 89:5 89:12 90:6 103:12 106:13 117:1 119:22 126:1,17,25 127:7 128:20 128:23 129:2 131:10,22 141:7 155:6 159:16 173:1,8 174:6,25 175:24 177:8 177:20 181:8 181:17 182:21 183:15 188:1,8 203:18 204:12 204:14 243:18 245:1
categories 18:14 52:24 71:13 125:12 129:9 156:14 243:11
category 66:25 68:20 71:21 157:8 179:14 230:10
causation 77:24 84:8 197:2,11
cbo 6:5 229:4 233:22
center 203:14 204:2
certain 18:14 49:23 50:10 62:22 69:8,11 90:19 104:9,10 104:25 117:4 148:17 224:24
certainly 27:14 41:21 42:3 62:3 62:11,15 66:2 66:10 77:21 78:4 89:2 115:2 136:17 207:14 226:24 235:18 240:9 246:17 249:3
certainty 100:20,23 101:10,13 102:1,10,14 103:13,23 104:2,5 105:6,7
certificate 251:1
certified 251:4 251:23
certify 251:5,12
cfr 5:21 6:1,16 42:22 94:7 144:20 145:5,9 145:20 147:7 173:3 176:8,13 181:6,11 184:22 185:14 185:22 187:23

cfrs 41:10 42:22
chad 5:19 27:19 54:22 126:24 132:21 134:4 196:5
chair 146:22 147:13 148:14
change 59:17 141:15,21 161:7,8,11,18 162:8,11 163:3 164:1,10,15 165:10 167:4,9 176:23 189:6,7 200:22 201:1 202:20 223:4 223:19 224:15
changed 163:16 164:17 165:6 177:14 179:4 189:2 194:6 238:13 239:11
changes 130:3 161:24 169:12 223:4,18 224:2 224:2,14 225:3 225:9,13,15,21 226:4,19 231:24 232:3 234:1,8,11 235:2,14 238:23 239:25
changing 233:5
chapter 5:23 172:10
chapters 109:15
character 184:4 186:23
characteristics 204:7
characterizati... 16:4 30:16 73:20 128:8 153:13 160:23 173:22 178:16
characterize 127:11 128:4,6
characterized 126:13
characterizing 135:16
charges 56:3
chat 11:18,19 12:9 93:7
check 80:12 187:16
chicago 58:11
choose 162:15 162:16 175:18
chorale 60:5
chosen 73:19 208:4
christine 1:23 7:22 26:21 251:3,22
circumstances 188:3,23 189:8 189:12,17,20 190:21
cirque 5:12 65:1,8
citation 213:2 213:13
citations 41:7,9 109:19
cite 39:19 40:10 41:5 42:22 96:22 111:18 112:9 120:12 144:21 193:15 211:2 227:13 235:8,9 237:15
cited 25:17 38:3 38:5 39:10,14 43:4 96:20 109:9,16 110:12 112:24 113:11 114:21 121:12,21 125:1 135:24 144:24 145:5 146:19 161:20 161:22 174:22 189:5 198:2 214:16 226:1 227:7 228:4 232:11 237:16
cites 42:24 235:13 240:18
citing 236:12
city 58:1
civil 2:4
claim 109:6,11 109:21 110:10 110:25 154:10 154:18 156:24 157:11 159:3 225:5
claimant 151:17 152:3 152:20
claimants 158:24
claiming 19:11 19:18 31:9
claims 15:18 18:9 21:6,15 28:6 32:21 75:15 92:5,12 94:2 105:19 116:7 132:13 154:25 155:12 156:6 157:3,10 157:12,19 158:2,4,20,22 158:22 159:4 159:25 166:16 169:21 239:13 242:15 243:7
clarify 42:21 43:5 49:25 70:3 91:18 100:14 115:13 138:11

172:1
clarity 22:19 24:16
class 16:25,25 62:6
clear 27:14 31:7 49:11,14 82:7 90:17 102:8 110:6 113:22 135:7 137:16 139:19 140:6 160:19 187:5 206:18 221:16 239:8 244:14
clearer 186:10
clearly 104:8 156:11 184:2 186:21 190:23
clients 66:5,6
clja 27:24 38:4 38:6
close 207:21
code 94:6,7
colleague 110:3
colleagues 101:15 102:22
collectively 243:19 245:2 245:19
college 57:9,17
column 232:2
combat 215:22 217:10,12,20 217:23 221:25
combined 193:8,18 202:8 206:15 231:1 246:7
combining 247:18
come 20:19 21:12,17 79:2 86:24 87:20 104:9 155:8 227:8 233:22 246:18
comes 19:22 21:10,21 27:17 42:6 65:19 75:7 75:11 90:10 113:23 216:17
cometto 33:2
coming 62:13 185:8
comma 106:12
commencing 2:1
comment 101:16 102:24
commentary 78:8
commented 77:22
commenting 237:3
comments 78:5 220:22
commercial 74:7,9 75:24 76:4,15
commission 252:25
committee 234:19 235:21
common 14:19 32:12 78:19,22 109:25 123:5 125:24 164:25
communicate 11:13
communication 11:5
communicati... 26:23 27:2,6,11
company 58:9 66:1
comparing 83:14 84:3
comparison 81:8
compensable 226:23
compensate 105:20 111:12 112:16,19 113:3,16 114:18 115:2 115:11 132:15 144:14 242:16
compensated 108:11 175:14 207:23 208:18 208:18 226:11 248:12 249:1
compensation 6:3,6,11 20:18 44:16 63:2,11 69:13,16,20,23 69:25 70:14 78:14 92:6,13 94:3 111:24 129:25 130:17 139:17 153:17 154:9,18 167:14 168:2 173:1 181:7 200:5,7,15,21 201:5,9,13 202:3,19 207:3 211:19 212:1 212:24 214:11 214:25 215:9 217:10,12 222:1 224:15 227:14 228:8 228:20 229:5 230:15,20 231:10 233:5 234:22 236:7 237:5
compensations 156:19
compete 115:22 116:1

competitor 79:19
compilation 42:12 45:10
complete 13:9
completed 117:13
completely 7:19
completeness 33:13 56:14 166:6
compound 40:3 123:16 248:3
computer 11:3
conceivably 159:24
concept 17:6 68:11 78:19 83:16,22 110:4
concepts 74:8 112:12 118:21 120:5,8,8,9 140:8 242:22
conceptually 122:25
concerned 184:3 186:22
conclude 169:15 196:8
concluded 250:2
conclusion 34:21 96:8 97:8 97:21 98:10 113:15 114:16 115:3,9 158:6 167:12
conclusions 97:9 106:16 154:22 197:16 243:21 245:3 245:20,25
concurrent 215:3,15,24 221:20
condition 151:16 152:3 152:20 169:6 183:16 184:7 187:3 194:2,13 194:21 195:5,9 200:5,14 202:2 202:18
conditional 157:11
conditioned 167:18
conditions 146:5 148:11 148:17 153:22 154:9 167:17 167:19,20 168:5 182:4,22 187:13 192:23 201:14 207:10 226:2,11,22 227:3 232:5 240:15 247:2
conduct 79:23 82:4
conducted 167:15 168:3
conducts 61:9
confidential 13:22 14:6,18 15:9
confines 97:16
confining 19:13
confirm 86:4 211:11 213:8 233:8
confirmed 167:18 168:5 169:6
congress 224:3 224:20 226:10 226:21 233:23
congressional 41:6,15 42:23 43:4 198:3,17 227:8,13,23 228:7
conjunction 247:3,22
connected 154:9 181:17 183:16 187:3 187:13 192:23 194:1,12 195:4 195:9 215:22 217:21 225:10 226:4
connection 27:14 183:24 184:23 186:16 190:2 211:8
consequences 97:12 98:12
conservatory 57:10
consider 64:15 107:2,7,12,16 107:20 116:20 117:21 171:10 239:15 245:7
consideration 249:4
considered 5:6 5:8 36:16 37:1 37:9,25 39:11 39:16 52:14,17 52:20 78:21 127:3 132:25 146:11 147:1 147:12 160:11 180:1,25 182:4 194:21 195:17 196:1,2 207:15 210:7
considering 190:1 224:21
consistent 110:15 112:10 113:10 120:4 121:2 141:18

148:16 169:20 243:12
constitute 231:2
constitutes 189:11
construct 18:21 63:4 118:14
consulting 60:3 65:17 71:22 73:23 75:1,5
consumer 16:20
contain 108:15
contained 46:4 211:12
contains 172:16
contamination 28:6
contesting 170:2
context 41:18 78:25 80:2,4,7 86:19 89:8 90:12 99:9 112:13 116:17 116:23 118:4 118:25 119:4,5 123:20 124:3 126:14 128:20 128:22 131:3 205:15,17,21 206:25 246:4 246:19 247:9
contexts 69:11 84:20 110:1
contingent 151:23 159:4
continue 170:5 170:11,23
continued 168:6 169:6 176:19 186:17
continuing 169:16 170:16 181:5
contract 15:1,2 15:5,19 16:11 16:14 20:6 62:8 72:10,13,18
contracts 16:9
contractual 16:1
contrary 130:10,25
contrast 81:9
contribute 109:14
contributing 231:22
control 209:16 209:24 213:10
conv 220:17
conversations 54:6 55:5
conversely 171:4
coordination 225:18
copy 38:24 56:11
copyright 15:18 66:23 72:14 73:1 75:15
corporate 19:24
correct 8:22 12:1,5,19,20,25 13:12,13 15:12 15:13,24,25 17:24 18:4 22:3 23:9 24:1 28:17 29:8,21 30:8,12 31:3,22 32:16 32:17 33:6,12 33:22 34:18 35:18 36:9,13 36:14,18,22,23 37:9,13,14 38:1 38:2,7 39:12,13 39:17,18 40:19 40:23 41:12 43:16,17 44:6,7 45:2,12 46:22 46:23 47:2 48:19 49:3 50:24 51:6,7,21 52:1,21,22 53:8 53:13,15 54:24 56:12,19 57:10 57:11 60:13 65:2,3 66:13,14 69:9 72:6,10,19 72:23 73:2,6 75:19 76:4,5,10 76:22 77:4,13 85:15 87:8 95:12 96:18 97:19 98:8 99:8 99:9,10 100:7 100:20 103:8 104:18 105:14 107:9,10,13,14 107:17,18,22 107:23 108:1 108:12 110:10 110:21 111:10 111:19 116:7,8 116:14 118:7 120:11,16,17 121:16,17,20 122:14,15 125:13,19 127:3 132:21 133:1,6 134:5,8 134:25 136:3 136:15 137:14 137:20 139:8 141:6,8,11,12 143:2 144:6,21 145:22 147:16 147:19 150:20 151:11,18 153:17,23

155:9 156:6,24
157:19 161:3
164:11 166:9
166:18 168:12
169:17 176:10
181:20,25
183:12 195:19
196:6,7,11,12
196:14,23
197:18 199:3
202:21 203:9
203:15 205:1,6
206:3 209:20
211:4 212:25
213:4,5 214:13
214:14,17,18
215:25 216:14
219:10,11,19
223:1 225:1,11
225:17,20,23
225:24 226:7
226:23 227:17
228:5,10 229:6
230:16 232:25
234:9,16,17
236:9 237:21
238:6 241:9
242:18,23,24
243:21,22
244:6,8,10
245:3,15,20
246:16 247:11
247:16,17
248:13 249:7,8

corrections 252:4

correctly 86:12 86:13 94:11 99:3 100:4 105:24 106:1 111:16 116:9 126:7 130:7 134:20 146:7 167:6,10,23 170:21 173:10 177:4 182:18 186:24 188:4 190:10 198:24 205:9 207:9 210:25 215:5 217:25 218:13 226:8 227:5 228:11 229:1 229:20 231:6 232:8 243:23 245:16 248:16

corresponded 137:5

corresponding 198:14

cost 234:8,11 235:2,13

costs 248:18 249:2

counsel 7:20 9:13 23:18 24:5 24:14,17 25:8 25:11 38:22 40:7,11 43:15 54:7 55:5 56:1 120:24 131:16 185:4 220:6,8 251:14,16

counting 79:10

country 49:23

couple 158:16 242:1

course 9:22 11:10,15 19:12 60:20 62:7 112:1 165:17 174:24 205:2

court 1:1 7:22 9:4 12:1 21:22 113:23 158:12 175:18 207:22 208:2 243:1,4 243:10 251:4 251:23

court's 175:13

cover 71:4

covered 61:24

crdp 215:24 217:8,18 218:5 218:9,19

created 35:17

creating 104:15 246:10

crew 91:11

criswell 33:2 34:8 38:7

criticisms 206:9

criticized 236:16

cromwell 3:19 4:3 8:6,15 22:9 28:1 29:3 30:21 31:17 32:3 34:14 35:1,8 37:6 39:1,5 40:14 43:1 47:17 50:22 52:16 54:13 55:11 68:9,21 69:5 74:22 80:16 81:14 85:19 87:25 89:9,20 90:16 91:2 92:10,18 93:10 96:14 97:14 98:7 99:18 100:11 102:7,18 104:23 106:20 108:6 110:18 111:4 112:14 112:25 113:12 114:10 115:6 115:18 116:19 119:2,24 120:22 121:2,7 123:11 124:9 124:12,17,23 127:20 128:2

129:11 131:20
132:10 133:12
133:18 135:6
135:25 136:5
138:8,25
139:23 140:14
142:5,25
145:15 146:16
147:14 148:19
149:12 151:8
151:25 153:14
154:12 155:2
155:24 157:14
158:12 159:6
159:13 160:2
160:15 161:14
162:3,24
163:14,20
164:7 165:13
165:24 166:24
168:10,16,21
169:13 170:3
170:12,25
171:9,17
173:13,23
174:11 175:9
176:7 177:17
178:1,12
179:10,24
180:10 182:9
183:7 184:8,20
185:9,12 186:7
187:21 189:10
189:15,22
191:12,23
192:7,17
193:24 194:19
195:1 199:12
200:23 202:14
203:4,12 205:4
205:16,22
206:17 207:7
207:17 208:22
209:3 210:8,16
211:23 212:6
212:15,21
214:2,8 215:14
216:23 217:16
219:24 221:15
222:12,15,18
223:8,15,24
224:12,22
226:15 227:19
228:2 229:12
230:4,12
231:15,19
232:18 233:2
234:4 236:3
237:2 238:21
239:5 240:6
241:11,21
244:11 246:24
248:21 249:11
249:18,22
crossed 137:9
crsc 217:9
crystal 105:1
cumulative 206:7 210:21 216:10
curious 57:14 57:23,25 59:13 59:19 60:8 180:1 192:25
current 13:1,7 30:3 167:8 176:20,24 188:7 193:18 220:13 239:6
currently 199:7 223:23
cut 88:1 103:5
cv 1:3 25:21 56:11,18,21 66:15 71:2,11 72:1 73:19 77:6

d

d 7:1
daily 146:5 148:11
damage 44:5 157:19
damages 4:25 15:4 16:13,25 17:1,3,7 29:6 29:16 31:14 52:25 75:14 77:18,25 78:22 84:17 86:25 89:11 96:3,10 97:11 98:11
105:19 108:9
109:11,21,24
109:25 110:10
110:25 112:13
132:13 140:8
153:7 155:7,20
156:1,5,14
159:3 160:6,21
160:22 175:21
204:11 242:15
243:6 248:9,9
248:17
dangerous 6:10 234:21 236:6
data 84:19 90:8 117:15,17 129:23 130:5 143:18 148:16 163:8 167:14 168:2 177:13 178:8 179:5 180:5 182:7 183:1,3 189:4 191:11 192:24 192:25 199:18 199:19 220:20 220:21
date 7:7 20:3 29:10 213:17 252:2
dated 12:18 15:24 17:13 18:3 22:15 23:7 29:7 37:9,25

43:13 53:7 86:7 166:8 227:15 228:9 234:23 236:8 237:18
dates 54:19 213:15
david 3:20,25 7:4 33:2,3 222:14,15
davis 33:2 34:8 220:12
day 61:10,10,11 61:11 251:18 252:21
dbq 91:4
de 101:2
deal 17:22 41:25 80:14
deals 81:5,11
death 18:18,20 19:5,20 21:13 76:25 84:18 186:17
debating 236:22
decade 228:24
december 53:7 53:7,10 54:1 55:10 86:7
decide 119:11 119:12
decided 59:22 156:10
decimate 6:14 235:6 237:17 238:5
decimated 238:14
decipher 90:5
decision 180:12
decisions 90:1 90:22 98:24 163:16
declaration 14:13
decline 171:14 228:24
decrease 194:13 195:5 198:16 202:1 239:11
decreased 239:3,9
decreases 161:25 202:18 241:10
decreasing 241:5
deduction 221:6
defamation 67:3 72:19
defect 18:21
defendant 2:5 3:18 79:14,21
defendant's 4:20 23:24 55:9
define 16:24 19:10 30:5 92:2 116:10 191:21
defined 80:6,20 82:16 84:20 90:13 102:17 115:20 217:9
defines 122:11 217:18
defining 83:14 84:4 97:20
definite 191:10
definition 5:17 19:17 63:22 120:14 121:14 122:8,17,19
definitional 32:20
definitions 125:7
degree 40:25 41:3 48:8 59:20 81:3 100:20,23 101:10,17,25 102:10,13 103:13,18 104:22 105:6 246:10,15,21
delays 9:10
delineated 243:2
demographic 204:7,18
demonstrate 130:11 131:1
demonstrated 114:23
demonstrates 131:23
denied 201:5 226:3
department 3:19 8:16 44:9 44:17 62:19 74:14,17,25 75:4,10 94:8 211:8
dependent 151:6,10 204:18
dependents 94:4,23 95:9
depending 153:20 175:8 175:12 202:8
depends 19:9 46:7 65:23 83:5 118:4,25 119:4 119:23 123:20 124:2 126:14 202:5,20 205:15
deponent 7:13 252:3,19
deposed 8:22
deposition 1:10 2:2 4:12,16,21

7:10,14 10:19 10:20 11:4,10 11:16 12:4,22 13:2,18 17:11 22:2,13 23:7,24 25:6 26:1,10,16 26:25 35:3 57:25 249:24 250:2 251:7,8 252:2
depositions 8:25 12:6 37:11 37:15
derived 203:24 204:3 208:6 220:18,19
describe 71:12
described 101:22 146:20 147:6 194:18
describing 120:5 178:11
description 4:10 49:7,13 51:19
descriptions 46:17
designated 232:4
designation 4:24 29:5 75:18
designations 29:15
despite 228:22
detail 49:2 172:18 197:25
details 91:9 108:18
determination 94:19 95:4 117:5,9 146:12 146:21 147:2 147:19 148:4 152:25 188:6 195:3
determinations 77:4 88:18 147:5,17 194:11
determinative 117:25
determine 70:14 128:21 128:24 139:2 148:22 149:1 155:14 182:21 183:15 193:18 193:25 200:7 200:11 210:9 219:25
determined 81:7,12 98:22 98:25 99:7 239:24
determines 176:18
determining 5:24 17:20 82:13,15,21 116:21 117:2 117:23 119:18 128:16 130:21 172:10,17 173:3 193:14 204:16
detroit 3:6
develop 51:20 198:13
development 15:1 58:14,21 59:1
devices 11:6,11
dga 14:8,8
diagnoses 94:22 193:14 198:13 198:15 202:10
diagnosis 134:16
dictate 88:18 129:20
die 204:20 205:1,10 207:11
differ 63:12
difference 63:21 67:9 71:9 71:12
differences 120:6
different 30:6 42:22 61:1 63:14,19 81:10 89:12 118:21 135:8 155:16 183:14 193:14 213:15 219:3 221:19
differently 36:7
difficult 59:18 189:21 225:4
difficulty 31:18
diminution 122:13
direct 16:17 79:19
direction 48:15
directly 50:14 80:14 81:5 116:13
director 48:2 58:5,13,17,20 59:1
directors 14:10
disabilities 190:22 225:11
disability 6:2,5 6:11 20:15 21:5 21:9 30:11 31:10 41:11,25 42:2 44:16,16 63:1,2,4,9,10 63:13,13,15,16 63:24 64:4

68:18,24 69:7
69:13,15,20,22
69:25 70:10,11
70:15,18,25
77:3 78:13 79:1
80:8 87:2,16,22
88:10,12,13,18
91:3,20 92:1,6
94:18,19 95:4
95:14,17,24
98:21 99:7,23
100:5 106:8
107:21 108:8
111:12,24
112:15,19
113:2,15 114:2
114:7,17
115:10 130:16
130:21 137:23
137:25 138:13
138:23 139:14
140:23 144:13
146:2,12 147:2
147:16,19,22
148:2,9,9 149:3
149:7 150:2,7
150:13,19
151:15,23
152:2,19 153:3
153:8,16,25
154:1,8,17
156:5 157:5,7
157:12 158:3,7
158:19 159:15
159:21 160:9
160:17 161:1,6
161:17 162:7
163:2,16,25
164:10,16
165:6 167:2,4
169:17,22
170:2,6,16,23
171:6 176:20
176:22,24
179:4,15,16
180:11 181:24
182:4,22
183:24 186:17
192:21 193:1,8
193:18 198:18
199:8,16,22
200:3,4,12,13
200:20 201:11
201:14 202:1,2
202:9,17,17
206:2,10,12
207:3 208:8
209:12,18,21
210:10,21,23
211:18,25
212:24 214:11
214:22,24,25
215:8,9,16,22
215:25 216:11
216:13,20
217:19 218:4
218:10,20,21
220:13 221:3,6
221:21 222:8
222:25 223:5
223:19 225:5
225:22 226:6
226:21 227:3
227:14 228:8
228:15,20
229:4,15,23
230:6,15,20
231:3,10
232:13,21
233:5,10 234:7
234:9,22 236:7
237:4 241:4
243:15 245:14
248:7,19
disabled 130:18
148:22
disagree 46:4
46:16,19 55:22
113:23 128:7
133:9 135:3,8
136:8 137:21
168:18 175:18
229:8 231:16
disagreed
136:22
discharge
184:4 186:23
187:7
disclosed 27:12
45:4
disclosure 4:25
29:6
disclosures
29:15
disconnected
68:3 160:13
discuss 55:5
90:18 114:12
115:19 227:7
242:20
discussed 24:5
24:25 25:8 42:7
68:11 108:18
171:18 190:6
221:2
discussing
116:25 124:25
172:18 219:15
discussion
37:21 84:9
210:3
discussions
44:24
disease 29:20
147:10 247:1
diseases 29:18
154:1 174:18
174:19 190:23
disgorgement
76:3 79:11 81:4
81:6,7,12
disposition
17:19
dispute 14:15
17:18 18:6
131:4 188:16

188:18
disputes 75:18
distinction 60:24 63:17,25 67:11 84:9 96:16 113:18 115:4 118:6
distinctions 69:4
distinguish 68:16,23 116:18 132:7 244:14
distinguished 126:21,21
distinguishing 126:23
district 1:1,1
divert 142:15 142:20
divide 64:16 118:9
division 7:6
divorce 62:5 64:14 87:21 88:7
docs 52:13
document 1:4 24:10 29:22,23 38:8,10 75:20 173:20 174:10 176:11 179:6 185:2 186:10 187:9 189:1 190:18,19 191:21 214:16 216:4 218:24 229:7 231:14 242:10
documents 4:14,17,22 23:15,25 24:10 24:23 25:16,19 38:4 156:10 157:2 179:18
doing 8:10 9:8 67:14 81:8 112:1 130:2,4 134:23
doj's 244:20
dollars 100:7 158:8 159:8,9
double 79:10 242:22
download 11:19
downs 33:3 34:9 219:16 220:15
downstream 81:3
draft 24:6 49:7 49:15,23 51:20 53:23
drafted 49:10 49:15 50:7
drafting 48:9 50:2,17 54:10
drafts 48:20
dragged 59:21
draw 115:3
drawing 67:12 96:16
drawn 96:7
dress 75:16
drive 3:10
drop 93:6
dropped 71:5 101:4 214:2
due 7:16 16:8 70:15 116:11 137:19 185:6
duly 8:1 251:7
duration 203:7

e

e 4:1,9 7:1,1 46:2 97:1
earlier 54:18 67:13 84:20 110:2 118:9 150:14 151:13 232:16 233:1 246:8
early 61:8
earn 122:12,14
earning 5:16 81:21,24 82:9 82:13,21 83:8 83:15 84:4 95:2 98:23 105:19 105:21 108:9 111:6,13 112:17,20 113:4,17,21 114:18 115:11 115:19,21 116:2,5,7,21 117:1,3,10,12 117:16,23 118:7,15,19,24 119:18 120:10 120:14 121:13 122:11,13,21 123:4,18 125:8 125:18 126:2,4 126:18 127:6 127:10,15,23 128:17,21,24 129:6,20 130:11,15 131:1,6 132:14 132:16 133:5 134:12,15,25 135:4,4,12,18 136:6,7,11,21 136:23 137:13 137:18 138:2 138:14,17 139:6,17 140:1 140:18,21 144:15 151:17 151:18 152:21 156:6,24 157:19 158:3,5 242:15,17,21 248:10

earnings 19:22 20:2,5,18 81:25 81:25 82:2,5,5 82:6,15,24,25 83:2,3,8,11,14 84:4 95:2,2 111:7,14 112:18 113:21 114:3,4 116:11 116:12 117:22 118:6,11,11,12 118:13,20,21 118:23 119:16 120:10 123:5,6 123:19,22 125:7,8,12,17 125:17,23,25 126:5,16 127:12,23 128:16,19,24 129:4,9,10,19 129:23 130:5 130:11,19,20 130:20 131:1 131:23,24 134:17,24 135:5,11 136:14,19 141:6,20,23 142:3,13,14,17 142:18,19 144:15 147:9 147:21,21 148:3,25 151:24 152:4,5 152:6,6,8,14,17 152:24,24 156:12 159:23 160:10,12
earns 143:20
easier 98:17 186:13 225:4
eastern 1:1
economic 44:5 100:20,23 101:25 102:10 102:14 103:13 105:6 109:1 110:7 112:11 113:14 114:15 118:21 120:5 155:7,20 204:11 242:22
economics 120:16
economist 100:24 102:15 143:2,25 170:14 243:9
economist's 200:9
economists 52:7 78:25 139:8 239:11 244:21
edgar 33:5 58:9
edited 77:19
education 57:6 117:6,20
effect 148:17 177:12 183:17 183:25 186:18 206:7,15 218:8 222:6 224:11 245:22 246:7 248:3
effects 82:4,5 148:20
effort 173:7 174:5 181:4 210:9
eight 13:17
either 13:18 51:8 174:20 176:19 201:4 218:11,22 222:4 235:12
elaborations 249:13
electronic 11:5 11:11
element 20:11 21:8 64:19 85:3 87:3,23 88:8,9 89:6 115:1 158:20
elements 48:6 69:10
eligibility 217:18
eligible 215:23 218:5
emerge 34:23
empirically 203:21,23 204:2 208:6
employed 151:11
employee 123:25 251:14 251:16
employees 240:21
employer 150:24
employment 60:7 146:6,10 146:25 147:18 150:20 151:7
ends 249:23
engaged 28:4,9 44:8,22,25 66:21 70:14 71:14 72:4,8 74:24 75:3,9 87:14 88:16
engagement 24:13,18 42:9 43:14 44:2,3,14 67:15
engagements 66:18 67:10,19 67:20 69:9,15 69:22 70:13

71:10 72:2 73:10 74:13
english 78:22 165:1
ensure 79:9 175:13 208:17
ensuring 207:22
enter 12:9 33:14 37:2 42:16 93:5 145:12 171:22 175:7,10,11 176:1 184:15 212:17 237:23
entertainment 18:7 62:1,2 76:8,9
entire 93:3 191:3
entirely 162:17
entirety 217:6
entities 19:24 19:24
entitled 15:22 23:11 36:25 37:8,24 53:1 57:5 66:17 67:7 71:9 76:7,13,24 77:7 79:15,17 100:6 105:13 120:13 121:13 122:4,8,21 125:7 134:11 145:21 171:15 172:10,25 176:9 181:7 184:23 212:24 214:11 217:9 220:1 228:8,15 229:17 230:14 231:22,23 233:4 234:20 236:5 238:4
entitlement 210:11,12
entries 46:17 49:6
environment 122:5
equal 171:2,13 203:8
equally 30:9 31:20,25
equals 138:1
equates 79:9
equations 104:9
equivalent 111:7
era 232:3
eras 230:24
erisa 76:20 85:3 85:9
errata 252:1
erred 203:6
especially 87:20 248:1
esq 3:4,9,14,19 3:20,20
essence 106:19
essentially 43:14 61:2 122:10 125:11 217:2 218:2
establish 159:21
established 160:1,3 181:24
establishes 179:7
estate 64:13
estimate 55:17 56:3 134:15 136:20 142:13 142:17 162:5 163:12 240:4 246:19 247:4
estimated 123:6
estimates 143:16 162:1
estimating 125:24
estimation 126:4,5
et 15:23 18:3
evaluate 139:14 182:20 183:14 189:16 199:15 244:7
evaluated 75:14
evaluating 140:20 204:11
evaluations 146:2 148:9 149:4 192:19
event 90:9
events 104:21
eventual 129:24
eventually 48:2 61:15
evidence 5:18 90:7 115:5 120:15 121:14 122:21 123:4 123:18 125:23 126:15 130:1,3 131:11 132:3 143:21 144:2,8 167:3 176:2,22 184:16 210:3 212:14 237:6
evidenced 220:14
evidentiary 126:2,19
ex 59:21
exact 20:3 52:2 85:17 106:18
exactly 9:21 21:2 63:18 202:9

examination 4:3,4 8:5 150:3 150:8 164:2,8 165:5,9 169:5 173:4 199:24 242:3
examinations 5:25 149:8 164:20,22 166:18 167:1 172:11,17 173:1,6,8,16 174:7 181:16 182:13,15 190:2
examined 8:1
examining 18:14
example 21:20 64:12,18 79:11 79:24 117:11 119:8 123:21 131:5 133:14 151:13 157:5 179:16 180:5 193:5 198:18 206:11 246:9 247:1,1,14 248:16,19,23
examples 42:2 126:14 161:21 161:21
except 11:12 85:9 147:22 184:1 186:19 188:2,22
exception 35:14 191:17
exceptions 70:2 131:11 132:6 147:23,24 190:7,15 219:4
excluding 21:23
excuse 25:10 53:19 71:21 97:9 142:18 148:23 149:1 157:13 172:1 208:12 248:4
exercise 173:2
exhaustive 73:12
exhibit 4:10,11 4:12,15,19,24 5:3,5,7,10,12 5:14,16,19,21 5:22,23 6:1,2,5 6:8,13,16 12:10 12:14,16 13:12 13:16 15:9,21 22:13,15,17,18 22:20,24 23:6 23:11,22 28:25 29:1,5 33:15,16 35:16 36:15,21 37:2,3,7,24 39:7 42:17,17 43:10,13 45:8,9 48:25 51:15 52:19 56:15,15 66:16 71:24 85:25 93:6,8,14 98:14,18 105:12 108:25 120:1,19,20 121:1,9,12 122:3 124:25 125:4 129:13 133:15,16,19 144:11,12 145:12,13,20 165:21,22 166:7 171:23 171:24 172:2 176:2,4 181:6 184:17,18,25 185:1 187:23 187:23 189:23 195:25 210:19 212:17,19,23 214:10,20 216:6 219:13 222:21 227:22 227:25 228:13 231:21 234:6 235:25 236:1 237:23,24 238:3 242:8
exhibits 6:18 11:13,18,19,21 22:6,7 37:4 42:18 121:4
existence 176:19
expand 226:22
expanded 226:10
expect 171:5
expectancies 246:10
expectancy 84:17,19,23 85:1,6 88:25 89:3,11 107:13 141:10 143:6,8 143:11,13 144:1,5 203:9 203:14,21 204:10,17,21 204:22 205:1,6 205:11,12 206:1,8,22 207:2,12 208:1 208:7,20 245:11 246:14 246:23 247:4,5 247:10,21 248:1
expectation 44:14 200:19
expected 44:4 81:24 82:6 89:18,22 118:11 123:6 125:8,17,25 126:5 129:10

142:3,13,18 228:23 244:3
experience 50:1 67:7,11 71:11 73:22 75:23 76:3,8,14,24 77:3 103:16 109:12,17,23 110:17 143:24 175:16,23 207:20 208:16
expert 4:11 5:1 5:3,13,19 12:17 28:4,11,15,20 29:7,16 30:7 34:16 35:3,11 35:11 38:17,18 44:18 45:4,12 53:1 54:22,25 61:12,13,14,14 66:17 67:10,17 67:20,22 69:8 69:15,21 70:9 70:13 71:10,15 71:16,21 72:1,4 73:9,24 74:2 77:25 86:22 87:17 96:10,21 97:11 98:11,14 101:1 103:7,22 104:16 105:18 109:25 132:13 134:4 157:18 160:21 175:21 196:2,4,9,18 197:2,8,13 203:18 221:10 221:11,17,18 221:20 242:14 243:8
expert's 107:11 107:15
experts 27:11 27:16 51:25 52:10 53:12,25 55:9,13 60:18 86:6,18 90:12 97:13 106:14 107:1,6,20 140:4 197:3,5 197:11,15 203:6 205:24 206:21 208:8 209:7,16,24 222:23
expires 252:25
explain 163:7 172:3 209:9
explained 209:11
explains 140:12
exposure 107:3 107:8 154:2 232:5 245:8,10 247:15
express 154:3
expression 173:21
extensively 49:16
extent 54:6 55:6 81:11 97:20 111:25 121:4 159:20 173:20
external 61:13

f

faces 156:10
fact 50:16 113:25 115:16 124:1 126:22 129:22 130:19 142:6,20 143:4 143:5,10 175:15 179:3 189:5 191:14 194:7 205:9 207:11 236:20 240:25
facto 101:2
factor 94:23 95:3 117:24 118:2,3 119:17 119:22 128:16 130:20 152:25 207:15,16 247:16
factors 94:17 95:6 107:24 116:20 117:4 117:19 142:1 147:12 148:21 202:21 207:19 222:24 227:7 231:22 233:9 245:18,24 247:10,19
facts 83:6 119:23 154:22 202:6
factual 139:21
failed 107:2,7 107:20 209:16 209:24
failure 107:12 107:15 206:21 245:6
fair 9:11,15 10:5 11:14 13:19 15:7 16:3 32:13 36:2 39:2 39:4 41:6 66:24 73:20 75:25 105:3 121:23 122:18 135:24 137:2,11 140:25 153:13 160:24 178:15 180:16,19,25 196:8 197:9,21 204:7 236:17 239:1 244:18
fairly 46:10 249:9,14
fall 68:20 230:9

false 75:17,18
familiar 8:24 28:3 30:2,5 43:18 45:16 92:9,19,21 95:13,16,23 96:17,24 121:23 126:24 127:5,14,17 144:20,24 149:3,7,11,16 150:5,10 151:3 161:1 163:15 163:22 165:14 165:19 166:20 185:14 195:24 203:13 215:15 221:22 222:4
familiarity 110:20 149:25 186:12
family 17:13,19
fancher 33:3 34:9
far 9:3,18 34:15 82:12 158:20 197:16
fashion 9:11 73:23 75:6
february 22:14 55:24 56:4
federal 2:4 39:15,19 41:10 41:24 80:3,9 81:17 94:7 111:23 187:2 225:19 228:19
federation 240:20
feel 25:22 103:19 213:8
field 41:3 131:7
fifth 240:12
figure 82:20 128:19 230:24 231:1
filed 26:8 159:1 159:3
filings 159:21
film 14:25
finance 15:23
financial 74:8 112:12
financially 153:9 251:13
find 244:24
findings 182:12
fine 57:9 85:20 160:25 192:5,7 213:8
finish 9:6,7 131:17 220:11 230:1 239:17
finished 59:11 59:12
firm 62:15 235:16
firms 49:22
first 5:5 8:1 13:6 14:3,8 26:13 27:21 36:25 37:8 46:21 52:24 61:19 70:23 71:14 86:11 94:10 99:2 105:16,17,23 108:25 111:15 115:15 120:12 125:6 126:6,10 129:8,14 130:7 132:17 134:14 134:20 146:7 157:23,24 167:6,22 173:10 177:3 182:18 186:24 188:4 190:10 198:23 215:4 217:24 218:12 223:3 228:25 229:19 231:5
fiscal 167:15 168:3
five 182:17,24 241:13
floor 3:5
fluctuations 107:2,7,12 245:7,8,10,11 247:9,14,21
focus 61:22 84:11
focusing 206:19
follow 125:2 154:13 161:15 195:7
following 33:1 215:18
follows 8:2 114:8
footnote 33:10 33:21 98:19 99:10 111:21 113:11 120:2,2 120:3 145:4 157:21 211:2 213:14 220:4,4 220:22 226:1 227:10,12,12 234:14,15 235:5,13 236:12 237:15 240:19
footnotes 41:4
foreclose 34:22
forensic 100:23 102:14 120:16 143:1,24
forgive 18:1
forgotten 162:21
form 36:8 159:3 244:11 246:24 248:21

forms 19:12 52:25 155:7,20 159:25
formula 193:13 193:15
formulate 193:2
formulating 24:3 91:12,21
forth 9:20 94:5 212:9 244:20 251:7
forward 115:25 223:11
foundation 109:2
founded 58:8
four 60:20
frame 183:18
frank 33:5 120:13 121:15
frankly 103:18
fraud 16:2 67:2 72:18 184:2 186:21 187:5
free 213:8
freelance 58:5 60:3
frequently 19:23
friday 1:13
front 11:25 33:7 85:18 172:12
full 8:12 115:24 129:14 214:25 215:10 218:9 218:21 221:5
fully 108:11 208:18 248:11 249:1
function 11:20 64:9 146:4,10 146:25 148:10 149:15
functional 145:21
fundamental 64:7
fundamentally 64:6 106:10 243:18 244:25
funded 229:23
further 108:7 226:25 228:24 229:13 230:13 240:12 249:17 249:18 251:12
future 90:3,19 90:23 104:18 104:21 105:1 107:21 118:13 118:20 130:5 141:6,23 142:18 161:18 162:8 163:3 164:2,20,22 165:5 166:17 167:5,7 169:4 172:25 173:6,8 173:16 174:6 174:14 175:16 181:16 191:18 192:19 194:14 195:6,12 199:23 206:2 207:2 208:8 222:25 226:5,6 226:19,20,23 233:11 234:7 239:25 245:14 246:18

g

g 7:1
gary 33:5
gender 204:18
general 8:24 28:23 30:18 31:8 46:9 49:12 73:8 74:7 94:1 132:17 144:4 148:17 165:8 226:13 232:11 232:20
generalization 66:24 236:18
generally 13:24 14:15,21 15:5,6 15:14 16:7 28:5 28:8 32:23 39:9 44:21 48:5,10 60:14,16,22 61:6,9,11,25 65:9,13 68:17 75:22 95:19 108:14 110:15 110:22 115:20 115:25 122:11 122:16 126:9 153:10 167:1 171:21 176:20
generous 6:12 234:23 236:7 237:5
georgetown 3:15
getting 13:14 114:13 142:22 174:20 222:12
give 13:24 34:3 102:19 140:11 165:25 177:24 235:15,16 242:1
given 12:3 13:2 13:10 49:12,17 80:21 90:9 91:23 97:25 98:21 126:14 131:3 137:11 147:10 148:21 148:25 151:16 152:2,12,19 174:23 177:6 178:8 179:11 194:1,11 195:8

200:4,13 201:5 202:2 204:17 207:10,11 208:13 210:20 216:10 222:7,9 248:7 251:9
giving 9:9
glanced 132:23 176:14
gleesing 33:3 34:9 219:17
go 12:8 22:5 25:2 28:24 33:14 36:10 37:2 42:15 43:12 52:18 54:11 55:7 59:22 68:5 82:12 83:8 85:24 88:2 93:5 94:18 98:13 105:11 116:4,5 116:10 119:13 124:5,15,18 142:24 144:11 145:12 162:19 165:20 171:22 184:15 187:22 189:1 192:13 203:25 213:22 214:1 219:13 237:23 241:17 249:24
goes 82:25 195:11
going 12:8 15:3 22:5,25 28:24 39:6 42:15 48:24 52:19 54:5 56:10 64:15 68:5 71:4 83:2 95:9 101:7 102:12 104:25 105:11 120:18 120:23 122:2 124:18 125:4 129:13 131:16 133:13,14,23 133:23 138:15 151:9 157:15 157:22 171:22 176:1 192:10 192:13 202:20 207:24 212:17 214:3 215:20 216:25 217:7 222:20 227:20 228:12 234:5 241:13,17 249:24
goldco 16:17
golkow 7:5
good 8:7,9 125:14 131:9 144:3,8
gosh 87:19
gotcha 15:20 18:11,16,23 43:6 74:3
gotten 44:19,23 145:17
governing 94:8
government 31:9 62:10 80:3 80:10 81:17 89:15,23 90:2 90:22 98:22 109:1 114:1,24 126:22 137:22 155:12 156:18 206:20 239:13 240:20 243:7 243:16 248:13
government's 106:14 109:5 209:16,23 222:23 243:17 243:20 245:2 245:19,25
grad 59:23
graduated 59:9
grand 3:5
grant 184:1 186:20
granted 186:17
granting 248:12
greater 210:23 216:12 247:19
grew 58:1
ground 61:25
group 3:13 60:11,11 61:6 61:23 62:11,15 62:21 64:25 65:11,12 91:12 204:20
grouping 64:1
groups 231:2
growth 228:15 231:1
guess 15:2 28:22 31:15 40:2 75:2 78:24 88:3 91:18 106:21 117:1 156:13 196:21 205:10 223:16 224:25 238:13
guide 94:1
guidelines 211:25 212:5
guild 14:10
gulf 230:25
guy 62:1
guys 68:1 192:5

h

h 4:9
half 204:19,21 207:23 208:21 208:24
halfway 122:7

han 15:23
hand 82:25,25 83:8,9 251:18
happen 36:11 104:18,25 203:3 238:19
happening 249:5
happily 102:22
happy 46:14 185:22
harm 19:11,15 19:18,20 84:22
head 9:20 199:10
headline 235:5 236:19
health 197:17 197:23 203:15 204:2 207:10 235:6 240:15
healthcare 6:14 237:17 238:4,6
hear 10:14
heard 7:19 148:6
hearing 6:12 234:23 236:8
hearings 12:6
help 16:24 50:17
helped 48:18
helping 49:23
hereinbefore 251:7
hereunto 251:17
hey 68:1 222:14
high 94:20 151:17
higher 215:23 216:21
hill 33:4 34:10 219:17 220:12
hired 28:15
historical 117:22 118:10 118:22 127:23 128:23 134:24 135:11 136:14
history 119:16 123:24 142:16 151:6 152:4,5,6 152:9,21,22,24
hit 202:15
hodgkin's 29:19
hold 50:19 101:24 138:10 213:22
holding 100:18 101:20 102:8 103:11 105:5
honestly 220:6
hooten 17:13
hopefully 185:10
hopkins 117:14
horner 120:13 121:15
hospital 176:17 182:15
hour 26:14
hours 26:14
house 10:22,24 11:1
howard 5:20 33:4 34:10 38:5 134:4 140:12
howard's 134:15,16,24 135:11,12
huh 23:13 49:4 49:8 164:23 183:20 196:3
hundred 60:20
hundreds 67:15
hypothetical 115:21,25 118:14 140:11 158:11
hypothetically 114:25 116:23 169:3 191:15

i

ibm 123:25
idea 137:15 164:20 171:8
identical 126:5
identifiable 130:3
identification 12:15 22:8 29:2 33:17 37:5 42:19 93:9 120:21 133:17 145:14 165:23 171:25 176:5 184:19 212:20 228:1 236:2 237:25
identified 13:22 31:21 32:2 33:10,25 35:13 108:4 166:7 223:9 235:18
identifies 37:11 125:11 218:8
identify 100:18 235:13 243:25
identifying 225:10
ignore 222:23
ii 5:23
iii 4:25 29:6,16
illness 116:6,13 152:13
illnesses 156:3 206:13,14 247:25
image 18:10
immediately 109:4
impact 129:24 147:10 224:4

230:6
impacted 222:8
impacting 226:5,20
impairment 122:12,21 145:21 148:25 152:11
impetus 166:21
implemented 233:23 240:25
implementing 48:15
implicated 82:17
implicates 54:6
implication 208:3
implications 243:5
important 132:8 189:8 232:2
improve 227:2
improved 167:3 176:22
improvement 182:16,23
improving 174:20
inappropriate 158:23
inapt 105:22 132:16 242:18
incidental 47:6
include 44:4 67:2 100:21 101:1 103:17 117:4 195:18 243:19 244:4 245:1,6
included 49:6 67:4 103:10,15 103:16 193:4 220:22 221:23 225:14,15
includes 82:4 106:14 225:3
including 63:5 146:5 176:17 186:5
income 21:17 64:13 69:8,11 69:14,20,25 70:4 141:17,22 171:14
inconsistent 128:11
incorrect 46:11 46:20 142:4,7 167:5 176:25
incorrectly 18:2
increase 194:13 195:5 198:13 232:13,17,22
increased 167:21 198:19 200:4,13 201:12,14 230:22 231:10 246:22
increases 161:25 198:16 231:22
incurred 56:4 137:19 138:19 140:3,19
incurring 20:1
independent 160:11 173:24 219:2
indicate 47:1 209:6
indicated 8:14 48:17 51:20 69:6 71:8 73:22 147:15 209:15
indicates 13:16 44:3 49:5 50:9 57:8 66:21 93:25 106:7 167:3 172:15 176:23 221:11
indication 131:9
indicative 123:22
indirectly 82:17
individual 18:8 19:11,18 20:1 27:3 31:2,15 33:24 99:13,21 127:24 133:5 136:14 140:1,2 140:19,21 141:5,14 161:2 161:17 162:6 163:2 179:20 180:13,17 192:19 220:1 221:2 229:16
individually 31:11
individuals 19:19,23 47:11 163:11 176:25 231:11,11
industry 14:25 65:14 102:23
inexactly 137:14
infer 220:23
inference 177:15 178:8 179:3 189:4 201:23
inform 112:10
information 35:3 46:4 112:24 129:21 130:9,24 131:4 146:11 150:6 150:23,23 177:12 178:9

178:21 188:9 188:10 197:20 211:12 220:18 220:19
informative 37:23 123:23 124:1,2
infringement 66:23,24 72:14 72:14 73:1,5 75:16 79:14 81:4
infringing 79:14,16
inherent 107:20 245:13
initial 48:20 156:16
initially 35:13 50:7 157:3
injured 129:15
injuries 18:20 21:7 107:3,8 137:20 154:1 154:18 155:8 155:21 156:3 245:7,9 247:14 247:25
injury 19:8,12 19:14,16 21:13 76:25 84:18,21 116:6,13 118:17 126:1 126:17 131:22
151:16 152:2 152:12,19 164:1 204:11 204:15 217:21 217:22 247:2
input 95:3
inputs 82:12 94:18
ins 219:5
inserted 158:17
inserting 115:14 156:7
inside 222:22
inspect 127:18
instance 41:21 83:1 117:6 118:19 141:15 141:24 150:22 181:22 201:3 246:6
instances 31:8 193:6
institute 238:4
instruct 54:5 55:4
instructed 9:14
instruction 166:16
insult 49:18
insurance 64:6
intellectual 18:6 62:7 75:13
intended 73:12 105:20 108:21
111:12 112:16 112:19 113:16 114:18 115:2 115:10 132:15 144:14 155:14 242:16
intending 178:18
intent 175:13 208:16
intention 35:23 187:18
interact 193:15 212:2 222:11
interaction 27:16
interactions 27:19
interested 207:22 251:13
interesting 17:4 17:6
internal 61:12
interplay 206:10,12 209:8,17,24
interpret 111:23 112:3,8
interpretation 165:1 181:1
interpretative 142:23
interrupt 25:13 68:2 145:1
239:22
interrupting 148:23
interruption 21:17 116:12
introduce 22:6 28:25 120:18 133:14 165:20 235:24
introduced 93:14 214:9
introducing 227:21
introduction 93:24
inverse 217:1
investigate 224:20
invoice 51:16
invoices 5:12 24:14,19 42:12 45:10,17,20 46:5,12 47:1,12 51:3,5,10 55:23
involve 74:13 79:7 81:16 83:19 84:16
involved 19:20 20:25 21:2,3 26:16 61:7 62:12,18 63:1 64:22,23 69:16 69:23 246:15

involvement 60:9 62:17 112:2
involves 16:12 66:12 154:21
involving 14:25 14:25 18:6 20:4 21:4 28:12 62:23 63:9 64:17 76:15 85:3
irrational 170:10 171:11 171:16
issue 19:21 81:6 116:14 158:24 219:15
issues 21:4 34:24 85:12 86:6
items 159:19 181:19 209:6
iv 5:23

j

jadine 38:18
jaeschke 18:2
jams 14:19
january 5:4 29:7 47:20 56:22 57:2
jefferson 33:2
jenna 3:9
jerry 33:4
jfb 3:11
job 1:25 65:18 119:14 125:15
johns 117:14
joseph 33:3
josh 26:19 45:24,24 47:2 47:21 49:18 50:15
josh's 48:14
journal 120:15
judge 11:25
judgment 173:2
jump 185:5
jumped 230:20
jurisdiction 40:22
justice 3:19 8:16 96:18 97:5 97:19,23 110:20

k

k 46:2
keep 93:2 156:7
keeps 13:14
keller 33:4 34:10
kidney 29:19
kind 9:10 11:5 16:5,22 17:1,5 17:16 18:11 21:2,12,13 31:1 35:2 37:19 40:22 41:18 55:16 56:2 64:11,21 65:16 66:6 70:14 79:4 99:12 125:3 132:17 139:24 150:1,6 241:14
kinds 21:10 63:4 64:23 67:19 110:1
kinrich 77:20
klotzbucher 3:20
know 9:25,25 10:8 12:10 13:15 17:6 19:14,24 21:16 21:20 30:15 31:25 34:15 44:22 45:3,6 50:11 51:9 52:6 63:24 71:17 74:4 77:14 79:1 79:8 81:8 84:11 87:20 88:20 91:3,5,9 92:4 92:11 93:11,19 94:17 95:1 103:24 104:3,8 104:11,12 113:22 119:14 119:15 123:21 123:22,24 124:13 127:18 128:17 131:2,7 137:3,12,15 142:2,23 145:16 146:17 146:24,24 147:24 148:1 149:2,13,16,18 149:22 150:1,6 156:8 161:12 163:24 164:12 164:14,18 165:17 177:7 177:19 178:2,3 178:15,23 179:7,22 182:2 185:16,20,21 186:6 188:15 189:11 190:25 191:2,20,24 192:4,6 193:3,5 193:7 194:4 195:3 197:15 197:22 199:6 200:3,12 201:16,21,22 201:23 202:1 204:6 207:21 209:13,23 211:7,10,15 216:16 220:23 223:13 224:13 235:12 237:7 238:18 239:1 240:24 246:6

249:13
knowing 180:9
knowledge 34:24 137:8 165:11 173:24 215:19
known 57:16 58:8 62:1

l

la 60:4
labor 115:22 116:1
lack 109:1
lamacchia 3:14
landslide 77:17
lane 3:25 7:4
language 85:18 103:15 115:7 128:10 134:23 179:9
laptop 11:12
laramore 33:4 34:11
large 120:4
law 12:1 39:20 40:15 96:4 122:10 175:20 220:17 224:2
laws 96:12
lawsuit 16:2
lead 44:3 108:4 126:3 159:24 165:10
leads 247:19
leave 153:8 249:1
leaving 208:21
led 59:13
left 108:10 248:11
legal 3:13 34:21 39:10 40:25 41:2 52:24 94:8 96:7 97:8,9,21 98:10 112:1 115:3 122:4 125:25 126:3 126:16 129:21 160:20
legislation 224:10
lejeune 1:3 7:11 8:18 27:22 28:3,12,16 30:3 35:19,24 49:2 96:18 97:5,18 97:23 107:3,8 110:20 153:23 154:2,7,10,16 154:19,24,25 155:9,22 156:3 194:22 195:10 198:13,15 206:13,14 245:8,10 247:15 252:2
lending 76:21
length 213:20
les 78:4 81:5
leslie 3:14
letter 5:10,22 24:13,18 42:9 43:14,18 44:2 44:14 166:8,15 166:15,21 168:1
letters 165:15
leukemia 29:19
level 64:7 78:10 94:20 99:21 101:13,13 104:12,17 131:8 139:3 164:6 197:24
leverage 61:1
life 84:17,19,22 85:1,6 88:25 89:3,10 107:12 141:10 143:6,7 143:11,12 144:1,5 146:5 148:11 195:19 195:22 196:10 196:18,22 203:7,8,13,21 204:9,16,20,22 205:1,5,11,12 206:1,7,22 207:2,11 208:1 208:7,20 245:10 246:9 246:14,23 247:4,5,9,21 248:1
light 210:11
likelihood 90:1 90:9,18,21 161:11,13,16 162:6 163:1 239:24 240:4
likely 129:22,24 161:7 163:10 167:2 169:5 174:16 176:21 199:23
limit 173:8 174:6
limited 18:13 48:8,21 49:23 78:1,9 147:23 183:3 229:17 244:19
limiting 21:23 126:19
line 129:18 134:14 220:12 220:15
lines 78:6 81:3
link 213:21
linked 232:5
list 12:16,21 33:12 36:16,20 37:1 39:12,16 52:18,20 53:21

54:20 73:13 76:24 77:10 107:24 127:3 132:25 180:1 180:25 181:4 191:3 195:17 224:24 225:14 226:22 233:9
listed 13:11,21 14:6,18 15:8,9 15:21 29:17 53:4,14 73:11 73:12 76:18 127:2 132:24 179:25 180:20 180:24 226:2 233:22 247:10 247:16
lists 23:14 181:19
literally 67:15
literature 109:8 109:19 110:8 110:14 120:5
litigation 1:3 7:12 8:18 17:23 27:4,22 28:3,11 28:16 30:4 49:2 60:18 61:7 62:2 71:22 74:7,10 75:16 76:15,20 76:20 85:3 110:2 155:13 252:2
little 9:9 31:12 32:19 34:21 37:21 56:7 60:3 70:8 71:3 90:20 91:16 104:12 124:1,8 183:13 199:4 201:7
live 117:7 204:21 205:5
lived 57:23
living 59:18
llamacchia 3:16
llc 15:23 16:17 18:2
ln 252:5
located 10:20
location 117:20
logical 217:3
long 26:5,11 59:19 131:6 158:10 192:1 193:25 219:18
longer 191:24 214:14
longevity 89:15 89:19,23
look 22:11 29:14 33:19 37:7 48:24 51:14 52:19 56:9,10 81:13 83:23 88:12 90:7 91:7,16 93:23 98:19 105:10 108:24 119:25 122:2 129:12,13 134:10 145:8 156:21 172:20 180:20 181:5,7 181:15 192:21 194:16 195:14 195:22,23 198:6 199:19 202:25 211:16 211:24 212:16 213:7 215:20 216:6 217:8 220:3 232:1 233:3 234:2 237:13 241:13
looked 25:16 87:15,23 88:17 91:20 92:25 94:13 145:25 181:12 183:21 186:4 193:3,5 194:3,5 196:5
looking 21:18 23:5 35:10 36:15 43:8,9 44:1 47:4 52:13 57:5 66:15 71:24 72:1,2 78:21 83:1,2 86:1 98:17 115:25 124:4 125:5 145:4 148:15 172:23 182:10 187:24 189:25 194:7 198:9 207:9 210:18 214:19 227:10 230:13 231:20 241:12 242:12 245:17
looks 48:1 53:4 54:18 59:4 60:10 148:9
loose 60:2
loosely 137:14
los 10:21 59:21
loss 19:22 20:4 105:21 108:9 111:6,13 112:17,20 113:17 114:18 115:11 116:11 118:10,11,12 122:13 126:1 132:15 136:25 136:25 144:14 175:16 242:17 242:21 248:10
losses 79:18 108:11 155:13 156:2,2 158:23 175:15 208:19 248:12
lost 20:1,18 75:24 77:18

81:20 82:9,13 82:15,21,24,25 83:1,2,7,8,10 83:14,14 84:4,4 84:8 98:23 105:19 111:7 111:14 112:18 113:4,20,21 115:20 116:10 116:11,21,25 117:3,9,16,23 118:6,7,15,19 118:20,20,22 118:24 120:9 120:10 127:6 127:10,11,15 127:23 128:16 128:16,19,21 128:24,24 129:4,6,9,10 132:14 133:5 134:11 135:5 135:17 136:6,7 136:11,14 137:18 138:2 138:13,17 139:5,17 140:1 140:18,20 144:15 156:6 156:24 157:19 158:3,5 160:10 213:21 225:12 242:15,21

lot 54:10 60:23 61:25 62:1 75:23 76:2 124:2 202:6
lots 62:7 91:9
louis 57:15,19 57:21
low 151:17
lower 141:22 216:21,22
lunch 124:12 185:7 192:2
luxenberg 3:4
lymphoma 29:19

m

m 121:15
m21-1 5:14,23 92:21 93:15,25 94:1,14 171:18 172:8 189:24 190:6
madam 158:12
made 79:21,22 88:19 97:13 123:16 141:19 147:17 157:11 164:10,15 169:21 173:7 174:6 181:4 183:9 187:10 244:14
majority 66:11 67:16 167:17 168:4
make 17:8 30:19,23 32:20 59:18 70:18,24 71:6 82:7 84:13 98:16 114:13 117:4,8 118:18 123:13 133:24 142:21 147:18 163:5,7,11 165:3 170:20 177:14 183:5 188:6 189:3 194:10 195:3 209:6 210:9 213:7 225:4
makes 32:21 84:14 147:5
making 46:9 94:18 95:3 104:15 113:18 114:5 117:19 146:12,20,22 147:1,19 175:17,21
manage 60:25
managed 19:2 48:5
management 123:25
manager 48:1 60:25
manages 61:10
managing 58:17 61:8 74:1
mandatory 229:15,23 230:7,10
manner 127:5 127:14
manual 5:15 85:21 92:4,11 92:22 93:15 94:1,14 171:19 172:4,9 189:24 190:13
manuals 88:17 88:20
march 1:13 2:1 5:6,8,21 6:1,16 7:7 22:16 23:7 37:9 38:1 251:18 252:2
marital 64:13
mark 33:1 133:14
marked 12:9,14 22:7 29:1,5 33:15,16,20 35:16 37:1,4 42:16,18 43:10 45:8 93:6,8 120:19,20 121:11 133:16 145:13,20 165:21,22 171:24 176:2,4

184:16,18 212:19,22 227:22,25 235:24 236:1 237:24
market 115:22 116:2
marking 120:25 171:23
massari 47:3,18 47:22 48:12 50:10
massive 56:6
master 60:5
material 106:14 167:4 176:23 182:16 182:23 243:19 245:1
materials 5:6,8 36:16,25 37:8 37:25 39:11,15 52:17,20,24 127:2 132:25 180:1,8,25 195:17 196:1
mathematical 104:9
mathematically 63:20 64:8
matter 7:11 13:24 14:12 15:15 19:21 28:18 61:22 130:19 246:20
matters 13:22 19:21 20:10 60:19,20 76:9 246:19
mba 41:2 59:6 59:10,14 60:11
mcelhiney 33:5 34:11 219:17 220:16
mcilroy 37:12
mean 25:12 31:16 38:9 49:11 50:18 66:1 69:24 71:16 83:9 87:19 88:1 89:18,19 93:2 100:23 102:14 103:5 104:15 116:25 119:8 119:19 131:2 145:1 161:7,10 171:4 178:17 180:20 192:8 201:2 202:19 203:24 208:1 208:19 209:9 223:17 233:16 239:22 240:10
meaning 168:11 175:17 204:17
meaningful 37:17
means 62:3 105:9 114:2 122:13 136:24
meant 113:3 151:14 186:11 192:20
measure 115:21,25 116:11 161:16 195:15
measurement 5:17 120:15 121:14
measures 116:6
measuring 130:6
mechanically 63:20
mechanism 130:17
mechanistic 82:10
media 18:7 76:7,9
median 204:23 207:25 208:20
medical 10:14 197:4,8,13 227:1 248:18 249:2
medically 149:5,6
medicare 229:14
meet 25:24
meetings 26:4
member 26:17 45:22
members 25:11 26:15,24 40:6 47:1 50:2,17
memorize 33:8 181:13 185:19
memory 28:7 180:21 186:12
mentioned 21:9 46:24 63:23 67:13 87:21 117:18 164:19 181:13 209:5
met 26:5
methodology 82:15 106:15 128:14 204:10 204:14 208:4 243:20,25 245:2,19,25
methods 74:9 82:21
michael 3:19 8:15
michael.w.cr... 3:22
michigan 3:6
midlevel 123:25

military 6:3 107:17 186:21 210:11,12 211:3,19 212:1 212:23,25 214:10,12,22 215:1,10,21 217:18 218:8 218:21 220:2 221:5 222:7 245:12
million 198:20 230:23,23
mind 27:17 42:6 62:14 63:23,25 75:7 75:11 148:7
mine 49:22 110:3 128:11
minute 73:14 124:6 241:15
minutes 185:10 191:25 192:6,7
misappropria... 66:22 72:9 75:17
misread 213:16
missed 122:22 122:23
missing 73:8
missouri 57:15 57:20
misstates 157:2
mistaken 210:5
moment 23:3 29:12 100:15 114:13 164:19 165:25 242:2
money 70:6 79:9 122:12,14
monthly 156:19 200:5,6,14 201:5,9,13,19 202:3,19
months 186:10
morning 8:7
mortgage 76:19
mousser 33:5 34:11
move 140:15 162:13
moved 57:21 58:2
moving 32:19 182:10 223:11 237:19
multiple 20:4 42:24
muted 222:16

n

n 4:1,1 7:1 46:2
name 7:4 8:12 8:15 26:19 50:25 252:2
named 28:19 33:25
names 33:8 47:16
narrative 6:10 234:22 236:6
narrow 79:2 90:12 130:23
national 161:23 203:14 204:1
natural 158:5
nature 7:17 194:25
near 11:6
nearly 101:5 230:22
necessarily 67:16,22 68:16 71:16 117:25 119:17 128:18 129:19 202:19 245:24
necessary 173:7,17
need 5:24 10:7 25:22 26:20 70:3 83:3 109:22 124:12 124:13 130:14 138:24 163:8 164:1,5,9 172:11,17 173:3 174:14 176:19 188:21 192:5
needs 150:7
neither 221:7
neurosurgeon 119:13,19
never 19:5,8 40:24 92:24 110:4 137:4 148:7 154:15 154:23
new 3:21 226:2
news 236:16
nightlight 58:21
nods 9:20
non 29:19 198:12 206:14
nonpayment 157:5
nonretained 38:17
nontestifying 65:17,21,25 66:7,9
normally 39:19
north 1:1 3:10 3:21
northlight 58:23 59:2
notary 252:24
note 54:17 100:17 106:13 109:4 111:11 122:22 123:3 125:22 144:13

185:5
noted 7:20 10:18 120:3 127:9 133:9 210:17,20 219:12,14 226:25 227:6 240:12
notes 190:5 241:12,14
notice 2:3 4:12 4:15,20 22:2,13 22:15 23:6,24 76:2
noticed 214:16
nouvelles 78:4 81:5
november 51:16,24 53:24 54:15
npr 240:19
number 33:21 39:10,14 41:4,9 48:25 51:14 94:23 95:8 174:25 181:19 222:22 224:23 226:11 230:14 230:19,22 231:9 232:12 232:16
numbered 45:11
numbers 99:20 140:4 168:22 169:2
numerous 133:5 175:24

o

o 4:1 7:1
oath 11:24
object 9:13 34:4 80:22 106:1 244:11 246:24 248:21
objected 80:24
objection 27:23 30:13 31:4,23 34:2,19 35:6 40:12 47:13 50:21 52:12 54:4 55:3 68:14 69:1 74:19 80:11 85:16 87:18 89:1,17 90:4,24 92:7,14 96:5 97:6 98:1 99:15 100:8 102:2,16 104:19 106:17 108:2 110:11 111:1 112:5,22 113:6,19 114:20 115:12 116:15 119:1,9 123:8 127:16 128:1 129:1 132:1 133:7 135:1,14 136:4 138:4,20 139:10 140:5 141:25 142:10 146:13 147:3 148:12 149:9 150:25 151:20 153:11 154:11 154:20 155:23 156:25 158:9 158:15 159:10 159:17 160:7 161:9,19 162:20 163:4 163:17 164:3 165:7 166:22 168:7,13,20 169:7,18 170:8 170:18 171:7 171:12 173:12 173:18 174:8 174:15 177:10 177:23 178:6 179:1,21 180:3 182:5,25 184:5 186:2 187:15 188:24 189:13 189:18 190:16 191:19 193:20 194:15,23 199:11 200:17 202:4,22 203:10 205:3 205:14,19 206:4 207:5,13 208:11 209:2 210:1,13 211:20 212:3 212:11 215:11 216:18 217:13 219:23 221:8 223:7,12,21 224:7,17 226:14 227:18 229:10,25 230:8 231:12 231:18 232:14 232:23 233:24 236:25 238:16 239:4 240:1 241:6
objections 4:19 22:18 23:19,23 24:4
observation 162:10 169:11 175:21 176:17
observations 169:20
observe 70:22
obtain 40:25 153:3
obtained 59:6 60:10 153:22
obtaining 58:3 59:14 95:14

obviously 9:4,8 11:4,12 14:19 36:11 59:24 74:5 108:22 146:22
occupation 117:7
occur 226:5,19 226:19 240:8
occurring 10:19 11:17 239:25 240:5
occurs 165:10
october 51:5,11 54:19 55:14 166:9 234:24 236:8
offer 36:4,8 44:8 72:5,8,12 72:17,21,25 73:4 86:22 98:10,24 99:12 103:22 111:23 138:16 187:11 199:20 206:9
offered 21:4 41:19 44:9,17 72:12 73:16 80:9 81:16 87:5 103:4,12 133:4 139:8 205:23
offering 14:12 14:22 15:3,15 16:6,12,23 17:17 18:12 28:15 30:7 31:1 31:7 32:25 34:16 35:23 37:16 44:15 87:16 88:11 97:3,8,10,17,24 99:6,24 100:19 101:21,24 102:9 105:11 108:16 119:6 121:20 127:8 127:25 136:3 137:17 138:15 139:24 140:17 141:4,13 160:17 168:25 183:10,11 187:19 199:14 204:9,24 208:15 217:11
office 10:23 41:6,15 42:24 43:4 166:16 198:3,17 227:9 227:13,23 228:7 239:7
offset 29:6 30:12 79:8,24 79:25 97:25 99:14,21,22 105:22 108:8 109:1,10,20,25 110:9 132:16 138:1 156:5,15 158:4,6,22 159:16,24 160:6,14 175:3 175:17 198:14 242:18 244:5,9 244:20,24 248:6,8,18
offsets 5:1 29:16 31:9 78:18,19,24 79:2,6,7 80:5 80:19 81:12 85:13 86:9,19 86:24 87:7 96:25 97:4,17 106:8 109:5 110:24 209:19 243:1,16 244:1 244:3
offsetting 100:1
oh 14:24 87:19 124:9 175:10 225:13 226:17
okay 8:21 9:2 9:17 10:1,11,18 10:25 11:3,9,16 11:23 12:12 13:1,5,8 14:17 15:8,20 16:10 16:16,22 17:10 17:25 18:16 19:4,7 20:14 22:1,5,21 23:4 23:10,18,22 24:9,16,22 25:2 25:12,18 26:11 26:15,18 27:10 27:18 28:9,14 28:24 29:13,25 32:4,8,14 33:13 33:18,19 34:7 34:15 35:9 36:7 36:12,15,24 37:24 38:12,16 38:20 39:6,8,23 40:15 41:4,23 42:4,7,15 43:11 44:1,25 45:7,16 45:23 46:3 47:7 48:11,24 50:4,9 50:16 51:1,9,14 51:23 52:8,17 52:23 53:3,16 53:23 54:14,25 55:16,21 56:2,9 56:18 57:4 58:25 59:9,24 61:17,21 62:9 62:17,25 63:22 64:25 65:16 66:15 67:2,6,25 68:22 69:6,12 71:23 73:21 74:6,16,23 75:8 75:12,22 76:23 77:6 78:11 80:17 81:19

83:12,18 84:24
85:8,20 86:21
87:11 88:16,23
91:3,12,18,25
92:19 93:2,4,13
93:19,23 94:13
94:17 95:1,7
96:2,24 98:13
99:5,11,19
100:16,22
101:18,23
102:12,25
103:22 105:10
105:16 106:5,6
107:19 108:24
109:8 111:5
112:2,15 113:1
113:13,24
115:7,19 116:4
116:20 117:21
118:1,5,18
119:3,25
120:18 121:18
122:2 123:1
124:4 125:16
125:21 127:13
127:21 128:12
129:12 132:24
133:13 134:22
136:1,20 137:3
137:7,11 138:9
139:1,5,24
140:24 143:10
144:4,10 145:8
145:12,19
146:1,17
147:15 148:7
149:13,18
150:1,12
151:13 152:18
155:4 156:22
158:1 159:14
160:16 162:4
163:15,24
164:14,19
165:20 166:1,3
166:6,11,14,20
167:9 168:24
169:2,14
171:22 172:5,7
172:15 174:4
176:1,16
179:11 180:11
180:15 181:15
182:10 183:13
183:23 184:9
185:24 186:14
186:15 187:1
187:22 188:19
189:23 191:13
191:23 193:7
193:25 194:10
194:20 196:8
196:17 197:1,9
197:14,21
198:1 199:6,13
199:17 200:2
201:8,20,25
204:16 207:8
209:4 210:17
211:16 212:7
212:16 213:6
213:19,24
214:19 215:20
216:2,6 217:4,7
217:17 218:7
218:15,25
219:25 220:10
221:16 222:5
222:20 223:3
224:13 225:13
227:20 228:18
229:22 230:5
230:13 231:20
233:3,20 234:5
235:20 237:15
238:1,2,12,22
238:25 240:10
241:2,12 242:5
242:8
omissions
106:15 107:5
108:3 243:19
245:1
omitted 85:22
once 93:11
145:16 164:14
201:10
ones 9:24 47:5
online 93:20
open 11:20
12:12,13 22:19
22:24 33:18
220:8
operate 78:14
opine 88:24
89:14,22,25
90:21 96:3
154:23 156:21
199:25 219:7
234:6 243:1
248:6
opined 108:7
153:6 203:5
opines 136:11
opining 17:1
96:13 98:4
197:15 243:3
244:9,13
245:23
opinion 97:4,17
97:24 98:24
99:6,12,24
100:4 105:16
105:17 106:6
107:1,25 108:5
108:25 109:10
109:20 110:9
112:1 113:2
118:5 127:8,25
131:15 132:11
132:17 136:3
137:24 138:11
138:16 139:5
139:20,25
140:17 141:13

156:4,15,22 160:21 174:12 187:11,19 199:13,19 204:9 205:23 207:1 208:15 209:19 216:25 219:21 222:23 224:23,24 225:25 240:13 244:23 245:4 245:18 248:25 249:15
opinions 14:20 15:4,16 17:16 18:11 21:23 30:7,9 31:2,7 31:20 32:24 34:16 35:4 36:4 36:9 37:16,18 38:13 41:13,18 44:9,15,18 50:18,23 54:2,9 54:11,14 72:13 73:1,5 86:22 87:5,17 88:11 91:13,21 97:10 100:19 101:21 101:24 102:9 103:12,23 104:16 105:5 105:11,13 108:15 111:23 119:7 121:19 125:2 128:9 133:4 137:17 141:5 142:7 143:7,12 168:25 183:10 183:11 193:2 197:22 198:1 200:9 203:18 204:24 205:9 205:11,25 206:16,23 207:4 208:9 209:7 217:11 226:16 227:1 242:13 243:9 244:4,19 249:7 249:10,13
opportunities 118:16
options 6:7 227:15 228:9 233:4,21
orange 232:6
order 120:23 163:5,7,11
ordinary 146:5 148:10
organ 146:4
organic 58:14
organizations 6:9 60:4 234:21 236:6
original 47:25 184:1 186:20
originally 57:20
ortiz 3:20
outcome 251:13
outcomes 227:2
outline 51:20
outlined 53:24
outs 219:5
outside 74:25 196:24
overall 153:7
overcompens... 208:24
overlooked 210:5
overly 138:6
overstated 175:3,17
overview 172:15
owed 17:20
own 49:19,20 61:16,18 68:12 79:18 98:23 128:8 134:22 139:1
owner's 85:21

p

p 7:1 46:2
p.a. 3:9
p.m. 192:13,14 192:14,16 214:4,5,5,7 241:17,18,18 241:20 249:25 250:2
pacific 7:8
pact 226:2,10
page 4:2,10 33:20,20 36:21 36:21 45:14 49:1 51:14,15 85:24 93:24 98:18,18 108:24,25 111:9,9 119:25 120:1 122:3,4,7 125:6,6,18,19 129:13,14 134:10 172:14 172:20 210:19 210:19 214:19 217:17,22 228:13,13 230:24 231:20 231:21 233:3,4 242:9,10 248:5
pages 198:6,7
paid 158:7 160:5
paragraph 44:2 86:1 98:19 113:8 116:3 129:14 144:16 168:9,15 169:9 182:14 198:8 215:18 228:14

229:13 241:8 243:14 245:5
paraphrasing 66:20
parenthetical 217:21
parkinson's 29:20
parse 31:19 84:12
part 5:23 13:6 20:17 31:12 41:2 44:18 48:18 63:5,7 65:17 77:6 81:25 83:10 101:11 106:22 107:2 141:5,10 144:20 145:9 154:1 157:23 157:24 172:4,9 190:6 198:1 203:17 204:10 226:17 230:3,7
particular 19:3 20:25 28:10 46:14 48:22 59:25 61:21 96:4 101:19,20 110:7 111:6 125:21 131:7,7 164:1 166:21 168:25 176:12 181:10 185:21 190:24 194:5,5 203:21 216:16 218:3 221:12 225:25 235:1 236:16 244:5
parties 7:14,19 16:8 121:3 251:15
party 129:23
pass 45:25
passage 216:19
passed 40:21,24
passes 78:5
passing 226:10
past 27:17 66:16 73:17 95:2 118:13,20 121:4 123:4,19 123:22 125:23 126:16 129:19 129:25 130:2 136:18 137:10 141:20 147:20 190:23
patent 75:16
paths 137:9
pause 7:18
pausing 42:21
pay 6:4 14:16 211:19 212:1 212:25 214:12 214:22 215:1 215:10,16,25 218:10,10,21 218:21 220:13 220:16,17 221:5,6,21 222:7
payment 63:13 80:8 147:22 210:22 216:12 225:16
payments 79:1 98:21 99:7 153:17,21 157:6,7,13 158:3,19 206:3 208:9 228:16
pdf 33:20 36:21 93:24 98:18 108:24 111:9 120:1 122:3 125:19 129:14 172:20 198:7 210:19 214:19 228:13 231:21 233:4 242:9
peer 77:15,20
peers 101:15 102:23
pending 10:9 237:11
pension 63:12 64:3,18 68:11 68:12,23 69:7 94:3
pensions 63:3 63:10,15,23 107:17 245:12
people 47:8,9 49:22 101:4 204:19
percent 66:10 104:25 143:19 148:2 167:17 167:19,20 168:5 174:23 199:1,8,22 200:3,12 201:11,18,25 202:8,17 210:22 214:21 214:24 215:2,8 215:23 216:11 216:21 217:20 218:4,19 221:3 230:23
percentage 65:20,24 66:6
perfect 143:19
perform 75:3,9
performed 74:17 75:8 140:7 149:4 165:5
performing 59:5,15 60:1 74:13
period 136:9 182:17,24 223:10 230:21 232:17

periodic 181:16 181:18,23 182:11 188:1 188:22
periodically 56:24
periods 54:19 176:17
permitted 96:3 97:4,18,22 98:3 98:4,5 159:15
persisted 182:16,23
person 59:19 61:13 119:10 119:11,12 130:2 143:4,5 147:5 148:22 184:3 186:22
person's 115:22 116:1 117:6,22 118:22,24 123:19 141:10 146:10,25 147:17 148:10 163:25
personal 18:20 19:8,14,16 21:13 76:25 84:18,21 126:1 126:17 131:22 204:11,15
personally 74:16
perspective 98:11 142:12 160:22 205:20
peter 1:12 2:2 4:14,17,22 5:3 5:5,7,11 7:13 7:25 8:13 23:25 29:17 251:6 252:3
peterson 33:5 34:12
pg 252:5
phase 4:25 29:6 29:16
philosophy 104:4,6
phone 11:7
phrase 136:23
physicians 27:7
pick 9:20
piece 70:7 146:11
pinckney 46:1
piper 38:18
place 7:11 14:7 15:10 122:23 144:3,9 223:18
placed 237:9
plaintiff 30:8 30:10,17 31:3 31:22 38:5,7 79:15,17,22 84:21 99:13,22 100:6 108:10 137:25 138:3 138:18,18 139:7 141:14 143:16,20 153:9,20 169:4 169:15 170:5 170:15 175:14 187:4,6 191:16 192:22 194:1 198:12 199:21 200:2,11,15 201:11,25 202:16 204:25 205:24 207:10 242:14 248:8 248:10,11,17
plaintiff's 22:17 138:12 142:11 153:7 161:6 194:6,12 195:4 203:7
plaintiffs 3:3 4:19,24 23:23 27:3,7 28:20 29:5,15 30:3,18 31:11,15,21 32:1,5,5,10,16 32:23 33:10,24 33:25 34:1,17 34:23 35:5,12 43:15 45:5 54:21 85:14 86:10 87:8 100:1 105:18 105:21 119:6 127:24 128:25 132:13,15 133:6 136:2,14 136:20 137:19 140:1,2,19,22 141:5 153:16 154:8 155:6,11 155:19 156:23 157:18 158:2 159:2 160:6 161:2,17,22 162:7 163:1 170:1 174:13 175:4 177:8,20 178:24 179:12 179:20 180:13 180:18 182:3 182:21 183:15 187:12 188:7 188:12,20 189:17 190:25 191:4,17 192:20 193:19 195:18 196:5,9 197:2,18,23 199:7 204:25 205:10,18 206:2 207:23 207:24 208:17 210:10 219:16 220:1 221:2 223:6,20 224:6 224:16 226:6

226:20 239:2 239:21 241:4 242:17 247:24
plaintiffs's 158:20
plan 36:4
planner's 196:23
planners 195:19 196:10 196:19
planning 36:8 99:12 111:22 138:16 187:11
plans 85:4 195:22
play 118:23 168:24
please 7:17 8:4 8:11 9:5,25 55:7 124:6,17 145:16 158:13
plg 5:13 45:12
plus 60:21
pocket 248:17 249:2
point 36:1,5,8 42:21 43:5 51:24 54:3,9 62:15 96:13 106:7 107:19 108:25 111:5 114:12,22 115:8 126:20 130:6 131:5 140:13 156:21 160:1 169:10 178:22 180:21 183:12 185:6 194:8 212:5 216:22 222:3 222:22 224:23 230:11 235:23 238:18 239:8,9 241:8
pointed 40:7,11 208:4
pointing 215:18
points 108:15
policies 211:17 211:24 212:8
policy 5:22 6:6 88:17,20 98:23 165:15 166:8 166:21 168:1 173:4,15,21 174:1,5 175:8 175:12 191:14 225:4 227:15 228:9 231:23 232:3 238:4
poor 9:24
population 94:21 146:21 147:9,11 148:18,21,25 152:12,15 204:6,20 228:23
portion 187:25 207:19 229:19 233:14
portions 49:9 54:2
position 65:22 157:17
positions 66:16
positive 70:5
possibilities 239:15
possibility 34:22 169:11 191:10
possible 27:15 42:3 56:23 82:4 137:9 142:14 202:7 203:2 246:5
possibly 85:9 244:9
potential 116:2 116:7 118:15 136:25 141:6 191:3 233:9
potentially 118:9 119:22 198:15
practice 103:17
practitioners 212:13
precise 26:6
predict 90:8
predictions 143:19
predictive 246:17
prefer 49:19
preferred 212:13
prejudicing 71:6
premise 188:15
prep 26:16 56:7
preparation 25:25 48:3,12 185:25
prepare 25:5 39:21
prepared 45:21 55:25 103:7 142:24 162:5
prepares 45:19 45:23
preparing 26:9 41:13 50:11 53:23
presence 155:8
present 3:24 4:11 12:18 101:15 249:10
presentation 81:15
presentations 77:7,11 78:13 78:18 80:5,18

81:20 82:8 83:13 84:7,16 84:25
presented 46:10 129:22
presenting 208:25
presently 10:20
president 60:25
president's 238:14
press 6:8 234:18 235:1 235:20 236:4 236:11
pressure 237:9
pressures 239:10
presumably 191:15
presume 141:14 155:21 221:1
presumed 153:21
presumptive 226:3 232:6
pretty 46:9 90:14 103:15 104:8 125:14 130:23 131:9 144:3,8 174:25 179:14
previous 245:17
previously 10:18 110:19 125:13 171:18 184:16 226:3
primary 73:16
principle 114:15
principles 77:18 113:14
prior 28:3,9,11 41:13 112:2 143:14 160:18
private 114:6
probabilities 194:17
probability 162:2,23 175:6 195:11
probably 26:6 30:22 44:20 59:8 60:19 62:14 63:5 66:9 73:13 78:9 81:22 87:20,23 88:14 89:4,6 110:4 124:1 131:8,9 132:22 142:12 176:14 180:20 181:12 200:20 212:13
procedure 2:4
procedures 5:15 8:25 92:22 93:15,25 94:14 171:19 172:9 189:24 211:17
proceed 34:6 81:1
process 6:11 95:14,16,24 126:3 149:11 150:5,11 151:4 163:19 165:12 225:10 234:23 236:7
processes 163:23
processing 92:5 92:12 94:2
processors 166:16
produce 150:23 151:2
produced 12:17 24:24 35:16 45:10 51:13 52:9 53:25 57:1 179:19 180:5,8 220:20 235:17
producer 58:5
producers 14:16
product 18:21
production 4:13,17,22 23:25
products 18:15
professional 61:14 67:7,11 71:11 73:22 101:11 251:4 251:22
professionali... 101:14
professionals 77:22 78:8
professor 114:6
profits 75:24 76:4 77:18 79:16,16 81:4
prognosis 197:17,23
program 169:17 170:17 215:16,19 216:3 218:3,16 221:21,23 222:1 228:20 229:5 233:6
programs 63:19 89:16,23 90:2,22 217:8 217:15 219:3,6 221:12,19 222:3
progress 174:19 190:23
projection 118:12 141:22

prologue 5:15 93:14
pronouncing 18:1
proof 150:20 159:19
property 18:6 62:8 75:13
proposed 109:5 224:25 234:8 235:14 243:16
protection 16:20
provide 24:9,17 150:7,20
provided 24:15 36:16,24 38:25 42:9 74:6 80:2 81:17 203:14 213:21
provides 166:15
providing 23:19 71:15
proving 84:8
provision 189:12
prudent 173:2
psyche 146:3
public 252:24
publication 77:17 114:15 228:7 238:3,9
publications 41:5 77:7,11,15 77:16 78:12,17 80:4,17 81:19 82:8 83:12,19 84:3,15,25 113:13
publicly 212:7 235:18
published 82:20
pull 23:22 121:9 195:25 222:20
pulling 133:21 172:5,6
purchasing 76:20
purpose 71:15 138:23 166:14
purposes 156:20 159:22 220:25
pursuant 2:3,4
pursue 155:12
pursuing 60:6
pushed 13:14
put 30:6 36:7 49:19 63:14 73:19 129:7 248:2
putting 95:22 109:17 201:8,9

q

qualify 215:2 219:18
quantitatively 64:8
quarters 231:2
question 9:6,15 9:23 10:1,3,4,9 10:10 13:7 17:4 43:3 44:12,24 46:14 50:4,9 54:8 60:7 74:21 75:1 82:11 87:1 90:6,19 92:8 98:3,6 99:17 100:2 101:6,7,8 101:9 102:13 105:9 108:23 114:14 116:24 128:13 130:22 135:8 140:15 146:15 149:18 152:8 155:1,3 155:15,17,18 157:16,23 158:13,14 159:7,8 162:10 162:10,13,18 162:19,22 170:21 178:3 182:8 183:13 183:22 184:11 184:14 185:13 191:8 194:4,7,9 194:25 195:2,7 195:15 202:15 214:21 216:25 221:1 247:6 249:12
questionnaire 91:4 92:1 150:13
questionnaires 91:21 180:12
questions 9:3 9:19 10:15 103:2 150:2 162:16 175:6 185:23 186:13 191:7 241:23 242:1 246:9
quibble 101:12
quick 124:16
quickly 55:20
quite 18:13 19:23 61:24 86:24 90:10 103:9 167:7
quote 106:22 122:11

r

r 7:1
race 204:18
racine 3:10
raise 191:8
raised 86:6
raleigh 3:21

range 74:9 183:3
rare 190:7,15 191:17,21
rates 224:15 225:16
rather 95:10 212:9
rating 70:10,11 70:19 71:1 95:10,17,23,25 149:19,22 161:6 163:25 164:10,16 165:6 167:5 176:24 193:8 193:19 199:8 199:16,22 200:3,4,12,13 200:20 201:12 201:15,17 202:1,2,9,11,18 210:21 214:24 215:2,8,23 216:11,21 217:19 218:4 218:20 221:3 222:8 234:9
ratings 70:16 94:19 95:4,14 107:2,7 160:17 161:2,17,24,25 162:7 163:2,16 165:10 169:12 177:13 179:4 179:17 180:12 189:2,6 192:22 192:24 193:1,6 193:9,14 194:6 198:16,19 206:10,12 223:5,19 227:3 245:7,9 247:14
ratio 208:20
rational 170:5 170:13,20,22 171:3,11
rationale 170:14
reached 54:2,9 54:14
read 39:2 77:21 86:11,13 94:10 96:20,23 99:2 105:23 106:1 110:16 111:15 116:9 126:6 130:7 134:20 146:7 157:20 158:14 167:1,6 167:9,22 173:10 177:3 182:18 185:3 186:24 188:4 190:10 198:23 210:25 215:4 216:20 217:2 217:24 218:12 225:7 226:8,17 227:5 228:11 228:25 229:19 230:3 231:5 232:8 235:4,20 243:22 245:16 252:5
reading 29:22 33:9 38:8 111:9 216:4 220:11 225:13 230:2
reads 166:19 252:5
real 124:16 157:16
realized 124:10
really 19:9 118:3 123:20 124:2 131:14 154:14 175:7 198:8 216:25 246:5
reason 10:7,13 46:3,7,16,19 55:22 168:17 188:16,18 198:11 220:15 229:8 231:16 252:5
reasonable 10:6 76:1 100:19,22 101:25 102:10 102:13 103:13 105:6 108:22 139:15,17,21 143:25 163:9 169:25 174:21 177:15 178:7 178:14 179:3 181:3 189:4
reasonably 169:15
reasons 220:13
reassess 240:15
rebuttal 5:1 28:20 29:7,16 90:11
rebutted 89:4
recall 14:11,20 14:23 15:14 18:25 20:3 27:20 35:10 38:19,21 40:13 41:20 42:2,5 49:13 50:6,8,13 52:2,3,14 54:16 55:15,19 56:5 56:24,25 61:18 62:12,23,25 74:15 84:10 87:2,4 88:4,22 89:24 90:13,25 91:14,19 93:17 94:15 137:10 141:18 145:11 148:2,5 150:17 166:13 171:19

171:21 180:14 180:15,22 188:14 193:21 193:22 196:20 197:7,12 198:4 199:9 201:3 210:6 217:5 236:24 246:8 246:13
recalled 190:8 190:14 191:18
receipt 215:3 215:16,24 221:20
receive 12:11 30:11 53:21 70:15 93:11 170:6,6,23 200:15 214:21 214:24 215:9 218:9,20 221:5 229:17 230:19 231:10
received 22:3 23:7 30:10 42:8 52:4 55:9 57:12 145:17 181:4 201:14 209:14 209:22 232:21
receiving 153:16 154:8 154:17 171:6 198:21 199:2 201:12 211:18 230:15 232:13
recently 159:2
recess 68:6 124:20 192:14 214:5 241:18
recipient 70:5
recipients 230:22 231:3
recite 144:23
recited 25:19
recognize 132:9 189:8
recollection 19:6 53:20 85:5 88:15 91:24 136:17 150:16 185:18,20 186:3,9 236:13 238:11
recommendat... 164:9,15
reconsideration 157:6 190:22
record 7:4,8,21 8:11 22:13 42:16 54:17 56:15 68:5,8 124:5,16,19,21 134:3 136:18 172:8 192:13 192:15 213:23 214:1,4,7 228:6 238:3 241:17 241:20 249:25 251:9
records 18:14 179:12,15 180:17 181:2 184:3 186:22 187:6
recoveries 85:14 86:10 87:7
recovery 242:23
reduce 85:14 86:9 87:7 236:23 237:10 240:14
reduced 167:19
reduces 116:6
reducing 153:6
reduction 116:5,12 202:11,12 218:11,22 239:13
reductions 240:13,25 241:5
redundant 71:5 103:20
reevaluated 95:20,23 164:5 191:9
reevaluation 157:6 174:14
reexamination 176:9 177:16 178:10,25 179:8 181:18 181:23 182:12 188:1,22 190:9 190:15,21 191:18
reexaminations 176:16,21,25 177:2,8,21
refer 32:4 173:2
reference 195:18,20,21 195:24
referring 25:15 32:22 50:12 52:6 54:21 55:1 63:9 64:11 66:4 67:23 120:7,8 125:12 179:15 212:10 213:14 213:17 215:17 221:17 224:1 234:12,15,18 235:2 246:6 248:20
refers 32:15 216:20
reflective 119:17
refrain 11:11

refuse 112:8
regard 44:15 73:21 86:8 99:23 205:17
regarding 14:15 17:19 35:11 97:4,17 97:24 111:24 137:18 139:25 141:5 166:17 169:21 204:9 211:18
regardless 75:5 194:20 195:8 237:3
regards 15:4 16:13 17:12 33:1 35:4 81:16 85:12 87:6 88:11 96:25 99:20 138:12 138:13 197:16 197:22
regional 166:16
registered 251:3,22
regular 134:17
regulation 187:25
regulations 41:10,24 87:16 87:24 88:13 94:5,7 187:2
relate 217:12
related 15:18 16:7,8 17:3 18:13 20:5 21:7 41:10 75:15 76:16 77:3 92:13 94:3,22 152:13 153:21 153:21 154:2 154:25 156:2 157:4,12 158:22 194:22 195:9 198:13 198:15 206:13 206:14 215:22 217:10,12,20 222:1
relates 1:4 57:24
relationship 79:20
relative 251:14 251:15
relatives 17:18
release 6:8 234:19 235:1 235:21 236:4 236:11
relevant 34:17 131:14 162:9 182:7 185:18 186:5 233:19 240:3
reliable 123:3 123:18 125:23 126:15 143:25
reliance 143:17
relied 41:14,24 87:15 96:21 121:13,19 125:1 193:3 228:4,19
rely 40:10 109:23 112:4 143:12 144:21 206:1 212:8
relying 107:25 109:9,19 110:8 113:14 114:15 115:9 140:3 207:1 213:3 219:9 238:9 240:18
remainder 108:18 230:5
remaining 167:20
remains 113:25
remedies 96:8 96:11
remember 14:23 220:7
remind 14:2
remote 3:1 7:10 7:17 9:10
remotely 1:14 7:15,16 9:8 10:19 11:17
render 106:15 142:7 143:7,12 205:11 206:15 243:20 245:2 245:19,24
renders 206:22 207:12 208:9
repeat 69:17 100:10 123:10 158:13
repeating 148:13
rephrase 10:1 247:8
report 5:3,19 14:13 25:7,17 26:8 28:15 32:2 32:4,11,18,23 33:7,9,14 35:15 35:17 36:2,16 36:17 39:6,11 39:16 40:10 41:5 48:8,18 49:7,10,24 50:2 50:6 51:2,20 53:24 54:10 56:10,15,19 71:25 85:25 86:3 96:21 98:14,20 100:17 101:12 105:12 108:19 109:9 120:1

121:22 127:9 133:9 134:4,11 135:22 136:10 139:13 144:11 144:22 145:5 157:16 159:1 177:2 185:25 191:8 193:5 194:18 196:1 198:7 206:19 207:9,19 209:12 210:17 213:3,12 214:16 216:7 219:10,14 222:21 227:8,9 227:23 228:3,4 229:3 231:9 232:11,20 233:22,23 234:5 236:12 238:9 242:9,25 243:24 244:17 248:6 249:10
reported 1:23 198:18 240:13
reporter 7:22 9:4 158:12,14 251:4,4,22,23
reporting 7:17
reports 35:11 35:23 39:21 40:4 41:15 47:22 48:4,13 49:15 50:17 51:25 52:3,5,6 52:7,9 53:1,4,5 53:5,9,12,17,25 54:18 55:1,8,13 86:7 101:2 103:8,11 105:18 126:25 132:13,21 134:7 141:4 157:18 182:15 196:2,10,18 197:2,8,13 237:4 242:14
represent 38:23 213:20 229:15 249:7,9
representative 66:17 67:10,18 67:20 71:10 72:1 73:9 149:14,19,23
representing 3:3,18 8:17
request 4:13,16 4:21 10:8,9 23:25 173:5,15 175:3 190:21
requested 173:9 174:7 176:18 179:8 181:17
requests 23:14 23:16,20 24:11 24:13,23
require 88:12 105:7
required 101:3 150:20,22 151:2 167:2 176:21 177:1
requirement 129:21 184:7
requirements 126:3,19
requires 175:20
requisite 184:4 186:23 187:7
reread 237:8
research 39:23 39:24 40:3,5,6 40:8 45:25 48:5 48:6,9,15,22 109:13
researched 41:22
reserved 250:4
reshare 125:4
residency 117:13
residuals 14:16
respect 31:14 32:18,20 42:1 87:1 221:11
respective 29:18
respond 10:15 46:15 85:11 86:5,16,18 162:15
responding 30:14,16 31:13 237:6 244:22
response 26:7 37:21 42:8 83:18,21 103:2 162:13,14
responses 4:20 22:18 23:19,24 24:4,7
responsible 50:11
responsive 24:10,12,23
rest 157:20 235:4 245:5
result 22:2 107:17 118:16 202:11 208:3 238:14 245:12 247:2
results 81:10
resume 56:18 56:21 71:13 76:23 77:2
retention 24:18 42:9
retire 220:17
retired 220:13 220:16
retiree 210:20 215:21 216:10

retirees 217:19
retirement 6:4 68:18 134:18 206:11 209:9 209:14,17 210:12,24 211:19 212:1 212:25 214:12 214:22 215:1 215:10 216:14 218:8,10,21 219:14,18 220:2,8,24 221:5 222:7
revealed 167:16
revenue 69:11 69:14,21 70:1,4 140:10
review 5:25 25:18,22 37:15 38:12,16 53:22 55:12 56:8 78:2 78:4 85:11 86:5 86:15,18 101:16 102:23 133:3 141:3 172:11,17 173:1,4 179:12 182:7 185:18 185:24 190:2 195:16 196:9 196:17,22 197:1,10,19 217:15 235:15 244:19,24
reviewed 23:16 24:6,7 25:7,7 25:14,20 77:15 77:18,20,21 78:1 110:24 121:18 122:1 132:20,22 134:8 167:17 180:2,16 181:1 197:8,12
revised 247:5
revisited 95:19
rework 49:16
rewrite 49:16
rewritten 50:5
rfe 167:15
rfes 166:18 168:3
richard 33:6
ridge 3:14
right 9:18 10:13 12:23 13:20 17:23 18:3,7 23:8 24:20 25:4 28:21 32:6 34:1 39:2 41:11 42:10,13 45:1,9 47:3 49:7 50:8 51:17 53:1 55:12 56:9 57:6 58:3,6,9,15,18 58:22 59:2,7,10 59:22 60:12 68:4 71:18 72:15 73:24 74:10 76:16,21 76:25 77:12 83:25 85:10,10 85:22 86:2 93:1 104:13 106:11 106:16 107:4 108:16 109:2,7 110:6 113:5 115:23 116:4 119:19 120:9 122:8,20 126:18 132:11 132:16 134:2 134:12 140:9 140:10 141:24 142:20 144:12 144:15 145:6 150:18 157:15 157:23 160:16 161:12 165:14 171:5 172:16 172:19 174:23 176:8 181:5 184:15 192:12 192:18 208:25 212:18 219:21 220:5 222:19 222:21 225:16 227:4,6,9,11,16 227:21 228:12 228:15,16 234:24 235:10 237:5,18 238:2 238:10,15 240:16,22 241:16,25 247:23
rising 228:21 230:14
road 58:9
role 24:3 48:2 48:11 60:15 61:9 77:24 97:21 118:23 138:12 147:18 149:16,25 168:24 243:8
roles 60:24
room 10:25
roughly 26:13 26:14 59:8 77:13 198:21 199:1 204:19
routine 164:2 164:20,22 165:4 166:17 169:4 199:23
routinely 190:8 190:14
royalty 67:3 72:22
rpr 1:23
rule 101:3

rules 2:4 8:25
running 248:5
rybolt 1:12 2:3 4:14,18,23 5:3 5:5,7,11,13 7:13,25 8:7,13 8:14,21 10:13 11:23 18:17 22:1,12 23:5 24:1 25:4 29:4 29:18 37:7 40:15 45:9,12 68:10 85:11 87:12 93:13 121:8,11 124:24 133:20 157:16 162:12 166:7 172:13 177:18 192:3 192:18 212:22 214:9 227:21 236:4 241:21 241:25 249:19 251:6 252:3

s

s 4:1,9 7:1
sake 17:8 32:9
salary 150:23 151:6
sale 18:14 79:18
sales 79:12,14 79:17,20,21,21
samping 15:23
sample 163:9 204:5
saving 234:8,11 235:2,14
saw 232:15,25
saying 30:22 31:5 79:6 87:3 91:10 92:24 104:15 112:18 119:21 130:24 132:3 138:6 148:20 160:21 175:19,19 186:16
says 38:11 51:22 75:14,20 76:8 98:20 110:24 113:24 115:16 122:10 122:15 134:14 168:9,15 174:10 176:11 181:15,22 182:1 187:9 189:1 190:1,18 191:22 211:6 215:13 216:1 218:6,24 219:20 223:2 226:18 228:17 229:7 230:3 231:14 234:10 234:25 236:20 237:22 238:7 240:17,23 242:13,19,20 245:6 248:14
scenario 208:25
schedule 193:9
scheduled 177:1,9,22 178:4,20,25 181:18,23 182:12,13 188:1
scheduling 166:17 172:25
school 40:16 59:23
scientific 110:7
scope 36:3 108:15 196:25 236:16,23 249:9
scott 33:4
screen 22:22 29:11 43:13 98:16 121:9 134:3 166:2 184:21 227:24 242:6
scroll 23:10 47:15 57:4 120:2 217:7 218:7
scrolling 53:3
second 5:7 6:13 14:17 26:14 37:24 44:2 52:24 71:20 106:6,7,25 107:25 111:5 129:18 222:23 232:2 235:5,8 235:11 237:15 237:16 238:5 238:14
secrets 66:23 72:9 75:17
section 5:24 23:11 53:1 57:5 66:17 67:6 71:9 73:9 74:12 76:6 76:7,13,13,24 77:1,3,5 96:25 97:1 105:13,14 111:19 112:4 122:4,8,20 125:7,9,16,18 125:22 134:11 145:6,20,24 166:14 167:13 172:10,16,21 176:9 181:6,7 181:11 182:14 184:23 185:15 185:21 186:15 206:6,19 228:14 230:14 231:21 233:4

233:18,19 248:5
sections 48:21 49:24 50:6 75:12 118:10 145:8 185:19 186:5 233:17 244:17
securities 76:14 76:16,19,21,21
security 229:14
see 16:17 17:14 45:13,13 47:15 49:1 51:4,7,8 53:14 55:8 66:18 72:2 77:8 83:24 101:4 122:5 125:9 129:16 155:10 166:1,10 172:12,14,22 173:19 177:13 179:5 181:8,9 184:24 185:2 189:2,25 190:3 190:4 191:11 198:8 210:2,3 211:16 213:12 218:23 225:13 230:23 231:1 231:24 233:6 233:16 234:14 235:5 238:1 241:14 242:5 242:10,13 243:15 245:6 247:9,13 248:4 249:4
seeing 180:15
seek 170:6 171:5 199:23
seeking 30:12 59:14 137:25 155:6,19 178:10
seem 75:22
seems 31:19 91:15 221:14
seen 29:9,23 35:2 56:6 93:16 115:4 145:24 150:12,15,17 165:17 166:11 168:22 176:12 179:17,18 180:7,11 181:10 185:3 185:14 196:13
select 25:19
selected 67:7 71:10 73:21
selective 67:10
semantics 128:14,18
senate 234:19 235:21
senator 236:15 236:21
sense 17:9 30:20 32:21 77:20 84:13,14 117:8 152:13 194:17
sent 22:14 23:15 24:6 43:15 44:13 55:25
sentence 105:8 115:15,24 116:8 157:20 157:25 166:19 167:8 182:1 216:1,9 219:20 225:7 226:18 230:2,5 245:18
separate 118:10 119:20 130:17,18 139:2 140:10 156:12 157:8 178:9,21 242:22
separately 114:1,24 140:20 155:6
september 51:5 51:10
served 219:17 232:7
serves 94:1 138:23
service 6:9 149:14,19,23 154:9 167:14 168:2 181:17 183:16,23 184:4,23 186:16,23 187:3,7,13 192:23 194:1 194:12,21 195:4,9 215:22 217:21 225:10 226:4 234:21 236:5
sessions 26:9,12 26:16
set 23:14 94:5 212:9 232:2 244:20 251:7 251:17
sets 36:3 52:3,5
settle 71:17
settled 35:13
several 13:14 26:7 43:4 161:21 185:17
severed 183:25 186:19 187:5
severity 176:20
share 22:22,25 23:2 29:11 43:12 71:23 85:10 98:16 121:9 134:2

157:15 166:2 176:3 184:21 214:15 227:24
shared 145:19 196:15
shareholder 76:19
sharing 25:2 30:1 45:7 71:23 93:2 144:10 210:18 212:17 222:19 227:20 240:11 242:6
sheet 252:1
sheets 180:12
shop 45:7
show 43:21
showing 184:1 186:20 187:5,6
shown 174:17 182:13 184:2 186:21 234:13
shows 229:4
shrinking 228:22
signature 43:22 43:23 250:4 251:20 252:19
signed 43:20 50:25
similar 21:9 63:4 74:5 81:9 87:24 101:3 201:4 249:12
similarly 163:10 197:9
simple 157:16
simplicity's 32:8
simply 11:9 12:16 70:21 85:25 139:7 140:3 146:11 161:5 162:12 177:19 187:18 200:10 247:20
single 19:18 84:21
sit 19:4 34:15 35:22 36:12 42:4 51:9 53:16 55:17 56:25 68:22 73:13 87:4 91:18 97:3 99:11 101:19 111:22 146:18 168:17 178:23 183:8 188:16 201:20 233:20 238:15,22
site 14:19
sitting 34:24 46:19 52:11 92:17,23 93:1 93:17,21 94:15 145:11 146:22 147:13 148:14 162:5 197:14
situated 163:10
situation 126:13
six 227:7
slam 6:9 234:21 236:6
slesnick 120:13 121:15
slows 23:1
smc 15:22
smith 3:9
social 229:14
somebody 19:14 117:13 123:23 201:4
someone's 116:21 117:3,9 164:15
soon 185:6
sooner 205:1
sorry 25:12 29:11 31:24 34:4 38:10 43:7 47:14 65:12 68:1 69:2 80:7 80:23 88:1 92:20 100:9 101:8 103:4,5,6 119:11 123:9 124:9 133:21 139:11 145:1,3 149:20 151:22 153:12 170:19 175:11 184:10 184:25 185:13 187:23 191:24 192:8 194:24 202:24 208:12 210:18 213:11 219:12 222:12 226:17 235:10 237:19,20 239:16,17,22 243:14
sort 13:2,10 14:20 19:11 49:12 64:5,7 86:25 103:20 157:4 179:6 235:8 243:25 246:7 249:13
sought 28:11
sounds 13:20 85:22 98:9 138:6
source 42:23,25 233:12 235:9 235:11
sourced 233:9
south 3:15
southern 59:7
sparks 33:6 34:12
speak 105:2 235:2
speaking 7:18 13:24 14:21 15:5,6 16:15

39:9 75:22 78:23 108:14 110:22 115:20 117:2 126:9 161:4 236:15
spec 220:17
special 156:19 201:5 217:10 217:12 222:1
specialty 15:22
specific 19:17 20:12 26:9 30:7 31:1,1 32:22 41:20 44:20,23 53:19,20 88:15 90:20 91:1,24 94:22,25 96:12 109:6,11,21 110:10,13,25 116:16 138:17 149:25 163:22 183:22 184:7 184:13 185:20 187:19 197:2 197:11,24 204:6 211:17 211:22 215:19 217:15 219:6 247:8
specifically 9:14 32:15,25 42:1 49:13 50:13 52:15 54:16 56:24 62:24 69:3 76:24 78:23 83:17 84:7 85:6 85:12 86:3,7 87:1,6 88:6 91:14 95:20 109:18 141:17 145:11 149:15 161:12 166:13 180:22 183:5 183:18 188:14 194:3 195:14 195:22 206:20 214:20 221:22 232:4 233:16 236:24
specifics 148:5 149:10 150:10 151:4 165:12 203:1 219:6
specified 202:6
speculating 91:16 201:6
speculative 106:10 142:8 143:13 205:25 208:10 239:14 243:18 244:25 246:2
spell 26:20
spending 228:19 229:15 229:24 230:7 230:10
spoken 137:4
spot 185:7
st 57:15,19,21
staff 45:22
staller 5:19 27:19 54:22 127:6,22 129:5 132:21 133:4 135:9,10 137:5 141:19 196:5
staller's 55:13 126:25 128:8 134:4,10,22 136:23 141:3
stand 14:8
standard 90:15 101:20 103:15 126:1,17 143:22 204:10 204:14
stands 198:11 215:24
starbucks 119:15
start 14:3 28:2 61:17 89:21 144:3,9,16 149:8 157:22 190:5
started 60:17 61:8,15
starting 130:6
starts 129:15 129:18 146:1 186:15 230:18 232:2
state 8:12 39:20 80:3,10 81:17 156:8 185:16
stated 156:11 226:1
statement 46:9 110:13 121:22 126:11 139:21 139:22 169:19 175:2 217:1 219:1 235:9 240:21
statements 156:17
states 1:1 8:17 12:18 38:17 45:11 51:25 52:9 53:25 86:6 94:6 106:9 136:7 140:4 166:15 167:13 169:9 173:2 176:16 182:11 187:25 196:18 197:10 203:6 205:24 208:7 209:6 214:20 215:21 228:19 229:13
static 181:24 182:4

statistic 161:23 174:22
statistical 74:8 204:5
statistics 94:22 152:12 174:17 189:5 203:15 204:2
statute 115:16
statutes 39:15 39:20,20 40:9 87:16 88:13 94:5 111:24 112:9
stay 200:20
stayed 168:11
stays 61:2
stem 155:20
stemming 16:13 155:7
stenographic 7:21
stenographic... 251:10
step 61:4 75:2 79:5 100:12 125:3 149:2 195:16
stephen 120:13 121:15
stepping 87:11
sticking 56:10
stop 25:2 29:25 63:6 88:3 91:17 136:9 144:10 159:5 171:5 212:17 222:19 227:20 240:11
straining 191:6
stream 21:20 70:5 171:14
streams 63:19 140:10
street 3:14
stressing 194:8
stretch 80:13
strike 136:21 140:16 141:2 162:13 218:17
strong 130:1,3 186:9
struggling 31:13
studied 104:3,6
studies 41:1,2
study 198:2
stuff 66:5
sub 249:13
subheading 231:23
subject 13:24 14:12 15:15 20:21 44:4 61:22 78:15 91:1 159:19
submit 102:22
submitted 24:19 46:5,12 46:18 49:10 51:4 56:19 157:10
submitting 157:3
subpart 5:23 172:9 190:6
subpoena 4:12 4:15 22:3 23:6 42:8
subscribed 252:20
subsequent 157:9 158:25
subset 190:25
substance 26:3
substantial 174:25 248:13
suggest 221:14
suggesting 201:9 206:20 240:7
sum 55:19
summarized 244:18
summarizes 249:15
summary 105:13 108:21 108:23 242:12 249:7,12
summerton 16:16
supplemental 5:5,7 36:25 37:8,25
support 109:16 109:22 113:15 114:16,22 115:9 121:21 224:24 240:21
supported 60:17
suppose 46:8
supposed 43:8
sure 9:12 10:2 14:3,5 19:13 22:12 30:23 41:20 44:11,13 45:15 56:13,17 63:18 64:24 65:19 66:4 68:15 69:10,18 71:6,19 73:15 78:3 82:7 84:1 84:14 89:21 100:12 105:3 106:3 108:20 114:13 118:18 123:12,13 131:2 133:24 142:21 145:25 149:22 151:1 165:3 170:20 178:17 181:12 191:1 197:25 199:5 201:16

203:25 207:20 209:1,11 213:7 220:5 222:2 237:6 247:12 247:22 248:15
surgery 117:14
sustained 156:3 217:23
swear 7:23
switch 213:11
sworn 7:16 8:1 251:8 252:20
symptoms 182:13
system 146:4 234:9

t

t 4:1,1,9
table 11:8 38:5 38:7 247:4
tables 38:13 50:10,12 84:23 85:7 88:25 89:3 89:11 144:1,5 203:14,21 204:1 208:7 246:14
take 10:10 11:4 66:2 100:12 124:7 125:3 191:23 195:23 204:17 241:13
taken 2:3 68:6 91:7,15 124:20 192:14 214:5 223:18 239:12 241:18 245:21 251:10
talk 82:14 192:9
talked 26:7,9 44:20 89:2,6 90:11 110:19 114:17 132:19
talking 19:10 46:8 64:3,4,5 65:24 71:2 79:13 116:22 120:9 128:15 140:8 149:5,6 192:19 197:4 200:6 221:18
target 32:19
tax 225:21
taylor 1:23 7:23 251:3,22
team 25:11 26:15,25 39:24 40:6 46:25 50:1 50:17 91:20
teams 60:18
technology 227:2
telephone 16:19 17:5
tell 14:14 26:4 26:18 49:9 54:1 60:14 68:12 69:14,21 91:9 91:25 92:16,23 92:25 93:21 110:23 147:6 148:15 207:18
telling 26:3
ten 77:11 183:17,19,25 186:18 187:4 187:14
tend 60:25 131:4
tender 241:23
tenured 114:5
term 6:13 32:9 32:11,15,15 78:22 79:5 80:3 100:22 135:21 135:22,23 136:8 137:13 165:16,18 235:6 237:17 238:5,15
termination 20:5
terminology 133:10
terms 63:18,19 64:9 147:7
terribly 37:22 165:19
test 180:21 186:12
tested 114:2 203:22
testified 8:2 13:17 18:17,19 18:24,25 19:3,5 19:8,16 20:1,4 20:12,20,23,24 91:1 118:8 153:1
testify 20:7,22 86:22 88:24 89:15 90:1,21
testifying 8:19 11:24,25 13:25 22:1 61:12,16 61:17 65:21,25 66:8,12 67:17 67:22 73:24 75:6,23 76:3 82:23 246:13
testimony 4:11 12:4,4,17,21,22 13:2,11 14:21 15:16,22 16:5 16:13,22 17:12 17:16 18:12 21:23 28:16 35:3 38:16 71:15,17 72:5,9 72:13,18,22 73:1,5,17 87:5 185:25 196:14 196:23 251:9

thank 13:8 26:22 59:13 121:5 141:1,1 160:16 222:17 249:16,19,21
theater 57:10 58:14 59:2
theatre 58:9,18 58:21
theoretically 200:25
therapist 59:17
thing 30:23 31:6 41:23 65:6 103:25 104:1 114:9 124:5
things 13:14 15:1 21:10 40:7 49:19,20 61:14 64:20 65:15 66:1 76:18 79:23 84:12 90:19 95:5 98:17 113:25 158:6,16 160:13 209:5 240:5 241:15 244:15
think 10:6 14:14 15:6 20:9 24:14 25:20 26:8,13 28:5,8 30:15,22 31:5 32:1,13,18 34:12,20 39:4 41:7 42:22 43:3 43:22 44:20,23 46:1,2,10,20 47:4,19 48:21 49:22 52:7 55:24 57:21 59:16 61:19,19 62:11 63:3 64:2 67:13 68:2 69:24 71:3,5 73:14,19 74:20 76:12 78:7 80:13,14 82:14 82:24 83:17,22 84:6 85:4 87:21 89:4 90:10 91:7 91:23 92:2 94:20,23,24 95:8,9 96:6,22 97:7 98:9 99:20 100:25 101:2,4 102:3,4 104:7,7 104:14 105:3,4 105:8 106:19 108:17,22 109:16 110:3 116:3 117:14 117:18,24 118:8 119:16 120:24 122:18 122:18,23 123:15,21 124:4 125:14 126:12 127:10 128:5,10,13 129:5,7 130:8 130:13 132:2,5 132:8,18,19 133:11 135:5 136:24 137:2,3 137:21 138:5 138:21,22,24 139:9,12,12 141:7,16 142:19 145:10 148:1 149:24 150:4,9,14 151:19 153:1 153:12,24,24 154:4,21 155:16 156:1 156:14 157:1,2 157:9 159:1,11 159:18,19 160:12 161:20 161:24 162:1,9 162:14 164:12 165:2 169:10 169:19 171:2 174:9,16,21,22 176:14 177:14 178:5 179:2,9 180:19 181:3 183:1 185:6 189:3 191:7,10 192:11 194:3 195:21 199:4 201:22 202:15 202:23,25 203:23 206:5,6 208:2 209:11 212:12 213:15 213:17 217:3 220:3,6,18,21 224:13 227:11 232:15 234:13 235:17 236:19 238:17 240:2 243:4 244:13 244:13 245:21 246:2,3,5 249:11,14
thinking 59:20 81:13 88:6
third 15:8
thought 239:18
threatened 242:23
three 13:21,25 46:25 60:19 81:9 108:14 118:10 125:11 185:10 231:2 249:6
thrown 71:18
tie 109:5,10,20 110:9
tied 110:25
time 7:8,9 9:9 19:25 21:11,11 44:13 46:17

47:5,6,9 49:1 56:3 59:22 60:5 61:19 62:6,7,16 66:3 83:25 93:3 134:17 151:14 154:7 155:9,22 179:5 183:18 187:20 189:3 193:6 194:6 198:14 214:7 223:10 224:5 224:11 235:15 241:20,22 249:20
times 13:17 18:23 26:4,7 43:5 135:3
timing 52:2
title 46:1 48:1 49:1 94:6,7 125:6 186:18 238:13
today 7:13,22 8:8,19 10:8,16 10:24 11:1 19:4 22:2 26:1,25 34:16,25 35:22 92:17,23 93:18 93:22 94:15 162:5 168:18 168:25 183:8 186:1 189:6 197:14 223:4 223:11 224:14 246:8
today's 7:7 25:5 249:23
together 64:2 248:2
token 114:8
took 14:7 239:7
tool 89:7
top 14:6 54:19 172:14 190:5 199:9 232:1
topic 19:3 20:13 80:15 83:20 86:23 111:6 114:12 127:22 172:16 174:2 183:10 198:2
topics 73:8 82:22
tort 62:8
tosic 53:6
total 193:7,18 198:19 210:22 216:12 222:8 230:22
totality 36:3
totals 134:18
touched 144:12 165:2
tpa 17:5,8
track 225:12 234:2 238:19 238:24,25 241:1,3
tracked 241:2
trade 66:22 72:9,14 75:15 75:17
trademark 15:18 66:23 73:5 75:15
trained 119:19
training 109:13 109:18,23 110:16 175:24
transcript 38:24 252:1
transcripts 9:20
treat 63:15
treated 64:7 69:13,20 130:16
treating 27:7 69:8
treatment 225:22
treatments 227:1
treats 114:1,24
trend 232:11,20
trends 6:6 227:14 228:9
trial 12:4,6 13:10,18
tricia 37:12
trier 129:22
tripled 228:21 229:5
trouble 135:15
true 18:8 19:7 30:17,19 129:25 144:4 169:3,23,24 179:23 191:2,3 194:20 195:8 196:22 221:3 221:25 251:8
trump 6:13 235:6 237:17 238:5
trust 17:12,13 17:20,22 21:19 64:19,20 87:21 88:7
trusts 64:18
try 100:14 122:25 158:11 240:4
trying 14:23 30:23 31:19 32:20 62:12 63:8 64:12 79:12 82:2,19 84:12 90:5 98:10 104:20 106:21 109:18 111:8 117:7,12 128:18 160:20 243:5 246:18

turn 155:10 228:12
two 26:8,14 38:3 42:22 46:25,25 47:11 52:3,5 71:12 79:23 129:8 132:8,22 158:6 209:25 217:8 222:10 230:24 231:2
type 14:21 187:7
types 65:15
typically 49:16 73:25 143:16

u

u 58:1
u.s. 3:19 8:16 30:11 62:10,18 139:8 234:19 235:21
u.s.c. 94:6 111:18 112:4 114:22 115:8
uh 23:13 49:4,8 164:23 183:20 196:3
ultimately 209:22 243:4
unable 155:11
unauthorized 18:9
uncertainties 104:13 107:21 222:24 224:25 233:21 234:6 245:13
uncertainty 104:17,22 246:10,15,22 247:20,20
unchanged 201:19
uncommon 198:17
under 11:24 19:17 27:24 29:18 51:19 66:16 89:8 96:4 96:12 97:5,18 97:22 109:4 122:20 125:21 146:4 148:10 166:14,25 167:12 181:22 186:15,17 188:2,22 189:12 191:5 193:8 204:6 217:17 218:18 239:10
undercompen... 239:20
undercompen... 175:5 207:25
undergo 164:1 174:14
understand 8:19 9:23 10:15 11:9,24 13:23 24:17 28:14,19 44:11 63:8 64:13 78:3 79:12 82:2 90:18 94:21 97:15 99:16 100:2 109:18 114:11 118:19 120:25 121:5 130:22 133:3 134:23 135:8 136:10,12 141:4 149:21 152:11 153:2 153:15,19 155:5,11 156:18 158:21 158:25 164:9 164:21 165:4,4 173:14 186:11 189:20 193:16 195:6 196:4 201:8,24 204:19 222:5 226:2,9 236:14 236:21 243:9 246:3 247:24 248:16 249:6
understanding 9:16 18:5 24:21 28:23 32:12 36:6 42:14 95:5 95:18 96:11 97:11 100:4 106:23 109:24 112:10,11,23 113:7,9 123:14 135:10 143:18 143:23 147:20 148:8,24 150:21 151:5 151:12,21,22 152:10,16,23 153:5,18,25 155:19 160:9 164:4,25 165:9 173:15 188:11 193:10,11 200:18 201:10 201:17 204:4 205:8 215:7 216:2,15 217:6 218:2,16,18 219:3,22 222:10 226:13 229:22 231:8 243:10,13
understood 10:4 12:8 13:16 14:11,17 15:20 25:24 31:18 35:2,15 39:1

43:2 51:3 57:19 78:11 80:1 83:7 95:11,13 96:15 97:15 131:13 136:22 140:24 148:6 170:21 186:8 193:17 204:8 216:24 216:24 219:8 220:25
undoubtedly 9:24
unequivocally 156:8
united 1:1 8:17 12:18 38:17 45:10 51:25 52:9 53:25 86:6 94:6 106:9 140:3 196:18 197:10 203:5 205:24 208:7 209:6
university 57:17 59:6 114:6
unnecessary 103:21
unreasonable 103:19,20 142:7 205:13 205:25 206:23 207:4,12 208:9 209:7
unrelated 107:8 153:8 194:22 201:6 245:9 247:15
unreliability 88:24
unreliable 106:16 142:22 143:8 206:16 243:21 245:3 245:20 246:1
unusual 50:3 87:9 188:3,22 189:7,11,17,20
update 56:24
updated 56:21 213:18
updating 57:1
uploading 11:17
ups 48:9,21
usa 38:4,6
usage 32:14
usc 186:18
usdoj.gov 3:22 3:23
use 11:14,18 18:10 32:9 40:4 52:8 79:5 84:16 85:1,6,12,21 86:8,18 87:6,9 105:20 124:7 128:10,23 132:14 133:10 135:3 136:8,23 148:21 158:21 160:4 193:1 207:25 208:6 238:13 242:16
used 6:18 32:11 41:24 69:7 78:24 84:19 89:3,10 94:14 101:1,5 103:14 110:1 128:20 135:22,23 137:13 149:1 203:17 206:8 220:21 246:14 247:3
useful 117:19 212:14
uses 92:4,11
using 11:4,11 11:13 63:18 70:4 80:3,19 127:22 135:21 208:19
usually 18:21 45:24,24 103:16 104:21 126:2,17 130:10,25 131:23 143:22
utilized 134:16
utilizing 134:24 135:10

v

v 16:16 18:2
va 6:2 41:11,25 42:1 63:5,15,16 68:11,12,16,23 68:23 69:7,7,13 69:15,19,22,25 87:16,23 88:12 88:17 94:18 95:3,14 111:24 130:21 148:9 149:3 150:18 153:3 157:7,12 158:7 159:21 160:9 163:9,15 163:19,23 165:14 166:8 168:1,1 169:22 170:23 171:6 176:18 189:25 190:12 191:14 200:7 211:18 211:24 212:5 212:24 214:11 214:21,25 215:9,22 217:19 218:10 221:6,13 223:18 224:9 225:3 229:4,14 229:23 230:6 232:4 240:14 240:24

va's 6:10 193:8
221:20 224:4
225:10 228:15
228:19 231:3
233:5 234:22
236:6 237:4
validate 49:20
valuation 5:16
120:14 121:13
value 98:23
137:23 244:1,3
values 98:21,25
98:25 99:6
vanslyke 3:4
4:4 5:11 27:23
30:13 31:4,23
34:2,5,19 35:6
38:22 40:12
47:13 50:21
52:12 54:4 55:3
68:14 69:1
74:19 80:11,22
80:25 85:16
87:18 89:1,17
90:4,24 92:7,14
96:5 97:6 98:1
99:15 100:8
102:2,16
104:19 106:17
108:2 110:11
111:1 112:5,22
113:6,19
114:20 115:12
116:15 119:1,9
120:24 121:5
123:8 127:16
128:1 129:1
131:16 132:1
133:7 135:1,14
136:4 138:4,20
139:10 140:5
141:25 142:10
146:13 147:3
148:12 149:9
150:25 151:20
153:11 154:11
154:20 155:23
156:25 158:9
158:15 159:10
159:17 160:7
161:9,19
162:20 163:4
163:17 164:3
165:7 166:22
168:7,13,20
169:7,18 170:8
170:18 171:7
171:12 173:12
173:18 174:8
174:15 177:10
177:23 178:6
179:1,21 180:3
182:5,25 184:5
185:4 186:2
187:15 188:24
189:13,18
190:16 191:19
192:10 193:20
194:15,23
199:11 200:17
202:4,22
203:10 205:3
205:14,19
206:4 207:5,13
208:11 209:2
210:1,13
211:20 212:3
212:11 215:11
216:18 217:13
219:23 221:8
222:14,17
223:7,12,21
224:7,17
226:14 227:18
229:10,25
230:8 231:12
231:18 232:14
232:23 233:24
236:25 238:16
239:4 240:1
241:6,25 242:4
244:16 247:7
248:24 249:16
variability 206:22
variables 246:23
varied 193:6
various 16:8
41:5 49:6 52:23
60:18,18 76:15
84:20 98:12
105:10 155:6
155:19
vary 66:10
vast 66:11
vba 30:11 31:10
31:21 32:5,9
34:1 86:9 87:1
87:6 90:2,22
92:4,11 98:21
99:7,23,25
100:5 105:17
106:8 107:16
107:21 108:8
111:11 112:15
112:18 113:2
113:15 114:2,7
114:17 115:10
119:5 132:12
138:18,22
139:6 144:13
149:1 151:15
151:22 152:1
152:18 153:8
153:15 156:4
156:15,23
157:17 158:1,3
158:18 160:5
162:6,25
169:17 170:2,6
170:16 173:15
174:1,5,13
177:7 178:24
179:12,18,19
182:2,20 187:3

187:12 188:7 188:12,19 191:15 192:21 193:19 194:11 197:17,23 199:6 200:7,10 200:16 205:18 206:1 210:23 216:13 219:16 220:20,21 221:6,12 222:25 223:5 223:20 224:6 224:15 225:5 225:22 226:6 226:12,20,23 229:4 233:10 234:7,8 239:2 241:3 242:14 243:6,15 245:12,14 248:6,19
vba's 140:22
vehicle 21:21
verbal 9:21
verbally 9:18
verbatim 106:22
verify 176:19
veritext 7:5
versa 107:18 245:13
version 213:18
versus 15:23 66:7 68:23 73:23 83:14 120:10
vet 211:11
veteran 70:15 87:12 150:7 151:11 153:2 171:5 190:20 210:22 216:12 218:3,9,19 222:7,9 238:12
veteran's 147:1 165:6 190:1
veterans 6:5,9 6:14 20:8,10,15 20:16 21:5,7 44:10,17,21 62:19,23 63:1 70:10 74:14,18 74:25 75:4,10 77:3 78:13 79:1 85:13 86:8,19 92:6,13 94:4,9 95:1,17,22,24 130:17 149:13 149:19,23 150:19 167:15 168:3 173:5 188:2 190:7,13 198:20 199:2 209:8,17 211:8 211:17,25 221:4 225:5 227:14 228:8 228:23 230:15 230:19,24 231:9 232:6,12 232:22 234:20 234:21 235:6 235:21 236:5 236:17,23 237:9,17 238:4 238:5 240:15
vice 60:25 107:18 245:13
video 7:10
videoconfere... 1:10
videographer 3:25 7:3,5 8:4 68:4,7 124:15 124:18,21 192:12,15 213:25 214:6 241:16,19 249:23
videotaped 1:10 2:2
vietnam 230:25 232:3,7
view 107:1 158:2,4 159:14 160:4 208:10
violations 15:1 17:4,8 18:9
voice 49:20
von 46:1
vp 65:1,9

w

wages 116:10 117:22 242:21
wait 9:5
walked 59:11
wallet 211:4 212:23 214:11
want 22:11 34:22 42:20 64:15 71:4,5 83:3 114:12,13 119:12 122:25 123:13 124:7 124:15 137:16 160:18 165:3 170:10,20,22 185:4 208:2 214:1 248:15
wanted 43:5 125:2 133:24 187:22
war 230:25,25
ward 3:9
wardandsmit... 3:11
water 1:3 7:12 8:18 28:6,12 49:2 195:10 252:2
way 20:8 30:6 32:10 37:17,19 45:6 49:20

63:14 67:24 78:24 82:10,16 91:19 93:19 101:13 128:4 132:7 146:17 163:24 164:13 173:25 174:12 174:19 179:23 180:8 200:1 201:21 209:13 224:4 237:1 238:23
ways 61:2
we've 12:9 29:4 33:14 35:16 36:25 42:16 43:9 45:8 80:19 93:6 120:8,19 121:11 165:21 166:7 172:18 172:21 176:2 179:17 219:15 227:22 235:24
weaknesses 245:22
website 211:7 211:12 212:9
webster 57:9 57:14,15,16,17
weitz 3:4
weitzlux.com 3:7
welch 220:17
welfare 85:3
went 57:18 59:5 169:4 191:24
west 3:5
whereof 251:17
wholly 140:9
wife 59:21
william 3:20
william.v.kot... 3:23
willing 33:11 169:16 170:15
wilmington 3:10
windfall 248:13
window 145:18
withdrew 35:14
withheld 107:16 245:11
witness 7:16,23 27:24 28:15,20 30:14 31:5,24 34:3,7,20 35:7 39:4 40:13 42:20 47:14 52:13 54:8 55:8 68:15 69:2 74:20 80:12,23 81:2 85:17 87:19 89:2,18 90:5,25 92:8,15 96:6 97:7 98:2 99:16 100:9 102:3,17 104:20 106:18 108:3 110:12 111:2 112:6,23 113:7,20 114:21 115:13 116:16 119:10 123:9 124:11 127:17 129:2 131:17,19 132:2 133:8 135:2,15 138:5 138:21 139:11 140:6 142:1,11 146:14 147:4 148:13 149:10 151:1,21 153:12 154:21 157:1 158:10 158:16 159:11 159:18 160:8 161:10,20 162:21 163:5 163:18 164:4 165:8 166:23 168:8,14 169:8 169:19 170:9 170:19 171:8 171:13 173:19 174:9,16 176:6 177:11,24 178:7 179:2,22 180:4 182:6 183:1 184:6 186:3 187:16 188:25 189:14 189:19 190:17 191:20 192:4 193:21 194:16 194:24 200:18 202:5,23 203:11 205:15 205:20 206:5 207:6,14 208:12 210:2 210:14 211:21 212:4,12 214:3 215:12 216:19 217:14 221:9 223:13,22 224:8,18 229:11 230:1,9 231:13 232:15 232:24 233:25 237:1 238:17 240:2 241:7,24 244:12 246:25 248:22 249:21 251:6,9,17
witnesses 5:2 29:7,17
word 58:23 70:4 105:25 109:25 115:14 156:7 158:17
worded 123:10
words 68:12 98:22 104:24

106:10 113:1
125:25 133:8
142:8 156:9
work 44:4
50:14 51:19
55:18 59:25
60:17 61:2,5,10
61:11,24 62:2,9
62:12 64:9 65:8
65:17,21,24
66:5,6,7,8,12
66:12 71:22
74:5,6,13,17
75:1,3,9 77:22
101:16 102:6
102:21,21
141:10 143:6,6
143:7,11,11,12
144:1 219:4
247:22
worked 17:20
19:1 20:10
48:14 49:14
58:4 60:11,16
62:5,21,22
67:15,17 70:9
89:5 175:25
worker 129:16
workforce
240:13,25
working 21:4
24:19 47:22
48:7 59:5,15
61:6,22 62:18
62:24,25 67:21
69:12,19
119:15 123:24
153:4
workings
163:23
worry 23:1
worse 174:20
write 48:9,18
48:21 198:11
writing 84:10
written 78:15
106:24 108:13
110:5 216:9
wrong 124:5
141:23 147:16
wrongful 18:18
18:20 19:5,20
20:5 21:13
76:25 79:23
82:3 84:18
wrote 226:16

x

x 4:9

y

y 46:2
yeah 16:3 19:13
47:19 58:1
65:12,13
104:14 106:21
115:13 124:9
131:2 154:4,5
155:5 169:25
184:12 195:13
213:10 214:2
220:5
year 13:15 14:7
14:24 123:24
174:23 198:22
199:3 228:22
years 15:10
59:5,8,15 60:21
67:14 109:12
167:15 168:3
174:24 175:23
182:17,24
183:17,19,25
186:19 187:4
187:14 188:2
207:21
yount 37:12
38:4,6 53:6

z

zero 100:6
158:8 159:8,9
zoom 1:14 2:3

Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate. The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

DISCLAIMER: THE FOREGOING FEDERAL PROCEDURE RULES ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY. THE ABOVE RULES ARE CURRENT AS OF APRIL 1, 2019. PLEASE REFER TO THE APPLICABLE FEDERAL RULES OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.

VERITEXT LEGAL SOLUTIONS

COMPANY CERTIFICATE AND DISCLOSURE STATEMENT

Veritext Legal Solutions represents that the foregoing transcript is a true, correct and complete transcript of the colloquies, questions and answers as submitted by the court reporter. Veritext Legal Solutions further represents that the attached exhibits, if any, are true, correct and complete documents as submitted by the court reporter and/or attorneys in relation to this deposition and that the documents were processed in accordance with our litigation support and production standards.

Veritext Legal Solutions is committed to maintaining the confidentiality of client and witness information, in accordance with the regulations promulgated under the Health Insurance Portability and Accountability Act (HIPAA), as amended with respect to protected health information and the Gramm-Leach-Bliley Act, as amended, with respect to Personally Identifiable Information (PII). Physical transcripts and exhibits are managed under strict facility and personnel access controls. Electronic files of documents are stored in encrypted form and are transmitted in an encrypted

fashion to authenticated parties who are permitted to access the material. Our data is hosted in a Tier 4 SSAE 16 certified facility.

Veritext Legal Solutions complies with all federal and State regulations with respect to the provision of court reporting services, and maintains its neutrality and independence regardless of relationship or the financial outcome of any litigation. Veritext requires adherence to the foregoing professional and ethical standards from all of its subcontractors in their independent contractor agreements.

Inquiries about Veritext Legal Solutions' confidentiality and security policies and practices should be directed to Veritext's Client Services Associates indicated on the cover of this document or at www.veritext.com.

Exhibit 793

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF NORTH CAROLINA

IN RE:	)	
	)	
CAMP LEJEUNE WATER LITIGATION	)	7:23-CV-00897
	)	

RICHARD L. BARBANO, MD, PhD
Wednesday, March 18, 2026

Remote videoconference videotaped deposition taken in the above matter commencing at 10:04 a.m. Eastern Time with the witness participating via videoconference while physically located in Rochester, New York.

Stenographically recorded and transcribed by Lisa Taylor, Registered Professional Reporter, Pennsylvania Notary Public, Pennsylvania eNotary, and North Carolina Notary Public (participating via videoconference).

_ _ _

GOLKOW, A VERITEXT DIVISION
877.370.3377 ph | 917.591.5672 fax
deps@golkow.com

A P P E A R A N C E S

On behalf of Plaintiffs:
BELL LEGAL GROUP
BY: LESLIE LAMACCHIA, ESQ.
PATRICK TELAN, ESQ.
219 Ridge Street
Georgetown, SC 29440
(843)278-5852 #246
llamacchia@belllegalgroup.com
ptelan@belllegalgroup.com
(participating via videoconference)

On behalf of Defendant:
UNITED STATES DEPARTMENT OF JUSTICE
BY: ELIZABETH PLATT, ESQ.
JOSEPH P. TURNER, ESQ.
JESSICA ANS, ESQ.
1100 L Street NW
Washington, DC 20005
(202)305-5871
elizabeth.k.platt@usdoj.gov
joseph.b.turner@usdoj.gov
jessica.i.ans@usdoj.gov
(participating via videoconference)

– – –

Also Present (participating via videoconference):
Judy Diaz, Videographer

_ _ _

E X A M I N A T I O N I N D E X

WITNESS:	PAGE:
Richard L. Barbano, MD, PhD	
Examination by Ms. Platt	7
Examination by Ms. LaMacchia	83

_ _ _

E X H I B I T I N D E X

EXHIBIT:	DESCRIPTION:	PAGE:
1	Amended Subpoena to Testify and Document Requests	10
2	Plaintiff’s Objections and Responses To Defendant’s Notice of Videotaped Deposition of Richard Barbano, MD	12
3	Barbano Expert Report	17
4	Plaintiff's First Amended Designation and Disclosure of Phase III “Damages and Offsets” Rebuttal Expert Witnesses Pursuant to Fed. R. Civ. P. 26(a)(2) and the Court’s Orders of January 2, 2025 (D.E. 312)	26
5	8/31/17 Medical Record 01576_Peterson_0000003911	53
6	8/31/17 Medical Records 01576_Peterson_0000003907 to 01576_Peterson_0000003910	59
7	9/12/17 Medical Records 01576_Peterson_0000003902 to 01576_Peterson_0000003906	68
8	9/15/17 Medical Record 01576_Peterson_0000003901	74
9	9/15/17 Medical Records 01576_Peterson_0000003899 to 01576_Peterson_0000003900	76

(Remote videotaped videoconference deposition commences, 10:04 a.m. Eastern Time.)

– – –

(The witness will read and sign the deposition transcript.)

– – –

VIDEOGRAPHER: We are now on the record. My name is Judy Diaz. I'm a videographer for Golkow Litigation Services.

Today's date is March 18, 2026, and the time is 10:04 a.m.

This remote video deposition is being held in the matter of Camp Lejeune Water Litigation versus United States of America.

The deponent is Dr. Richard Barbano.

All parties to this deposition are appearing remotely and have agreed to the witness being sworn in remotely.

Due to the nature of remote reporting, please pause briefly before speaking to ensure all parties are heard completely.

Will counsel please identify themselves for the record.

MS. LAMACCHIA: Leslie LaMacchia with

Bell Legal Group on behalf of the plaintiff's leadership group.

MR. TELAN: Good morning. This is Pat Telan from Bell Legal Group also on behalf of the plaintiff's leadership group.

MS. PLATT: Elizabeth Platt on behalf of the United States.

MR. TURNER: Joseph Turner for the United States.

MS. ANS: Jessica Ans for the United States.

VIDEOGRAPHER: The court reporter is Lisa Taylor, who will now swear in the witness.

_ _ _

(RICHARD L. BARBANO, MD, PHD, having been duly sworn, testified as follows:)

_ _ _

EXAMINATION

BY MS. PLATT:

Q. Good morning, Dr. Barbano. I know we've met before, but just to introduce myself again, I'm Elizabeth Platt. I represent the United States in this matter.

A. Good morning.

Q. Thank you so much for being here this morning. I'm hoping it does not take too long, but there are a few questions we want to ask you.

You understand that you are under oath; correct?

A. Correct.

Q. And would you please state your full name for the record.

A. Richard L. Barbano MD, PhD.

Q. And what is your current address?

A. 370 Westminster Road -- that's all in one -- one word, Westminster Road, Rochester, New York 14607.

Q. Thank you.

And you understand that this is a court proceeding? Even though we're not a courtroom, you are obligated to tell the truth?

A. I understand.

Q. I know we've gone over this in the last deposition, but just for the record, I'm going to go over some instructions just to be clear.

A court reporter is taking down everything we say. It is important that you answer all questions verbally, for example, saying yes or no, rather than shaking your head.

Do you understand?

A. Yes.

Q. Please talk at a reasonable pace, and I will try not to interrupt you, and please try not to interrupt me.

A. Understood.

Q. Once the deposition is complete, you'll be given the opportunity to read a transcript of your testimony and make any corrections and then you'll be able to sign it. Is that understood?

A. Understood.

Q. Because this is a remote deposition, I'll be sharing my screen to show you the exhibits. I'm happy to navigate within that exhibit if you would like to see another portion of it. Please just let me know.

A. Yes.

Q. And so you'll see on the screen there's another "Elizabeth Platt (Computer)." That's what will be showing my exhibits.

A. Understood.

Q. If you do not understand a question, please let me know, and I will try to clarify. If you do not ask for clarification, I will under- -- I will assume that you understood the question. Is

that fair?

A. Fair.

Q. During the deposition, you may hear your attorney say "objection." Unless that attorney instructs you not to answer the question, please answer the question after that objection has been made.

A. Understood.

Q. Is there any reason why you are unable to give the most truthful and accurate testimony today?

A. No.

Q. Is there any reason your memory might be impaired today?

A. No.

Q. Are you taking any medication that might impair you?

A. No.

Q. You may ask for breaks at any time. Please just answer the question if there is a question pending, and then we can take a break.

A. Understood.

Q. And then before we get started, I want to get some abbreviations on the record to make sure that we're on the same page.

For tetrachloroethylene, I'll be referring to that as TCE.

A. Understood.

Q. For perchloroethylene, I'll refer to it as PCE.

A. Understood.

Q. And from time to time, I may refer to Parkinson's disease as PD.

A. Understood.

Q. Great. Do you have any materials in front of you today?

A. No.

Q. Do you have any documents or PDFs open on your screen?

A. No.

MS. PLATT: Okay. So we can get started. I'm going to mark the first exhibit. I will share my screen.

(Whereupon, Exhibit 1 marked for identification.)

BY MS. PLATT:

Q. Can you see my screen, Dr. Barbano?

A. Yes.

Q. And let me scroll through this. Do you recognize this document?

A. Yes.
Q. And do you recognize this as the amended subpoena for your deposition?
A. Yes.
Q. And let me scroll through. You can see this is the subpoena as well as the requests for documents.
If you need me to slow down or anything, please let me know.
A. I will let you know.
MS. LAMACCHIA: Counsel, are you making this as Exhibit 1 and then subsequently will put it in the chat and name it as Exhibit 1?
MS. PLATT: Yes, I will.
MS. LAMACCHIA: Okay.
BY MS. PLATT:
Q. Okay. So, Dr. Barbano, this is Exhibit 1. Have you reviewed this request before today?
A. Yes.
Q. And do you have any responsive materials to produce for the requests for production?
A. No.

Q. Are you withholding any materials that would be responsive?

A. No.

MS. PLATT: Okay. And then I'm going to go ahead and share Exhibit Number 2.

(Whereupon, Exhibit 2 marked for identification.)

BY MS. PLATT:

Q. And can you see this document, Dr. Barbano?

A. Yes.

Q. I'm going to mark this as Exhibit 2. Do you recognize this?

A. Yes.

Q. And in your words, what is this document?

A. In my words, this is the response to the request to produce materials as requested in the first document in Exhibit 1.

Q. Okay. And I'm going to scroll through just so you can see that this is the complete document.

Okay. Dr. Barbano, I'm going to scroll up to page 7 and direct your attention to request number 7. Do you see that on the screen?

A. Yes.
Q. And this request is requesting all bills, invoices, and other documents reflecting compensation paid to you related to the CLJ litigation; correct?
A. Correct.
Q. And do you have any materials responsive to that request?
A. No.
Q. You have not submitted an invoice since your last production?
A. Correct.
Q. You have not been paid for your expert report that was submitted earlier this year?
A. Correct.
Q. Do you intend to submit an invoice for that report?
A. Yes.
Q. Ands when do you intend to submit that invoice?
A. Probably March 31st. I've agreed to -- so I generally do my invoices quarterly, but it may be before then, but -- depending on whether there's anything else, but at the latest, March 31st.

Q. Okay. And you -- did you have any invoices for the previous quarter?

A. No.

Q. Do you have an estimate of what your March 31, 2026, invoice will have as the amount?

A. Including or excluding this deposition?

Q. Let's start with including.

A. Well, the -- the -- depending how long the deposition goes, my estimate would be somewhere between 3- and $5,000.

I apologize. I'm thinking actually it wasn't that much. Probably 2 and 4.

MS. PLATT: Okay. And, Counsel, we request that once that invoice is submitted it be produced to us.

BY MS. PLATT:

Q. And the previous exhibit, Exhibit Number 2, was your objections and responses to the requests for production. Did you review that prior to today?

A. Briefly, yes.

Q. And did you review it prior to it being sent to us?

A. No.

Q. When was the first time you reviewed that document?
A. Two days ago.
Q. When was the first time you reviewed the request for production of documents?
A. That, I had seen sometime after it came. I'm not sure. Perhaps a month ago, maybe, perhaps, plus or minus.
Q. It was more than two days ago?
A. More than two days ago, yes.
Q. Okay. Dr. Barbano, you prepared a report dated January 12, 2026; correct?
A. Correct.
Q. And that report is related to Mr. Edgar Peterson; correct?
A. Correct.
Q. Did anyone assist you in writing this report?
A. No.
Q. Do you have any staff supporting you in your work in this matter?
A. No.
Q. It's just you writing the report yourself?
A. Correct.

Q. Just so we have a clear record, you previously wrote a report on Dr. -- I'm sorry -- on Mr. Peterson; correct?

A. Correct.

Q. And that report -- the previous report on Mr. Peterson was dated February 7, 2025; correct?

A. Yes.

Q. And that was submitted in phase 3 of this litigation; correct?

A. I'll take your word for that. I'm not sure of the phase nomenclature, what phase 3 is. It doesn't mean anything to me.

Q. That's okay. That's fair.

And you previously prepared a report on Mr. Gary McElhiney; correct?

A. Correct.

Q. And that was submitted on February 7th- -- or that was dated February 7, 2025, as well; correct?

A. Correct.

COURT REPORTER: I'm sorry. Counsel, may we go off the record for a second?

MS. PLATT: Yes.

VIDEOGRAPHER: The time right now is 10:18 a.m. We're off the record.

(Recess taken.)

VIDEOGRAPHER: The time right now is 10:19 a.m. We're back on the record.

BY MS. PLATT:

Q. Okay. Dr. Barbano, we were talking about your previous reports in this litigation, and just so that we have a clear record, you have two reports on Mr. Peterson, one dated February 7, 2025, and one dated January 12, 2026; correct?

A. Correct.

Q. Have you prepared any other reports on Mr. Peterson in this litigation?

A. No.

Q. Other than these reports and the report on Mr. McElhiney, have you prepared any other reports in this litigation?

A. No.

MS. PLATT: Let me go ahead and share Exhibit Number 3.

(Whereupon, Exhibit 3 marked for identification.)

BY MS. PLATT:

Q. Can you see my screen, Dr. Barbano?

A. Yes.

Q. And do you recognize this document?

A. Yes.
Q. What is this?
A. This is the report I prepared regarding the relatedness of three medical records that I was given to give an opinion on as to their relatedness as to Parkinson's disease.
Q. And this is your complete report; correct?
A. Yes.
Q. It is just this one page?
A. Correct.
Q. Great. And that's your signature at the bottom of the document; correct?
A. Yep. Yes. I'm sorry.
Q. And between this report, Exhibit Number 3, and your previous report on Mr. Peterson that was dated February 7, 2025, did these two reports contain all the opinions you have formed to date on this case regarding Mr. Peterson?
MS. LAMACCHIA: Objection. Form.
THE WITNESS: Yes, yes.
BY MS. PLATT:
Q. Are you planning to form any additional opinions regarding Mr. Peterson?
MS. LAMACCHIA: Objection. Form.

THE WITNESS: I have no plans at this moment.

BY MS. PLATT:

Q. Your CV was previously produced in this litigation; correct?

A. Correct.

Q. And I believe it is dated July 2025. Does that sound right?

A. That sounds about right, yes.

Q. Do you have any updates to your CV since July 2025?

A. I do.

Q. And what kind of updates would you have added?

A. I've added publications and presentations. I believe there was -- between July and November, I think I added one publication and one presentation.

Q. And what is the title of the publication?

A. Oh, that's a tough one. I don't know if I can give you the exact title, but it was related to cervical dystonia and dystonia.

Q. That's fine.

A. And the presentation was titled

"Long-Term" -- "Long-Term Utilization of Botulinum Toxins and Cervical Dystonia."

Q. Any other updates to your CV since July of 2025?

A. Not that I recall.

Q. Would you be able to produce a copy of your updated CV?

A. Yes.

MS. PLATT: And, Counsel, we request that CV be produced after this deposition.

BY MS. PLATT:

Q. Dr. Barbano, you hold yourself out as an expert in Parkinson's disease; correct?

A. Correct.

Q. And what is the basis of your expertise in Parkinson's disease?

A. I've been a neurologist for onever 30 years, the director of the movement disorders division at the University of Rochester for 15 years. I've treated well over 100 -- well over 100 patients with Parkinson's disease; and based on training, experience, including research in Parkinson's disease; and my position at the university.

Q. Thank you.

You are not a life care planning expert; correct?

A. Correct.

Q. And you are not a vascular surgeon; correct?

A. Correct.

Q. You are not a vein specialist; correct?

A. Correct.

Q. You are not an economist; correct?

A. Correct.

Q. Did you compile a list of materials considered for this report?

A. No.

Q. What materials did you consider for this report?

A. The three medical records that I was presented and then my general experience and knowledge of the disorders that were related in this -- in this event.

Q. Did you re-review any records from your previous report?

A. Yes.

Q. What records did you review?

A. I actually reviewed overall just

briefly looking over Mr. Peterson's medical history.

Q. That would be quite a few documents. Is there a way you can identify which specific documents you looked at?

A. Not at this moment. It was an overall general review.

Q. How did you conduct that review?

THE WITNESS: Just going through his medical records. Just briefly looking over the time -- the arc of illness, if I can put it in that sense. Just where he was at certain times over the years in regards to his Parkinson's disease.

BY MS. PLATT:

Q. And if you went back to your files or wherever those records are saved, would you be able to identify which particular records you looked at?

A. That's difficult for me to answer, I think partly -- partly because of it was a general overview as to his -- as I say, his arc of his illness.

I'm sure there are some -- obviously, if I'm looking through records, there's some dates that are in there and I could -- I'm sure I could figure out and pull out which ones I thought were

pertinent, but as I sit here today, it was more of a general review of his records as opposed to a specific -- any specific date.

Q. And all of the records would have been included in the materials considered list submitted with your previous report; correct?

A. That's correct.

Q. So is it fair to say that the materials considered list for your previous reports carry over to this current report?

A. Not in entirety.

MS. LAMACCHIA: Objection. Form.

THE WITNESS: Not in their entirety. So in other words, his medical records would have been in the prior materials considered list, but they would not -- but this report would not include the entirety of that. So in part, but not in total.

Does that -- does that -- do you understand what I'm trying to say?

MS. PLATT: I do. Thank you.

THE WITNESS: Okay.

BY MS. PLATT:

Q. But as you sit here today, you can't tell me off the top of your head which specific

records you looked at; correct?

A. That's correct.

Q. Did you consider creating a materials considered list for this report?

A. No.

Q. Why not?

A. In -- in my opinion, the -- the request was fairly straightforward, and there was really not a material-considered list to be made.

Q. And what was the request?

A. The request was to render an opinion as to whether the three medical records that I was presented were or were not related to Mr. Peterson's Parkinson's disease.

Q. But you felt that you needed to go outside of those three medical records?

A. Just --

MS. LAMACCHIA: Object to form.

THE WITNESS: Just to refresh my memory of the -- of the -- where in the course of Mr. Peterson's illness those three records fell --

MS. PLATT: I see.

THE WITNESS: -- time-wise. And that's -- when I say I reviewed his records

in general, that's what I mean, to just -- to put those three requested medical records into context.

BY MS. PLATT:

Q. I see. And you said you were -- you were asked to render an opinion on three medical records. Were those medical records given to you?

A. Yes.

Q. Did you ask for any other medical records?

A. No.

Q. Did you wonder why it was these three medical records?

A. No.

Q. You didn't think, "Maybe there's more medical records I should be looking at"?

MS. LAMACCHIA: Objection. Form.

THE WITNESS: No. The -- the question was in my -- in my opinion was -- it was fairly straightforward, so I did not think I needed any additional medical records to answer the question I was asked.

MS. PLATT: Okay. I'm going to go ahead and share my screen for Exhibit Number 4.

(Whereupon, Exhibit 4 marked for identification.)

BY MS. PLATT:

Q. Dr. Barbano, can you see my screen?

A. Yes, as long as I put on my glasses.

Q. So I'm going to scroll through this document. This is Exhibit Number 4, for the record, and I'm going to scroll through this document, and then I'm going to tell you my question is do you recognize this document, and so once we scroll through it, you can answer that.

If you need me to slow down or speed up at any time, please let me know.

A. Yep, you're doing fine.

Q. Do you recognize this document, Dr. Barbano?

A. No.

Q. You don't think you've ever seen it before?

A. No.

Q. Okay. So I'm going to scroll up in the document to page 5 and part of page 6. Do you see that?

A. Yes.

Q. And if we scroll up to the top of page

5, you can see the heading says Parkinson's Disease; correct?

A. Correct.

Q. And then at last paragraph of page 5, I'm going to read into the record, and please confirm that I'm reading this correctly.

"Track 1 trial plaintiff for Parkinson's disease, namely Edgar Peterson, also designates the following expert who may be called upon to offer rebuttal testimony on the subject of relatedness of the medical visits of August 31, 2017," and then in parentheses there's a Bates number that ends in 3911; "September 12, 2017," and in parentheses there's a Bates number range ending in 3902 through 3906; "and September 15, 20,217," which I think is supposed to be 2017, and then in parentheses a Bates number ending in 3901, "for his Parkinson's disease and subsequent conditions."

Correct?

A. Yes, correct.

Q. And then your name is listed underneath that; correct?

A. Correct.

Q. And then if we scroll down to the middle of page 6, there's a sentence in the middle

of the paragraph that starts "With respect..." Do you see that, Dr. Barbano?

A. Can you put your cursor on it?

Q. Yes.

A. Yes, I see it now.

Q. Okay. "With respect to Drs. Longo, Schwarz, and Barbano, the expert qualifications, opinions, fee schedule, and a list of all other cases in which during the previous four years the witness testified as an expert as required by Federal Rule of Civil Procedure 26(a)(2)(B) was previously set forth in their expert reports produced February 7, 2025.

"Any facts and data considered by the above-named experts not already produced in this action and/or not readily available to the public has already been produced pursuant to the stipulated order regarding expert discovery (Case Management Order Number 17) (D.E.305)."

Correct?

A. You've read that correctly.

Q. And so, Dr. Barbano, these portions are about you; correct?

A. Correct.

Q. And you did not review this language

before today; correct?
A. Correct.
Q. And so if we look at the bottom of page 5 onto page 6, there are dates listed; correct?
A. Correct.
Q. It's August 31, 2017; September 12, 2017; and September 15, 2017. Correct?
A. Correct.
Q. And those are the dates of the medical events you reviewed; correct?
A. Correct.
Q. And do you know, are those Bates numbers following the dates the records you reviewed?
A. I have no idea.
Q. If you went back to those records, would you be able to confirm that information?
A. I think so.
Q. Okay. I'm not asking you to do it right now --
A. Okay.
Q. -- but just in general.
A. Okay. No, I think so. I would -- I don't have the Bates numbers memorized.
Q. Of course.

A. But I would say I could probably find them.

Q. That -- that would be pretty impressive if you could memorize Bates numbers, but I don't think any of us are able to do that.

And so this -- this sentence indicates that your attorneys are saying these are the records you reviewed; correct?

A. That's my understanding of what it says.

Q. And your understanding is that you did not consider any other medical records beyond those listed on this document; correct?

A. For this request, correct.

Q. And you -- and we already talked a little bit about your -- your review of the timeline of Mr. Peterson's disease.

Did you review any articles related to this report?

A. No.

Q. You didn't perform any literature review for this report?

A. Not to any specific extent. I mean, I would say no.

Q. So you were -- you were really basing

this report solely on your experience and the three sets of records you reviewed; correct?

MS. LAMACCHIA: Objection. Form.

THE WITNESS: As well as my general medical knowledge.

BY MS. PLATT:

Q. Okay. Anything else that you -- you base this re- -- this report on?

A. No.

Q. Without discussing specific details of any conversations, have you spoken to any other experts in this litigation?

A. No.

Q. Have you spoken with Marjorie Hackett-Wallace?

A. No.

Q. Do you know who she is?

A. No.

Q. So I guess it's fair to assume you did not review her report in this litigation?

A. Correct.

Q. And did you not review her rebuttal report in this litigation?

A. Correct.

Q. And you did not review her deposition

transcript in this litigation?
A. Correct.
Q. Do you know who Dr. Syed Hassan is?
A. No.
Q. So I guess it's fair to say you did not review Dr. Hassan's report; correct?
A. Correct.
Q. And you did not review Dr. Hassan's deposition transcript?
A. Correct.
Q. Were you -- were you aware that Dr. Hassan has a spreadsheet related to Mr. Peterson's damages in this litigation?
A. No.
MS. LAMACCHIA: Objection. Form.
BY MS. PLATT:
Q. And so you did not review Dr. Hassan's spreadsheet related to Mr. Peterson; correct?
MS. LAMACCHIA: Objection. Form.
THE WITNESS: Correct.
BY MS. PLATT:
Q. Were you aware that the United States disclosed an expert report regarding the medical records that you opined here in this report?
A. Before I answer no, can you repeat

that, what it is that I'm aware of or not?

Q. Yes. Were you aware that the United States disclosed an expert report regarding the medical records you opined on?

A. Are you -- you're talking about those last three ones that --

Q. Yes.

A. No, I'm not aware of that.

Q. Do you think it would have been helpful for you to review that report?

MS. LAMACCHIA: Objection. Form.

THE WITNESS: Not particularly.

BY MS. PLATT:

Q. Why not?

A. Again, to me, the -- the request was fairly straightforward and I was rendering an opinion, and I think it was -- would be very unlikely that someone else's opinion would sway me on that.

Q. Were you aware that you were named as an expert in the damages phase of this litigation?

A. No.

Q. Okay. So I am going to turn to some questions about your expert report.

Are you doing okay or do you need a

break?

A. I'm fine. Thank you for asking.

Q. So I want to turn back to Exhibit Number 3, which is your expert report.

What was your method in writing this report?

A. I reviewed the three medical records, the dates of those three medical records, as you had pointed out, and then again did an overview of where Mr. Peterson was in the course of his illness at the time. Again, as I said, just a general review to -- to put that date into some sort of context because I thought that would be important.

And then wrote an opinion the way I -- I -- I'm not sure what you mean by "method," to be very honest. I just put -- typed out my opinion on my computer.

Q. Did you conduct an independent medical exam for this report?

A. No.

Q. Mr. Peterson has a deep brain stimulator; correct?

A. Correct.

Q. And he had -- if I refer to it as DBS, do you know what I'm referring to?

A. Yes.
Q. And he had DBS implanted in 2004; correct?
A. Correct.
Q. Can you describe how Mr. Peterson's DBS works?
MS. LAMACCHIA: Objection. Form.
THE WITNESS: Sure. In -- in general, DBS stimulates the -- the tract or pathway in the brain that is no longer functional because of the degeneration of nerve cells that form its tract.
So there is a -- the deep brain stimulation is able to bypass to some extent the pathway that no longer functionally exists because of his Parkinson's disease.
MS. LAMACCHIA: Counsel, I'm going to ask that these types of questions be limited to the scope of Dr. Barbano's report that he issued on January --
MS. PLATT: I'm sorry, Leslie. I'm having a really hard time hearing you. I don't mean to interrupt. Just I can't hear.
MS. LAMACCHIA: Can you hear me?
MS. PLATT: Yes.

MS. LAMACCHIA: I'm -- I'm going to object to that question. I'm also going to ask that these questions be limited to the scope of Dr. Barbano's report that he issued on January 12th of 2026. That is what this deposition is about and -- and nothing as it relates to anything outside of that.

MS. PLATT: Your objection is noted for the record, Leslie.

BY MS. PLATT:

Q. Dr. Barbano, where is the placement of the DBS itself in the body?

MS. LAMACCHIA: Objection. Form.

MS. PLATT: It can be placed in -- in basically two areas, both in the brain.

BY MS. PLATT:

Q. I'm sorry. Did you say "both in the brain"?

A. Yes. Both -- both areas that it would be placed for Parkinson's would be in the brain, correct.

Q. And is there -- is there like a battery pack in the chest?

A. Yes.

Q. Is there any other hardware related to

DBS?

A. Yes.

Q. And what is that?

A. There's wires that are tunneled under the skin from the battery pack up over the -- basically the nape of the neck and up into the skull where it then connects into the probe that is placed into the brain.

Q. Thank you.

A. So there's the battery pack and the wires.

Q. Thank you. I'm going to go ahead and share my screen again to show Exhibit Number 3, which is your expert report.

Can you see Exhibit Number 3, Dr. Barbano?

A. Yes.

Q. Okay. And then I'm looking at the first sentence of the text of this report. It states "I was asked to review several of Edgar Peterson's medical visit to assess relatedness to his Parkinson's diagnosis"; correct?

A. Correct.

Q. And you have listed here -- you have written here that it was several of Edgar Peterson's

medical visits; correct?
A. Correct.
Q. And you previously said that those visits were identified to you through counsel; correct?
A. Correct.
Q. You did not identify these on your own; correct?
A. Correct.
Q. And in the following paragraph, it states "I was asked to review Edgar Peterson's visits to the Sanders Clinic on 8/31/17 and 9/15/17 as well as his emergency room visit to Methodist Hospital on 9/12/17"; correct?
A. Correct.
Q. And you concluded that each of these visits were related to his development and treatment of superficial venous thrombophlebitis; correct?
A. Correct.
Q. I apologize if I'm mispronouncing that term.
A. It was perfect.
Q. Good. I did practice ahead of time.
A. Okay. It paid off.
Q. And how did you reach this conclusion?

A. That they were -- that the records were related to the treatment of his superficial venous thrombophlebitis. It's essentially there in the medical records; it says that's what he was there for.

Q. And you did not discuss superficial venous thrombophlebitis in your previous report dated February 17, 2025; correct?

A. Correct.

Q. And you did discuss Mr. Peterson's mobility issues in your previous report dated February 7, 2025; correct?

A. Correct.

Q. And in 2021, Mr. Peterson's mobility was so limited, he began using a wheelchair; correct?

A. Correct.

Q. Turning back to Exhibit Number 3, the third paragraph, the first sentence states "Immobility is a significant risk factor for the development of this condition"; correct?

A. Correct.

Q. Add the term "this condition" in that sentence is referring to superficial venous thrombophlebitis; correct?

A. Correct.
Q. And is this different from superficial saphenous thrombophlebitis?
A. Is -- is which different from that?
Q. The superficial venous thrombophlebitis.
A. Yes. Is it different from...? I'm sorry.
Q. Is it different from superficial saphenous thrombophlebitis?
A. I'm -- I'm not sure whether the second -- I'm not sure what the second thing you're saying is referring to. I'm sorry.
COURT REPORTER: Can you spell it for me?
MS. PLATT: Yeah.
THE WITNESS: Go ahead.
MS. PLATT: It is S-A-P-H-E-N-O --
THE WITNESS: Oh --
MS. PLATT: -- -U-S.
THE WITNESS: -- thank you very much. I'm sorry. I couldn't hear what you were say.
Saphenous. That just names the specific vein.

I -- I apologize. I didn't quite catch what you were saying. So --

MS. PLATT: No, that's also on me. Sorry.

THE WITNESS: So to answer your question, no. Essentially those are the same thing.

BY MS. PLATT:

Q. Okay. And saphenous, you said, is referring to the vein?

A. Saphenous is a specific vein.

So superficial venous thrombophlebitis is the overarching term for a condition of any vein, and if it -- if someone wanted to be more specific, they could name which veins it was involving, and in this case, it would be the saphenous vein.

Q. Okay. And is there a difference between superficial venous thrombophlebitis and deep vein thrombosis?

A. Yes.

Q. What is the difference?

A. Well, even in the -- in using the different terms, sup- -- one is superficial. That means one of the vessels near the surface of the skin.

Deep vein thrombosis, or DVT, if we can say that, refers to the deeper veins in, in this case the leg, but it could be in any limb.

And phleb- -- thrombophlebitis is inflammation of the vein. Or so -- it's thrombo. It would be in this case the vascular surface. Phlebitis would be the inflammation of it.

Whereas deep vein thrombosis is clotting in that deep vein. So it differs both in location as well as pathology.

Q. Thank you.

Are the same tests used to diagnose both?

A. To some extent, yes.

Q. Could you elaborate on that?

A. Sure. A superficial venous thrombophlebitis, as the name implies, is near the surface and can be seen on physical examination.

Deep vein thrombosis is -- occurs in the deeper veins. It's not readily visible nor necessarily readily palpable on a physical exam.

So then one does other testing to see whether deep vein thrombosis exists and is there, because there is a frequent co-occurrence of superficial venous thrombophlebitis and deep vein

thrombosis.

Q. Okay. Thank you.

I'm going back to your report. In the third paragraph, do you see the sentence that begins "By..."?

A. Yes.

Q. "By the time of these visits, Mr. Peterson's Parkinson's disease, he was having significant mobility issues."

A. Yes. And I apologize. In -- in reading this in retrospect, that's missing a word or a clause, which means Peterson's disease progressed to the point he was having -- or maybe I meant when I wrote it by the time of these visits, it -- Mr. Peterson's Parkinson's disease was resulting in having significant mobility issues.

That -- that's the meaning of that sentence, but my apologies. I left out a -- a word there.

Q. That's okay.

And the final sentence of that paragraph states "Given the lack of other reasonable causes for his immobility, it is my opinion that his development of his thrombophlebitis is a direct result of his immobility causally related to his

Parkinson's disease."

Did I read that correctly?

A. You did.

Q. It is your opinion that Mr. Peterson's Parkinson's disease caused immobility; correct?

A. Correct.

Q. And it is that immobility that caused Mr. Peterson's thrombophlebitis; correct?

A. Correct.

MS. LAMACCHIA: Objection. Form.

BY MS. PLATT:

Q. What are the causes of blood clots, Dr. Barbano?

A. Blood clots?

Q. Um-hum.

A. Well, there's many causes of blood clots, including immobility is -- is often the number one cause. Occult or even overt cancers can result in blood clots. Blood clots can form from a person's hypercoagulability, or that is a tendency to cause -- to form blood clots which can be genetic. For example, dehydration, which causes a concentration of the blood, can be -- can cause blood clots as well. And direct trauma can cause blood clots sometimes.

Q. When you say direct trauma, are you referring to injuries?

A. Yes.

Q. Would it be an injury specifically to a vein?

A. So in -- in -- in certain cases, if someone gets a direct -- for example, direct blow trauma -- let's say someone gets hit in the -- in the -- in the calf with a baseball bat during a game. Occasionally that can cause blood clots in that vein due to, yeah, injury, internal injury.

Q. Do you know if Mr. Peterson had any injuries to his vein prior to 2017?

A. Yeah, no, I did -- let me answer that. Do I -- I do not think that he had any injuries to his vein prior to 2017.

Q. Did you confirm this in the medical records?

A. I did not look specifically for an injury, but in -- again, my general review of the records did not -- nothing stood out to me as a particularly -- a particular injury that could potentially be causative of a condition like this.

Q. Do you know if Mr. Peterson has a genetic predisposition to blood clots?

A. I would have no suspicion for him to have those, again, but it -- to be clear, you -- are you still talking about DVTs or are you talking about the superficial thrombophlebitis?

Because those are two different entities, and when -- and when you and I were talking before, we were talking about blood clots specifically related to DVTs, and my opinion was regarding his superficial venous thrombophlebitis. So just -- I just want to clarify that.

Q. I was asking about blood clots.

A. Okay. Yes. No, I -- I -- I have -- I do -- I would have no suspicion that he has a genetic cause for developing blood clots particularly at his age. Those usually you would suspect in someone decades younger.

Q. Did you review any medical records to confirm this?

A. I do not think those records exist nor would they exist. He would have no suspicion of having had a genetic tendency to develop blood clots, so there would be no records regarding that one way or the other.

Q. Turning back to superficial venous thrombophlebitis, what are the causes of it?

A. Again, the most common cause is immobility. It can occur sometimes with superficial skin injuries. It can sometimes occur in the area where people get IVs put in. So that would, I guess, include some sort of superficial injury. The majority of the time it's due to immobility.

Q. Are there any other causes of superficial venous thrombophlebitis?

A. Infections can cause -- can cause that problem.

Q. Can they be genetic?

A. Not that I'm aware of.

Q. Are there any risk factors for superficial venous thrombophlebitis?

A. Yes.

Q. What are the risk factors?

A. Immobility and infection, local, local infection.

Q. What about age? Is that a risk factor?

A. I think it is a relative risk factor. I'm not -- I don't know the data specifically on that off the top of my head, but I -- I do think it probably is a relative risk factor.

Q. Is cancer a risk factor?

A. For superficial venous thrombosis -- thrombophlebitis? Not that I'm aware of.
Q. What about being overweight or obese?
A. Yes, that can be a risk factor.
Q. Do you know if Mr. Peterson had an infection, a local infection, prior to August 31, 2017?
A. I don't believe so, no.
Q. Did you confirm that in the medical records?
A. I did not.
Q. And at the time, Mr. Peterson was about 68 years old; correct?
A. Correct.
Q. Sorry. And just so we're clear, at the time of the August 31, 2017, visit, he was about 68 years old?
A. Yes, correct.
Q. And do you know if Mr. Peterson was overweight at the time of the August 31, 2017, visit?
A. Yes, I believe he was.
Q. And did you include any of those -- you did not include any of these risk factors in your report; correct?

A. Correct. In -- in words, no. They were taken into overall the opinion.

Q. But they were not in the text of your report; correct?

A. That's correct.

MS. LAMACCHIA: Objection. Form.

BY MS. PLATT:

Q. Okay. Let's go back to your expert report, Exhibit Number 3, and if you look at the first sentence of the last paragraph, it begins "I reached..." Do you see that?

A. Yes.

Q. It states "I reached these conclusions within a reasonable degree of medical certainty."

Did I read that correctly?

A. Yes.

Q. What does a reasonable degree of medical certainty mean?

A. Over 50 percent likelihood, or more likely than not.

Q. And why did you choose this standard?

A. That would be the standard I would use for relatedness in this case.

Q. And what do you mean by "relatedness"?

A. Relatedness? Is there a relationship

between one condition and another condition in this case. So is there a relation -- is there a relation -- relationship or is it related -- the Parkinson's -- the superficial venous thrombosis -- thrombophlebitis and Mr. Peterson's Parkinson's disease.

Q. And have you used this standard before?

A. Yes.

Q. Where have you used this standard before?

A. In -- in the majority of the legal work -- medicolegal work that I do usually involving personal injuries, that is the standard that is requested that I give my opinion to.

Q. And in those reports, are you opining on whether one condition is related to another condition?

A. Yes, sure, yes. The answer is yes.

Q. Are you opining on anything else?

A. In the other reports? And there are -- there are many, so it's difficult to answer that because they all can be quite different. They can be related to motor vehicle accidents, medical malpractice suits, but the majority of them involve

relatedness to -- from one thing to another.
So I don't know if that answers your question.
Q. Is this the standard you used in your previous report on Mr. Peterson dated February 7, 2025?
A. No.
Q. And what standard did you use in that report?
A. At least as likely.
Q. And why did you decide to change standards here?
MS. LAMACCHIA: Objection. Form.
THE WITNESS: This is an entirely different question, an entirely different issue.
BY MS. PLATT:
Q. And how is a reasonable degree of medical certainty different from at least as likely?
MS. LAMACCHIA: Objection. Form.
THE WITNESS: Well, I mean, if I were to put it in just kind of nonlegal, let's say, terms, from what I understand, "at least as likely" is 50 percent or more and "more likely than not" is over 50 percent.

MS. PLATT: Okay. I think this is a good stopping place for us to take a break.

THE WITNESS: Okay.

VIDEOGRAPHER: The time right now is 11:10 a.m. We're off the record.

(Recess taken.)

VIDEOGRAPHER: The time right now is 11:21 a.m. We're back on the record.

BY MS. PLATT:

Q. Okay. Dr. Barbano, I want to go through some of the medical records -- medical records that are referenced as the records you reviewed.

So let me show you Exhibit 4 again. Can you see Exhibit 4?

A. Yes.

Q. And at the bottom of page 5, it lists the medical visits of August 31, 2017; September 12, 2017; and September 15, 2017, with the last two on the next page; correct?

A. Correct.

Q. And those correspond with the dates listed in your expert report; correct?

A. Correct.

Q. So I want to first look at that first

appointment, August 31, 2017. Can you see on this document the medical record listed is a Bates stamp 01576_Peterson_0000003911; correct?

A. Correct.

MS. PLATT: And so I'm going to introduce Exhibit Number 5.

(Whereupon, Exhibit 5 marked for identification.)

BY MS. PLATT:

Q. Can you see my screen, Dr. Barbano?

A. Yes.

Q. And do you see at the bottom it has the same number that I just read to you?

A. Yes.

Q. And so this is Exhibit Number 5. Do you recognize this record?

A. Yes.

Q. You reviewed this record?

A. Yes.

Q. And you reviewed this record for your report; correct?

A. Correct.

Q. And so if we look at the top left of this document, it has the name Allen; correct?

A. Correct.

Q. And this would indicate -- it's a medical record from Mr. Peterson's visit with Dr. Allen; correct?

A. Correct.

Q. And slightly underneath that, it has the date 08/31/2017; correct?

A. Correct.

Q. And this would indicate that it is Mr. Peterson's visit with Dr. Allen on August 31, 2017; correct?

A. Correct.

Q. And if we look at the very first line that appears after that date, it states "Edgar Peterson - 124844 - patient with Parkinson's disease of marked severity"; correct?

A. Correct.

Q. And then at the bottom of the first paragraph, it states "Parkinson's symptoms and most everything else remains" -- sorry. "Parkinson's symptoms and most everything else are the same as usual"; correct?

A. Correct.

Q. And those are the references to Parkinson's disease in this note; correct?

A. Correct.

Q. And if we look at the beginning of that first paragraph, it states "GERD esophagitis, chronic leg edema, chronic insomnia, hyperlipodemia, vitamin D deficiency, and other issues. Returns because of something new"; correct?

A. Correct.

Q. It goes on to say "For the last several days, he developed right lower thigh and upper calf posteromedial redness, warmth, swelling, pain, and tenderness"; correct?

A. Correct.

Q. And that would indicate that's the something new that Mr. Peterson is at this appointment for; correct?

A. Yes.

Q. And if we look at the middle left of the page, it states "con't"; correct?

A. Correct.

Q. And that would typically stand for "continued"; correct?

A. Typically, yes.

Q. And so that would indicate there are other pages that are part of this record; correct?

A. A part of this record. That would be the way I would interpret that.

Q. And so it's possible that those other pages are from the same visit; correct?

A. It would be possible, yes.

Q. Did you request to review other pages related to this visit?

A. No.

Q. Why not?

A. Because I think this had enough information with it. Again, viewing not this in isolation but the other three records in total, it was pretty clear to me that this is a person who developed superficial venous thrombophlebitis as a result of immobility related to his Parkinson's disease. I mean immobility here is his biggest risk factor.

He has chronic leg edema also, you know, likely related -- not -- you know, more likely than not related to his immobility.

So these all go together and the three visits holistically fit together, so I did not think I needed any further records to formulate an opinion.

Q. But you do not know what the remainder of the note on this particular record states; correct?

A. Correct.
Q. Let's go back to Exhibit Number 4. This is the expert disclosure. On Exhibit Number 4, at the top of page 6, there's a range of Bates numbers. Do you see that --
A. Yes.
Q. -- Dr. Barbano?
A. Yes.
Q. And for simplicity, I'm just going to review the last four digits. Is that okay with you?
A. Yes.
Q. And so the Bates number range ends in 3902 through 3906; correct?
A. Correct.
Q. And then the document we just looked at ended in 3911; correct?
A. Yes, correct.
Q. And the pages in between 3906 and 3901 were not provided to you; correct?
MS. LAMACCHIA: Counsel, the --
COURT REPORTER: I can't hear you.
MS. LAMACCHIA: I'm sorry.
THE WITNESS: Yeah.
MS. LAMACCHIA: Objection. Form.

Can you hear me?

COURT REPORTER: I can't hear you.

MS. LAMACCHIA: I'm not sure why I'm having --

COURT REPORTER: There you go.

MS. LAMACCHIA: -- audio issues. I'm not sure why I'm having audio issues. I'm sorry.

Object to the form.

Counsel, witness has no idea how -- how documents are Bates numbered in this litigation.

MS. PLATT: Thank you. Your objection is noted, and I'll remind you that per this litigation, your objections are limited to form and foundation.

BY MS. PLATT:

Q. And I think I may have already asked this question, but just so we have it on the record, you did not receive the records in between 3906 and 390- -- sorry -- 3911; correct?

MS. LAMACCHIA: Objection. Form.

THE WITNESS: Not for this report.

MS. PLATT: Okay. And I'm going to go ahead and share Exhibit Number 6.

(Whereupon, Exhibit 6 marked for identification.)

BY MS. PLATT:

Q. Can you see my screen, Dr. Barbano?

A. Yes.

Q. I'm going to scroll through this exhibit, and then I'm going to ask you if you recognize this document.

Do you recognize this document, Dr. Barbano?

A. Yes.

Q. And what is this?

A. It's the results of the Doppler examination and the visit of that -- or the notes related to it on that day.

Q. Did you review this record for your report?

A. Yes.

Q. But it is not listed as a record that you reviewed for your report; correct?

A. No, I think this is listed in -- as one of the three records that came to me.

Q. Would you like to look back to Exhibit 4?

A. Sure. Or -- or Exhibit 3, even, if

that's okay.

Q. Yes. Exhibit 3 is your report and Exhibit 4 is the disclosure. Which one would you like to see first?

A. 3.

Q. 3. Okay. One second.

Okay. This is Exhibit 3.

A. All right. I just want to write down the dates. 8/31, 9/15, and 9/12. Okay.

And now Exhibit 4, please.

Q. Yes, I have it on pages 5 and 6, but please let me know if you would like to scroll.

A. No, no, it's okay. I'm just -- I just want to double-check the dates because I'm a little confused because it seems to include the report that you just showed me, so that's -- I do think that's included in my report.

Q. You think that the documents shown in Exhibit 6 are included in these ranges of pages on Exhibit 4?

A. Yes. Can I see document 6 -- Exhibit 6 again, please?

Q. Yes.

A. I mean, I definitely recall reviewing the Doppler findings in -- in that, so that's why --

and, yeah, its end date -- yeah, isn't this the 8/31/2017? Isn't this the -- aren't we talking about the same record?

Q. Dr. Barbano, I'll direct your attention to the Bates stamp at the bottom of the first page of Exhibit 6. It ends in 3907. Do you see that?

A. Yes, I do see that.

Q. And if we scroll to the last page of Exhibit 6, the Bates number ends in 3910; is that correct?

A. Yes, that's correct.

Q. And I'm going to go back to Exhibit 4 --

A. Okay.

Q. -- for a moment. And do you see a page ending in 3907 in Exhibit 4?

A. Nope, not on this.

Q. And that would include documents through 3910; correct?

A. 3910. On -- which are you talking about?

Q. That was the ending of Exhibit 6; correct?

A. Okay. Yes. So I -- maybe this will

help clarify it. I don't use Bates numbers, so -- but I can tell you that that what you showed me, Exhibit 6, I've seen, and that is what I'm referring to in my report.

So -- but -- but, you know, personally, I don't use Bates numbers. So what you showed me is what I reviewed in formulating my opinion.

Q. But you would agree that those pages are not listed on this disclosure, Exhibit 4; correct?

A. Yeah, I would -- I don't see them there, correct.

Q. And so you would agree that Exhibit 4 includes an incomplete list of the records that you reviewed for your report; correct?

MS. LAMACCHIA: Objection. Form.

THE WITNESS: By Bates numbers, correct. Again, I don't -- I don't use Bates numbers, so I wouldn't really -- it wouldn't be something I would be double-checking.

BY MS. PLATT:

Q. And how do you keep track of the records you review, Dr. Barbano?

A. I generally just keep them by source

and date, is my general method. So I might have records that might say Dr. X, you know, 2001 through 2010. So I -- I -- I don't use Bates numbers. Just not my practice.

Q. I understand. Bates numbers are typically something lawyers create.

So you previously testified that the specific medical records to review for this report were given to you by counsel; correct?

A. Correct.

Q. So this Bates range of documents 3907 through 3910, were they ones given to you by counsel?

A. Yes, I have seen those. Those were -- those were the -- what I reviewed for my opinion.

Q. They were not (dropped audio) --

COURT REPORTER: I'm sorry. Say it again.

MS. PLATT: -- your independent review?

COURT REPORTER: Say it again.

MS. PLATT: I'm so sorry. I'm sorry. The whole question?

COURT REPORTER: I'm sorry. I think -- I think I froze because I did not --

the last thing I heard you say was "I'm so sorry."

MS. PLATT: Do you have -- what was the last thing that you wrote?

(Off record due to dropped videoconference connection for the court reporter.)

VIDEOGRAPHER: The time right now is 11:39 a.m. We're back on the record.

BY MS. PLATT:

Q. Dr. Barbano, those records were not part of your independent review of Mr. Peterson's trajectory of Parkinson's disease; correct?

MS. LAMACCHIA: Objection. Form.

THE WITNESS: I'm not -- I'm not understanding. I'm sorry.

BY MS. PLATT:

Q. That's okay. Let me rephrase.

Let's take a step back. You said that in -- in creating in -- sorry. In writing this report, you also looked to previous medical records on Mr. Peterson to get a sense of the trajectory of Mr. Peterson's Parkinson's disease; correct?

A. Correct.

Q. And so was this range of documents,

3907 through 3910, part of that review of the trajectory of Mr. Peterson's Parkinson's disease?

A. No. Those were -- those I was provided with, so there would be no reason to look at those again.

Q. Okay. So it is your -- as you sit here today, you believe these records were provided to you by counsel for this report; correct?

A. Correct.

Q. Okay. Let's go back to Exhibit 6, which is that range of documents we've been talking about.

Go to that first page here. Can you see Exhibit 6, Dr. Barbano?

A. Yes.

MS. LAMACCHIA: Counsel, can you drop Exhibits 5 and 6 into the chat, please.

MS. PLATT: Yeah, I can do that on the next break.

MS. LAMACCHIA: If we were sitting with each other at the deposition, you would have to hand me a copy. So I'm asking if you put those in the chat now for me to download.

MS. PLATT: Yes, I can do that. That is fine. If you give me one moment, I will

do that.

MS. LAMACCHIA: Thank you.

BY MS. PLATT:

Q. Okay. Dr. Barbano, can you see Exhibit 6?

A. Yes.

Q. And I'm looking at the first page of Exhibit 6. About the middle of the page states "Exam date and time." Do you see where I'm looking?

A. Yes.

Q. And do you see it states "08/31/2017, 3:34 p.m.;" correct?

A. Correct.

Q. And so this appears to be part of Mr. Peterson's medical appointment on August 31, 2017; correct?

A. Correct.

Q. And that is one of the medical events you opined on; correct?

A. Correct.

Q. And let's go to the last page. Well, let's go to the second to last page ending in 09. Do you see that?

A. Yes.

Q. And you can see that the date at the

top is 8/31/17; correct?
A. Correct.
Q. And this is from the Sanders Clinic; correct?
A. It appears so.
Q. If we scroll to the final page, do you see this final page ends in 3910?
A. You would have to move it up a little bit --
Q. Sorry about that.
A. -- on my screen.
Q. Can you see that now?
A. No, the bottom -- now I can. 3910, yes, I see it.
Q. Okay. And the top of the page is dated 8/31/17; correct?
A. Correct.
Q. And after "8/31/17" is in parentheses "con't"; correct?
A. Correct.
Q. And that likely means "continued"; correct?
A. Correct.
Q. And can you see the text on this page, Dr. Barbano?

A. Yes.

Q. So reading the first sentence of that paragraph, "Venous ultrasound of the right leg showed no deep vein thrombosis and nothing suspicious. I think that means the leg signs and symptoms are due to cellulitis again."

Did I read that correctly?

A. That that's the way I would interpret it, yes.

Q. Okay. Let's go back to Exhibit 4. And so on the bottom of page 5, beginning of page 6, it states that -- it states "September 12, 2017"; correct?

A. Yes.

Q. And then the Bates range is ending 3902 through 3906; correct?

A. That's what it says, correct.

Q. And September 12, 2017, is another medical event of Mr. Peterson's you opined on in this report; correct?

A. Correct.

MS. PLATT: I'm going to go ahead and then share Exhibit Number 7.

(Whereupon, Exhibit 7 marked for identification.)

BY MS. PLATT:

Q. Can you see Exhibit Number 7, Dr. Barbano?

A. Yes.

Q. And let me scroll through these pages so you can see the complete exhibit.

Do you recognize this document?

A. Yes.

Q. And what is this?

A. This is the document that I reviewed in formulating my opinion that we're speaking with -- speaking about today.

Q. And if I can direct your attention to the first page, the Bates number ends in 3902; correct?

A. Correct.

Q. And the last page, the Bates number ends in 3906; correct?

A. Correct.

Q. And that corresponds with the range of documents listed in Exhibit 4; correct?

A. Correct.

Q. If we go to the first page of this exhibit, do you see about the middle there's a section titled Findings?

A. Yes.
Q. And the first sentence of that section states "Realtime ultrasound with the assistance of color and spectral Doppler demonstrates normal deep veins of the right lower extremity from the common femoral vein, through the femoral vein, and popliteal vein."
Did I read that correctly?
A. Yes.
Q. And then the next section states Impression. Do you see that?
A. Yes.
Q. And that section states "No sign of deep vein thrombosis involving the right leg"; correct?
A. Correct. I don't think there was any evidence of him having a -- what we would call a DVT. What he had was the superficial vein thrombophlebitis.
Q. Um-hum. Let's go to the third page of -- I'm sorry. One -- the fourth page of this document, it ends in 3905. Do you see that, Dr. Barbano?
A. Yes.
Q. I know that text is pretty small. Can

you read that?

A. No. Can you enlarge it more?

Q. Yes.

Is that better?

A. That's better, yeah. I can see that, honing in.

Q. And do you see at the top right of the document it's dated 9/12/2017?

A. Yes.

Q. And about the middle of the document is a section called History of Present Illness. Do you see that?

A. Yes.

Q. I want to direct your attention to the last two sentences of that section. Do you see the last two sentences?

A. Yes.

Q. "Bedside exam notable for palpable cord centrally to erythema from medial calf to thigh. Bedside US notable for superficial saphenous thrombophlebitis."

Did I read that correctly?

A. Yes.

Q. And the abbreviation US in that last sentence, what does that stand for?

A. Ultrasound.
Q. Thank you.
And so this note indicates that the treating physician felt a cord-like blood vessel in Mr. Peterson's vein; correct?
A. Correct.
Q. Let's go back to Exhibit 6.
I'm sorry. Let's go back to Exhibit 4.
I'm actually going to go back to our Exhibit Number 6.
Sorry I keep switching it up on you, Dr. Barbano, but I'll give you a second to -- to look at this.
Okay. This is Exhibit 7. This is what we were just looking at, and I -- I apologize for going back and forth. This is one of the -- the problems with so many files open for a Zoom deposition.
But this is Exhibit 6 -- this is Exhibit 7 that we were just talking about. Do you recognize this, Dr. Barbano?
A. Yes.
Q. Okay. And so I want to scroll to the final page of that exhibit that ends in 3906. Do

you see that?
A. Yes.
Q. Okay. And if we look at the description of -- underneath the word Pharmacy at the top of that page -- do you see that?
A. Yes.
Q. Do you see what Mr. Peterson was prescribed?
A. Yes.
Q. What was he prescribed?
A. Enoxaparin and indomethacin.
Q. And that first one is a blood thinner; correct?
A. Correct.
Q. And the second one is an anti-inflammatory; is that correct?
A. Correct.
Q. And those are both related to the treatment that they're prescribing for the superficial venous thrombophlebitis; correct?
A. Correct.
Q. They're not medications for Parkinson's disease; correct?
A. Correct.
Q. Okay. Now we can go to Exhibit Number

7. Sorry. Exhibit Number 4. I'm all confused.
Okay. So on Exhibit Number 4 -- this is the disclosure. If you look at page 6 of this document, the last date listed is September 15, 2017; correct?
A. Correct.
Q. And that's for -- and then after that is a medical record Bates range ending in 3901; correct?
A. That's what it says, yes.
Q. And this September 15, 2017, is the final visit you opined on in your report; correct?
A. Correct.
MS. PLATT: I'm going to go ahead and share Exhibit Number 8.
(Whereupon, Exhibit 8 marked for identification.)
BY MS. PLATT:
Q. Can you see this document, Dr. Barbano?
A. Yes.
Q. And the Bates number in the bottom right ends in 3901; correct?
A. Correct.
Q. And that corresponds with what we just

read on Exhibit 4; correct?
A. Correct.
Q. And do you see at the top of this document is Dr. Allen's name?
A. Yes.
Q. And the date below that is 9/15/2017?
A. Yes.
Q. And so this would indicate that it is Mr. Peterson's visit with Dr. Allen at the Sanders Clinic on 9/15/2017; correct?
A. Correct.
Q. And the first sentence states "Patient with severe Parkinson's disease is mostly following up problems related to his right leg"; correct?
A. Yes.
Q. And it goes on to say "He went to the hospital emergency room a few days ago because of persistent problems with his right leg"; correct?
A. Correct.
Q. "They were previously diagnosed (by me) as being 'cellulitis'"; correct?
A. Correct.
Q. "Previous ultrasound of that leg had failed to reveal signs of deep vein thrombosis or even superficial vein thrombosis"; correct?

A. Correct.
Q. "He has been given three courses of oral antibiotics of various kinds"; correct?
A. Correct.
Q. And if we look at the middle of that page, it states "con't"; correct?
A. Correct.
Q. And as we previously discussed, that typically stands for "continued;" correct?
A. Correct.
Q. And this likely indicates that the note is continued on another page; correct?
A. Yes, correct.
Q. Did you review the other pages associated with this note?
A. No.
MS. PLATT: I'm going to go ahead and share Exhibit Number 8. I'm sorry. Exhibit Number 9.
(Whereupon, Exhibit 9 marked for identification.)
BY MS. PLATT:
Q. Do you see my screen, Dr. Barbano?
A. Yes.
Q. This is Exhibit Number 9, and if you

look at the bottom right, the Bates number ends in 3899; correct?

A. Correct.

MS. LAMACCHIA: Counsel, can you please put Exhibits 7, 8, and 9 into the chat?

MS. PLATT: Yes. One moment.

MS. LAMACCHIA: Thank you.

BY MS. PLATT:

Q. Okay. Can you see Exhibit Number 9 on the screen, Dr. Barbano?

A. Yes.

Q. And it ends in -- the first page ends in 3899; correct?

A. Correct.

Q. And the second page ends in 3900; correct?

A. Correct.

Q. And those are the numbers immediately preceding the pages we saw in Exhibit 8; correct?

A. By Bates number, yes.

Q. Do you need to see Exhibit 8?

A. No.

Q. And let's look at the first page of Exhibit 9. If you look at the top right, it's dated

9/15/2017; correct?

A. Correct.

Q. And the second page in the top left is dated 9/15/17; correct?

A. Correct.

Q. And those are the same dates of medical appointments from that we saw in Exhibit 8; correct?

A. Yes.

Q. And on the second page after 9/15/17 appears "con't"; correct?

A. Correct.

Q. And as we previously said, that likely stands for "continued"; correct?

A. Correct.

Q. Do you recognize these records?

MS. LAMACCHIA: Objection. Form.

THE WITNESS: Not offhand, no.

MS. PLATT: Okay. Let's take a five-minute break. I'm almost done.

VIDEOGRAPHER: The time right now is 12:00 p.m. We're off the record.

(Recess taken.)

VIDEOGRAPHER: The time right now is 12:06 p.m. We're back on the record.

BY MS. PLATT:

Q. Dr. Barbano, I just have a few remaining questions for you.

Are you receiving compensation for your work in this case?

A. Yes.

Q. And what is your hourly rate?

A. I'd have to go back and review. I believe it's $580, but I could be wrong about that. I'd have to look at it.

Q. Have you changed that since your last deposition?

A. No.

Q. Have you testified in any cases as an expert since your last deposition?

A. Yes.

Q. What have you testified in?

A. It was in Queens, New York. It was a medical malpractice case, and it was last month.

Q. Do you remember the parties' names in that case?

A. Yes. It was Trinh, T-R-I-N-H, versus -- I think the last name is Kalika, K-A-L-I-K-A. Again, it was a Queens State Supreme Court.

It's on my computer if you need that

exactly. I could certainly pull it up on another screen.

Q. We request that after this deposition you provide that to counsel, and counsel can provide that information to us.

A. Perfect.

Q. And if possible, we request the case number as well.

A. Okay. If I have it.

Q. Thank you.

Any other testimony since your last deposition?

A. No, I don't think so. Not that I'm aware of. Not that I can recall.

Q. And this case in Queens, New York, what was the -- sorry. Let's start -- was it a deposition?

A. It was testimony in front of a jury.

Q. And what was the topic of that case?

A. Iatro- -- iatrogenically or medically induced oral mandibular dystonia.

Q. And which party were you representing?

A. The plaintiff.

Q. Did you do anything to prepare for today's deposition?

A. No, no more than just review my report.
Q. Did you meet with counsel?
A. Yes.
Q. Who did you meet with?
A. Ms. LaMacchia.
Q. Anyone else?
A. No.
Q. How many times did you meet with Ms. LaMacchia?
A. Once.
Q. And for how long?
A. In -- in total? Less than half an hour.
Q. Why do you say "in total"?
A. Well, for the first few minutes of that half hour, if not up to 10 minutes, it was more personal discussion because I'm wearing a brace and --
Q. Yeah.
A. -- had surgery.
Q. You don't need to go into specifics of your conversation, Dr. Barbano. I appreciate you elaborating.
Other than your report dated

January 2026, did you review any other documents prior to this deposition in preparation?

A. As I said, I -- I -- I just rereviewed a quick over- -- just a quick overview of Mr. Peterson's records. I hadn't looked at his records for months. It was just kind of refreshing my memory of the time course of his illness, like when he was diagnosed, etc.

Q. And do you know which specific records you reviewed?

A. No. Just general.

Q. Did you review your previous report on Mr. Peterson?

A. No.

MS. PLATT: Dr. Barbano, thank you so much for your time. I have no further questions.

I'll turn it over to Ms. LaMacchia.

MS. LAMACCHIA: Thanks.

EXAMINATION

BY MS. LAMACCHIA:

Q. I just have a couple clarifying questions for you, Doctor.

I might have misheard you earlier. It was before one of our breaks.

COURT REPORTER: Hold on. Can you just -- I can't hear you really well.

THE WITNESS: I can't either.

MS. LAMACCHIA: I'm sorry.

THE WITNESS: I'm sorry.

MS. LAMACCHIA: I don't know what's happening with my audio.

Can you hear me?

COURT REPORTER: Yes.

MS. LAMACCHIA: Okay. Thank you.

BY MS. PLATT:

Q. I just have a couple clarifying questions.

You were asked some questions about legal standards earlier; do you recall that?

A. Yes.

Q. Okay. And I might have misheard you when you were asked about the standard of "at least as likely as not." Can you please explain that again, what that standard means to you?

MS. PLATT: Objection. Form.

THE WITNESS: "At least as likely as not" would be 50 percent or greater.

BY MS. LAMACCHIA:

Q. Okay. And then this opinion you gave

for your report dated January 12th of '26 had to do with a reasonable degree of medical certainty; correct?

MS. PLATT: Objection. Form.

THE WITNESS: Correct.

BY MS. LAMACCHIA:

Q. Okay. And what does that mean?

A. Greater -- to me, greater than 50 percent.

Q. Okay. And you're not an expert in -- in legal standards or conclusions; right?

MS. PLATT: Objection. Form.

THE WITNESS: Correct.

BY MS. LAMACCHIA:

Q. Okay. And the opinion you gave in your specific causation report was an at least as likely as not opinion; right?

MS. PLATT: Objection. Form.

THE WITNESS: Correct.

MS. LAMACCHIA: And that -- that was a standard published by the Camp Lejeune Justice Act; right?

MS. PLATT: Objection. Form.

THE WITNESS: Correct.

BY MS. LAMACCHIA:

Q. Okay. And here your January 12, 2026, report is based on your experience, general medical knowledge, and the three medical records you reviewed? That's what you testified to; right?

A. Correct.

Q. Okay. And counsel continued to bring up Exhibit 4 and Bates numbers during this deposition, and you had never seen those disclosures before today; right?

MS. PLATT: Objection to form.

THE WITNESS: Correct.

BY MS. LAMACCHIA:

Q. Okay. So if there were Bates numbers that were not included in the disclosures, it does not mean that you did not review the medical records; correct?

MS. PLATT: Objection. Form.

THE WITNESS: Correct.

BY MS. LAMACCHIA:

Q. Okay. So you would leave it up to me, as the attorney in this litigation, to correct the disclosures that you had no benefit of seeing before this deposition and you didn't rely on -- rely on them in -- in issuing your report; right?

MS. PLATT: Objection to form.

THE WITNESS: Correct.

BY MS. LAMACCHIA:

Q. Okay. And as you sit here today, it's your opinion that -- and your conclusion that Mr. Peterson's thrombophlebitis was related to his Parkinson's disease; right?

A. Correct.

MS. LAMACCHIA: Okay. I have no further questions. Thank you, Doctor.

MS. PLATT: I -- I just wanted to put on the record that we would like to leave this deposition open given that there is incomplete production of the materials considered list for Dr. Barbano's January 12, 2026, report.

VIDEOGRAPHER: The time right now is 12:15 p.m. We're off the record.

MS. LAMACCHIA: I'm sorry. I think I had an audio issue again. I apologize. Are we still on the record?

COURT REPORTER: No.

MS. LAMACCHIA: Can we go back on for a second?

VIDEOGRAPHER: The time right now is

12:16 p.m. We're back on record.

MS. LAMACCHIA: I apologize. Before we went off -- I'm sorry -- I think I had an audio issue again, and I'm sorry it has plagued me today.

Can you repeat what you had said, Elizabeth?

MS. PLATT: Yes. The United States requests that this deposition be kept open given that there is an incomplete production of the materials considered for Dr. Barbano's January 12, 2026, report.

MS. LAMACCHIA: I'm going to object to keeping the -- the deposition open because the materials considered is -- is not incomplete.

Counsel will amend the disclosures to include the Bates numbers.

Additionally, any medical records that Dr. Barbano has reviewed in this litigation have been previously produced on his materials considered list, so PLG objects to this deposition being kept open.

MS. PLATT: Your objection is noted.

Can we go off the record now or

anything else?

MS. LAMACCHIA: That's it. Thank you, yes.

MS. PLATT: Thank you.

VIDEOGRAPHER: The time right now is 12:17 p.m. We're off the record.

COURT REPORTER: And then your orders, please.

MS. PLATT: We would like a rough draft.

MS. LAMACCHIA: PLG does not need a rough draft, but Dr. Barbano will read and sign his deposition.

COURT REPORTER: Okay. Thank you.

Leslie, you are ordering a copy, though?

MS. LAMACCHIA: Yeah, I'll order a copy, but not on rush and I don't need a rough.

_ _ _

(Remote videotaped videoconference deposition concludes, 12:18 p.m. Eastern Time.)

C E R T I F I C A T E

I, Lisa Taylor, Registered Professional Reporter and notary public certify:

That the foregoing deposition of Richard L. Barbano, MD, PhD was taken before me at the time and place therein set forth at which time the witness personally appeared before me via videoconferencing and was duly remotely sworn or affirmed;

That the testimony of the witness and all objections made at the time of the deposition were recorded stenographically by me and thereafter transcribed;

That the foregoing deposition is a true record of the testimony and of all objections made at the time of the deposition.

I further certify that I am neither counsel for nor related to any party to said action, nor in any way interested in the outcome thereof.

My certification as to the accuracy of this transcript, if it has been reformatted or altered from its original form in any manner, is null and void.

In witness whereof, I have subscribed my name this 21st dav of March 2026.

_____

Lisa Taylor
Registered Professional Reporter
Notary Public

ERRATA SHEET

Deponent: Richard L. Barbano, MD, PhD
Date of Deposition: Wednesday, March 18, 2026
In Re: Camp Lejeune Water Litigation
INSTRUCTIONS TO THE DEPONENT:
In compliance with the Rules of Civil Procedure, a copy of your deposition is provided for your review and signature. Any corrections/changes to the deposition that you care to make are to be made on this sheet.

PAGE	LINE	CORRECTION/CHANGE & REASON FOR CORRECTION/CHANGE

DEPONENT CERTIFICATE

I have read the foregoing transcript of my oral deposition taken on the date and at the location indicated on the title page of the deposition transcript and I certify that the said transcript is true and correct, with the provision that any corrections and changes appearing therein have been corrected/changed personally by myself by listing them on a separate sheet indicating the page number, line number, and content of correction or change.

I further understand that upon completion of the reading and correcting/changing of the deposition transcript that I am to sign this deponent's certificate in the presence of a notary public and then return this original deponent's certificate with my list of corrections/changes and the deposition transcript to the person so indicated to me by my counsel or the court reporter.

I further understand that if I do not carry out all of the above-mentioned instructions within thirty (30) days from receipt, I automatically waive my right to read and sign the deposition transcript and, thereupon, the original transcript can be filed accordingly.

PRINTED NAME:_____

SIGNATURE:_____

DATE:_____

Notary seal

Sworn to and subscribed before me this _____day of_____ 2026

Notary Signature:_____

&

& 90:8

0

0000003899 4:20
0000003900 4:20
0000003901 4:18
0000003902 4:16
0000003906 4:17
0000003907 4:14
0000003910 4:15
0000003911 4:13 53:3
00897 1:3
01576 4:13,14 4:15,16,17,18 4:20,20 53:3
08/31/2017 54:6 66:11
09 66:22

1

1 4:4 10:19 11:12,14,19 12:19 27:7
10 4:4 81:17
100 20:20,20
10:18 16:25
10:19 17:3
1100 2:12
11:10 52:5
11:21 52:8
11:39 64:9
12 4:5 15:12 17:9 27:13 29:6 52:18 68:12,18 85:2 86:15 87:12
124844 54:14
12:00 78:22
12:06 78:25
12:15 86:18
12:16 87:1
12:17 88:6
12:18 88:22
12th 36:5 84:1
14607 7:13
15 20:19 27:15 29:7 52:19 74:4 74:11
17 4:7 28:19 39:8
18 1:7 5:11 90:2

2

2 4:5,10,11 12:5 12:6,12 14:13 14:19 28:11
20,217 27:15
20005 2:12
2001 63:2
2004 35:2
2010 63:3
2017 27:12,13 27:16 29:6,7,7 45:13,16 48:7 48:16,20 52:18 52:19,19 53:1 54:10 66:16 68:12,18 74:5 74:11
202 2:13
2021 39:14
2025 4:11 16:6 16:18 17:8 18:17 19:7,11 20:4 28:13 39:8 39:12 51:6
2026 1:7 5:11 14:5 15:12 17:9 36:5 82:1 85:2 86:16 87:12 89:16 90:2 91:21
219 2:4
21st 89:16
246 2:5
26 4:8,10 28:11 84:1
278-5852 2:5
29440 2:5

3

3 4:7 14:11 16:8 16:11 17:19,20 18:16 34:4 37:13,15 39:18 49:9 59:25 60:2 60:5,6,7
30 20:17 91:12
305-5871 2:13
31 14:5 27:11 29:6 48:6,16,20 52:18 53:1 54:9 66:15
312 4:11
31st 13:21,25
33143 89:19
370 7:11
3899 77:2,14
390 58:21
3900 77:16
3901 27:17 57:19 74:8,23
3902 27:15 57:14 68:16 69:14
3905 70:22
3906 27:15 57:14,19 58:20 68:16 69:18 72:25
3907 61:6,17 63:11 65:1
3910 61:10,20 61:21 63:12 65:1 67:7,13
3911 27:13 57:17 58:21

3:34 66:12

4

4 4:8 14:13 25:25 26:1,7 52:14,15 57:2,3 59:24 60:3,10 60:20 61:13,17 62:10,14 68:10 69:21 72:9 74:1 74:2 75:1 85:8

5

5 4:12 26:22 27:1,4 29:4 52:17 53:6,7,15 60:11 65:17 68:11
5,000 14:11
50 49:19 51:24 51:25 83:23 84:9
53 4:12
580 79:9
59 4:14

6

6 4:14 26:22 27:25 29:4 57:4 58:25 59:1 60:11,19,21,22 61:6,10,23 62:3 65:10,14,17 66:5,8 68:11 72:7,11,20 74:3
68 4:16 48:13 48:17

7

7 3:6 4:16 12:24 12:25 16:6,18 17:8 18:17 28:13 39:12 51:5 68:23,24 69:2 72:15,21 74:1 77:5
74 4:18
76 4:19
7:23 1:3
7th 16:18

8

8 4:18 74:15,16 76:18 77:5,20 77:22 78:7
8/31 60:9
8/31/17 4:12,14 38:12 67:1,16 67:18
8/31/2017 61:2
83 3:7
843 2:5
877.370.3377 1:24

9

9 4:19 76:19,20 76:25 77:5,10 77:25
9/12 60:9
9/12/17 4:16 38:14
9/12/2017 71:8
9/15 60:9
9/15/17 4:18,19 38:13 78:4,11
9/15/2017 75:6 75:10 78:1
917.591.5672 1:24

a

a.m. 1:9 5:2,12 16:25 17:3 52:5 52:8 64:9
abbreviation 71:24
abbreviations 9:24
able 8:10 20:6 22:16 29:17 30:5 35:14
above 1:9 28:15 91:12
accidents 50:24
accuracy 89:13
accurate 9:10
act 84:22
action 28:16 89:12
actually 14:12 21:25 72:10
add 39:23
added 19:14,15 19:17
additional 18:24 25:21
additionally 87:19
address 7:10
affirmed 89:6
age 46:15 47:19
ago 15:3,7,9,10 75:17
agree 62:9,14
agreed 5:18 13:21
ahead 12:5 17:18 25:24 37:12 38:23 40:17 58:25 68:22 74:14 76:17
allen 53:24 54:3 54:9 75:9
allen's 75:4
altered 89:14
amend 87:17
amended 4:4,8 11:3
america 5:15
amount 14:5
ands 13:19
ans 2:11 6:10 6:10
answer 7:23 9:5,6,20 22:18 25:22 26:11 32:25 41:5

45:14 50:19,22
answers 51:2
anti 73:16
antibiotics 76:3
apologies 43:18
apologize 14:12 38:20 41:1 43:10 72:16 86:20 87:2
appeared 89:5
appearing 5:18 91:4
appears 54:13 66:14 67:5 78:11
appointment 53:1 55:14 66:15
appointments 78:7
appreciate 81:23
arc 22:10,20
area 47:3
areas 36:15,19
articles 30:18
asked 25:6,22 37:20 38:11 58:18 83:14,18
asking 29:19 34:2 46:11 65:22
assess 37:21
assist 15:17
assistance 70:3
associated 76:15
assume 8:25 31:19
attention 12:24 61:5 69:13 71:14
attorney 9:4,4 85:22
attorneys 30:7
audio 58:6,7 63:16 83:7 86:20 87:4
august 27:11 29:6 48:6,16,20 52:18 53:1 54:9 66:15
automatically 91:12
available 28:16
aware 32:11,22 33:1,2,8,20 47:12 48:2 80:14

b

b 4:2 28:11
back 17:3 22:15 29:16 34:3 39:18 43:3 46:24 49:8 52:8 57:2 59:23 61:13 64:9,19 65:10 68:10 72:7,8,10,17 78:25 79:8 86:23 87:1
barbano 1:6 3:5 4:6,7 5:16 6:16,21 7:9 10:22 11:18 12:10,23 15:11 17:5,23 20:12 26:4,16 28:2,7 28:22 36:11 37:16 44:13 52:10 53:10 57:7 59:4,10 61:4 62:24 64:11 65:14 66:4 67:25 69:3 70:23 72:13,22 74:20 76:23 77:11 79:2 81:23 82:15 87:20 88:12 89:4 90:2
barbano's 35:19 36:4 86:15 87:11
base 31:8
baseball 45:9
based 20:21 85:3
basically 36:15 37:6
basing 30:25
basis 20:15
bat 45:9
bates 27:12,14 27:17 29:12,24 30:4 53:2 57:4 57:13 58:11 61:5,10 62:1,6 62:18,19 63:3,5 63:11 68:15 69:14,17 74:8 74:22 77:1,21 85:8,14 87:18
battery 36:23 37:5,10
bedside 71:18 71:20
began 39:15
beginning 55:1 68:11
begins 43:4 49:10
behalf 2:2,9 6:1 6:4,6
believe 19:7,16 48:8,22 65:7 79:9
bell 2:3 6:1,4
belllegalgrou... 2:6,6
benefit 85:23
better 71:4,5
beyond 30:12

biggest 56:14
bills 13:3
bit 30:16 67:9
blood 44:12,14 44:16,19,19,21 44:23,24,25 45:10,25 46:7 46:11,14,21 72:4 73:12
blow 45:7
body 36:12
bottom 18:13 29:3 52:17 53:12 54:17 61:5 67:13 68:11 74:22 77:1
botulinum 20:1
brace 81:18
brain 34:21 35:10,13 36:15 36:18,20 37:8
break 9:21 34:1 52:2 65:19 78:20
breaks 9:19 82:25
briefly 5:21 14:22 22:1,9
bring 85:7
bypass 35:14

c

c 2:1 89:1,1
calf 45:9 55:9 71:19
call 70:17
called 27:9 71:11
camp 1:3 5:14 84:21 90:3
cancer 47:25
cancers 44:18
care 21:1 90:6
carolina 1:1,13
carry 23:10 91:11
case 18:19 28:18 41:16 42:3,6 49:23 50:2 79:5,19,21 80:7,15,19
cases 28:9 45:6 79:14
catch 41:2
causally 43:25
causation 84:16
causative 45:23
cause 44:18,21 44:23,24 45:10 46:14 47:1,9,9
caused 44:5,7
causes 43:23 44:12,16,22 46:25 47:7
cells 35:11
cellulitis 68:6 75:21
centrally 71:19
certain 22:12 45:6
certainly 80:1
certainty 49:14 49:18 51:19 84:2
certificate 91:1 91:8,9
certification 89:13
certify 89:2,11 91:3
cervical 19:23 20:2
change 51:11 90:8,8 91:6
changed 79:11 91:5
changes 90:6 91:4,9
changing 91:7
chat 11:13 65:17,23 77:6
check 60:14
checking 62:21
chest 36:23
choose 49:21
chronic 55:3,3 56:16
civ 4:10
civil 28:11 90:5
clarification 8:24
clarify 8:23 46:10 62:1
clarifying 82:22 83:12
clause 43:12
clear 7:21 16:1 17:7 46:2 48:15 56:11
clinic 38:12 67:3 75:10
clj 13:4
clots 44:12,14 44:17,19,19,21 44:24,25 45:10 45:25 46:7,11 46:14,22
clotting 42:9
color 70:4
commences 5:2
commencing 1:9
common 47:1 70:5
compensation 13:4 79:4
compile 21:12
complete 8:7 12:21 18:7 69:6
completely 5:22

completion 91:7
compliance 90:5
computer 8:19 34:17 79:25
con't 55:17 67:19 76:6 78:11
concentration 44:23
concluded 38:16
concludes 88:22
conclusion 38:25 86:5
conclusions 49:13 84:11
condition 39:21 39:23 41:13 45:23 50:1,1,17 50:18
conditions 27:18
conduct 22:7 34:18
confirm 27:6 29:17 45:17 46:18 48:9
confused 60:15 74:1
connection 64:6
connects 37:7
consider 21:15 24:3 30:12
considered 21:13 23:5,9,15 24:4,9 28:14 86:15 87:11,15 87:22
contain 18:18
content 91:6
context 25:3 34:12
continued 55:20 67:21 76:9,12 78:14 85:7
conversation 81:23
conversations 31:11
copy 20:6 65:22 88:15,18 90:5
cord 71:19 72:4
correct 7:5,6 13:5,6,12,15 15:12,13,15,16 15:25 16:3,4,6 16:9,15,16,19 16:20 17:9,10 18:8,11,13 19:5 19:6 20:13,14 21:2,3,5,6,8,9 21:10,11 23:6,7 24:1,2 27:2,3 27:19,20,22,23 28:20,23,24 29:1,2,4,5,7,8 29:10,11 30:8 30:13,14 31:2 31:21,24 32:2,6 32:7,10,18,20 34:22,23 35:3,4 36:21 37:22,23 38:1,2,5,6,8,9 38:14,15,18,19 39:8,9,12,13,16 39:17,21,22,25 40:1 44:5,6,8,9 48:13,14,18,25 49:1,4,5 52:20 52:21,23,24 53:3,4,21,22,24 53:25 54:3,4,6 54:7,10,11,15 54:16,21,22,24 54:25 55:5,6,10 55:11,14,17,18 55:20,23 56:2 56:25 57:1,14 57:15,17,18,20 58:21 59:20 61:11,12,20,24 62:11,13,16,19 63:9,10 64:13 64:23,24 65:8,9 66:12,13,16,17 66:19,20 67:1,2 67:4,16,17,19 67:20,22,23 68:13,16,17,20 68:21 69:15,16 69:18,19,21,22 70:15,16 72:5,6 73:13,14,16,17 73:20,21,23,24 74:5,6,9,12,13 74:23,24 75:1,2 75:10,11,14,18 75:19,21,22,25 76:1,3,4,6,7,9 76:10,12,13 77:2,3,14,15,17 77:18,20 78:1,2 78:4,5,8,11,12 78:14,15 84:3,5 84:13,19,24 85:6,12,17,19 85:22 86:2,8 91:4
corrected 91:5
correcting 91:7
correction 90:8 90:8 91:6
corrections 8:9 90:6 91:4,9
correctly 27:6 28:21 44:2 49:15 68:7 70:8 71:22
correspond 52:22

corresponds 69:20 74:25
counsel 5:23 11:11 14:14 16:21 20:9 35:17 38:4 57:21 58:10 63:9,13 65:8,16 77:4 80:4,4 81:3 85:7 87:17 89:12 91:10
couple 82:22 83:12
course 24:21 29:25 34:10 82:7
courses 76:2
court 1:1 6:12 7:16,22 16:21 40:14 57:22 58:2,5 63:17,21 63:24 64:7 79:24 83:1,9 86:22 88:7,14 91:10
courtroom 7:17
court's 4:11
create 63:6
creating 24:3 64:20
current 7:10 23:10
cursor 28:3
cv 1:3 19:4,10 20:3,7,10

d

d 3:3 4:2 55:4
d.e. 4:11
d.e.305 28:19
damages 4:9 32:13 33:21
data 28:14 47:22
date 5:11 18:19 23:3 34:12 54:6 54:13 61:1 63:1 66:9,25 74:4 75:6 90:2 91:2 91:17
dated 15:12 16:6,18 17:8,9 18:17 19:7 39:8 39:11 51:5 67:16 71:8 77:25 78:4 81:25 84:1
dates 22:23 29:4,9,13 34:8 52:22 60:9,14 78:6
day 59:15 89:16 91:20
days 15:3,9,10 55:8 75:17 91:12
dbs 34:24 35:2 35:6,9 36:12 37:1
dc 2:12
decades 46:16
decide 51:11
deep 34:21 35:13 41:18 42:1,8,9,19,23 42:25 68:4 70:4 70:14 75:24
deeper 42:2,20
defendant 2:9
defendant's 4:6
deficiency 55:4
definitely 60:24
degeneration 35:11
degree 49:14,17 51:18 84:2
dehydration 44:22
demonstrates 70:4
department 2:10
depending 13:23 14:9
deponent 5:16 90:2,4 91:1
deponent's 91:8,9
deposition 1:9 4:6 5:2,6,13,17 7:20 8:7,12 9:3 11:3 14:7,10 20:10 31:25 32:9 36:6 65:21 72:19 79:12,15 80:3,12,17,25 82:2 85:9,24 86:13 87:9,14 87:23 88:13,22 89:3,7,9,10 90:2,5,6 91:2,3 91:8,10,13
deps 1:25
describe 35:5
description 4:3 73:4
designates 27:9
designation 4:9
details 31:10
develop 46:21
developed 55:8 56:12
developing 46:14
development 38:17 39:21 43:24
diagnose 42:12
diagnosed 75:20 82:8
diagnosis 37:22
diaz 2:18 5:9
difference 41:17,21
different 40:2,4 40:7,9 41:23

46:5 50:23 51:15,15,19
differs 42:9
difficult 22:18 50:22
digits 57:10
direct 12:24 43:24 44:24 45:1,7,7 61:4 69:13 71:14
director 20:18
disclosed 32:23 33:3
disclosure 4:9 57:3 60:3 62:10 74:3
disclosures 85:9,15,23 87:17
discovery 28:18
discuss 39:6,10
discussed 76:8
discussing 31:10
discussion 81:18
disease 10:8 18:6 20:13,16 20:21,23 22:13 24:14 27:1,8,18 30:17 35:16 43:8,12,15 44:1 44:5 50:6 54:14 54:24 56:14 64:13,23 65:2 73:23 75:13 86:7
disorders 20:18 21:19
district 1:1,1
division 1:24 20:19
doctor 82:23 86:10
document 4:4 10:25 12:9,16 12:19,22 15:2 17:25 18:13 26:7,8,10,15,22 30:13 53:2,24 57:16 59:8,9 60:21 69:7,10 70:22 71:8,10 74:4,19 75:4
documents 10:13 11:7 13:3 15:5 22:2,4 58:11 60:18 61:19 63:11 64:25 65:11 69:21 82:1
doing 26:14 33:25
doppler 59:13 60:25 70:4
double 60:14 62:21
download 65:23
dr 5:16 6:21 10:22 11:18 12:10,23 15:11 16:2 17:5,23 20:12 26:4,16 28:2,22 32:3,6 32:8,12,17 35:19 36:4,11 37:16 44:13 52:10 53:10 54:3,9 57:7 59:4,10 61:4 62:24 63:2 64:11 65:14 66:4 67:25 69:2 70:23 72:13,22 74:20 75:4,9 76:23 77:11 79:2 81:23 82:15 86:15 87:11,20 88:12
draft 88:10,12
drop 65:16
dropped 63:16 64:5
drs 28:6
due 5:20 45:11 47:6 64:5 68:6
duly 6:17 89:5
dvt 42:1 70:18
dvts 46:3,8
dystonia 19:23 19:23 20:2 80:21

e

e 2:1,1 3:3,3 4:2 4:2 40:18 89:1 89:1
earlier 13:14 82:24 83:15
eastern 1:1,9 5:3 88:23
economist 21:10
edema 55:3 56:16
edgar 15:15 27:8 37:20,25 38:11 54:13
either 83:3
elaborate 42:15
elaborating 81:24
elizabeth 2:10 6:6,23 8:19 87:7
elizabeth.k.pl... 2:13
else's 33:18
emergency 38:13 75:17
ended 57:17
ends 27:13 57:13 61:6,10 67:7 69:14,18

70:22 72:25 74:23 77:1,13 77:13,16
enlarge 71:2
enotary 1:13
enoxaparin 73:11
ensure 5:22
entirely 51:14 51:15
entirety 23:11 23:13,17
entities 46:6
errata 90:1
erythema 71:19
esophagitis 55:2
esq 2:3,4,10,11 2:11
essentially 39:3 41:6
estimate 14:4 14:10
event 21:20 68:19
events 29:10 66:18
evidence 70:17
exact 19:22
exactly 80:1
exam 34:19 42:21 66:9 71:18
examination 3:6,7 6:19 42:18 59:14 82:20
example 7:24 44:22 45:7
excluding 14:6
exhibit 4:3 8:14 10:18,19 11:12 11:14,19 12:5,6 12:12,19 14:18 14:18 17:19,20 18:15 25:24 26:1,7 34:3 37:13,15 39:18 49:9 52:14,15 53:6,7,15 57:2 57:3 58:25 59:1 59:7,23,25 60:2 60:3,7,10,19,20 60:22 61:6,10 61:13,17,23 62:3,10,14 65:10,14 66:5,8 68:10,23,24 69:2,6,21,24 72:7,8,11,15,20 72:21,25 73:25 74:1,2,15,16 75:1 76:18,18 76:20,25 77:10 77:20,22,25 78:7 85:8
exhibits 8:13,20 65:17 77:5
exist 46:19,20
exists 35:16 42:23
experience 20:22 21:18 31:1 85:3
expert 4:7,10 13:13 20:13 21:2 27:9 28:7 28:10,12,18 32:23 33:3,21 33:24 34:4 37:14 49:8 52:23 57:3 79:15 84:10
expertise 20:16
experts 28:15 31:12
explain 83:19
extent 30:23 35:14 42:14
extremity 70:5

f

f 89:1
factor 39:20 47:20,21,24,25 48:4 56:15
factors 47:13 47:16 48:24
facts 28:14
failed 75:24
fair 9:1,2 16:13 23:8 31:19 32:5
fairly 24:8 25:20 33:16
fax 1:24
february 16:6 16:18,18 17:8 18:17 28:13 39:8,12 51:5
fed 4:10
federal 28:11
fee 28:8
fell 24:22
felt 24:15 72:4
femoral 70:6,6
figure 22:25
filed 91:13
files 22:15 72:18
final 43:21 67:6 67:7 72:25 74:12
find 30:1
findings 60:25 69:25
fine 19:24 26:14 34:2 65:25
first 4:8 10:17 12:19 15:1,4 37:19 39:19 49:10 52:25,25 54:12,17 55:2 60:4 61:6 65:13

66:7 68:2 69:14 69:23 70:2 73:12 75:12 77:13,24 81:16
fit 56:20
five 78:20
following 27:9 29:13 38:10 75:13
follows 6:17
foregoing 89:3 89:9 91:2
form 18:20,23 18:25 23:12 24:18 25:17 31:3 32:15,19 33:11 35:7,12 36:13 44:10,19 44:21 49:6 51:13,20 57:25 58:9,16,22 62:17 64:14 78:17 83:21 84:4,12,18,23 85:11,18 86:1 89:14
formed 18:18
formulate 56:21
formulating 62:7 69:11
forth 28:12 72:17 89:4
foundation 58:16
four 28:9 57:10
fourth 70:21
frequent 42:24
front 10:11 80:18
froze 63:25
full 7:7
functional 35:10
functionally 35:15
further 56:21 82:16 86:10 89:11 91:7,11

g

game 45:10
gary 16:15
general 21:18 22:6,19 23:2 25:1 29:22 31:4 34:11 35:8 45:20 63:1 82:11 85:3
generally 13:22 62:25
genetic 44:22 45:25 46:14,21 47:11
georgetown 2:5
gerd 55:2
give 9:10 18:5 19:22 50:15 65:25 72:13
given 8:8 18:5 25:7 43:22 63:9 63:12 76:2 86:13 87:10
glasses 26:5
go 7:21 12:5 16:22 17:18 24:15 25:23 37:12 40:17 49:8 52:10 56:19 57:2 58:5 58:24 61:13 65:10,13 66:21 66:22 68:10,22 69:23 70:20 72:7,8,10 73:25 74:14 76:17 79:8 81:22 86:23 87:25
goes 14:10 55:7 75:16
going 7:20 10:17 12:4,12 12:20,23 22:8 25:23 26:6,8,9 26:21 27:5 33:23 35:17 36:1,2 37:12 43:3 53:5 57:9 58:24 59:6,7 61:13 68:22 72:10,17 74:14 76:17 87:13
golkow 1:24 5:10
golkow.com 1:25
good 6:3,21,25 38:23 52:2
great 10:10 18:12
greater 83:23 84:8,8
group 2:3 6:1,2 6:4,5
guess 31:19 32:5 47:5

h

h 4:2 40:18 79:22
hackett 31:15
half 81:13,17
hand 65:22
happening 83:7
happy 8:14
hard 35:22
hardware 36:25
hassan 32:3,12
hassan's 32:6,8 32:17
head 7:25 23:25 47:23
heading 27:1
hear 9:3 35:23 35:24 40:22 57:22 58:1,2

83:2,8
heard 5:22 64:1
hearing 35:22
held 5:14
help 62:1
helpful 33:10
history 22:1 71:11
hit 45:8
hold 20:12 83:1
holistically 56:20
honest 34:16
honing 71:6
hoping 7:2
hospital 38:14 75:17
hour 81:14,17
hourly 79:7
hum 44:15 70:20
hypercoagula... 44:20
hyperlipodemia 55:3

i

iatro 80:20
iatrogenically 80:20
idea 29:15 58:10
identification 10:20 12:7 17:21 26:2 53:8 59:2 68:25 74:17 76:21
identified 38:4
identify 5:23 22:3,17 38:7
iii 4:9
illness 22:10,21 24:21 34:10 71:11 82:7
immediately 77:19
immobility 39:20 43:23,25 44:5,7,17 47:2 47:6,17 56:13 56:14,18
impair 9:17
impaired 9:14
implanted 35:2
implies 42:17
important 7:23 34:13
impression 70:11
impressive 30:4
include 23:17 47:5 48:23,24 60:15 61:19 87:18
included 23:5 60:17,19 85:15
includes 62:15
including 14:6 14:8 20:22 44:17
incomplete 62:15 86:14 87:10,16
independent 34:18 63:19 64:12
indicate 54:1,8 55:12,22 75:8
indicated 91:3 91:10
indicates 30:6 72:3 76:11
indicating 91:5
indomethacin 73:11
induced 80:21
infection 47:17 47:18 48:6,6
infections 47:9
inflammation 42:5,7
inflammatory 73:16
information 29:17 56:9 80:5
injuries 45:2,13 45:15 47:3 50:14
injury 45:4,11 45:11,20,22 47:5
insomnia 55:3
instructions 7:21 90:4 91:12
instructs 9:5
intend 13:16,19
interested 89:12
internal 45:11
interpret 55:25 68:8
interrupt 8:4,5 35:23
introduce 6:22 53:6
invoice 13:10 13:16,20 14:5 14:15
invoices 13:3 13:22 14:2
involve 50:25
involving 41:15 50:13 70:14
isolation 56:10
issue 51:16 86:20 87:4
issued 35:20 36:4
issues 39:11 43:9,16 55:4 58:6,7
issuing 85:25
ivs 47:4

j

january 4:11 15:12 17:9 35:20 36:5 82:1 84:1 85:2 86:15 87:12
jessica 2:11 6:10
jessica.i.ans 2:14
joseph 2:11 6:8
joseph.b.turner 2:14
judy 2:18 5:9
july 19:7,11,16 20:4
jury 80:18
justice 2:10 84:22

k

k 79:23,23
kalika 79:23
keep 62:23,25 72:12
keeping 87:14
kept 87:9,23
kind 19:13 51:22 82:6
kinds 76:3
know 6:21 7:19 8:16,23 11:9,10 19:21 26:13 29:12 31:17 32:3 34:25 45:12,24 47:22 48:5,19 51:2 56:17,17,23 60:12 62:5 63:2 70:25 82:9 83:6
knowledge 21:19 31:5 85:4

l

l 1:6 2:12 3:5 6:16 7:9 79:23 89:4 90:2
lack 43:22
lamacchia 2:3 3:7 5:25,25 11:11,16 18:20 18:25 23:12 24:18 25:17 31:3 32:15,19 33:11 35:7,17 35:24 36:1,13 44:10 49:6 51:13,20 57:21 57:23,25 58:3,6 58:22 62:17 64:14 65:16,20 66:2 77:4,8 78:17 81:6,10 82:18,19,21 83:4,6,10,24 84:6,14,20 85:1 85:13,20 86:3,9 86:19,23 87:2 87:13 88:2,11 88:17
language 28:25
latest 13:24
lawyers 63:6
leadership 6:2 6:5
leave 85:21 86:12
left 43:18 53:23 55:16 78:3
leg 42:3 55:3 56:16 68:3,5 70:14 75:14,18 75:23
legal 2:3 6:1,4 50:12 83:15 84:11
lejeune 1:3 5:14 84:21 90:3
leslie 2:3 5:25 35:21 36:9 88:15
life 21:1
likelihood 49:19
likely 49:20 51:10,19,24,25 56:17,17 67:21 76:11 78:13 83:19,22 84:17
limb 42:3
limited 35:18 36:3 39:15 58:15
line 54:12 90:8 91:6
lisa 1:12 6:13 89:2,20
list 21:12 23:5,9 23:16 24:4,9 28:8 62:15 86:15 87:22 91:9
listed 27:21 29:4 30:13 37:24 52:23 53:2 59:19,21 62:10 69:21 74:4
listing 91:5
lists 52:17
literature 30:21
litigation 1:3 5:10,15 13:5 16:9 17:6,12,16 19:5 31:12,20 31:23 32:1,13 33:21 58:12,15 85:22 87:20 90:3
little 30:16 60:14 67:8
llamacchia 2:6
local 47:17,17 48:6
located 1:10
location 42:10 91:2

long 7:2 14:9 20:1,1 26:5 81:12
longer 35:10,15
longo 28:6
look 29:3 45:19 49:9 52:25 53:23 54:12 55:1,16 59:23 65:4 72:14 73:3 74:3 76:5 77:1 77:24,25 79:10
looked 22:4,17 24:1 57:16 64:21 82:5
looking 22:1,9 22:23 25:16 37:18 66:7,9 72:16
lower 55:8 70:5

m

m 3:3
made 9:7 24:9 89:7,10 90:6
majority 47:6 50:12,25
make 8:9 9:24 90:6
making 11:12
malpractice 50:25 79:19
management 28:18
mandibular 80:21
manner 89:14
march 1:7 5:11 13:21,25 14:5 89:16 90:2
marjorie 31:14
mark 10:17 12:12
marked 10:19 12:6 17:20 26:1 53:7 54:15 59:1 68:24 74:16 76:20
material 24:9
materials 10:10 11:23 12:1,18 13:7 21:12,15 23:5,9,15 24:3 86:14 87:11,15 87:22
matter 1:9 5:14 6:24 15:21
mcelhiney 16:15 17:15
md 1:6 3:5 4:6 6:16 7:9 89:4 90:2
mean 16:12 25:1 30:23 34:15 35:23 49:18,24 51:21 56:14 60:24 84:7 85:16
meaning 43:17
means 41:24 43:12 67:21 68:5 83:20
meant 43:13
medial 71:19
medical 4:12,14 4:16,18,19 18:4 21:17 22:1,9 23:14 24:12,16 25:2,6,7,9,13 25:16,21 27:11 29:9 30:12 31:5 32:23 33:4 34:7 34:8,18 37:21 38:1 39:4 45:17 46:17 48:9 49:14,18 50:24 51:19 52:11,11 52:18 53:2 54:2 63:8 64:21 66:15,18 68:19 74:8 78:7 79:19 84:2 85:3,4,16 87:19
medically 80:20
medication 9:16
medications 73:22
medicolegal 50:13
meet 81:3,5,9
memorize 30:4
memorized 29:24
memory 9:13 24:20 82:7
mentioned 91:12
met 6:22
method 34:5,15 63:1
methodist 38:14
middle 27:25 27:25 55:16 66:8 69:24 71:10 76:5
minus 15:8
minute 78:20
minutes 81:16 81:17
misheard 82:24 83:17
mispronounci... 38:20
missing 43:11
mobility 39:11 39:14 43:9,16
moment 19:2 22:5 61:16 65:25 77:7
month 15:7 79:19

months 82:6
morning 6:3,21 6:25 7:2
motor 50:24
move 67:8
movement 20:18

n

n 2:1 3:3,3,3 4:2 40:18 79:22
name 5:9 7:8 11:13 27:21 41:15 42:17 53:24 75:4 79:23 89:16 91:15
named 28:15 33:20
names 40:24 79:20
nape 37:6
nature 5:20
navigate 8:14
near 41:24 42:17
necessarily 42:21
neck 37:6
need 11:8 26:12 33:25 77:22 79:25 81:22 88:11,18
needed 24:15 25:21 56:21
neither 89:11
nerve 35:11
neurologist 20:17
never 85:9
new 1:10 7:12 55:5,13 79:18 80:15
nomenclature 16:11
nonlegal 51:22
nope 61:18
normal 70:4
north 1:1,13
notable 71:18 71:20
notary 1:12,13 89:2,21 91:8,19 91:22
note 54:24 56:24 72:3 76:12,15
noted 36:8 58:14 87:24
notes 59:14
notice 4:6
november 19:17
null 89:15
number 12:5 12:25 14:19 17:19 18:16 25:24 26:7 27:13,14,17 28:19 34:4 37:13,15 39:18 44:18 49:9 53:6 53:13,15 57:2,3 57:13 58:25 61:10 68:23 69:2,14,17 72:11 73:25 74:1,2,15,22 76:18,19,25 77:1,10,21 80:8 91:5,6
numbered 58:11
numbers 29:13 29:24 30:4 57:5 62:1,6,18,20 63:3,5 77:19 85:8,14 87:18
nw 2:12

o

o 3:3 40:18
oath 7:5
obese 48:3
object 24:18 36:2 58:9 87:13
objection 9:4,6 18:20,25 23:12 25:17 31:3 32:15,19 33:11 35:7 36:8,13 44:10 49:6 51:13,20 57:25 58:13,22 62:17 64:14 78:17 83:21 84:4,12 84:18,23 85:11 85:18 86:1 87:24
objections 4:5 14:19 58:15 89:7,10
objects 87:22
obligated 7:17
obviously 22:22
occasionally 45:10
occult 44:18
occur 47:2,3
occurrence 42:24
occurs 42:19
offer 27:10
offhand 78:18
offsets 4:9
oh 19:21 40:19
okay 10:16 11:16,18 12:4 12:20,23 14:1 14:14 15:11 16:13 17:5 23:22 25:23 26:21 28:6 29:19,21,23 31:7 33:23,25 37:18 38:24 41:9,17 43:2,20 46:12 49:8 52:1

52:3,10 57:10 58:24 60:1,6,7 60:9,13 61:15 61:25 64:18 65:6,10 66:4 67:15 68:10 72:15,24 73:3 73:25 74:2 77:10 78:19 80:9 83:10,17 83:25 84:7,10 84:15 85:2,7,14 85:21 86:4,9 88:14
old 48:13,17
once 8:7 14:15 26:10 81:11
ones 22:25 33:6 63:12
onever 20:17
open 10:13 72:18 86:13 87:9,14,23
opined 32:24 33:4 66:19 68:19 74:12
opining 50:16 50:20
opinion 18:5 24:7,11 25:6,19 33:17,18 34:14 34:16 43:23 44:4 46:8 49:2 50:15 56:22 62:8 63:15 69:11 83:25 84:15,17 86:5
opinions 18:18 18:24 28:8
opportunity 8:8
opposed 23:2
oral 76:3 80:21 91:2
order 28:18,19 88:17
ordering 88:15
orders 4:11 88:7
original 89:14 91:9,13
outcome 89:12
outside 24:16 36:7
overall 21:25 22:5 49:2
overarching 41:13
overt 44:18
overview 22:20 34:9 82:4
overweight 48:3,20
own 38:8

p

p 2:1,1,11 4:10 40:18
p.m. 66:12 78:22,25 86:18 87:1 88:6,22
pace 8:3
pack 36:23 37:5 37:10
page 3:4 4:3 9:25 12:24 18:10 26:22,22 26:25 27:4,25 29:4,4 52:17,20 55:17 57:4 61:6 61:9,17 65:13 66:7,8,21,22 67:6,7,15,24 68:11,11 69:14 69:17,23 70:20 70:21 72:25 73:5 74:3 76:6 76:12 77:13,16 77:24 78:3,10 90:8 91:3,5
pages 55:23 56:2,4 57:19 60:11,19 62:9 69:5 76:14 77:20
paid 13:4,13 38:24
pain 55:10
palpable 42:21 71:18
paragraph 27:4 28:1 38:10 39:19 43:4,22 49:10 54:18 55:2 68:3
parentheses 27:12,14,17 67:18
parkinson's 10:8 18:6 20:13 20:16,21,23 22:13 24:14 27:1,8,18 35:16 36:20 37:22 43:8,15 44:1,5 50:4,5 54:14,18 54:19,24 56:13 64:13,23 65:2 73:23 75:13 86:7
part 23:18 26:22 55:23,24 64:12 65:1 66:14
participating 1:10,13 2:7,15 2:17
particular 22:17 45:22 56:24
particularly 33:12 45:22 46:15
parties 5:17,22 79:20

partly 22:19,19
party 80:22 89:12
pat 6:3
pathology 42:10
pathway 35:9 35:15
patient 54:14 75:12
patients 20:21
patrick 2:4
pause 5:21
pce 10:5
pd 10:8
pdfs 10:13
pending 9:21
pennsylvania 1:12,12
people 47:4
percent 49:19 51:24,25 83:23 84:9
perchloroethy... 10:4
perfect 38:22 80:6
perform 30:21
persistent 75:18
person 56:11 91:10
person's 44:20
personal 50:14 81:18
personally 62:6 89:5 91:5
pertinent 23:1
peterson 4:13 4:14,15,16,17 4:18,20,20 15:15 16:3,6 17:8,12 18:16 18:19,24 27:8 32:18 34:10,21 45:12,24 48:5 48:12,19 51:5 53:3 54:14 55:13 64:22 73:7 82:13
peterson's 22:1 24:13,21 30:17 32:13 35:5 37:21,25 38:11 39:10,14 43:8 43:12,15 44:4,8 50:5 54:2,9 64:12,23 65:2 66:15 68:19 72:5 75:9 82:5 86:6
ph 1:24
pharmacy 73:4
phase 4:9 16:8 16:11,11 33:21
phd 1:6 3:5 6:16 7:9 89:4 90:2
phleb 42:4
phlebitis 42:7
physical 42:18 42:21
physically 1:10
physician 72:4
place 52:2 89:4
placed 36:14,20 37:7
placement 36:11
plagued 87:5
plaintiff 27:7 80:23
plaintiff's 4:8 6:1,5
plaintiffs 2:2
plaintiff’s 4:5
planning 18:23 21:1
plans 19:1
platt 2:10 3:6 6:6,6,20,23 8:19 10:16,21 11:15,17 12:4,8 14:14,17 16:23 17:4,18,22 18:22 19:3 20:9 20:11 22:14 23:21,23 24:23 25:4,23 26:3 31:6 32:16,21 33:13 35:21,25 36:8,10,14,16 40:16,18,20 41:3,8 44:11 49:7 51:17 52:1 52:9 53:5,9 58:13,17,24 59:3 62:22 63:19,22 64:3 64:10,17 65:18 65:24 66:3 68:22 69:1 74:14,18 76:17 76:22 77:7,9 78:19 79:1 82:15 83:11,21 84:4,12,18,23 85:11,18 86:1 86:11 87:8,24 88:4,9
please 5:21,23 7:7 8:3,4,15,23 9:5,20 11:9 26:13 27:5 60:10,12,22 65:17 77:5 83:19 88:8
plg 87:22 88:11
plus 15:8
point 43:13
pointed 34:9
popliteal 70:7
portion 8:15
portions 28:22

position 20:23
possible 56:1,3 80:7
posteromedial 55:9
potentially 45:23
practice 38:23 63:4
preceding 77:20
predisposition 45:25
preparation 82:2
prepare 80:24
prepared 15:11 16:14 17:11,15 18:3
prescribed 73:8 73:10
prescribing 73:19
presence 91:8
present 2:17 71:11
presentation 19:18,25
presentations 19:16
presented 21:18 24:13
pretty 30:3 56:11 70:25
previous 14:2 14:18 16:5 17:6 18:16 21:22 23:6,9 28:9 39:7,11 51:5 64:21 75:23 82:12
previously 16:2 16:14 19:4 28:12 38:3 63:7 75:20 76:8 78:13 87:21
printed 91:15
prior 14:20,23 23:15 45:13,16 48:6 82:2
probably 13:21 14:13 30:1 47:24
probe 37:7
problem 47:10
problems 72:18 75:14,18
procedure 28:11 90:5
proceeding 7:16
produce 11:23 12:18 20:6
produced 14:16 19:4 20:10 28:13,15,17 87:21
production 11:24 13:11 14:20 15:5 86:14 87:10
professional 1:12 89:2,21
progressed 43:12
provide 80:4,4
provided 57:20 65:4,7 90:5
provision 91:4
ptelan 2:6
public 1:12,13 28:16 89:2,21 91:9
publication 19:17,20
publications 19:15
published 84:21
pull 22:25 80:1
pursuant 4:10 28:17
put 11:13 22:10 25:2 26:5 28:3 34:12,16 47:4 51:22 65:23 77:5 86:11

q

qualifications 28:7
quarter 14:2
quarterly 13:22
queens 79:18 79:24 80:15
question 8:22 8:25 9:5,6,20 9:21 25:18,22 26:9 36:2 41:6 51:3,15 58:19 63:23
questions 7:3 7:24 33:24 35:18 36:3 79:3 82:17,23 83:13 83:14 86:10
quick 82:4,4
quite 22:2 41:1 50:23

r

r 2:1 4:10 79:22 89:1
range 27:14 57:4,13 63:11 64:25 65:11 68:15 69:20 74:8
ranges 60:19
rate 79:7
rather 7:25
reach 38:25
reached 49:11 49:13
read 5:5 8:8 27:5 28:21 44:2

49:15 53:13 68:7 70:8 71:1 71:22 75:1 88:12 91:2,13
readily 28:16 42:20,21
reading 27:6 43:11 68:2 91:7
really 24:9 30:25 35:22 62:20 83:2
realtime 70:3
reason 9:9,13 65:4 90:8
reasonable 8:3 43:22 49:14,17 51:18 84:2
rebuttal 4:10 27:10 31:22
recall 20:5 60:24 80:14 83:15
receipt 91:12
receive 58:20
receiving 79:4
recess 17:1 52:6 78:23
recognize 10:25 11:2 12:13 17:25 26:10,15 53:16 59:8,9 69:7 72:22 78:16
record 4:12,18 5:9,24 7:8,20 9:24 16:1,22,25 17:3,7 26:7 27:5 36:9 52:5 52:8 53:2,16,18 53:20 54:2 55:23,24 56:24 58:19 59:16,19 61:3 64:5,9 74:8 78:22,25 86:12,18,21 87:1,25 88:6 89:10
recorded 1:11 89:8
records 4:14,16 4:19 18:4 21:17 21:21,24 22:9 22:16,17,23 23:2,4,14 24:1 24:12,16,22,25 25:2,7,7,10,13 25:16,21 29:13 29:16 30:7,12 31:2 32:24 33:4 34:7,8 39:1,4 45:18,21 46:17 46:19,22 48:10 52:11,12,12 56:10,21 58:20 59:22 62:15,24 63:2,8 64:11,21 65:7 78:16 82:5 82:6,9 85:4,17 87:19
redness 55:9
refer 10:4,7 34:24
referenced 52:12
references 54:23
referring 10:2 34:25 39:24 40:13 41:10 45:2 62:3
refers 42:2
reflecting 13:3
reformatted 89:14
refresh 24:19
refreshing 82:6
regarding 18:4 18:19,24 28:18 32:23 33:3 46:9 46:22
regards 22:12
registered 1:12 89:2,21
related 13:4 15:14 19:23 21:19 24:13 30:18 32:12,18 36:25 38:17 39:2 43:25 46:8 50:3,17,24 56:5 56:13,17,18 59:15 73:18 75:14 86:6 89:12
relatedness 18:4,6 27:11 37:21 49:23,24 49:25 51:1
relates 36:7
relation 50:2,3
relationship 49:25 50:3
relative 47:21 47:24
rely 85:24,24
remainder 56:23
remaining 79:3
remains 54:19
remember 79:20
remind 58:14
remote 1:8 5:1 5:13,20 8:12 88:21
remotely 5:18 5:19 89:5
render 24:11 25:6
rendering 33:16
repeat 32:25 87:6
rephrase 64:18

report 4:7 13:14,17 15:12 15:14,18,23 16:2,5,5,14 17:15 18:3,7,15 18:16 21:13,16 21:22 23:6,10 23:16 24:4 30:19,22 31:1,8 31:20,23 32:6 32:23,24 33:3 33:10,24 34:4,6 34:19 35:19 36:4 37:14,19 39:7,11 43:3 48:25 49:4,9 51:5,9 52:23 53:21 58:23 59:17,20 60:2 60:15,17 62:4 62:16 63:8 64:21 65:8 68:20 74:12 81:2,25 82:12 84:1,16 85:3,25 86:16 87:12
reporter 1:12 6:12 7:22 16:21 40:14 57:22 58:2,5 63:17,21 63:24 64:7 83:1 83:9 86:22 88:7 88:14 89:2,21 91:10
reporting 5:20
reports 17:6,8 17:11,14,16 18:18 23:9 28:12 50:16,21
represent 6:23
representing 80:22
request 11:19 12:18,25 13:2,8 14:15 15:5 20:9 24:8,10,11 30:14 33:15 56:4 80:3,7
requested 12:18 25:2 50:15
requesting 13:2
requests 4:4 11:6,23 14:20 87:9
required 28:10
rereviewed 82:3
research 20:22
respect 28:1,6
response 12:17
responses 4:5 14:19
responsive 11:22 12:2 13:8
result 43:25 44:19 56:13
resulting 43:15
results 59:13
retrospect 43:11
return 91:9
returns 55:4
reveal 75:24
review 14:20 14:23 21:21,24 22:6,7 23:2 28:25 30:16,18 30:22 31:20,22 31:25 32:6,8,17 33:10 34:11 37:20 38:11 45:20 46:17 56:4 57:10 59:16 62:24 63:8,20 64:12 65:1 76:14 79:8 81:1 82:1,12 85:16 90:5
reviewed 11:19 15:1,4 21:25 24:25 29:10,14 30:8 31:2 34:7 52:13 53:18,20 59:20 62:7,16 63:15 69:10 82:10 85:5 87:20
reviewing 60:24
richard 1:6 3:5 4:6 5:16 6:16 7:9 89:4 90:2
ridge 2:4
right 16:24 17:2 19:8,9 29:20 52:4,7 55:8 60:8 64:8 68:3 70:5,14 71:7 74:23 75:14,18 77:1 77:25 78:21,24 84:11,17,22 85:5,10,25 86:7 86:17,25 88:5 91:13
risk 39:20 47:13,16,19,21 47:24,25 48:4 48:24 56:14
road 7:11,12
rochester 1:10 7:12 20:19
room 38:13 75:17
rough 88:9,12 88:19
rule 28:11
rules 90:5
rush 88:18

s

s 2:1 40:18,20
sanders 38:12 67:3 75:9

saphenous 40:3 40:10,24 41:9 41:11,16 71:20
saved 22:16
saw 77:20 78:7
saying 7:24 30:7 40:13 41:2
says 27:1 30:10 39:4 68:17 74:10
sc 2:5
schedule 28:8
schwarz 28:7
scope 35:19 36:4
screen 8:13,18 10:14,18,22 12:25 17:23 25:24 26:4 37:13 53:10 59:4 67:11 76:23 77:11 80:2
scroll 10:24 11:5 12:20,24 26:6,8,10,21,25 27:24 59:6 60:12 61:9 67:6 69:5 72:24
seal 91:19
second 16:22 40:12,12 60:6 66:22 72:13 73:15 77:16 78:3,10 86:24
section 69:25 70:2,10,13 71:11,15
see 8:15,18 10:22 11:6 12:9 12:21,25 17:23 24:23 25:5 26:4 26:23 27:1 28:2 28:5 37:15 42:22 43:4 49:11 52:15 53:1,10,12 57:5 59:4 60:4,21 61:7,8,16 62:12 65:14 66:4,9,11 66:23,25 67:7 67:12,14,24 69:2,6,24 70:11 70:22 71:5,7,12 71:15 73:1,5,7 74:19 75:3 76:23 77:10,22
seeing 85:23
seems 60:15
seen 15:6 26:18 42:18 62:3 63:14 85:9
sense 22:11 64:22
sent 14:24
sentence 27:25 30:6 37:19 39:19,24 43:4 43:18,21 49:10 68:2 70:2 71:25 75:12
sentences 71:15 71:16
separate 91:5
september 27:13,15 29:6,7 52:18,19 68:12 68:18 74:4,11
services 5:10
set 28:12 89:4
sets 31:2
several 37:20 37:25 55:8
severe 75:13
severity 54:15
shaking 7:25
share 10:18 12:5 17:18 25:24 37:13 58:25 68:23 74:15 76:18
sharing 8:13
sheet 90:1,7 91:5
show 8:13 37:13 52:14
showed 60:16 62:2,7 68:4
showing 8:20
shown 60:18
sign 5:5 8:10 70:13 88:13 91:8,13
signature 18:12 89:19 90:6 91:16,22
significant 39:20 43:9,16
signs 68:5 75:24
simplicity 57:9
sit 23:1,24 65:6 86:4
sitting 65:20
skin 37:5 41:25 47:3
skull 37:6
slightly 54:5
slow 11:8 26:12
small 70:25
solely 31:1
sorry 16:2,21 18:14 35:21 36:17 40:8,13 40:22 41:4 48:15 54:19 57:23 58:8,21 63:17,22,22,24 64:2,16,20 67:10 70:21 72:8,12 74:1 76:18 80:16 83:4,5 86:19 87:3,4
sort 34:12 47:5

sound 19:8
sounds 19:9
source 62:25
speaking 5:21 69:11,12
specialist 21:7
specific 22:3 23:3,3,25 30:23 31:10 40:25 41:11,14 63:8 82:9 84:16
specifically 45:4,19 46:8 47:22
specifics 81:22
spectral 70:4
speed 26:12
spell 40:14
spoken 31:11 31:14
spreadsheet 32:12,18
staff 15:20
stamp 53:2 61:5
stand 55:19 71:25
standard 49:21 49:22 50:7,10 50:14 51:4,8 83:18,20 84:21
standards 51:12 83:15 84:11
stands 76:9 78:14
start 14:8 80:16
started 9:23 10:17
starts 28:1
state 7:7 79:24
states 1:1 2:10 5:15 6:7,9,11 6:24 32:22 33:3 37:20 38:11 39:19 43:22 49:13 54:13,18 55:2,17 56:24 66:8,11 68:12 68:12 70:3,10 70:13 75:12 76:6 87:8
stenographic... 1:11 89:8
step 64:19
stimulates 35:9
stimulation 35:14
stimulator 34:22
stipulated 28:17
stood 45:21
stopping 52:2
straightforward 24:8 25:20 33:16
street 2:4,12
subject 27:10
submit 13:16 13:19
submitted 13:10,14 14:15 16:8,17 23:5
subpoena 4:4 11:3,6
subscribed 89:16 91:20
subsequent 27:18
subsequently 11:13
suits 50:25
sup 41:23
superficial 38:18 39:2,6,24 40:2,5,9 41:12 41:18,23 42:16 42:25 46:4,9,24 47:2,5,8,14 48:1 50:4 56:12 70:18 71:20 73:20 75:25
supporting 15:20
supposed 27:16
supreme 79:24
sure 9:24 15:7 16:11 22:22,24 34:15 35:8 40:11,12 42:16 50:19 58:3,7 59:25
surface 41:24 42:6,18
surgeon 21:4
surgery 81:21
suspect 46:16
suspicion 46:1 46:13,20
suspicious 68:5
sway 33:18
swear 6:13
swelling 55:9
switching 72:12
sworn 5:19 6:17 89:5 91:20
syed 32:3
symptoms 54:18,20 68:6

t

t 3:3 4:2 79:22 89:1,1
take 7:2 9:21 16:10 52:2 64:19 78:19
taken 1:9 17:1 49:2 52:6 78:23 89:4 91:2
talk 8:3
talked 30:15
talking 17:5 33:5 46:3,3,7,7 61:2,21 65:11 72:21

taylor 1:12 6:13 89:2,20
tce 10:2
telan 2:4 6:3,4
tell 7:17 23:25 26:9 62:2
tendency 44:20 46:21
tenderness 55:10
term 20:1,1 38:21 39:23 41:13
terms 41:23 51:23
testified 6:17 28:10 63:7 79:14,17 85:5
testify 4:4
testimony 8:9 9:10 27:10 80:11,18 89:7 89:10
testing 42:22
tests 42:12
tetrachloroet... 10:1
text 37:19 49:3 67:24 70:25
thank 7:1,14 20:25 23:21 34:2 37:9,12 40:21 42:11 43:2 58:13 66:2 72:2 77:8 80:10 82:15 83:10 86:10 88:2,4,14
thanks 82:19
thereof 89:12
thigh 55:8 71:20
thing 40:12 41:7 51:1 64:1 64:4
think 19:17 22:19 25:15,20 26:18 27:16 29:18,23 30:5 33:9,17 45:15 46:19 47:21,23 52:1 56:8,20 58:18 59:21 60:16,18 63:25 63:25 68:5 70:16 79:23 80:13 86:19 87:3
thinking 14:12
thinner 73:12
third 39:19 43:4 70:20
thirty 91:12
thought 22:25 34:13
three 18:4 21:17 24:12,16 24:21 25:2,6,12 31:1 33:6 34:7 34:8 56:10,19 59:22 76:2 85:4
thrombo 42:5
thrombophle... 38:18 39:3,7,25 40:3,6,10 41:12 41:18 42:4,17 42:25 43:24 44:8 46:4,9,25 47:8,14 48:2 50:5 56:12 70:19 71:21 73:20 86:6
thrombosis 41:19 42:1,8,19 42:23 43:1 48:1 50:4 68:4 70:14 75:24,25
time 1:9 5:3,12 9:19 10:7,7 15:1,4 16:24 17:2 22:10 24:24 26:13 34:11 35:22 38:23 43:7,14 47:6 48:12,16 48:20 52:4,7 64:8 66:9 78:21 78:24 82:7,16 86:17,25 88:5 88:23 89:4,4,7 89:10
timeline 30:16
times 22:12 81:9
title 19:19,22 91:3
titled 19:25 69:25
today 9:11,14 10:11 11:20 14:21 23:1,24 29:1 65:7 69:12 85:10 86:4 87:5
today's 5:11 80:25
together 56:19 56:20
top 23:25 26:25 47:23 53:23 57:4 67:1,15 71:7 73:5 75:3 77:25 78:3
topic 80:19
total 23:18 56:10 81:13,15
tough 19:21
toxins 20:2
track 27:7 62:23
tract 35:9,12
training 20:22
trajectory 64:13,22 65:2
transcribed 1:12 89:8

transcript 5:6 8:8 32:1,9 89:14 91:2,3,3 91:8,10,13,13
trauma 44:24 45:1,8
treated 20:20
treating 72:4
treatment 38:17 39:2 73:19
trial 27:7
trinh 79:22
true 89:9 91:4
truth 7:17
truthful 9:10
try 8:4,4,23
trying 23:20
tunneled 37:4
turn 33:23 34:3 82:18
turner 2:11 6:8 6:8
turning 39:18 46:24
two 15:3,9,10 17:7 18:17 36:15 46:5 52:19 71:15,16
typed 34:16
types 35:18
typically 55:19 55:21 63:6 76:9

u

u 40:20
ultrasound 68:3 70:3 72:1 75:23
um 44:15 70:20
unable 9:9
under 7:4 8:24 37:4
underneath 27:22 54:5 73:4
understand 7:4 7:15,18 8:1,22 23:20 51:23 63:5 91:7,11
understanding 30:9,11 64:16
understood 8:6 8:10,11,21,25 9:8,22 10:3,6,9
united 1:1 2:10 5:15 6:7,9,10 6:23 32:22 33:2 87:8
university 20:19,24
updated 20:7
updates 19:10 19:13 20:3
upper 55:9
usdoj.gov 2:13 2:14,14
use 49:22 51:8 62:1,6,19 63:3
used 42:12 50:7 50:10 51:4
using 39:15 41:22
usual 54:21
usually 46:15 50:13
utilization 20:1

v

various 76:3
vascular 21:4 42:6
vehicle 50:24
vein 21:7 40:25 41:10,11,13,16 41:19 42:1,5,8 42:9,19,23,25 45:5,11,13,16 68:4 70:6,6,7 70:14,18 72:5 75:24,25
veins 41:15 42:2,20 70:5
venous 38:18 39:3,7,24 40:5 41:12,18 42:16 42:25 46:9,24 47:8,14 48:1 50:4 56:12 68:3 73:20
verbally 7:24
veritext 1:24
versus 5:15 79:22
vessel 72:4
vessels 41:24
video 5:13
videoconfere... 1:8,10,13 2:7 2:15,17 5:1 64:6 88:21
videoconfere... 89:5
videographer 2:18 5:8,10 6:12 16:24 17:2 52:4,7 64:8 78:21,24 86:17 86:25 88:5
videotaped 1:8 4:6 5:1 88:21
viewing 56:9
visible 42:20
visit 37:21 38:13 48:16,21 54:2,9 56:2,5 59:14 74:12 75:9
visits 27:11 38:1,4,12,17 43:7,14 52:18 56:20
vitamin 55:4
void 89:15

w

waive 91:12
wallace 31:15

want 7:3 9:23 34:3 46:10 52:10,25 60:8 60:14 71:14 72:24
wanted 41:14 86:11
warmth 55:9
washington 2:12
water 1:3 5:14 90:3
way 22:3 34:14 46:23 55:25 68:8 89:12
we've 6:22 7:19 65:11
wearing 81:18
wednesday 1:7 90:2
went 22:15 29:16 75:16 87:3
westminster 7:11,12
wheelchair 39:15
whereof 89:16
wires 37:4,11
wise 24:24
withholding 12:1
witness 1:9 3:4 5:5,19 6:14 18:21 19:1 22:8 23:13,22 24:19 24:24 25:18 28:10 31:4 32:20 33:12 35:8 40:17,19 40:21 41:5 51:14,21 52:3 57:24 58:10,23 62:18 64:15 78:18 83:3,5,22 84:5,13,19,24 85:12,19 86:2 89:5,7,16
witnesses 4:10
wonder 25:12
word 7:12 16:10 43:11,18 73:4
words 12:15,17 23:14 49:1
work 15:21 50:13,13 79:5
works 35:6
write 60:8
writing 15:17 15:23 34:5 64:20
written 37:25
wrong 79:9
wrote 16:2 34:14 43:14 64:4

x

x 3:3,3 4:2,2 63:2

y

yeah 40:16 45:11,14 57:24 61:1,1 62:12 65:18 71:5 81:20 88:17
year 13:14
years 20:18,20 22:12 28:9 48:13,17
yep 18:14 26:14
york 1:10 7:13 79:18 80:15
younger 46:16

z

zoom 72:18

Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate. The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

DISCLAIMER: THE FOREGOING FEDERAL PROCEDURE RULES ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY. THE ABOVE RULES ARE CURRENT AS OF APRIL 1, 2019. PLEASE REFER TO THE APPLICABLE FEDERAL RULES OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.

VERITEXT LEGAL SOLUTIONS

COMPANY CERTIFICATE AND DISCLOSURE STATEMENT

Veritext Legal Solutions represents that the foregoing transcript is a true, correct and complete transcript of the colloquies, questions and answers as submitted by the court reporter. Veritext Legal Solutions further represents that the attached exhibits, if any, are true, correct and complete documents as submitted by the court reporter and/or attorneys in relation to this deposition and that the documents were processed in accordance with our litigation support and production standards.

Veritext Legal Solutions is committed to maintaining the confidentiality of client and witness information, in accordance with the regulations promulgated under the Health Insurance Portability and Accountability Act (HIPAA), as amended with respect to protected health information and the Gramm-Leach-Bliley Act, as amended, with respect to Personally Identifiable Information (PII). Physical transcripts and exhibits are managed under strict facility and personnel access controls. Electronic files of documents are stored in encrypted form and are transmitted in an encrypted

fashion to authenticated parties who are permitted to access the material. Our data is hosted in a Tier 4 SSAE 16 certified facility.

Veritext Legal Solutions complies with all federal and State regulations with respect to the provision of court reporting services, and maintains its neutrality and independence regardless of relationship or the financial outcome of any litigation. Veritext requires adherence to the foregoing professional and ethical standards from all of its subcontractors in their independent contractor agreements.

Inquiries about Veritext Legal Solutions' confidentiality and security policies and practices should be directed to Veritext's Client Services Associates indicated on the cover of this document or at www.veritext.com.

Exhibit 794

ERRATA SHEET

Page No. 28 Line No. 9 Change to: From "would provide with those services" to "would provide for those services"

Page No. 130 Line No. 12 Change to: From "has been included" to "has or has not been included"

Page No. 135 Line No. 12-13 Change to: From "From page 8 of that Bates stamp document" to "From the bates stamp document or page 8 of the reviewed PDF."

Page No. _____ Line No. _____ Change to: _____

Page No. _____ Line No. _____ Change to: _____

Page No. _____ Line No. _____ Change to: _____

Page No. _____ Line No. _____ Change to: _____

Page No. _____ Line No. _____ Change to: _____

Page No. _____ Line No. _____ Change to: _____

Page No. _____ Line No. _____ Change to: _____

Page No. _____ Line No. _____ Change to: _____

DECLARATION UNDER PENALTY OF PERJURY

I declare under penalty of perjury that I have read the entire transcript of my Deposition taken in the captioned matter or the same has been read to me, and the same is true and accurate, save and except for changes and/or corrections, if any, as indicated by me on the DEPOSITION ERRATA SHEET hereof, with the understanding that I offer these changes as if still under oath.

Signed on the 30th day of March, 2026.

GREGORY S. RUSSO